

Shaping the future of care together, Great Britain: Department of Health, Stationery Office, 2009, 0101767323, 9780101767323, 134 pages. This Green Paper sets out the Government's proposals for ways to reform the care and support system for adults in England and to establish a National Care Service. Care and support help people stay as independent, active, safe and well as possible, and to participate in and contribute to society throughout the different stages of their lives. Need for care and support can increase as a result of accidents, long-term illnesses, disability and growing older. The proposed National Care Service will provide six basic services: prevention; assessment; a joined-up service; information and advice; personalised care and support; fair funding. The Green paper explores ways in which different services can work together, a wider range of services can be developed, and better quality and innovation be achieved. The choices around funding are crucial to the reforms. The cost of care and support is high (a 65 year old man can expect to need care costing Đ'Đ^30,000 during retirement). The Government has ruled out people paying for all of the costs or use of a tax-funded scheme (unfair on those of working age). The options for funding being proposed are: (1) partnership, where the state would pay, for those who qualified for support, a quarter to a third of the basic care and support, with extra help for the less well-off; (2) insurance (either private or a state scheme) to cover costs above the quarter to a third met by the state; (3) comprehensive, where everyone over retirement age who could afford it would be required to pay into a state insurance scheme..

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NHS Pay Review Body twenty-fourth report 2009, NHS Pay Review Body, Jul 3, 2009, Medical, 89 pages. The NHS Pay Review Body advises the Government on the remuneration of all staff paid under Agenda for Change and employed in the NHS. Since its last report (Cm. 7337, ISBN

Shaping our future together the U.S., the U.N., and we the people, R. Carroll Cannon, 1984, Political Science, 100 pages.

A Guest Again , Peter Siedzick, 2006, Travel, 164 pages. Newly retired and newly widowed, the author sets out on a cross-country trip to help erase some bad memories. Along the way, he observes America, reminisces and learns much

Double-Edged: a Change of Heart , Anthony W. Harris, May 1, 2007, Fiction, 204 pages. With scientists now on the defensive, May 2007 might turn out to be an appropriate time to publish this controversial detective thriller, telling of the investigators

Structure and biochemistry of natural biological systems proceedings of the Third Philip Morris Science Symposium, Richmond, Virginia, November 9, 1978, Philip Morris Incorporated, 1979, Technology & Engineering, 180 pages.

Reducing healthcare associated infection in hospitals in England fifty-second report of session 2008-09, report, together with formal minutes, oral and written evidence, Great Britain: Parliament: House of Commons: Committee of Public Accounts, Nov 10, 2009, Medical, 37 pages. Every year over 300,000 patients in England acquire a healthcare associated infection whilst in hospital. These infections cost the NHS more than Đ'Đ¹ billion a year. They are

Caring for our future progress report on funding reform, Great Britain: Department of Health, Jul 11, 2012, Business & Economics, 38 pages. The Commission on Funding of Care and Support, chaired by Andrew Dilnot, reported its recommendations in 2011 (TSO ISBN 9780108510847). Two key proposals were: (i) the

Payback , Philip Harper, 1991, Fiction, 224 pages. Former reporter George Gray and tough Sara Mitchell confront Willie Reidus--the sadistic right-hand man to a powerful real-estate mogul and a man who derives exquisite pleasure

Catalog of information , United States Military Academy, 1946, Language Arts & Disciplines, . .

Building the National Care Service, Great Britain. Department of Health, Mar 31, 2010, Political Science, 158 pages. Building the National Care Service.

The attendance allowance and the costs of caring , Christine Horton, Richard Berthoud, Policy Studies Institute, 1990, Political Science, 84 pages.

Expert teacher action program, Eva Washington, 1971, Education, 113 pages. .

Supporting people with autism through adulthood fiftieth report of session 2008-09, report, together with formal minutes, oral and written evidence, Great Britain: Parliament: House of Commons: Committee of Public Accounts, Great Britain. Parliament House of Commons, Oct 15, 2009, Education, 35 pages. Autism is a lifelong developmental disorder which affects the way people interact with the world around them. The three main areas of difficulty which all people with autism

Draft Care and Support Bill Report, Session 2012-13, Report, Together with Formal Minutes, Great Britain: Parliament: Joint Committee on the Draft Care and Support Bill, Mar 19, 2013, Law, 129 pages. The Government has not fully thought through the implications of its social care reforms and may leave local authorities open to a deluge of disputes and legal challenges. MPs

High Quality Care for All NHS Next Stage Review Final Report, Great Britain. Department of Health, 2008, Business & Economics, 84 pages. This review incorporates the views and visions of 2,000 clinicians and other health and social care professionals from every NHS region in England, and has been developed in

In 2008 the government announced the launch of a 'once in a generation review' of how social care is organised and funded and ran a six-month engagement process with the public, services users and social care staff. The resulting Green Paper was published on 14 July 2009 and invites consultation on the principles for improving the delivery of care, and on a number of options for reform of the current funding system.

