

**JUST.**

# SOCIAL CARE – A DECADE IN REVIEW



**In the ten years we've been running our study, we've seen little movement in people's attitudes to social care. That's hardly surprising given there's been no change in government policy. The next 10 years offer the promise of positive and material change in how society considers social care but it won't happen unaided.**

Our latest research makes clear that people have only the very loosest idea of what the new reforms mean. The public needs to understand the policy the government has put in place before they will engage with it. Simply laying down a new policy and leaving people to figure it out for themselves won't achieve the change required.

Moving people to a point where they understand the system sufficiently to feel confident enough to plan around it will require consistent and continued communications from the government. Setting out the new policy was without doubt an important step, but it's only the first in a long journey.

#### New reforms are on the way

£20K

means-tested lower capital limit below which no fees are due

£100K

means-tested upper limit above which individuals pay their own care fees

£86K

cap on individual contribution to personal care costs

#### But they're not cutting through, people are confused and confidence in the system is low

6%

said they understand recent government announcements on care funding

48%

are delaying planning until the new reforms are fully implemented

10%

think later life care provision is fit for purpose in the UK

#### And time is running out to get people on board

2.8M

over 85s in the UK by 2040<sup>1</sup> with growing pressure on the sector

74%

of over 75s have not thought about care, planned or spoken to family about it

89%

of over 75s have made no provision to cover care costs

## FOREWORD

**Welcome to the Care Report 2022. This is the 10th anniversary edition of our in-depth research series that sheds light on how the over-45s think and feel about adult social care.**

A great deal must have changed in a decade, right? Unfortunately, that's not the case. The system described as "broken and in desperate need of reform" by the government<sup>2</sup> then is largely the same one we have in England today.

The biggest shame is that 2012 had the feel of a new dawn. The Dilnot Commission had made a series of bold recommendations including a lifetime cap on care costs and more generous means-testing limits. The coalition government supported the principles laid out and stated its intention to create a new funding model based on them – when the cash could be found.

Our original research set out to test public knowledge of how the system works and attitudes towards those funding proposals. Then – as now – we found strong evidence that those navigating the system found it confusing, stressful and expensive, and also broad support for the idea of capping costs.

Strange, then, that I'm feeling optimistic. After a lost decade of false starts and broken promises, with health services still reeling from a pandemic, and in the middle of a cost of living crisis, what grounds are there for expecting a better future?

My confidence stems from the fact that the ball has already started rolling and is gathering momentum.

The government last year announced "an unprecedented investment in health and social care" and a White Paper that will commence "a once in a generation transformation"<sup>3</sup>.

It promised to introduce in England a cap on care costs, already legislated for in the 2014 Care Act but not yet in force, and more generous means-tested limits so that everyone with assets valued at less than £100,000 would receive some financial support, up from £23,250 currently.

New Prime Minister Liz Truss, despite scrapping plans for a new Health and Social Care Levy, has promised to find the cash needed to press on with the plan. The job now is to create the infrastructure and processes and to train the people who can deliver the vision.

Let's remind ourselves of the prize. An adult social care system that's well funded, that provides high quality care, that helps people plan for the future and make informed decisions at the point of need, and is fair and accessible to all.

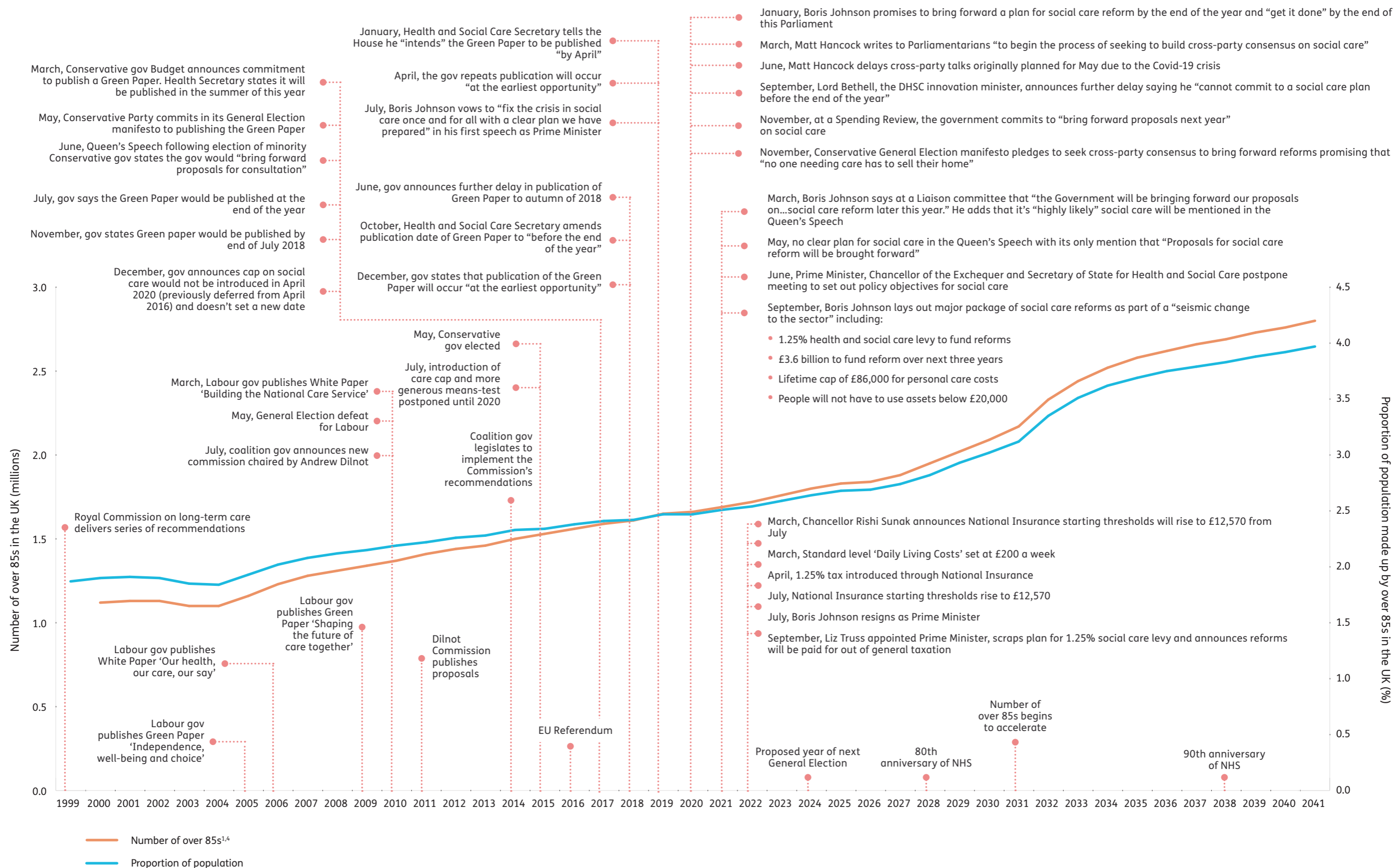
This 2022 edition is going to conclude by looking forward a decade to our 2032 report. What would we want those who access care in the coming years to tell us about their experience? What will good look like? And why there is an important role for a government-backed 'Care Wise' service providing independent and impartial guidance to those accessing the care system just as Pension Wise does to those approaching retirement.

Until then, let this year's research become the benchmark against which the brighter future will be judged.

**Stephen Lowe**  
Group Communications Director  
Just Group



# A HISTORY OF SOCIAL CARE POLICY



# POLICY MEETS REALITY

## In the shadow of the pandemic

Many people’s thoughts and feelings about adult social care will have been influenced by harrowing news reports during the Covid-19 pandemic which showed already struggling care services pushed to the point of collapse.

