THE YOUNG FOUNDATION

Care4Care

Overview

Partnered by Professor Heinz Wolff of Brunel University and Age UK Isle of Wight

Care4Care will provide support for older people through mutual exchange: 'support provided by me now in return for support for me later' Care4Care members earn 'care credits' by supporting/caring for an older person in their local community. The hours of support members provide are recorded in their individual care credit account for future use.

The Young Foundation

The Young Foundation brings together insight, innovation and entrepreneurship to meet social needs. We have a 55 year track record of success with ventures such as the Open University, Which?, the School for Social Entrepreneurs and Healthline (the precursor of NHS Direct). We work across the UK and internationally, carrying out research, influencing policy, creating new organisations and supporting others to do the same, often with imaginative uses of new technology. We now have over 60 staff, working on over 40 ventures at any one time, with staff in New York and Paris as well as London and Birmingham in the UK.

Our Work on Ageing

The Young Foundation works to address social isolation, resilience and enable the elderly to remain in their own homes through a range of projects; potential solutions lie in diverse fields including how we build homes and communities, develop and use technology and ventures that translate latent community skills into valuable resources.

We have worked on ageing for many years; indeed Michael Young pioneered new thinking about active ageing, helping to create many new organisations, from the University of the Third Age to Grandparents Plus. Today our work encompasses research, the design of new public or community services and the launch of new ventures that can better meet the needs of older people.

Other ventures – Neuroresponse and Maslaha – are trialing new models for supporting people with long-term conditions and work with many older people. We are also working with over 30 local authorities on the Ageing Well Innovation programme, an initiative, backed by the Ageing Well team at Local Government Improvement and Development, supporting local authorities to develop good places to grow older.

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The Context

Meeting the needs of an ageing population

Life expectancy in the UK is increasing at more than five hours a day, every day.[1] Improvements in the diagnosis and treatments of diseases as well as changes in areas such as diet, housing, sanitation and education have all contributed to the doubling of lifespans in much of the world over the past 150 years.

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[1] Rejuvenating Ageing Research The Academy of Medical Sciences (2009)

As a result, we face what has been termed an 'agequake'. For the first time in history in the UK the number of people over the age of 60 outnumbers those under 16.[2] In future, centenarians will become a much more common group in society. The combination of rising life expectancy and a low birth rate means that the populations of the world are ageing.

A common reaction to this is pessimistic: how will society cope as potentially ever greater numbers of us live longer and longer with chronic illness and frailty supported by a dwindling group of people of working age? This is understandable; the challenges ahead are real and daunting.

But we need to be mindful of the successes – the social progress and human ingenuity that have prolonged the lives of so many – not least because it is these things that will help us meet the needs of the future. Pessimism risks fatalism and seeing our older selves and loved ones, not as a resource but as a burden. In practice, those over 65 contribute more in pensions, tax and informal caring than those under 65[3].

A recent report by the Organisation for Economic Co-operation and Development (OECD) found that Britain faces one of the biggest care bills in the industrialised world.[4] If the OECD's predictions are correct, and the current system of support remains unchanged, by 2050 this country will spend more than a fifth of its entire national output on services for the elderly. Already the demographic change is adding £1 billion pounds a year to NHS costs at a time when the health service is being asked to make efficiency savings of £15-£20 billion by 2015.[5] One in 24 of the population is now aged 80 or over, by 2050, that figure will reach one in 10.

Reforming public services

Even before the current economic crisis, public services were struggling to meet the needs and rising expectations of the public. As well as the challenges of an ageing population, the UK faces persistent social problems including drug and alcohol misuse, high teenage pregnancy rates and the social exclusion of particular groups.

New thinking about the future of public services suggests a much less 'top down' approach; with more emphasis placed on the potential role of behavioural economics, civic engagement and social networks. These are not simply ways of letting the state off the hook but acknowledging in tackling structural inequality, we also need to understand better the factors that increase wellbeing; the skills, attributes and values that matter to people and enhance individuals and community capacity to work alongside the state. In this scenario more importance is being given to the importance of civility, empathy and resilience (understanding of which has been pioneered by the Young Foundation).

These developments are driven by new knowledge about human behaviour and what shapes our sense of individual and collective agency and self-determination. Our public services were shaped by a post-war command and control approach and belong to a time of relative homogeneity, fixed gender roles, shared norms and mass institutions. They were forged at a time when relatively few people lived into their 80s and 90s.

