

Autumn Statement 2016

Age UK representation

October 2016

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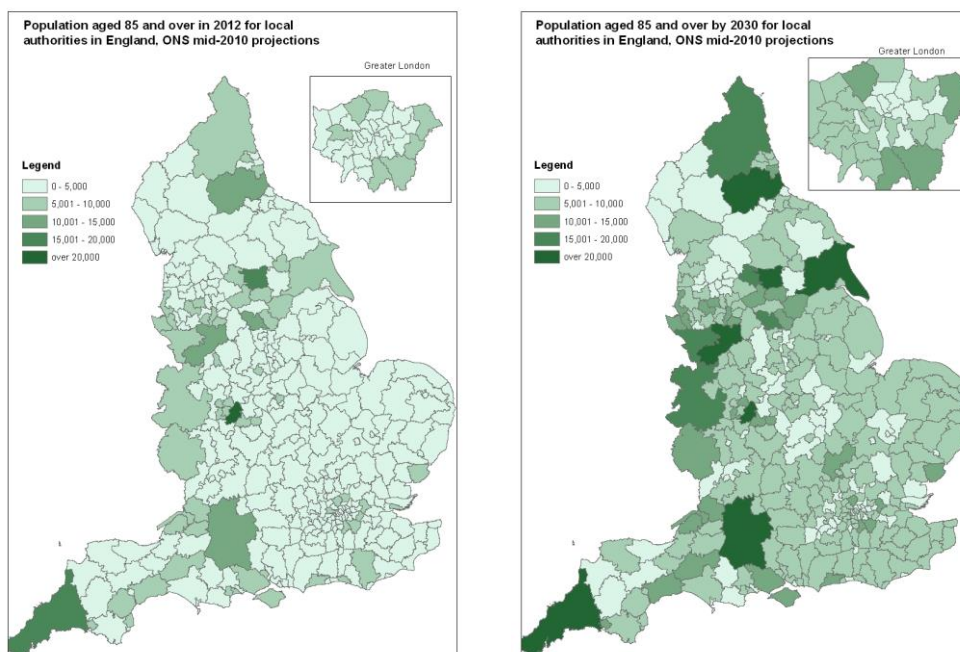
Key points and recommendations

- It is our strongly-held view that enabling people to remain independent as they age is an investment that will be amply repaid in terms of savings to healthcare and income support services, and we pick up this theme throughout this submission. However, in order for this investment to be effectively developed, infrastructure spending must take into account the realities of an ageing population.
- Local Government must be supported to provide the local infrastructure network that will enable an ageing population to remain independent. We believe that now is not the time for further cuts in local government revenue funding, or for the transfer of extra responsibilities (such as Attendance Allowance) from central to local government.
- The Government must prioritise a proper, coordinated approach to health and care policy, including recognition of the contribution of people who are paying for their own care, building in flexibility across the system so that savings in one sector (NHS) can be shared across the other (social care). In the meantime, the need for an immediate, and significant injection of funding into social care is now inescapable. It may also be possible to use infrastructure spending to relieve the pressure on health and care services, for example by looking afresh at new models of housing, integrated transport services and better use of the existing NHS estate.
- We welcome the Government's commitment to invest in housing, but this should include increased investment in new homes to rent and buy that are suitable for older people. This would benefit all generations and receive public support.
- The Government should designate energy efficiency as a national infrastructure priority. It should commit to bringing 2 million UK low income homes up to EPC band C by 2020 and all 6 million low income homes up to EPC Band C by 2025, and use public funding to bridge the gap between the amount needed for energy efficiency and that provided through ECO.
- If the State Pension age is to be increased following the Cridland Review, the Government will need to consider the strong public desire for flexibility and seek ways to mitigate the impact on those people who are unable to work until retirement. This should include a package of increased employment support for older workers.
- We urge the Government to move as quickly as possible to confirm that older people living in the EU can continue to receive annual increases to their State Pensions and other support on which they rely, such as reciprocal rights to healthcare.
- We caution the Government against seeking to extend the new system of lifetime ISAs, and against introducing a marketplace for secondary annuities before consumer protection is assured. The focus should instead be on considering how to improve auto-enrolment and the 'freedom and choice' reforms.