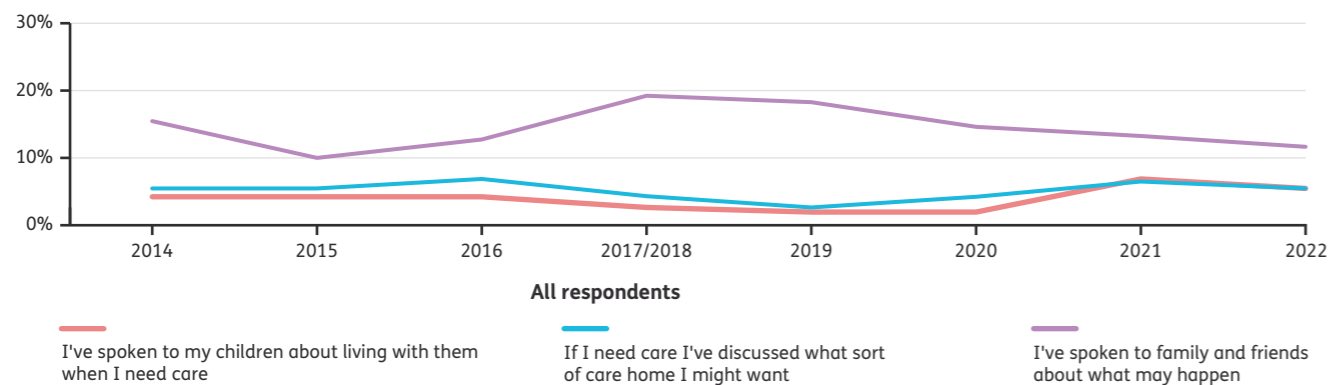
It raises the question, is our care system fit for purpose? Among over-45s who have experienced the system through helping someone like a parent or elderly relative find care, only 10% believe it is fit for purpose while 72% say it’s not.

## A difficult conversation

Our research set out to see what steps people had taken to think about their future care needs and to communicate their care wishes to loved ones. The research suggests it’s a topic many find hard to discuss.

Nearly eight in 10 (79%) agree that they’ve not thought about care, planned for it or spoken to family about it and the proportion was almost as high for the over-75s (74%). The coverage of the ‘care crisis’ and pandemic has not sparked an increase in the proportion taking action to prepare for care, even among older groups.

### What kind of conversations have you had about your future care needs?



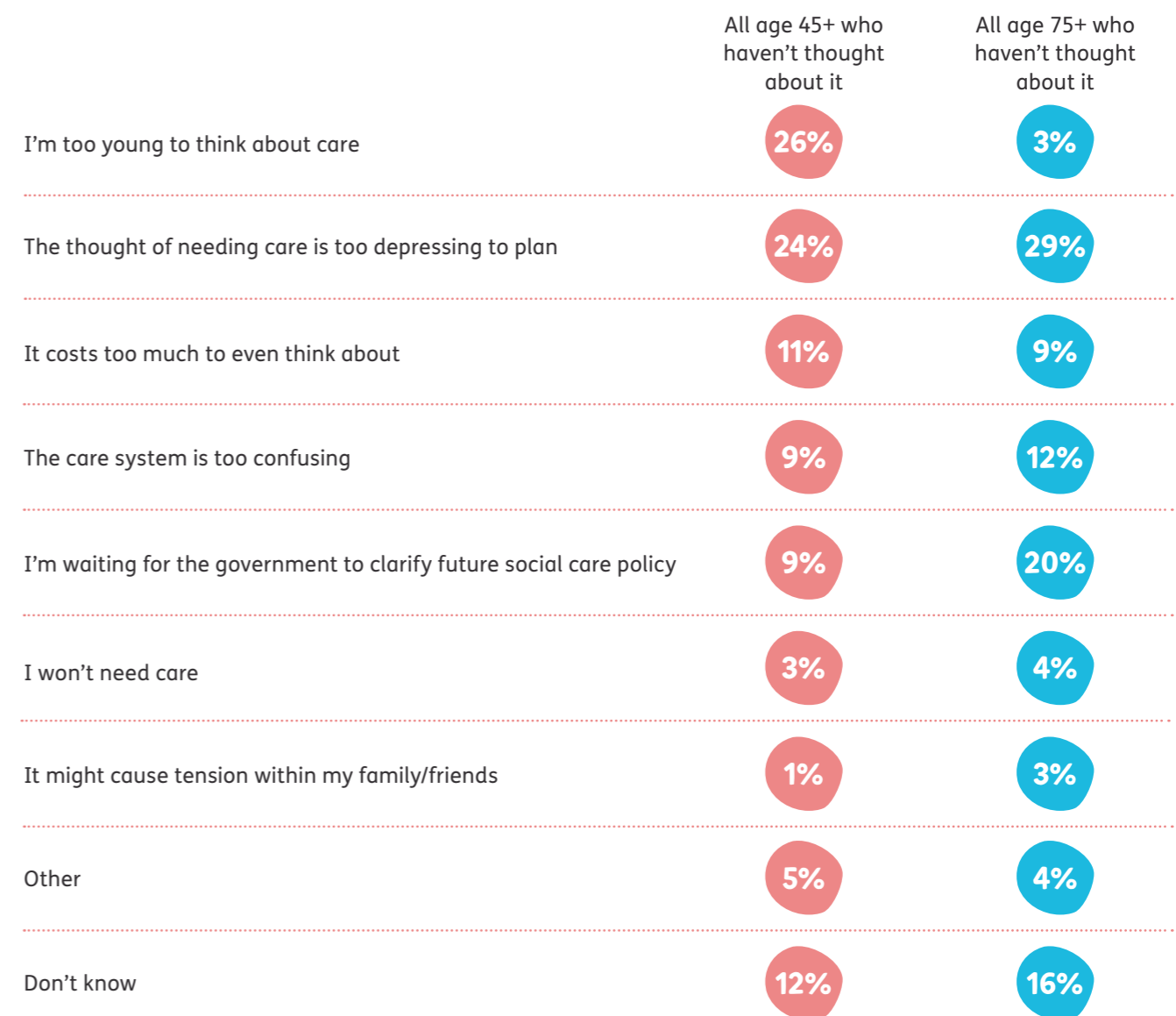
### Most people have a view on what they would prefer if they require care in the future:

- Only 20% of over-45s agreed that they would be happy to go into residential care if they need to, compared to 47% who disagreed.
- Two-thirds (67%) would be happy to have carers come into their own home to help if needed, against 9% who disagreed.
- 63% said they would want to be near family if they went into residential care, against 6% who disagreed.
- They want to choose their own care arrangements – among those with children 21% agreed they would rely on them to decide their care arrangements against 40% who disagreed.
- And a quarter (26%) of those with children agreed they would like to move in with them if they couldn’t cope in their own homes, but this was outstripped by 41% who disagreed.

## A task deferred

We explored the reasons why people weren’t thinking ahead. There was a large contingent who felt it was just too depressing to plan, the costs put them off, or they’re confused. Notably among over-75s one in five (20%) said they were waiting for the government to clarify future policies, suggesting lack of policy action is directly leading to people being more poorly prepared.

### Why haven’t you thought about care, planned for it or spoken to your family about it?





## OUT WITH THE OLD, IN WITH THE NEW

Unlike the NHS which is free at the point of use, the social care system is needs and means-tested.

This is a complex area with multiple rules and regulations. The government's reforms apply only to the English system which is outlined below. Scotland, Wales and Northern Ireland have different rules.

### Assessments for care and funding

Requests to a local authority for a care needs assessment can be made by the individual needing care or any other person such as a carer, family member or GP. Councils have a duty to consider a person's physical, mental and emotional needs to judge whether the need meets national eligibility criteria.

Care needs range from requiring home adaptations such as ramps or bath rails, to professional care workers providing help with washing, dressing or taking medicine, which can be either at home or in a residential care home.

This is followed by a financial assessment looking at the individual's wealth – their income from pensions and benefits, their savings and other assets – to decide if they need to contribute to their care costs and, if so, how much. The value of the home may be included if the individual is going into a care home permanently and no disregard applies (such as it is the main home of a partner or elderly relative).

People are expected to put their income towards meeting their own care costs, bar a protected amount for expenses. For care home residents this is £25.65 per week this tax year but those living in their own homes receiving support can keep a higher amount (a Minimum Income Guarantee) to ensure they can still pay normal household bills.

### Capital thresholds

The current capital thresholds in England are a lower limit of £14,250 below which care is state-funded and an upper limit of £23,250 above which individuals are 'self funders' who must pay their own care costs. Between these thresholds, every £250 capital above the lower capital limit is assumed to generate £1 a week 'tariff income' which is added to the overall income assessment.

