Proposed Changes to the Council's Fair Contributions Policy

Consultation Analysis Report

September to December 2019

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1. Introduction

As a council with responsibility for social care, we must make sure that people who are eligible for social care have their needs met, within the financial resources available. At the same time, we must make sure that where customers meet the financial criteria to make a contribution towards the cost of their care, they do so in a way that meets current national regulations and guidance. We do this in a way which is equitable and fair and is clearly explained in policy statements.

The Northamptonshire Adult Social Care Fair Contributions Policy sets out the Council’s policy and guidance on how the Council calculates a person’s contribution towards their care and support. It was created in 2014. The Policy is currently due for review and renewal providing the opportunity to update it, incorporate new elements and bring it in line with national guidance and wider practice.

The following three changes were proposed and consulted upon:

1. A change to the rate of Disability Related Expenditure (DRE) to have a single standard rate of £23 per week, instead of having two levels as at present (£18 per week for people on the lower/middle rate of benefits and £28 per week for people on the higher rate of benefits)
2. A change to the level of Older Person’s Standard Income Disregard (a deduction of £5.50 per week to the current standard rate) which would bring the Council in line with other authorities and Department of Health guidance
3. A change to the current charging model for residential college charges, so that all affected customers are charged a reduced amount for their care provisions by charging under domiciliary (home care) rules

At the time of planning the consultation and writing the Equality Impact Assessments there were 885 service users who receive the lower standard rate of DRE of £18 per week and 2,239 who receive the higher rate of DRE of £28 per week, all of whom could be affected by the proposed changes.

There were 2,124 old service users who have been afforded the Older Person’s standard income disregard allowance of £194.50 per week. Of these, 628 were currently not required to make a contribution towards their care and support. There would be 1496 people affected by the proposed change, which would allow them an amount of £189.00 per week.

There were 10 people at residential colleges in 2018/19 who were assessed under residential charging rules.
Northamptonshire Adult Social Services consulted on the proposed changes to the Council’s Fair Contributions Policy between 11th September 2019 and 3rd December 2019. This report is an analysis of the information and data gathered during this consultation.

The feedback from the consultation will help inform the Council’s decision on the review of the Fair Contributions Policy at the Cabinet meeting on 11 February 2020.

If the proposed changes are agreed, all affected customers will be sent a letter to confirm what changes are being introduced and will let them know what changes, if any, will be made to their financial contributions towards their care and support.

This consultation was conducted by the Northamptonshire Adult Social Services (NASS) and the Consultation, Equalities & Accessibility Team based within Business Intelligence within Northamptonshire County Council (NCC), and was carried out in compliance with the Council’s Consultation and Engagement Policy and Statement of Required Practice.

2. Consultation Methodology

The following outlines the public consultation methodology used to generate the material / data for analysis.

Due to the breadth of potential stakeholders, a base questionnaire was devised. An easy read version of the questionnaire was also devised for those that required it. The questionnaire was designed to:

- Inform stakeholders of the consultation proposals and what may change
- Gain an understanding of stakeholders’ views of the proposals, and their perceived impact
- Give stakeholders an opportunity to provide comment, including alternative suggestions to that proposed
- Gain an understanding of the demographics of respondents

The questionnaires were supported by several supporting documents, as listed below. The questionnaires made reference to the supporting documentation, including the insertion of web links.

- September 2019 Cabinet paper - proposed changes to the Fair Contributions Policy
- Equality Impact Assessment - Review of the Disability Related Expenditure model in the ASC Fair Contributions Policy
- Equality Impact Assessment - Review of the Older Person's Standard Income Disregard
A number of qualitative and quantitative questions were asked to gain an understanding of respondents’ views. Respondents were asked to read the supporting documentation prior to completing the questionnaire.

Both versions of the questionnaires and all of the above supporting documentation were made available on the Council’s consultation hub, https://northamptonshire.citizenspace.com, which is where all of the Council’s consultations are published. Paper copies of the consultation documents were available upon request.

In addition to the questionnaires, three public consultation events were held at accessible NASS venues across the county. These events were open to the public and provided an opportunity for attendees to ask questions and to provide feedback to officers including the Assistant Director of Adults Finance Operations and also the Portfolio Holder for Adult Social Care & Public Health.