Introduction

1. Age UK is the country's largest charity dedicated to helping everyone make the most of later life. We reach 5.9 million people every year, providing support, companionship and advice for older people who need it most. The Age UK network includes Age UK, Age Cymru, Age NI and Age Scotland and around 150 local Age UK partners in England.
2. Our priority, for this spending round, is to ensure that public spending recognises the need to adapt to an ageing population, both in terms of infrastructure and service delivery. Investing now in housing that will suit the needs of all age groups will, for example, reduce pressure on health and care services, and so will investing in integrated transport solutions that reduce social isolation and loneliness. However, changing demographics will affect all areas of public spending including, for example, flood defences (ensuring that retirement housing is resilient in the event of extreme weather events), sewerage services (if changing demographics will affect the size of rural populations) and broadband provision (to support innovations in telecare and telehealth). It will be important to forecast the future needs of the ageing population – as these charts show, there will be significant regional variations, with the darker green areas showing higher populations of people aged 85+.

Population aged 85+ 2012 and 2030



The role of public infrastructure in supporting independence

3. It is our strongly-held view that enabling people to remain independent as they age is an investment that will be amply repaid in terms of savings to healthcare and income support services, and we pick up this theme throughout this submission. However, in

order for this investment to be effectively developed, infrastructure spending must take into account the realities of an ageing population. Infrastructure, to Age UK, means more than just sewerage pipes and broadband cables, it must address the poor quality of local environments, for example the energy inefficiency of houses occupied by low income households, and it should include social infrastructure such as an adequately funded care workforce, community assets and sufficient support for local volunteers.

4. Local government has a particularly important role in providing this local infrastructure, however a 25 per cent real-terms cut in revenue spending power between 2010/11 and 2015/16 mean that it is in severe danger of not being able to meet its statutory commitments under the Care Act 2014, let alone support local infrastructure such as libraries, public transport and information and advice services. Furthermore, 49 per cent of councils reduced their capital spending in the four years to 2014/15ⁱ. This local infrastructure is not a 'nice to have'; it provides a framework around which other services can coalesce – often provided by the third sector, leveraging up local volunteers - and it is fundamental in building the capacity of older people to live flourishing and independent lives. For example, the proposal to apply the local housing allowance (LHA), which caps housing benefit payments, to supported housing from 2019/20 could further reduce the provision of sheltered housing, even though this is a valuable housing option for lower-income older people and helps to keep them independent.
5. We understand the need to control public spending, but the crisis in local authority funding is leading to extra costs elsewhere in the system – such as the 23 per cent rise in bed days lost through delayed discharge from hospital while older people are waiting for social care, over the year to June 2016ⁱⁱ. **We believe that now is not the time for further cuts in local government revenue funding, or for the transfer of extra responsibilities (such as Attendance Allowance) from central to local government.** We do not believe that retention of business rates will solve the funding gap, because of the regional disparities between spending need and ability to tax. For example, our own estimates show considerable local variation in the forecast number of people with a disability that could lead them to claim Attendance Allowanceⁱⁱⁱ.
6. Community organisations stand ready to work in partnership with government in making public spending go further. For example, the Age UK network of around 150 local Age UKs has provided a route through which the NHS has been able to support 'home from hospital' schemes, dementia support and integrated care schemes. However, an important role for networks such as Age UK and Citizens Advice is in providing advice and information on what services are available locally. **Age UK would like to see a comprehensive cross-governmental strategy for supporting local services of this kind.**