As we face austerity and cuts to public services unseen since the 1970s, the questions about what kinds of public services we need in the long term to meet people's changing needs and expectations become

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[2] Office for National Statistics (2008)
[3] Gold Age Pensioners report, Valuing the social-economic contributions of older people in the UK
[4] Help Wanted? Providing and paying for long-term care' OECD (2011)
[5] King's Fund estimate (2011)

more, not less, important. If William Beveridge identified the kind of radical transformations needed to meet the needs of post-war Britain, what is the revolution we need now?

While arguments about the speed, impact and targeting of public spending cuts will continue to rage, there is a large degree of consensus about some of the ways in which services need to be reshaped to meet the needs of the 21st century. This includes looking at the potential role that could be played by the voluntary sector and social innovations – like Care4Care – that will need to alongside individuals, communities, the market and the state. For it is not just public services that need to be more empowering and enabling; shaping their 'offer' increasingly in terms of how we work better *with* people, rather than providing a service that is done *to* us. These kinds of debates are being shaped not just by an intuitive sense that self-determination is critical but are based on mounting evidence that the services we use need to do more to engage citizens in design and delivery, and that citizens need to take greater individual and social responsibility in delivering the outcomes they wish to see.

Will technology save us?
Technology on its own is not the solution to the ageing crisis. It has the potential to make a sizeable and effective contribution to providing some of the solutions we need and can dramatically increase efficiency. But technology brings with it a host of additional requirements in relation to infrastructure, content, user acceptance and interest. This is particularly the case when it comes to the ageing population who have both particular and diverse needs. Although devices such as home monitors, response alarm calls, telehealth devices and i-pads for skypeing the grandchildren all have their part to play, any response to the challenge of ageing which is genuinely driven by the needs and wishes of older people shows that technology cannot be the full answer.

The role of social enterprise and new kinds of organisation
We are seeing a flowering of social enterprise and other forms of mutual support such as co-operatives. These offer a new approach to these challenges which are neither traditional public services nor a traditional charity model (which tend to be fundraising or contracting led). Social enterprises exist in myriad forms but generally they seek out new forms of revenue funding and sustainability structures, taking a more business-like approach to social innovation. At the same time they are able to pull on the resources of their members and the community to make change happen and make the most of network effects to build community resilience. They can flex and respond rapidly to change around them, unlike more traditional structures; from Teachfirst to The Big Issue to GLL Leisure many of the most exciting organisations in social innovation follow the social enterprise model.

The Story So Far

Care4Care is the brainchild of Professor Heinz Wolff. He has a long and distinguished career: Emeritus Professor of Bioengineering at Brunel University, former director of the Bio-engineering division of the Clinical Research Centre of the Medical Research Council, holder of a number of honorary positions with the European Space Agency. He is also a well-known TV presenter thanks to shows such as the Great Egg Race. What makes Professor Wolff stand out is his extraordinary knowledge and commitment to innovation and the public space.

The concept of Care4Care emerged from Wolff's insight that having spent much of his working life developing new forms of technology, the most important technology for older people is a pair of helping hands and the need for human contact. He concluded that the priority in relation to care is how we increase the number of people actively supporting older people.

Professor Wolff chose the Young Foundation as his preferred innovation partner because of its experience in service design, the development of social enterprises and knowledge in the field of ageing. The first pilot site for Care4Care was launched in March on the Isle of Wight. The pilot is being delivered in partnership with Age UK, Isle of Wight, which enjoys a strong local reputation and has excellent delivery skills in providing care and support to older people.

This work alongside prototyping has been funded by Nesta (the National Endowment for Science, Technology and the Arts). Prof. Wolff's lecture earnings and private means were used to fund a small team over the last four years, to help with the development of the concept. In the long term, Care4Care's aim is to develop a sustainable business model. In the short-term we are dependent on individuals helping us to shape and test the service by taking part, grassroots organisations providing the local infrastructure and networks, and funders to support development.

The idea

Care4Care will provide support for older people through mutual exchange: support provided by individuals now in return for support for later in life. Care4Care members earn 'care credits' by supporting/caring for an older person in their local community. The hours of support members provide are recorded in their individual care credit account.