The government favours the development of a version of the 'partnership' model of funding first proposed in a report by Sir Derek Wanless for The King's Fund in 2006. This would give all those in need a basic minimum entitlement funded through taxation $\hat{a} \in \hat{a}$ a 'National Care Service' $\hat{a} \in \hat{a}$ combined with payments made by individuals who could afford to contribute to their own care. Refinements on this add some form of insurance to cover this individual contribution.

It also appears to be unsustainable – already it is only those in severe need who are helped in many areas, and with increases in the number of older people and adults with disabilities the position is set to deteriorate significantly over the next few years. The government also argues that public expectations of care standards and the degree of choice individuals should enjoy are increasing, which will place further cost pressures on services.

Two of the options outlined are immediately ruled out: individual payments with no state contribution are dismissed because many would not be able to afford to pay for their care, and full state funding through taxation is rejected on the grounds that it would place too much of a financial burden on the working population.

Everyone who has needs that qualify them for care and support would be eligible to have a certain proportion of their care needs funded by the state through general taxation. The government suggests that this would be means tested, with most people receiving funding for a quarter to a third of their costs, while those less well-off would receive more, and the least well-off would be eligible for fully funded care, as is currently the case.

Although the affordability of the state contribution is not discussed in any detail, the government does suggest that some funding might be drawn from integrating Attendance Allowance (a benefit

for 65+ year olds with disabilities) into the state contribution of the partnership model. Detailed costings are not provided.

a part-national, part-local system, under which everyone would still be guaranteed to have a proportion of their costs met by the state, and that same 'level of support' would be available to someone wherever they lived in the country, but the precise amount of funding available to the individual would be set locally.

Insurance – This option would involve the state working with private insurance companies or establishing its own scheme, into which individuals could pay in return for their care costs being met should they require care. The individual's contribution could be made as a lump sum or by instalments before or after retirement, or via their estate after death.

The government suggests that the costs might be around £20,000 to £25,000 to cover the potential average of £30,000 worth of care costs for over 65s. The insurance scheme would not be available to those born with care and support needs (and not financially eligible for full costs under the state contribution) as it is based on insuring against future risks.

Comprehensive – This option would involve everyone over retirement age paying a means-tested amount into a compulsory state insurance scheme, in return for their care being fully funded. The government suggests that the means testing could be adjusted so that most would pay a set amount and so that they are clear about how much they will need to contribute, with only those on very low incomes or with few assets paying less or nothing. The way in which people contribute could be flexible, as with the insurance option.

The government estimates that individuals would have to pay around £17,000 to £20,000 into the scheme. The government proposes that disabled adults of working age should also be eligible for fully state-funded care under this policy, but the Green Paper implies that there would not be a corresponding contribution requirement.

None of the options include accommodation costs, on the grounds that these apply to everyone irrespective of care needs. To help cover the costs of board and lodging in residential care (which could be in the region of £12,000 a year) the government proposes to set up a 'universal deferred payment' scheme, which means that these costs can be paid after death. These schemes are already offered by some local authorities.

The consultation period for the options set out in the Green Paper runs until mid-November 2009. The government has committed to setting up a 'national leadership group' made up of individuals and groups with expertise and experience in social care with the aim of sustaining the momentum for reform and creating a forum for resolving disagreements.

This Green Paper, "Shaping the Future of Care Together (Cm. 7673)", sets out the Government's proposals for reforming the care and support system for adults in England and to establish a National Care Service. Care and support help people stay as independent, active, safe and well as possible, and to participate in and contribute to society throughout the different stages of their lives. Need for care and support can increase as a result of accidents, long-term illnesses, disability and growing older. The proposed National Care Service will provide six basic services: prevention; assessment; a joined-up service; information and advice; personalised care and support; and, fair funding. The Green paper explores ways in which different services can work together, a wider range of services can be developed, and better quality and innovation be achieved. The choices around funding are crucial to the reforms. The cost of care and support is high (a 65-year-old man can expect to need care costing GBP 30,000 during retirement). The Government has ruled out people paying for all of the costs or use of a tax-funded scheme (deemed unfair on those of working age). The options for funding being proposed are: partnership, where the state would pay, for those who qualified for support, a quarter to a third of the basic care and support, with extra help for the less well-off; insurance (either private or a state scheme) to cover costs above the guarter to a third met by the state; and, comprehensive, where everyone over retirement age who could afford it

would be required to pay into a state insurance scheme. http://edufb.net/575.pdf