The role of the private sector

7. The private sector has a similarly important partnership role, for example in providing capital, employment, suitable housing etc. However, privately-funded services must be fit for purpose and well-coordinated with the public services. For example, less than 10

per cent of people aged 65+ received support with social care in 2013/14, down from 15 per cent in 2003/04^{iv}. More people are now reliant on privately-funded services, yet there is real concern about the viability of local markets. In the ADASS 2016 Budget Survey 125 councils reported that at least one provider in their areas had ceased trading in the last 6 months, while 91 areas had seen contracts ‘handed back’^v. This is leading to concerns about quality, but also to regular cross-subsidy from self-funders to care recipients who are funded by local authorities paying below-market rates. The Government must prioritise a proper, coordinated approach to health and care policy across both the public and private sectors – see paragraph 12 below.

8. As the Government prepares its plans for delivering Brexit, it will be important to maintain strong and effective regulation for older people as consumers and workers, and we welcome the Government’s commitment to converting the existing body of EU law into British law. The challenge for the future will be to ensure that business serves the needs of a growing marketplace of older people, many of whom have low financial resilience. We are pleased that the Financial Conduct Authority has a current programme of work around ageing populations, and we would like to see this approach replicated in other industries. For example, we have long advocated adoption of a ‘lifetime homes’ standard for new housing.
9. Finally, we are aware that pension funds are being seen as a source of infrastructure funding. It is our strong belief that pension funds must remain first and foremost providers of trusted savings schemes for retirement, but if their use for infrastructure spending increases, we hope that Government will consider how this funding can most effectively be used to support an ageing population.

Health and care

10. Age UK analysis shows that net revenue expenditure on older people’s social care has already declined by nearly £2 billion in real terms between 2005/6 and 2015/16, although we anticipate a slight recovery this year. There is a significant knock-on effect on the NHS and on individuals, with the number of older people receiving social care falling from 1.2 million during 2005/6 to 850,000 in 2013/14, despite rising numbers of older people, most of whom are wholly unprepared to fund their own care. Our most recent report [‘The Health and Care of Older People’](#) published in October 2015 shows a continuation and acceleration of these trends. We are currently working on our forthcoming 2016 publication which will be available in November.
11. Unfortunately the adult social care provisions set out in the Spending Review 2015^{vi} do not in any way reassure us about the future of older people’s social care or the ability of local authorities to manage growing cost pressures. In 2016/17 the social care council tax precept raised £381.8 million for all adult social care^{vii} with 93.4 per cent of local authorities choosing to levy the precept at the full amount^{viii}. Assuming that 51 per cent was spent on older adults, in line with proportionate spending on older people, this would result in a budget increase of just £194.7 million. Furthermore the Local Government Association has previously estimated that, at best, the precept could raise a maximum of £1.7 billion by 2019/20^{ix}. **Age UK believes that an immediate, and significant injection of funding into social care is now inescapable.**

Support for self-funders

12. **We also urge the Government to look more broadly at support for what are known as ‘self-funders’** who in many cases are effectively subsidising local authorities by paying higher rates for residential care than authority-funded. Less than 10 per cent of the 65+ population now receive any assistance, down from 15 per cent in 2005/06. Even where people qualify for local authority funded residential care they, or their relatives, may be asked to pay ‘top up’ fees to cover the difference between the local authority rate and the care home fees. Nationally, an estimated 24 per cent of care home residents pay top-ups, but this masks huge regional variation; in the South East, this rises to 54 per cent^x.
13. Age UK accepted the Government’s decision to delay the implementation of the cap on care costs because of the need to focus on the immediate crisis in care funding, but the general principle of partnership between the individual and the state in meeting the cost of care is a sound one and must not be abandoned. A ‘partnership’ approach would also recognise the vital role of informal care provided by family.