For those with more than £23,250 of wealth, there's currently no limit on how much they might have to pay in care costs over their lifetime. There are about 154,000 self-funders in the UK paying an average of nearly £50,000 a year for care<sup>5</sup>. While some people will pay nothing or modest amounts for care, it's estimated that about one in seven adults will face care costs of more than £100,000<sup>5</sup>.

### The reforms due to come into effect in October 2023

- Aim to help those with more modest wealth as well as those facing potentially 'catastrophic costs' due to needing an extended period of professional care.
- Introduce more generous means-test limits. Those with below £20,000 of assets wouldn't be expected to contribute any capital while those with between £20,000 and £100,000 would be likely to receive some local authority funding.
- Put a 'cap' of £86,000 on the amount an individual would pay for personal care in their lifetime. Once that amount has been spent on care, the local authority will pay all eligible care costs.

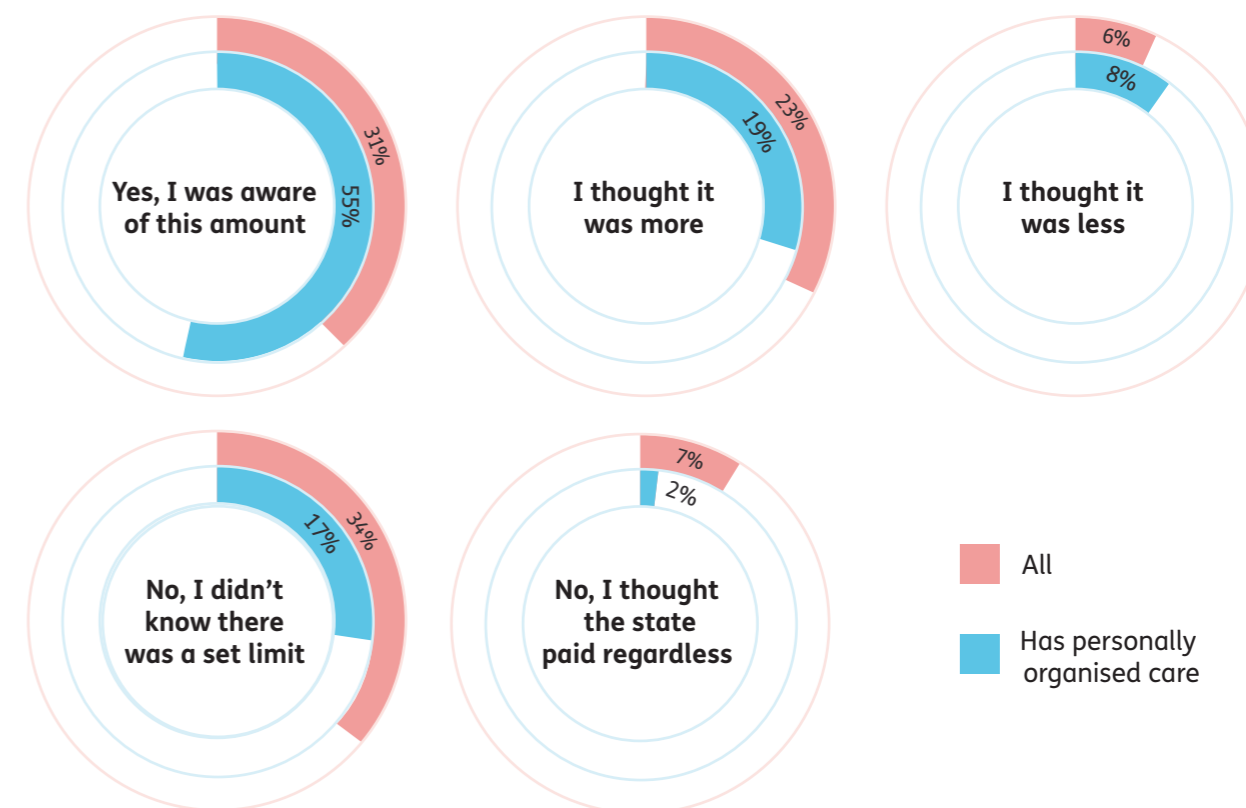
### The small print

The devil is in the detail. Where a council agrees to pay towards care, it will calculate a 'personal budget' reflecting the costs of receiving professional help with activities such as eating, washing and dressing, but this could be less than the actual costs people find themselves paying. People will continue to be responsible for paying their own Daily Living Costs (DLCs) where they can afford to, which for those in a care home may include rent, food and utility bills. The government intends DLCs to be set at a national amount of £200 a week (at 2021/22 prices). Additional costs such as en suite bathrooms, single occupancy rooms, access to gardens, may be charged as 'optional extras'.

### How much do people know about the current means-tested system?

About four in 10 had no idea there was a limit and another three in 10 knew there was a limit but not where it was set, mostly thinking it was more generous. Not surprisingly, the three in 10 (31%) who were aware jumps to more than half (55%) of those who have personal experience of the care system.

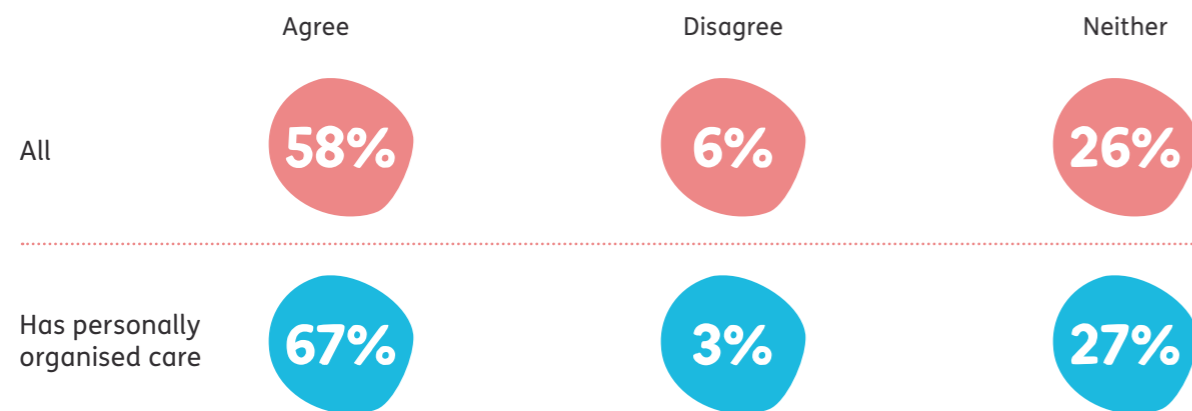
### Were you aware that if a person has savings over £23,250 they will have to use their own money to fund care fees?



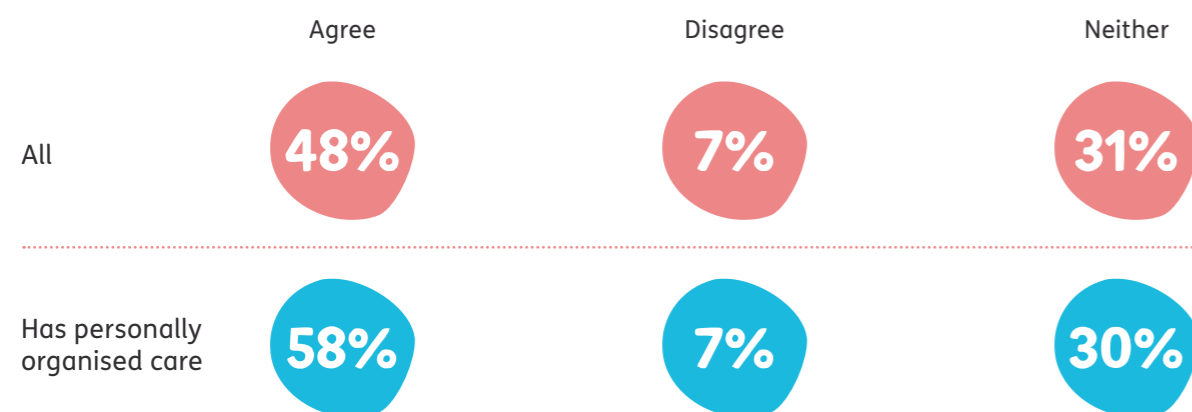
**How far have the details of the government’s reform plans sunk into the national consciousness?**

Not far, according to our research. Those with personal experience of finding care were more likely than average to admit to confusion about the plans. One of the consequences of confusion could be people’s reluctance to start planning for care until the new plans are in place.