All potentially affected customers and/or their families and carers were written to and advised of the proposals and invited to participate in the consultation. They were also offered an individual meeting with NASS officers if they wished, to allow them the opportunity to respond to the consultation directly with an officer and to discuss any concerns or questions which they might have.

Details of the consultation and a web link to the online questionnaire was also circulated electronically to the individuals and organisations signed up to receive notification of the Council’s consultations, which includes County Councillors and local MPs, and to all of the 1,000+ members of the county’s Residents’ Panel. The consultation was also promoted to third sector organisations, health partners, and other identified stakeholders.

This consultation was publicised via Northamptonshire County Council’s Facebook, Twitter and other social media accounts. Respondents were given the opportunity to participate through these social media sites, although no direct responses were received or could be attributed to this method.

An email and telephone number was published to help respond to queries or receive feedback. Unfortunately there was a technical fault with the telephone number initially published, however this was identified within the first 48 hours of the consultation period. The telephone number was subsequently amended and a new number was published. All customers who were originally written to were sent a further letter with the revised telephone number.
3. Summary of Feedback

This is a summary of the feedback received. It is recommended that it is read in conjunction with the full consultation results, which can be found in the Appendix and is available on our Consultation Hub.

A total of 193 questionnaire responses were received, generating a wealth of feedback that included some 248 comments from the different groups of respondents.

In addition to the questionnaire feedback, a total of 24 people attended the three consultation events, and 3 written submissions were received. Eighty-six stakeholders also contacted the Council via the telephone number and email address provided, either for themselves or on behalf of service users. In most cases, this was to seek clarification about the letter they had received informing them of the consultation, or to discuss their personal circumstances rather than the proposals themselves. Service users were able to request a visit or support to complete the questionnaire if required, or could give their feedback via telephone or email. This was recorded where received to be included in the consultation feedback.

3.1. Questionnaire feedback

3.1.1. About you

Respondents were asked in what capacity they were responding to the questionnaire. A total of 145 respondents answered this question, with a family member / friend / unpaid carer of a customer / service user being the most frequent respondent, with 33.8% selecting this answer option. This was followed by interested members of the public (30.3%) and a customer/service user (29.7%). The 2.8% of respondents who identified themselves as ‘other’ said they were a carer, the service user’s appointee, a volunteer with the homeless, a paid support worker of a service user and a parish councillor.
Respondents were then asked if they currently make a financial contribution towards the cost of their adult social care services. From the 144 respondents who answered this question, 4.9% said they were a self-funder and paid for all of their care; 43.8% said they make a financial contribution towards some of the cost of their care service; 3.5% said they receive a care service but do not make a financial contribution towards it. The remaining 48.0% said they either were not in receipt of any care services or did not know if they made a financial contribution towards the cost of their care.

Respondents were then asked to identify which of the following proposals might apply to them, being able to select as many as appropriate. A total of 139 respondents answered this question, with 78 respondents answering that at least one of the proposals would apply to them. The highest proportion of those indicated that they currently receive the higher level of Disability Related Expenditure (£28 per week) (21.6% or 30 respondents). Twenty-two respondents (15.8%) indicated that they have the current £194.50 Older Person’s Standard Income Disregard applied to their financial assessment. This was followed by 7.9% indicating...
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that they claim the lower level of Disability Related Expenditure (£18 per week) (11 respondents) and 7.2% who indicated that they claim a personalised level of Disability Related Expenditure (10 respondents). Five respondents indicated that they currently live in a residential college and make a contribution towards the cost of their care (3.6% of respondents to this question). Overall, 21.6% (30) said they did not know which, if any, applied to them, and 44.6% (62) said that it was not applicable.

3.1.2. Disability Related Expenditure

When respondents were asked if they were interested in giving their views on the proposed amendment to the Fair Contributions Policy – Disability Related Expenditure, 74.3% of 152 respondents said ‘Yes’.

These respondents were then presented with a reminder of the Disability Related Expenditure (DRE) proposal, along with two examples to help demonstrate how the proposal may affect customers.