Attendance allowance and other preventive services

14. Services that have experienced particularly deep cuts are those most associated with prevention, support for independent living and support for informal carers. Public Health funding has also been delegated to local authorities and will be reduced by 3.9 per cent annually from 2016/17, leading to an estimated real terms reduction of at least £600 million by 2019/20^{xi}, further constraining the capacities of local authorities to invest in measures aimed at reducing future demand. Whilst understandable given the need to focus on crisis intervention we are deeply worried that this is storing up big problems for the future.
15. We are particularly concerned that, as part of a recent consultation on changes to business rates, DCLG has suggested transferring support currently given through Attendance Allowance (AA) to councils in England for disabled older people needing help in the future. Given the financial pressures that councils are currently facing, we are deeply worried that support for future claimants would be eroded and the proposed transfer would create a patchwork of different local approaches in place of a single national scheme of eligibility and assessment.
16. While we believe that there is a case to look more broadly at current systems to see if there are more effective ways to provide care and support for older people in need, we are strongly opposed to the piecemeal dismantling of a benefit which currently works well in enabling older people to meet the extra costs of disability in a way that suits their needs. As shown by a recent Age UK survey of over 550 people receiving AA^{xii}, these costs include practical help in the home, essential transport to appointments, extra heating, special diets and disability equipment.

Better spending across health and social care

17. It is impossible to separate the financial sustainability of the social care system from that of the NHS. Unmet need in social care is eventually met somewhere, and that is typically in an acute hospital following a crisis. As the rising levels of delayed transfers of care attest, people can then stay in hospital longer than they need as the absence of social care support prevents them from going home safely. The National Audit Office report estimated that delayed discharges like this cost the NHS £820 million a year^{xiii}. At the same time, the hospital sector finished last year with a deficit of £2.45 billion^{xiv}.
18. However, any new system should account for the link between social care and NHS services. **Building in flexibility across the system so that savings in one sector (NHS) can be shared across the other (social care) would help both to improve productivity and more importantly, would improve outcomes for people.** Where people are moving between settings it may be appropriate for healthcare providers to take a lead on what is traditionally social care support in order to better coordinate their care. Some hospitals are already playing this role by directly recruiting social workers^{xv}.
19. **It may also be possible to use infrastructure spending to relieve the pressure on health and care services.** We would be very interested in the re-use of parts of the NHS estate, for example converting underused community hospitals into nursing homes. The national infrastructure of urgent/emergency services is equally interesting. If any future planning were to reduce hospital capacity, it would need to address safe access to A&Es or urgent care centres or even access to specialised services like stroke centres. Equally, how ambulances are structured has a big impact. A starting point might be to build on learnings from existing Urgent and Emergency Care Networks.

Housing

20. We welcome the Government's commitment to invest in housing. Although the focus to date has been on home buying schemes for younger families we think that this must be accompanied by increased investment in new homes to rent and buy that are suitable for older people. 20 per cent of households aged 60+ live in non-decent homes, and the Building Research Establishment has calculated the cost of poor housing to the NHS as at least £1.4bn^{xvi}. Extending the options available for older people who wish to downsize could have considerable benefits for local housing markets by freeing up more family size housing. We would like to see improved financial and planning incentives to stimulate the construction of smaller 'lifetime' house, flats and bungalows that are particularly suitable for older people. We support the need for more leasehold retirement housing as well as low cost sheltered housing to rent. **Encouraging suitable new homes and housing options for older people would benefit all generations and receive public support.**
21. The Government recently announced proposals for the future funding of supported housing, including sheltered provision for older people. **It is important that allocations cover additional service costs and offer a stable and long lasting financial settlement for residents.** The allocation needs to recognise the value of

preventative housing support, which can reduce demand on higher cost services within the social care system and NHS. Older residents need reassurance that any financial agreement will provide a lasting settlement to dispel concerns over closures and the withdrawal of services. The National Housing Federation has suggested the need for 16,000 specialist homes each year until 2030 to meet on-going demand. Further investment in this sector, including extra care housing, will provide considerable savings and social benefits for older people over the longer term.