**I am confused by the recent government announcements on the funding of residential care**



**I will delay making financial plans for residential care until the new plans for funding long-term care are introduced**



## ATTITUDES TO FUNDING

Most over-45s know enough about the care system to realise that the state doesn’t pick up everybody’s care costs regardless of their wealth – only 7% thought that was the case.

**State or private funding**

One of the objectives of the government’s reforms is to be clear about where the line is drawn between when the individual pays for care and when the state should step in.

Perhaps not surprisingly, when asked who should pay the care bill, the more the state is prepared to pay the higher the support it gets. But even at its most extreme – the taxpayer picking up the whole cost for everyone – support remains at a minority of just 49%.

The over-45s feel it’s fair to protect the least well-off in society, with three-quarters (77%) agreeing that taxpayers should pick up the bill where someone is unable to afford their own care, compared to just 5% disagreeing.

Where people do have the wealth to pay, the balance of support is still in favour of the state picking up some of the bill. Three in 10 (30%) agreed the state should not pay for care if people could use their own savings instead, compared to 34% who thought the state should pay.

**Support for a cap on care costs**

Importantly there’s consistent evidence of the strong support for the government’s proposals to introduce a cap on care costs. In fact, since the care cap question has been part of the research it’s always generated a larger positive response than any other option, including the taxpayer funding the full cost.

The Dilnot Commission’s proposal for a cap – making people who can afford to pay for their own care but protecting them from ‘catastrophic’ costs – clearly resonates with large sections of the public. Pushing on with the cap appears to be the nearest thing to a winning policy the government can expect.

**Do you agree or disagree with the following statements about who should be responsible for paying for long-term residential care for the elderly?**



# WHO KNOWS? WHO CARES?

Adult social care can be compared to a faraway land. People know it exists and may have seen glimpses in the papers or on TV, but probably have no plans to visit. Those that do venture there are usually shocked and surprised by the red tape and expense.

Back in 2010 the Dilnot Commission estimated half of people aged 65+ will spend up to £20,000 on care costs, while one in 10 would face costs of more than £100,000<sup>6</sup>. With rising care costs, the government has since revised that figure to one in seven.

Interest in the debate about the long-term funding of later life care has certainly been consistently high for the last decade.

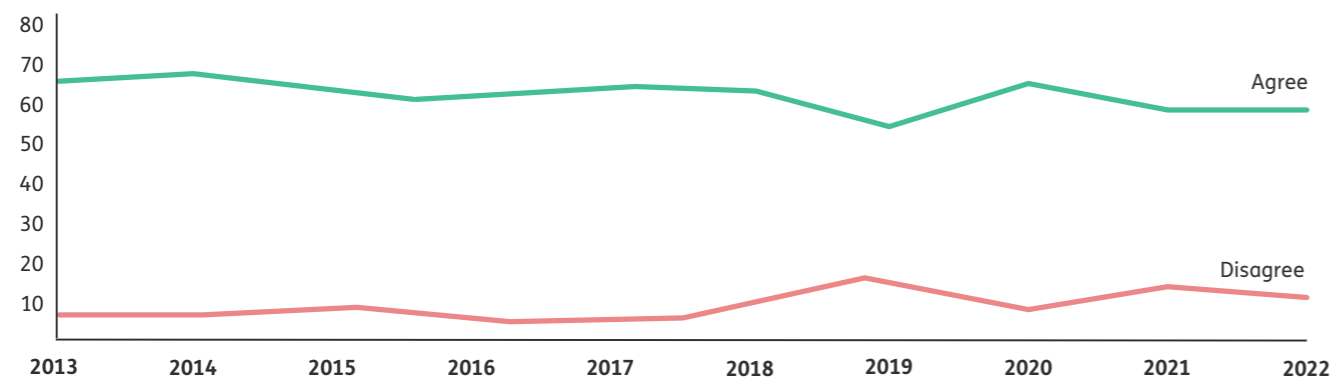
## Planning for the future

People’s awareness of the need to plan for likely events in the future is evident in the high numbers who have private pensions or who write wills, particularly as they head into later life.

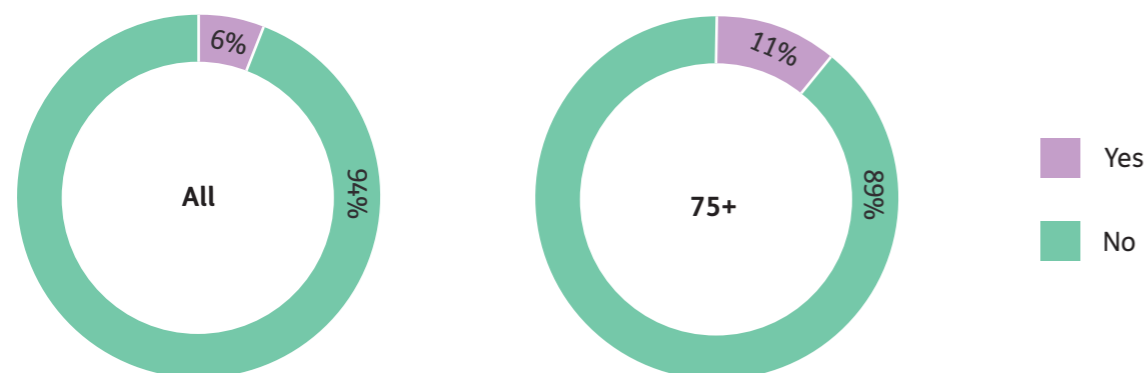
That planning doesn’t carry across to possible future care needs where we don’t know if our own care costs will be zero or hundreds of thousands of pounds. What we do know is that the vast majority – including those in the 75+ group – haven’t put in place formal plans to pay for care and are instead relying on being able to find the money if it’s needed.

On the positive side, people are becoming more realistic about the high costs of residential care although their estimates tend to undershoot the actual costs, particularly for those paying for their own care.

## I’m interested in the debate about who should pay for long-term care



## Have you made any specific provision to cover the cost of care?

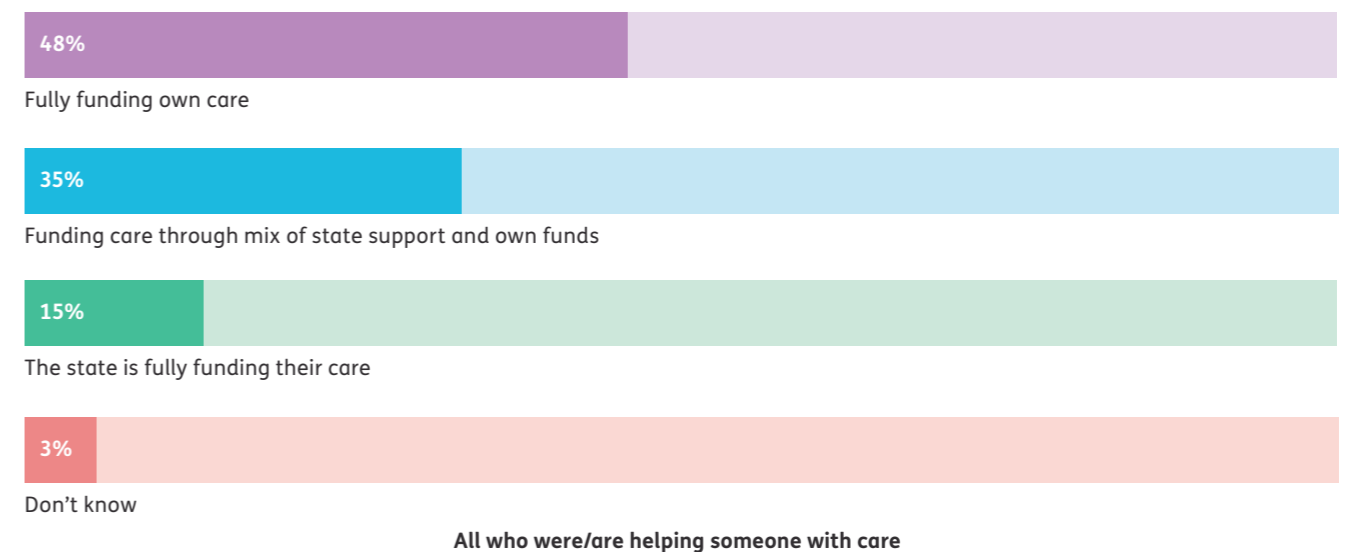


## Finding care for family members

About one in five (19%) over-45s have been involved with finding care for a parent, spouse or elderly relative and many found it an uncomfortable experience. Finding a care home is typically not something that people plan in advance and the vast majority must find some or all of the financing.

