CARE & SUPPORT ALLIANCE Campaigning for the care we need

Care and Support Alliance Representation to Autumn Budget 2026

About the Care and Support Alliance

The Care and Support Alliance (CSA) is a coalition of over 50 of England's leading charities campaigning for a properly funded care system alongside the millions of older people, disabled people and unpaid carers who rely on it.

The Autumn Budget is an important opportunity for the Government to demonstrate that its renewed commitment to adult social care reform is backed by investment.

We recognise that the Independent Commission on Adult Social Care is considering the longer-term future of care and support, with its final recommendations expected in summer 2027. The Budget does not need to pre-empt that work. However, people who need care and support cannot wait until 2027 for action.

The immediate pressures are significant. Councils overspent their adult social care budgets by £715 million in 2025/26, while more than 400,000 people are waiting for an assessment, care and support, a direct payment or a review.[1] But these figures capture only part of the picture. Significant unmet need remains, including among people who do not approach their council, are found ineligible for support, or receive support that does not fully meet their needs. The consequences are felt not only by individuals going without the care and support they need, but by families and unpaid carers who are often left to fill the gaps. At the same time, councils report rising demand and increasingly complex needs, with growing pressures in supporting both older people and working-age disabled adults.

We are calling on the Government to use the Budget to fully fund the immediate pressures facing adult social care, while laying the financial foundations for lasting reform.

1. Ensure people can get the care and support they need now

The Government should provide additional funding sufficient to meet evidenced pressures from rising demand, increasing complexity and the cost of delivering high-quality care and support.

The £715 million overspend recorded by councils in 2025/26 demonstrates the scale of immediate financial pressure. Additional funding should enable councils to meet their Care Act responsibilities, address unmet need and improve access to care and support, rather than relying on reductions in services, increased charges or unsustainable use of reserves.

Funding must recognise the breadth of people who rely on social care, including older people with care and support needs and working-age disabled people, and the breadth of support that enables people to live independently, maintain relationships and participate in their communities – from personal care and practical support to rehabilitation, day and community services, and support to work and participate in everyday life.

CSA's Show Us You Care campaign has highlighted substantial geographical variation in what happens when people approach their council for care and support. In some parts of England, around three in ten requests do not result in formal support; elsewhere, it is more than nine in ten.[2] Longer-term reform must create a system in which people's ability to access essential care and support is determined by their needs, not their postcode or the financial position of their local council.

Reducing unmet need should be a core test of both immediate investment and longer-term reform. Success should be measured not simply by whether budgets balance, but by whether more people are able to get the right support at the right time.

2. End NHS–social care funding disputes and improve hospital discharge

No one should remain unnecessarily in hospital or be left without the support they need following discharge, because different parts of the system cannot agree who is responsible for funding their care.

Around 13,000 people who are medically fit to leave hospital remain there on a typical day. In 2025/26, 6.75 million bed days were lost to discharge delays of seven days or more, at an estimated cost to the NHS of £2.66 billion.[3]

Insufficient community support is one contributor to these delays. Disagreements between councils and the NHS over responsibility for funding care, including NHS Continuing Healthcare, can create further barriers.

Where formal support is not available, families and unpaid carers can also find themselves expected to provide significant care following discharge, sometimes at short notice and without the support, information or preparation they need. This can have significant consequences for carers themselves, affecting their ability to remain in or return to work, reducing household incomes and taking a toll on their physical and mental health and wellbeing. These impacts carry wider economic costs, including through lost productivity, increased pressure on health services and greater reliance on other forms of public support. Hospital discharge must not simply shift responsibility for care from statutory services onto families.

The Government should establish clearer and more sustainable funding arrangements between the NHS and local government, alongside sufficient investment in social care, rehabilitation and recovery support in the community. People and their families should be properly involved in discharge planning, with unpaid carers identified and supported and their willingness and ability to provide care taken into account.

Improving discharge should not simply be about freeing hospital beds. People need the right support, in the right place, at the right time, enabling them to recover well, regain independence where possible and avoid unnecessary readmission.

There is also a clear fiscal case. Getting this interface right can improve people's outcomes while releasing NHS capacity and reducing the substantial costs associated with delayed discharge.

3. Fully fund a fair and sustainable social care workforce

People who draw on social care depend on a skilled, stable and properly valued workforce. Workforce shortages and high turnover can mean disrupted relationships, inconsistent support and less choice and control for people receiving care.

The Government's commitment to improving pay and conditions through a Fair Pay Agreement is welcome. It must be backed by sufficient additional funding, alongside investment in recruitment, retention, skills and career development.

Wider nationally determined employment and workforce costs must also be fully funded. They cannot simply be passed to councils and providers without consequences for the availability, continuity or quality of care.