22. The Government's investment in the Disabled Facilities Fund is extremely welcome. However, this is only one component of the funding and services required to deliver fast, efficient and affordable adaptation services to older and disabled people. There is evidence that investment in preventative housing services speeds up hospital discharge times and reduces readmissions, thereby diminishing pressure on the NHS^{xvii}. **We would like to see further investment in the Better Care Fund and joint budgets to ensure the practical and swift delivery of adaptations and equipment at home.** In addition, we would welcome further investment in assistive technology to allow more older people to receive support and care at home. We would like to see targeted investment to encourage more older people to improve their home environment and install preventative adaptations. This could include financial incentives to install accessible features such as a level access shower.

Energy efficiency

23. The Government should designate energy efficiency as a national infrastructure priority, in order to improve the energy efficiency of the housing stock. It should commit to bringing 2 million UK low income homes up to EPC band C by 2020 and all 6 million low income homes up to EPC Band C by 2025.
24. The only programme helping fuel poor households in England is the Energy Company Obligation (ECO), and it is currently unlikely to deliver the outcomes stated in the Government's already unambitious Fuel Poverty Strategy. The Committee on Climate Change estimates that the real cost of bringing the housing occupied by fuel poor householders up to a satisfactory level of energy efficiency is between £1.8bn and £2.8bn a year, but ECO is projected to be £640m. The shortfall should be met with public funding, but it is an investment insofar as it delivers quantifiable benefits in terms of health and jobs – and even tax revenues (yielding £1.27 income for every £1 invested). Using energy more efficiently also means needing to buy less from volatile international markets and less investment in new generating capacity, so it improves our national energy security too. The Committee on Climate Change is warning that energy efficiency is having an impact on our ability to deliver the fourth and fifth carbon budgets, which are crucial to our national and international climate change agreements.
25. It is not just the homes of fuel poor households where we need to promote energy efficiency. A new Green Deal which incentivises able-to-pay householders is also required. This should be expedited with more urgency in order to work with the delivery of the smart meter programme, which gives us a once in a generation

opportunity to talk to people about saving energy and managing the costs of what they use.

Adequate incomes for current and future pensioners

State pensions and benefits

26. While it is positive that pensioner poverty fell considerably in the late 90s and first decade of this century, progress appears to have stalled and there are still 1.6 million pensioners (14 per cent) living in relative poverty, with incomes of less than 60 per cent of typical household income. Of these, around one million are in severe poverty (with incomes of less than half of typical household income).
27. The new State Pension which started in April 2016 will produce a fairer and simpler system for many, and should particularly help some carers and people who have spent a life time on low incomes. However it does not apply to people who reached State Pension age before April 2016, and for a fairly length period of transition, many will not receive the full new State Pension due to periods of contracting out or an incomplete contribution record. The Government should consider how current pensioners can be brought into the new State Pension where this will benefit them, with no loss of current rights.
28. Given the significant number of existing pensioners in poverty, and the length of time it will take for the new State Pension to lift future pensioners out of poverty, the Government should set targets for the reduction and eventual abolition of pensioner poverty and should aim to halve pensioner poverty by 2020.
29. To help achieve this it is important that current support, including the triple lock, is protected and, more is done to help ensure that older people receive the benefits that are due to them, given that DWP estimates show that more than a third of pensioners entitled to Pension Credit are not receiving it.
30. While the abolition of poverty should be a goal in itself, we also know that the Prime Minister's aim to help those who are 'just managing' will be welcomed by many older people who are in this position. There are, for example, around 1.2 million pensioners (nine per cent) who are living just above the poverty line (that is with incomes between 60 and 70 per cent of typical household income) and only around a half of people aged 65+ have incomes high enough to pay income tax. This group have low financial resilience, and are unlikely to be able to earn or borrow their way out of trouble. Although equity release is an option for some, property wealth is very unevenly distributed and half of pensioners aged 75 to 84 have property wealth below £152,000^{xviii}.
31. **When making policy decisions that affect this 'just managing' group, the Government must look at the cumulative impact on individuals.** For example, some people tell us how throughout their life they worked hard and struggled to put money by for their retirement but now find that because of the modest private pension income, they miss out on means-tested benefits and support such as help with glasses

and dental treatment. Many in this position have also been affected by low interest rates from their savings. The state pension will make up a large part of income for many in this group, so maintaining the triple lock is important, and people also value the non-means-tested benefits such as the winter fuel payment and the bus pass which some people say is the only extra financial help they receive.