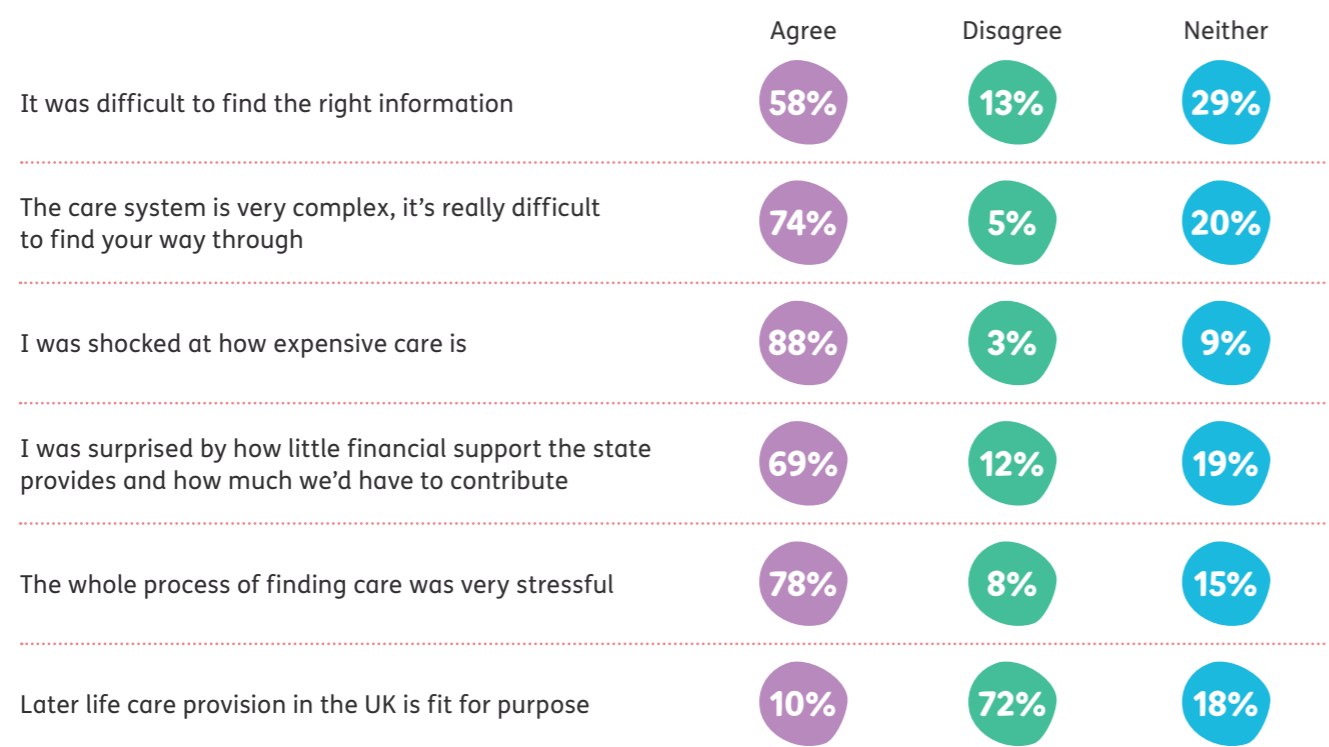
With reforms to overhaul the creaking care system set to be in place by October 2023, this year’s Care Report findings should act as a valuable benchmark to judge future progress towards improved knowledge and higher levels of planning.

## Which of the following best describes the financial arrangements in place to meet the care costs of the person who went into care?



“ The task of finding care often lands on families unexpectedly due to a loved one’s illness, injury or a realisation they can no longer cope with day-to-day living.

**To what extent do you agree or disagree with the following statements?**



All who have helped find care

**Professional advice**

Care is too important to be left to chance. Both self-funders and those receiving state support can expect to spend large amounts of their income on paying for care with many needing to eat into savings and other assets.

Although paying for care is a major financial decision, often involving tens of thousands of pounds of spending each year, very few people sought the help of a professional financial adviser when exploring their options for paying for care.

Selling property can be the best option from a financial and practical viewpoint. Where families do want to retain the home, they can consider renting it out to provide income to cover the care costs, or they can cover the costs themselves if they have the funds.



**Didn't have the help of a regulated financial adviser when exploring care options**

All who have helped find care

# HOME SWEET HOME

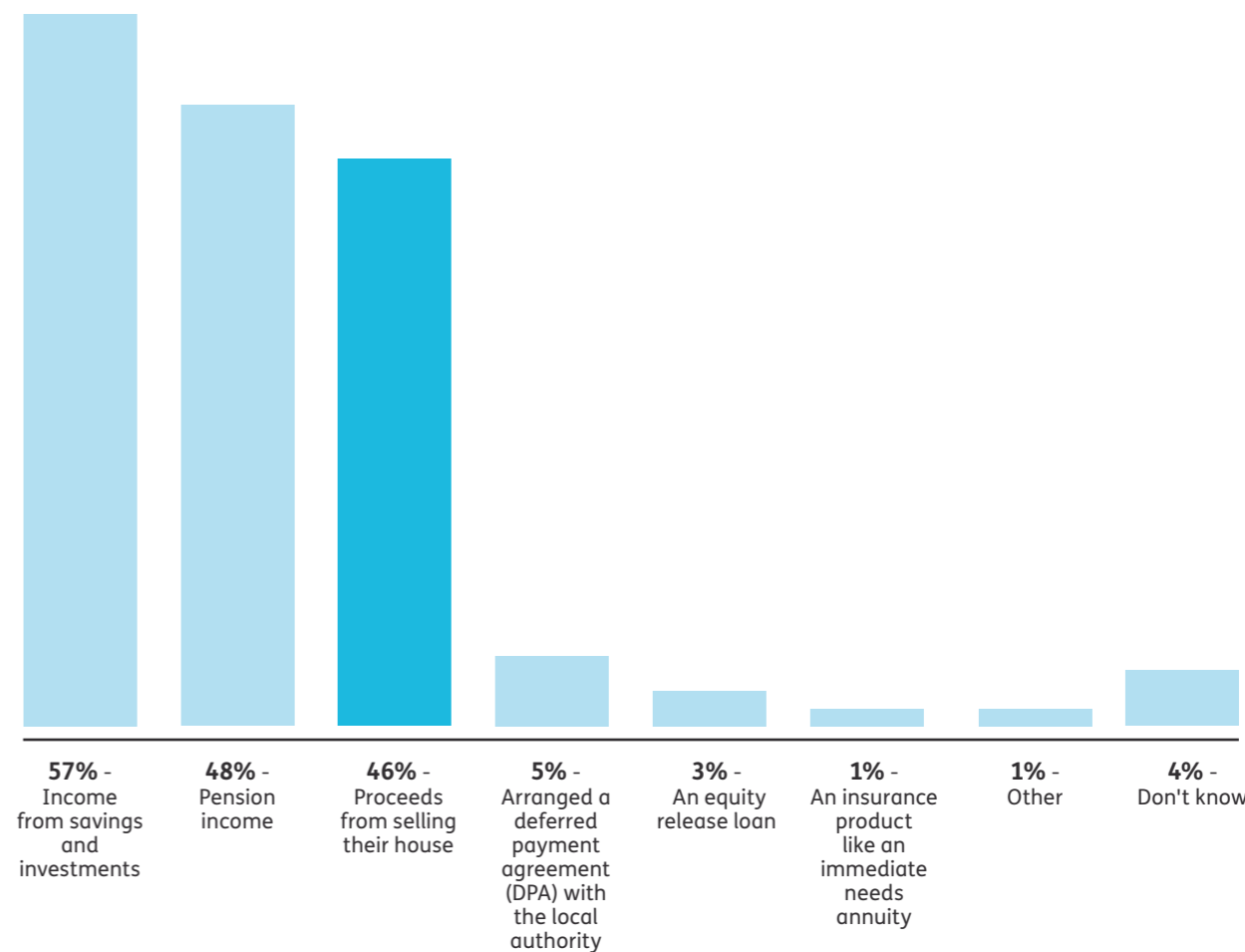
Despite the political rhetoric, a large majority of people believe the rules could force them to sell their homes to pay for care – more than three quarters (77%) of over-45s thought this to be true compared to under a quarter (23%) who thought it false.