Time spent supporting an older person earns an equivalent time credit (calculated in 15 minute segments). For example a member spend 45 minutes making breakfast for their neighbour then earns a credit of 45 minutes which is recorded for future use; members in effect build up their own 'care pension' for their own old age.

Members can spend a portion of their credits immediately to provide support for a family member or friend. For example a Care4Care member might earn care credits locally supporting a neighbour and then choose to spend some of these to get support for their mother who lives 200 miles away.

It will result in more people giving time to older people within their community and will appeal to people's enlightened self-interest as well as purely altruistic volunteering motives.

Care4Care is a radical idea. Unlike other approaches to care and support currently being considered, it focuses on bringing *additional* resources into the system immediately. At its heart is the aim of engaging people in not just providing immediate solutions but in planning for their future lives. It speaks to the importance people place on mutuality, empathy, civility and altruism; and to finding a genuine solution to an issue, which increasingly preoccupies people as they age. How do we plan for a good later life for ourselves, our loved ones and the wider community?

It is a relatively simple idea that presents some challenges in making it a reality. The prize will be huge: Care4Care is a game-changing innovation to tackle the national crisis in support and care facing older people and the entire nation.

In practice

Operating as a national membership organisation, the focus of Care4Care is on enabling its members to deliver mutual support by issuing and managing care time credits, and generating a shared value system between its members. Members have an ongoing commitment to Care4Care as an organisation. They are not signing up to a bank or for a quick bit of volunteering but are joining a mutual aid co-operative with a shared commitment to providing care and support to others – including their future selves – when needed.

The direct provision of care and support is provided through a wide range of local partners who will be quality assured by Care4Care. These will usually be third sector organisations – large or small – that provide quality support to others through unpaid members of the community. Care4Care will help the bridge the current gap in provision, increasing the number of people into the care market.

Care4Care is testing some of its early assumptions in its pilot and prototyping. We expect many Care4Care members to be active retirees – men as well as women - who see the crunch on care approaching them in the next few years. We will also test the engagement of those who live at a distance from relatives and seek mutual exchange for remote caring. However, we will encourage a broader age group to become members including students (looking to build skills). We anticipate many current informal carers will join Care4Care, recognising the enormous contribution made by the current army of informal carers who look after family members and friends, but who sooner or later may need care themselves.

Over a lifetime a Care4Care members' time contribution is likely to rise and fall according to what stage of life they are in. Our clear aim is for people to aspire to earn over a lifetime enough credits to meet their own needs.

Values

Mutuality: the aim is for all members to both provide support and receive support. In the early stages we will issue free credits to the frailest who have had no opportunity to earn credits to get the system going – but even at this time we will encourage every member to work out how they can give back to earn some credits (for example, if housebound by providing telephone befriending support to another lonely older person, or by mentoring and sharing experiences with a younger person).

Independence: Care4Care is independent of local and central government and the NHS and is run for its members. This independence provides reassurance to members that the care credits earned are protected by the organisation and not subject to the whims of future changes in policy. Care credits are owned by members and held in trust for them by Care4Care (and therefore not subject to the whims of future changes in policy).

Care special to me: Care4Care credits are used for whatever a person finds useful, within reason. It does not seek to distinguish between the value of different types of support – the currency is time (which in itself takes Care4Care away from the task-based nature of much current care) – and that time is best used for what the older person wants as they identify their needs. The reciprocal nature of Care4Care helps turn the rhetoric of personalisation into reality.

Simplicity: Care4Care aims for minimal bureaucracy and will have one over-riding aim, to encourage people to provide mutual support.

The organisation

The current intention is that Care4Care will be member-owned, with an ethos of a co-operative and a drive to ensure that members have a strong voice in how the organisation works. As an organisation, Care4Care's key activities will be:

- Developing commitment and loyalty for its members (for example, providing advice, training and recognition);
- Issuing and recording credits every time a member supports an older person; or an older person spends that credit;
- Acting as the trusted bank of credits and running the credits system behind the scenes in a safe and secure way;
- Deciding what and what is not credit earning;
- Bringing local partners on board and validating local partners commitment to quality;
- Ensuring an ongoing stream of members sign up and are active in the scheme;
- Monitoring and evaluating quality and outcomes by embedding qualitative and quantitative measurements in the way Care4Care works;
- Developing and maintaining a robust revenue model so that the organisation is long-term self-sustaining.