Leaving the European Union

32. Inevitably it will be some time before we know what the full implications of leaving the European Union will be. However, for those UK pensioners living abroad in EU countries this is a time of great uncertainty and worry. We urge the Government to move as quickly as possible to confirm that people can continue to receive annual increases to their State Pensions and other support on which they rely, such as reciprocal rights to healthcare.

State Pension age (SPA)

33. Age UK accepts that it is reasonable to review SPA as life expectancy rises. However, any policy based on changes in average life expectancy would put some groups at a disadvantage and we believe any changes need to consider a range of factors such as the wide differences in healthy life expectancy between different groups, and varying employment opportunities for continued working in later life. It is important that there is good provision for those who are not able to work until SPA due to reasons such as ill health or who are caring for family members. We welcome the Cridland review and will be responding to this. If the State Pension age is to be increased, the Government will need to consider the strong public desire for flexibility and seek ways to mitigate the impact on those people who are unable to work until retirement.

Future pensioners

34. Age UK has been a strong supporter of automatic enrolment since its inception and we are pleased with the success of the roll-out to-date. The 2017 review of automatic enrolment provides a valuable opportunity to create a vision for pension saving and retirement outcomes, and to begin building a consensual approach towards defining the role of automatic enrolment in future pensions and savings policy. **The forthcoming review should therefore be as wide-ranging as possible, including how to determine adequacy in pensions saving and what a long-term route map for increasing adequacy should look like.** This would allow an informed discussion about how best to ensure that the contribution rates and qualifying earning band levels deliver the best outcomes to people in greatest need of a private pension income in later life and how best to ensure that excluded groups, including those with multiple part-time jobs and the self-employed, are brought into pension saving. This is particularly important in the current context of the State Pension age review – the two debates are inevitably intertwined.
35. **We caution the Government against seeking to cut pensions tax relief by extending the new system of lifetime ISAs.** In our view, these are not a satisfactory means of saving for later life. The products are being aimed at very different life-course

events – buying a house and retirement – which are not compatible from an investment viewpoint. If LISAs were to become a vehicle for regular pension saving, it could undermine the progress of automatic enrolment and lead to worse outcomes in later life. **If pension tax relief is reformed, it should be done on a cost-neutral basis that is fairer to lower earners.** An ISA-style system where pension contributions do not qualify for tax relief but pension income is received tax-free in later life is likely to deliver worse outcomes for future pensioners and should be avoided.

Financial resilience in retirement

36. The pension flexibilities have provided an opportunity for many savers to improve their outcomes in retirement. However, as the early cohorts of automatically enrolled savers, who are highly likely to have lower levels of financial capability than current users of the flexibilities, begin to access their pensions, the challenge of ensuring good outcomes, and avoiding scams and poor product choices, will become harder to meet. **It is important that the Treasury measures and evaluates outcomes in a comprehensive manner so we can fully understand the impact that choice, advice/guidance and provider marketing have on retirees.** This analysis could be done as part of the 2017 automatic enrolment review.
37. **The government must also consider how default product pathways can aid savers to get the most out of their pension.** We believe there is a very strong case for building these ‘routes’ through retirement, to help the disengaged navigate the highly complex decumulation product marketplace, and that the Treasury should work with providers to establish these.
38. We urge the Government not to go ahead with the new secondary annuities marketplace until it has satisfactorily accounted for all consumer protection angles as it risks creating severe disadvantage for a large number of people. Apart from small groups of people, it is unlikely to be in the interests of consumers to sell their ‘whole life’ income. In particular we are concerned by the significant gaps in protection for people suffering from a cognitive impairment, who may not be able to make sound decisions, especially if they have low levels of financial capability. The dependents of all joint-life annuity holders are also, at risk as there is, at present, no minimum requirement for obtaining agreement that their future income is also being sold.