Many thousands of homes are sold to help pay care fees each year. This was evident in our research among

the one in five (19%) of over-45s who have helped someone – a parent, in-law, partner or other relative – find a place in a care home that is being self-funded either wholly or partly.

Selling the home was in the top three sources of funding, just behind income from savings/investments and pensions.

**How did this person pay – or how is this person paying – for their care?**



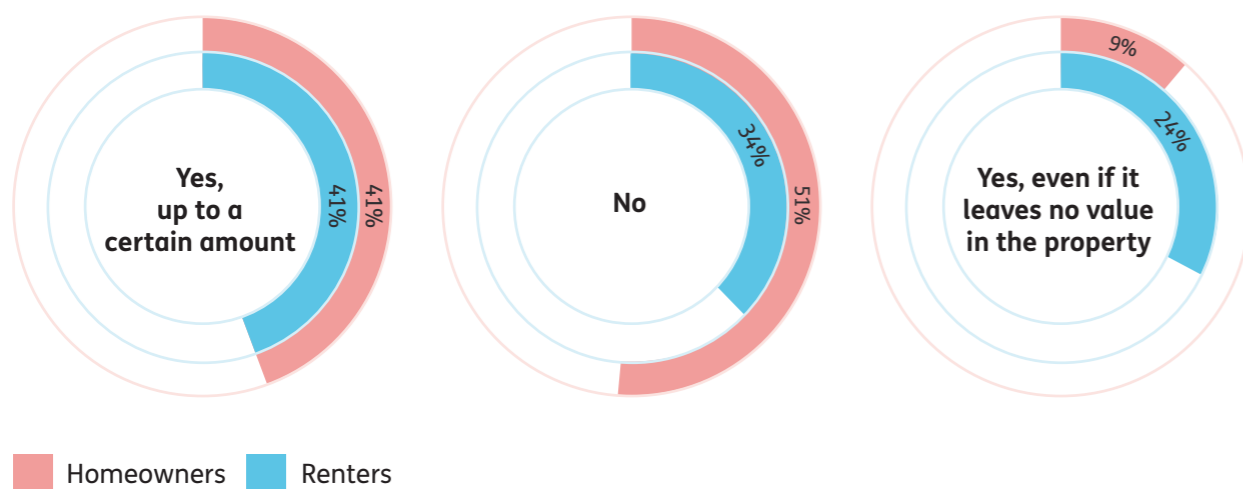
All who were/are helping someone with care



Politicians aren't keen to be seen enforcing house sales on the aged and vulnerable. Is their concern shared by the over-45s more widely? That largely depends on home tenure with people renting not so keen on the idea of their tax subsidising the care bills of homeowners.

Asked if it's fair that someone owning a property should use the equity to pay for later life care, more than half (51%) of homeowners said no compared to just over a third (34%) of renters. Among those who said it was fair, homeowners thought it was fair to take 38% of the value of the property while renters suggested a higher amount at 48%.

Do you think it's fair that the value of someone's house is used for later life care fees?



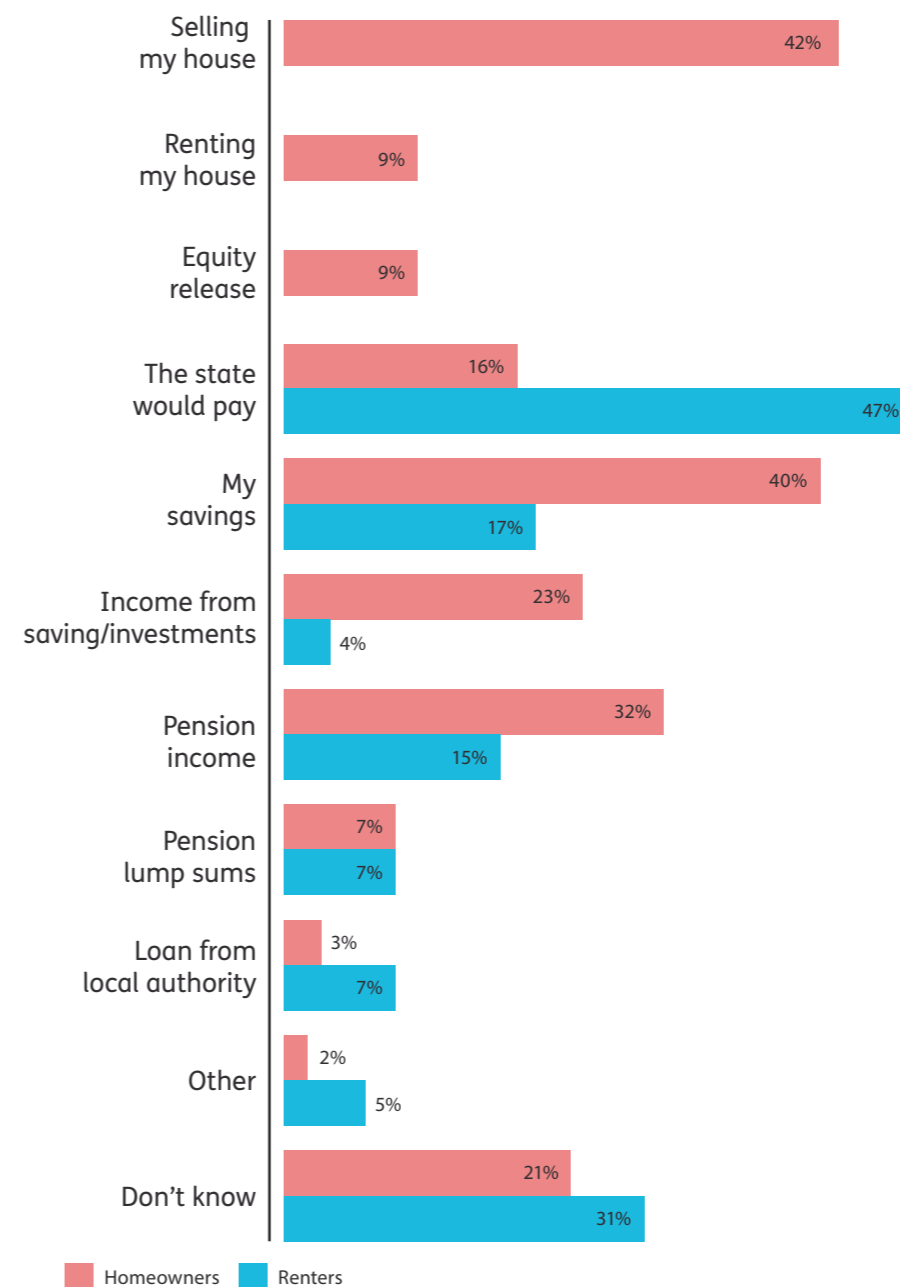
“ Despite the political rhetoric, a large majority of people believe the rules could force them to sell their homes to pay for care – more than three quarters (77%) of over-45s thought this to be true compared to under a quarter (23%) who thought it false.

### Homeowners and renters

In reality, most homeowners accept that the wealth tied up in their home is likely to be a source of funding if they need care in the future. Renters have fewer options and are more likely to be reliant on the state.

It's also worth noting the high proportion answering 'don't know' to what could be one of the biggest financial challenges of their future lives.

If you went into residential care how do you think you would pay for it?

