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The government's recent announcement of a new levy to pay for health and social care has thrown the spotlight once again on what is a great success story of our time – that thanks to medical and social advances we are living much longer lives.

Many people whose disabilities and health conditions would have claimed their lives in childhood benefit from this longevity too, not just older people. But how well we live is as important as how long we live. More of us will need some kind of care and support to help us live the best lives we can. As a society, we've yet to think through how we meet these growing needs and how we pay for them.

Every government over the last three decades has struggled to answer these questions, with innumerable reports, reviews and commissions. So, hopes were raised when the government finally announced its plans, with the centrepiece proposal for a cap or limit on how much individuals should have to pay towards the cost of their care (currently anyone with more than £23,250 has to pay the lot without any help from the state). Undoubtedly this will help some, especially those who stand to lose most of their modest savings. But as the dust settles after the government's announcement, many questions remain. It is not clear how much new money will be available to social care, and when. The lion's share is heading for the NHS. The new cap will not be introduced until 2023, and on its own will not sort out the bigger challenges facing our care services, including rising numbers of people with unmet needs, unsupported family carers and a fatigued, underpaid and poorly paid workforce with over 112,000 vacancies. None of these pressing needs is addressed in the Government's proposals. Instead, it has promised a White Paper to look at these wider issues. In the meantime, Coronavirus and Brexit are placing further strains on our creaking system. There are fundamental questions about what is the nature and purpose of care in our complex, 21st-century society. What is the right balance of responsibilities between the state, individuals, families and communities – including faith communities?

That is why the Archbishops of Canterbury and York have set up a new commission – [Reimagining Care](#) – to engage with these deeper issues where theology and faith can offer fresh and distinctive perspectives, especially on the enduring values and principles which should underpin care and caring. As Archbishop Justin has reminded us "reimagination of Britain as a country in which human beings flourish has to put high-quality social care, public and mental health at the heart of its objectives." The Commission aims to inform the national debate and influence national policy by drawing on the work of churches in communities and by identifying practical ideas, informed by extensive listening, and gathering examples of good practice. My aspiration is that the Commission will inject a sense of hope and possibility that after years of neglect real change can be brought about in this vital public service on which most of us will draw at some point in our lives. [Further information about the Commission's work can be found on our website.](#)

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