Fuller working lives

39. We welcome much of the work the Government has done on Fuller Working Lives in recent years. However, we would like to see greater investment in the unemployment support system for older workers, more support for older employees with caring responsibilities, and increased access to workplace training.
40. Long-term unemployment is a particular problem for the over 50s – once out of work, people in this age group are more likely to stay out of work for 12 months. The new Work and Health Programme is an opportunity to improve back-to-work support for the many older jobseekers who find themselves locked out of the labour market. However, to do so it must address the failings of the Work Programme, which delivered

significantly worse job outcomes for participants aged over 50, for example by ensuring providers are adequately rewarded for addressing the age-related difficulties faced by unemployed over 50s in finding a new and sustainable job. Perhaps most importantly, it should be funded to an extent which allows Jobseekers Allowance claimants to be referred onto the scheme after an appropriate duration of unemployment – ideally after six months. We are concerned that the current proposal of waiting for two years is simply too long for the vast majority of over 50s.

41. We also believe that the Government should increase workplace support for informal carers. With increasing numbers of people picking up informal caring responsibilities – which can have a damaging effect on their own work from as little as five hours of caring per week – it is important that carers are properly supported to keep working. The Government should commit to introducing a statutory right to paid carers' leave, and to allowing flexible working to be requested during the recruitment process as part of a system of 'flexible by default'.
42. With nearly 10 million over 50s in employment, it is essential that all workers have the opportunity to update their skills, and undergo training where appropriate. This responsibility falls partly on employers who have a direct interest in training their staff, but also on the Government to ensure that suitable and good quality opportunities exist, in particular through the Further Education sector. **We believe the Treasury should commission the Department for Education and the UK Commission for Employment and Skills to conduct a thorough review of the type of provision typically accessed by older workers, with the intention of identifying where public funding can help raise skill levels.** We think that raising participation in good quality training is one part of the 'productivity puzzle' that has been apparent in the UK in recent years.

A digital economy

43. Age UK has welcomed the commitment in the Queen's Speech 2016 to introduce a universal service obligation (USO) for broadband. Although three in five (61%) people aged 75+ are still non-users, older people are increasingly using the internet for vital tasks such as shopping, banking, telecare/health and communicating with family.
44. However for older people to be able to benefit fully, we strongly support the introduction of social tariffs and/or price caps. Despite progress, one in seven (14 per cent) pensioners live in poverty. This must be accompanied by greater investment in building digital skills. We therefore welcome the announcement by the Culture Secretary that there will be free training in digital skills for everyone, and we look forward to engaging in the consultation process to ensure that all older people who are able to benefit from digital technology are able to do so.
45. At the same time, it is vital that people who are not online, or not yet online, are not disadvantaged by any move to digital services. Older people should be supported and encouraged to get online but those who cannot or do not want to do so should continue to be able to access services and support in a way suits them. Given the likelihood of the further removal of offline access to essential services, and the resulting deprivation

and stress, the Government should consider imposing a levy on industry to pay for the offline provision of essential services as a supplement to the USO.

46. We also highlight the risk of cyber crime, including online fraud; recent ONS figures estimate that there were 2 million incidents of computer misuse crime in a year in England & Wales, plus a further 3.8 million incidents of fraud, including fraud committed online.^{xix} We ask the Government to ensure that enforcement agencies are adequately funded to counter this serious risk, particularly (following the EU Referendum) where this takes place cross-border.

Integrated transport services

47. The Government needs to promote an integrated approach to transport that looks at complete journeys taken by older and disabled people across different types of public transport and different providers. As with health and care, it would help if savings in one area could be set off against extra spending elsewhere.