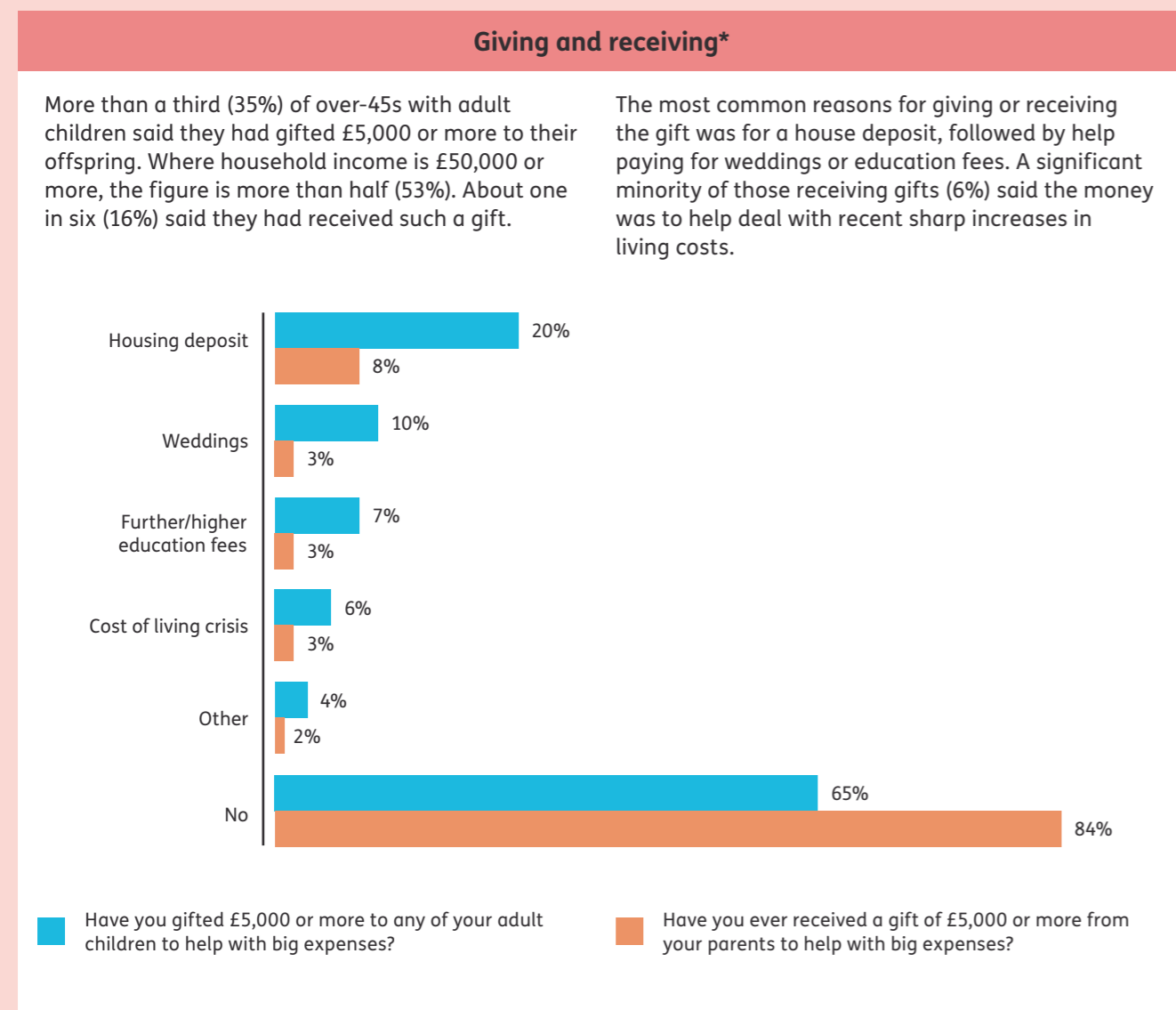


# SPOTLIGHT ON LIVING INHERITANCES

## The Bank of Mum and Dad

The Bank of Mum and Dad (BoMaD) is one the UK’s largest sources of finance, typically handing over billions each year for their adult offspring’s housing deposits, weddings, college costs and more recently to help address the cost of living crisis too.

BoMaD is usually more of a donor than a lender. It’s rare that there are formal agreements between parents and offspring and usually no intention that the money will ever need to be repaid.



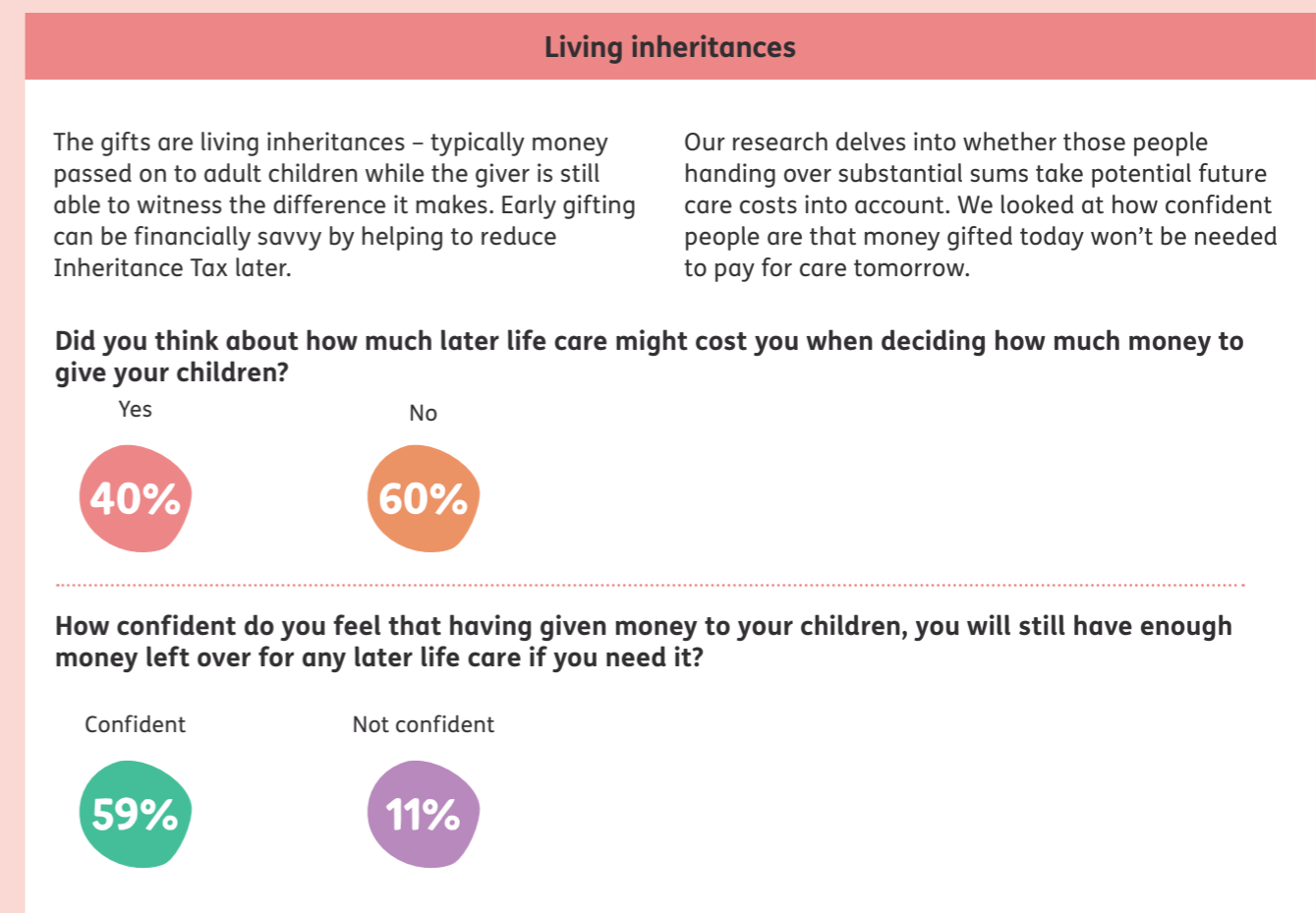
## Considering care\*

The UK’s ageing population means likely increases in the numbers of people needing care. Official forecasts are for about 2.8 million people aged 85+ by 2040<sup>1</sup>, up from 1.7 million in 2020.

Care costs vary considerably between individuals who can’t know whether they’ll go on to develop a mental or physical disability that requires significant professional help.

The Dilnot Commission in 2011 suggested around half of 65 year olds will pay more than £20,000 for care with 10% paying more than £100,000<sup>7</sup> although those numbers are likely to be much higher today after a decade of rising costs.