There is significant evidence that public commissioning rates do not consistently reflect the sustainable cost of providing care. The Homecare Association estimates a £3.25 billion funding gap in homecare, while around 80% of homecare is purchased by public bodies.[4] Funding for councils and NHS commissioners must therefore take account of the real costs of workforce improvements and high-quality provision

The Budget should ensure councils and NHS commissioners have sufficient resources to commission good-quality care at sustainable rates, while building the workforce required for longer-term reform.

4. Invest in prevention, independence and unpaid carers

Too often, people's needs go unmet or they struggle to access support until those needs have escalated and they reach crisis.

The Budget should begin shifting investment towards prevention, early intervention and support in people's homes and communities.

This should include homecare and community support, rehabilitation, adaptations and equipment, and better support for unpaid carers. Unpaid carers provide vital support, but families should not be expected to fill gaps created by insufficient formal care. Investment should ensure carers have access to assessments, breaks and replacement care, and that caring does not come at the expense of their own health, finances or ability to work.

This is fundamentally about enabling older and disabled people to maintain their independence, relationships, employment where relevant, and connection to their communities, while ensuring unpaid carers and families have the support they need to sustain their own health, wellbeing and lives alongside caring.

It also represents better use of public money. Appropriate support at an earlier stage can prevent or delay needs escalating into more intensive and expensive interventions, prevent avoidable hospital admissions, support timely discharge and enable unpaid carers to remain in employment.

Adult social care is itself a major contributor to the economy, contributing an estimated £77.8 billion in gross value added to the English economy in 2024/25.

Social care should therefore be recognised as essential social and economic infrastructure – an investment in people's independence and participation as well as part of the solution to pressures elsewhere in public services.

5. Put social care on a sustainable national footing

Immediate investment must be accompanied by a commitment to lasting reform.

The Government should commit to providing the sufficient and sustainable national funding necessary to implement meaningful reform following the Independent Commission on Adult Social Care.

We recognise that decisions on the detailed future funding model should be informed by the Commission and the Big Conversation on Care. The Budget does not need to pre-empt that process.

However, the Government can provide confidence now that reform will be matched by the resources required to deliver it.

Any future funding settlement should enable everyone who needs care and support to live with dignity, independence, choice and control. It should reduce unacceptable geographical variation in access to support, be fair across generations, recognise the circumstances of working-age disabled people and protect benefits intended to meet the additional costs of disability.

A credible commitment to funding reform would provide confidence for people and families, councils and providers, while ensuring that the work of the Commission leads to meaningful change.

The economic and fiscal case for action

Investment in adult social care should not be viewed simply as additional public expenditure. Social care is essential social and economic infrastructure. The sector itself makes a significant contribution to the economy, contributing an estimated £77.8 billion in gross value added in England in 2024/25.[5]

A properly funded care and support system can:

- reduce avoidable NHS expenditure and release hospital capacity;
- prevent or delay people's needs escalating into more intensive and expensive interventions;
- enable older and disabled people to live independently, participate in their communities and, where appropriate, remain in or enter employment;
- support unpaid carers who want to work to remain in employment;
- support a large and economically important workforce; and
- provide greater stability for councils and care providers.

The immediate and longer-term cases for investment are therefore closely connected. Unmet need is not cost-free. When people cannot access the care and support they need, their needs can escalate, families and unpaid carers can be left to fill the gaps, and costs can be shifted elsewhere in the public sector, particularly to the NHS.

Investing in social care now, alongside a commitment to sustainable longer-term reform, can therefore improve outcomes for people and families while supporting wider Government objectives on economic participation, prevention, NHS productivity and the sustainability of public services.

Our ask to the Chancellor

The Autumn Budget should mark the beginning of change, not another period of waiting.

We are asking the Government to:

- **ensure people can get the care and support they need now**, providing sufficient additional funding to address unmet need, rising demand and complexity, and the cost of high-quality care and support;
- **stop people falling between the NHS and social care**, investing in community capacity and addressing funding disputes that can delay or disrupt support;
- **fully fund a fair and sustainable social care workforce**, including the Fair Pay Agreement and wider nationally determined workforce costs;
- **invest in prevention, independence and unpaid carers**, helping people access support before they reach crisis; and
- **guarantee sustainable national funding for lasting reform** following the Independent Commission on Adult Social Care.

There is a strong economic and fiscal case for action. A properly functioning care and support system can prevent needs escalating into more expensive interventions, support employment and economic participation, help people leave hospital safely, reduce avoidable pressure on the NHS and provide greater stability for councils and providers.

But fundamentally, social care is about enabling millions of people to live their lives with dignity, independence, choice and control.

The Government has described this as the best opportunity in a generation to fix social care. The Autumn Budget is an opportunity to demonstrate that this ambition will be matched by action.

Reform is coming, but people cannot wait for reform. Short-term investment should be a bridge to reform, not a substitute for it.