The evidence base

As well as the Young Foundation's practical experience in creating new social innovations and ventures, Care4Care builds on a range of Young Foundation research in the field of ageing including:

- **Good Days and Bad Days: Stories of Ageing in the Community**[6], a Young Foundation ethnographic study funded by the Big Lottery Fund that highlighted the importance of informal support in giving people a sense of belonging and connectedness for older people. Care4Care seeks to strengthen these informal networks and expand them to those who do not already take part.
- **One Hundred Not Out: Resilience and Active Ageing**[7] – an overview of the challenges and benefits of an ageing population.
- **The Young Foundation's Ageing Well Innovation Series** exploring the challenges if life post retirement (and how poorly current services meet these needs)[8].
- A wide literature review which confirms the scale and size of many of the key issues Care4Care seeks to mitigate including:
    - The extent of widespread loneliness and isolation in older people
    - The poor quality of much current paid for homecare
    - That the core population of volunteers within the UK has remained stagnant over the last 10 years
    - That support from the state for moderate level care has been in rapid decline over the last decade – only 18% of councils still provide this.

In advance of the pilot work on the Isle of Wight, we have conducted two days of workshops with over 50 people. Four groups participated: elderly volunteers; non-volunteering elderly; professionals, and students (16 years old).

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[6] http://www.youngfoundation.org/publications/paper/good-days-bad-days-stories-ageing-community
[7] http://www.youngfoundation.org/publications/reports/one-hundred-not-out-resilience-and-active-ageing
[8] http://www.youngfoundation.org/our-work/advising-public-service-innovation/ageing-well-innovation-programme/ageing-well-innovation-

These workshops showed strong support from the different groups for the Care4Care concept. Feedback from the workshops was particularly clear that potential members should carry out a very wide range of activities under the Care4Care umbrella; providing that individuals feel that they are in control.

We also learnt that many people said there were things they would not be prepared to do initially but would as and when they got to know someone. In addition to potential service users, we consulted with local stakeholders, including the Isle of Wight's Director of Social Services, and representatives from the local MP, health and the third sector who gave positive feedback and offers of support.

From this research and our local partner's knowledge we anticipate that our target market segments for Care4Care initially will be:

- Active retirees (of both genders)
- Remote carers (those looking for immediate mutual exchange)
- Informal carers
- Students (looking to build skills as well earn credits).

The Next Steps

Care4Care has developed a clear plan for the next stages of its development following piloting and prototyping in the Isle of Wight. This will ensure we understand in as much depth as possible which practical aspects of the scheme need refinement, what will encourage the community to sign up and get caring, and the specification for resilient banking software for the national rollout.

- **Engaging the community.** We are creating a marketing campaign including a consumer-oriented website and national press coverage to build interest and enable people to register interest.
- **Research.** We will carrying out further national market research building on our consultation work to date in order to quantify the different market segments we will be targeting for recruitment and how best to reach them.
- **Developing partnerships.** Engagement with stakeholders with the aim of building a coalition of delivery partners to offer care on the ground. This will mean we will have secured a key part of the infrastructure for rapid and high quality rollout. In the longer term, where groups of individuals want to be Care4Care members and there is no local appropriate organisation, Care4Care will work to enable these groups to organise and deliver care themselves autonomously.
- **Testing.** Setting up further pilot sites in different demographic locations. This will enable us to build on the lessons from the Isle of Wight in a different setting and refine how we work with our third sector delivery partners.
- **Funding.** We will develop our revenue model in more depth. In the medium to long-term Care4Care will be funded mainly by its members who will pay a small subscription to manage their credit pension in their Care4Care care account. We plan to encourage corporate membership where organisations can both contribute cash to running costs, in-kind support and, critically, commit to giving their staff time to be active Care4Care members.
- **Infrastructure:** The development of Care4Care's national infrastructure including the core central team, partners, governance arrangements and resilient banking software to support the national rollout

Our Vision

By 2015 Care4Care aims to be a service available across the UK so that everyone can build his or her own care pension or mutually exchange support for a family member living at a distance. The aim is for Care4Care to be a game changer; reshaping how local services work. Its aim is to increase the number of people who plan and act now and who can rest assured that their contribution will provide for better later years. Most importantly, it aims to provide one way of ensuring that instead of burying our heads in the sand, we meet out collective future needs.

To keep in contact visit, and register on www.care4care.org, so that that you can receive information as the scheme develops.