Despite the likelihood of needing care in later life, only four in 10 said they thought about potential care costs when deciding to gift money.



**Is it really best left unsaid?**

Famously, the British are great at talking about the weather but not so good about discussing money. Research carried out during the pandemic into the financial behaviours of UK adults found more than half (52%) of adults struggle to talk openly to someone about their financial situation, with just one in 10 (11%)

opening up to family or friends about how they had managed their financial situation during the pandemic<sup>8</sup>.

This reluctance to talk hard facts about hard cash is reflected in our gifting research.

**Unspoken rules\***

In eight out of 10 cases those receiving the money said there was no understanding they would be expected to help meet any care costs their parents may face in the future.

A minority are confident their children will be able to help them with care costs later but far more don't think their children will be able to help.

**Did you give the money to your children on the understanding that they would commit to helping you meet the costs of any later life care you may need in the future?**



**Do you think your children will be able to help you financially with any later life care that you might need?**



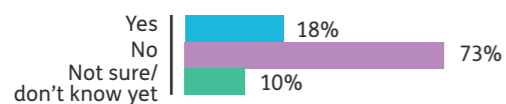
**Making ends meet**

Spiralling living costs in recent months raise questions about whether those giving money to children might be leaving themselves short to deal with the economic squeeze. Of the one in five (20%) who said handing over the cash had upped the pressure on their own finances, about a third of them said by a lot.

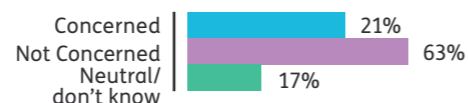
That proportion is reflected among the receivers of the cash, about a fifth said they were concerned their parents might struggle financially after giving the gift.

**Hard times\***

**Has the cost of living crisis changed your plans on how you use or might use the money your parents have given you?**



**How concerned are you that having given you the money, your parents may struggle financially through the cost of living crisis?**



**Some words of advice**

One in four men are expected to live to age 92 and one if four women to age 94 with wealthier people likely to live longer than the average person. Where care costs have been budgeted for in advance, more options exist in terms of starting to receive care earlier or securing a higher standard of support, delivering quality of life benefits.

With people often unwilling to talk about care with their families, it falls on financial advisers to factor it in as part of their clients' overall later life financial-

planning such as retirement income, wills and powers of attorney, potentially even funeral planning. Most advisers believe having the 'care conversation' with clients and their family – however difficult – will save money and stress later.

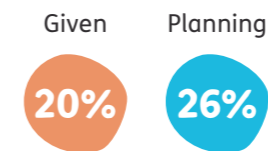
Gifting money while still alive can save inheritance-tax later as well as being a loving gesture. But our research shows many advisers recognise that the gifts only make sense if the clients has sufficient assets to fall back on should they need care later.

**The expert view<sup>†</sup>**

Professional financial intermediaries understand the motivation for clients to gift money for children as a living inheritance. They reported about one in five clients (20%) had already given money and a quarter (26%) were actively planning to do so.

In about one in five cases where clients have given money away or are planning to, the adviser feels the need to challenge the decision.

**The proportion of UK IFAs' clients who have already given or plan to give a living inheritance**



**17%** The proportion of clients that IFAs feel they need to challenge about giving a living inheritance

**Top three reasons why IFAs feel they need to challenge clients about giving living inheritances**

- 64%** They haven't considered how long they might live and need an income for
- 52%** They don't have enough money to give away
- 37%** They haven't considered how they might pay for care in later life

## CONCLUSION

The year is 2032. The Care Report proclaims that the 'care crisis' is now a thing of the past.

The reforms introduced nearly a decade ago in the aftermath of a cruel pandemic and cost of living crisis have transformed the UK one of the most admired countries for looking after its elderly population when they can no longer look after themselves.

From today's perspective, that's quite a wish list. But it's not a pipe dream.

Do we want an adult social care system fit for the 21st Century? Yes, of course. Progress has been slow in the first two decades but now we know where we are headed and how we can get there. Let's make the next 10 years count.

### This is what good looks like

- Funds flowing into the care sector are more plentiful and sustainable due to a combination of more widespread financial planning for care and a higher level of taxpayer support.
- Saving or care incentivised through innovative solutions such as Care ISAs and Care Bonds.
- More widespread understanding and acceptance of the 'social contract' between individual and state delivers a care system seen as fair on taxpayers generally and younger generations in particular.
- Self-funders rate the care services they're paying for as high quality and good value for money.
- Information and support are freely available through the government-backed 'Care Wise' guidance service that helps all those who can benefit to navigate through their care options.
- Consistent levels of service and funding are available across all local authorities to help people secure the standards of care they aspire to, enabling them to stay in their own homes for longer with access to well-resourced residential care when they need it.
- Careers in the care sector are attractive because workers are well trained, paid fairly according to their duties and experience, and are as equally recognised for their key contribution to society as those in the NHS.
- Informal carers receive the financing and other resources to look after ageing parents and relatives while still able to live their normal lives.
- The care sector and health sectors are more closely integrated to ensure the most suitable support is given at the optimal time by the best service.

## RESEARCH

This report is the 10th in our series of Care Reports designed to provide a snapshot of what people aged 40 and older in England and Northern Ireland know and think about the later life care system. In the course of our research we have conducted consumer polling with around 19,000 people.

Unless a footnote references an external source, the data we use in this report is taken from our own online research conducted in 2022.

Where we have used our own historical research data from 2012 - 2021 we mark which year's data we reference.

1. ONS, National population projections
2. Caring for our future: reforming care and support (July 2012)
3. Build back better: our plan for health and social care (September 2021)
4. ONS, National population estimates
5. Laing & Buisson Care Homes for Older People, UK Market Report, 32nd Edition
6. Fairer Funding for All – The Commission's Recommendations to Government
7. The Kings Fund, Key facts and figures about social care
8. MaPS, Why 29 million UK adults don't feel comfortable talking about money (November 2020)

### We conducted research in 2012-2022 as follows.

**2022** – online survey among 1,000 adults aged 45 years and older in England and Northern Ireland, conducted 7-11 July 2022 by Opinium.

**\*2022** – supplementary data: online survey among 1,087 adults aged 45 years and older in England and Northern Ireland, conducted 8-12 July 2022 by Opinium.

**†2022** – supplementary data: online survey among 207 IFAs in the UK conducted 7-13 July 2022 by Opinium.

**2021** – online survey among 1,000 adults aged 45 years and older in England and Northern Ireland, conducted 7-13 April 2021 by Opinium.

**2021** – supplementary data: online survey among 1,014 adults aged 45 years and older in the UK, conducted 13-18 May 2021 by Opinium.

**2021** – supplementary data: online survey among 214 IFAs in the UK conducted 14-17 May 2021 by Opinium.

**2020** – online survey among 1,002 adults aged 45 years and older in England and Northern Ireland, conducted 30 January-3 February 2020 by Opinium.

**2020** – Covid-19 supplementary data: online survey among 1,000 adults aged 45 years and older in England and Northern Ireland, conducted 4-7 May 2020 by Opinium.

**2019** – online survey among 1,001 adults aged 45 years and older, conducted 4-11 March 2019 by Opinium.

**2017** – online survey among 1,088 adults aged 45 years and older in England and Northern Ireland, conducted September 2017 by Opinion Matters.

**2016** – online survey among 1,005 adults aged 40 years and older in England and Northern Ireland, conducted April 2016 by Opinion Matters.

**2015** – online survey among 1,592 adults aged 40 years and older in England and Northern Ireland conducted, December 2014 by Opinion Matters.

**2014** – online survey among 1,005 adults aged 40 years and older.

**2013** – online survey among 841 adults aged 45 years and older.

**2012** – online survey among 894 adults aged 40 years and older.



## ABOUT JUST

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Just (Just Group plc) is a FTSE-listed specialist UK financial services company.

A leader in the individual retirement income, care and defined benefit de-risking markets, Just has been trusted to manage over £23 billion of customers' retirement savings and has helped customers release over £5.5 billion from their properties.

Just provides a wide range of products, advice and professional services to individual customers, financial intermediaries, corporate clients and pension scheme trustees.

## FURTHER INFORMATION

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Just Group plc

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