48. Age UK supports the Government's Bus Services Bill but would like to see franchising accompanied with a specific capital funding allocation to help improve accessibility for older and disabled people, for example by increasing the availability of audio-visual displays on buses and at bus stops outside London. We would also like to see spending on practical measures to make it easier for older people using scooters, wheelchairs and walking aids to get to bus stops and stations, including level pavements, dropped curbs and age friendly crossing points.

49. We would like to see further investment in community transport services, especially in rural areas. The Government already recognises the value of voluntary transport schemes to help older people get to hospital and other essential services. As well as further investment in vehicles we would like to see additional funding for transport authorities, to allow flexible use of bus passes for community transport, voluntary car schemes and taxis. Providing alternative solutions through community transport or a 'total transport' approach could offer long term savings and improve services. More generally we believe the powers contained in the Bus Services Bill should be made available to all local authorities to help extend public transport to vulnerable groups, especially in remote or isolated areas.

50. Driver mobility centres for older and disabled drivers play a vital role in improving driver safety and facilitating independence. We would like to see further investment to increase the capacity and reach of these services. Promoting the ability of older people to drive 'safely for longer' offers cost benefits by supporting independent living.

51. The Government has made considerable progress in helping network rail and the rail companies to improve accessibility on trains and at stations. We would like to see further allocations to the 'Access for All' programme to ensure consistent standards across the whole rail network.

Understanding ageing

52. In conclusion, we return to our earlier point that all these areas of public spending must take into account our ageing population. It is important that the research community is supported to provide this insight to Government, yet we lack a national specific programme of funding for cross-disciplinary research into ageing. The cross-Council Lifelong Health and Wellbeing initiative, which was established to meet the challenges and opportunities of an ageing population, has closed and has not been replaced by any similar programme. We would like to see further programmes of funding into the ageing population.

53. We also understand that there is concern in the academic community about the possible loss of European funding, and we welcome Government's guarantee of funding for research commitments agreed before the EU referendum. We support the position of the Association of Medical Research Charities, that the UK medical research community should have continued access to EU funding programmes and collaborative opportunities to progress the discovery and understanding of diseases and ill-health.

ⁱ *Financial sustainability of local authorities: capital expenditure and resourcing*, National Audit Office, 2016

ⁱⁱ Acute and non-acute delayed transfers of care, total days delayed, 2016/17 www.england.nhs.uk

ⁱⁱⁱ http://www.ageuk.org.uk/Documents/EN-GB/For-professionals/Policy/money-matters/Cr_Age_UK's_response_to_DCLG_consultation_including_Attendance_Allowance_September_2016.pdf?dtrk=true

^{iv} *The Health and Care of Older People in England 2015*, Age UK, 2016

^v Association of Directors of Adult Social Services, Budget Survey 2016

^{vi} HM Treasury, Spending Review and Autumn Statement 2015

^{vii} Department for Communities and Local Government; "Revenue account (RA) budget 2016 to 2017," Department for Communities and Local Government (2016) -

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/532962/RA_2016-17_data_by_LA.xlsx

^{viii} Association of Directors of Adult Social Services, Budget Survey 2016

^{ix} Local Government Association: Spending Review and Autumn Statement 2015: On the day briefing, 25 November 2015

^x Laing and Buisson, Care of Older People Market Report 2015, (2015)

^{xi} Kings Fund, Nuffield Trust and Health Foundation, The Spending Review: What does it mean for health and social care (December 2015)

^{xii} http://www.ageuk.org.uk/Documents/EN-GB/For-professionals/Policy/money-matters/Attendance_Allowance_%20survey_report_September_2016.pdf?dtrk=true

^{xiii} Discharging older patients from hospital, National Audit Office, 2016

^{xiv} https://improvement.nhs.uk/uploads/documents/BM1653_Q4_sector_performance_report.pdf, NHS Improvement - accessed 15 August 2016

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