Respondents were then asked to what extent they agreed or disagreed with the proposal to introduce a single standard rate of Disability Related Expenditure. A higher proportion of respondents were not in favour of the proposal put forward. A total of 95 respondents answered this question, with a total of 37.9% agreeing and 47.4% disagreeing.
Respondents were invited to provide comment as to why they either agreed or disagreed with the proposal. From the 57 respondents who provided comment, the most frequently mentioned reason for people agreeing with the proposal to change the Disability Related Expenditure (DRE) rate was because they felt it was fair to all service users. A similar number also felt that the proposal would make it simpler for everyone. Other reasons mentioned included the view that it would make it easier for people with less severe disabilities to remain independent for longer; that those who can afford to pay more should do so; and that some people will actually receive more money as a result.

One respondent felt it was important that DRE calculations take individual circumstances into account. Some respondents who said they agreed with the proposal in the previous question made comments that suggested that they actually disagreed with the proposal, as they stated that a single rate would not take into account individual needs, and that people on lower incomes may be disadvantaged.

Some people took the opportunity to comment about their own circumstances, mentioning how much they pay for their care, their personal experience with DRE and opportunities in the community for disabled people.

The most frequently mentioned reason for people disagreeing with the proposal to change the Disability Related Expenditure (DRE) rate was that they could not afford to have their DRE reduced by £5 if they currently receive the higher rate. Another frequently mentioned reason was the view that people with more severe disabilities (currently claiming the higher rate of DRE) need more money, so to reduce it would unfairly penalise them. The increased cost of living was mentioned by several respondents.

Some respondents felt this proposal was targeting vulnerable people and those already on lower incomes. Others said that DRE should be personalised to take into account individual needs.
Other reasons given for disagreeing with the proposal included that some people would be financially worse off, and that this is unfair; that some people felt they are already paying a lot of money for their care and that the DRE amount they currently receive is not enough; that it would have a negative impact; and that the Council’s financial position is not the fault of disabled people. Some felt this proposal will lead to more personalised DRE requests which could cause more stress for staff and service users alike; that DRE shouldn’t be linked to benefits and that the social care system needs a fundamental overhaul and that social care should be free of charge.

Respondents who said they neither agree nor disagree with the proposal gave a variety of reasons. These included that the change should only apply to new customers; the view that the proposal penalises people with more severe disabilities; that it will be administratively expensive to implement; that there should be no change until the two new unitary authorities for Northamptonshire are in place; and that all social care should be free of charge. Two respondents said that they did not understand the proposal sufficiently.

One respondent who said ‘Don’t know’ said that disability is not a choice and so disabled people should not be faced with more expensive care. The other person said they did not understand the proposal sufficiently.

Any respondents who felt the proposal would have a negative impact were then asked to tell us what they thought the impact would be, along with any suggestions on how any potential negative impacts could be mitigated. A total of 47 respondents provided comment. The most frequently mentioned impact was that the proposal would cause financial hardship for those affected. Some respondents also felt this would lead to a reduced quality of life for disabled people. It was noted that some people may have more than enough DRE under the proposed changes, while others may not receive enough. Some respondents said they already have to go without and this would make that even harder.

Some respondents thought this would lead to more people needing a personalised DRE calculation, which may cost more in the long run and that this money could be spent directly on care. A similar number felt this would have a negative impact on the people who most need support. One respondent felt there would be no negative impact.

Various potential mitigations were mentioned in response to this question. Some respondents felt that DRE calculations should be personalised to take into account individual circumstances. Other mitigations mentioned included the view that there are other services and support available for people with more severe disabilities; that a sliding scale of DRE would be fairer; that senior management salaries should be cut to achieve the savings; that the change should apply to new service users only; that there should be a grace period for implementation; that social care should be provided free of charge; that costs should be shared between health and social care; that the lower rate of DRE should be increased,
rather than the higher rate being reduced; that the system should not be changed; that the Government should better fund social care and that the Council should ensure that people know that they can get a personalised DRE rate if needed and support them to apply for it.

Some respondents also made some general comments in response to this question. These included the view that disabled people are less able to top up their income to make up the shortfall if the DRE rate is reduced; that they wouldn’t like to pay more than they are already paying; doubts about the legality of the proposal; and the view that when local government in Northamptonshire is changed to unitary authorities, it will be the same people delivering what was considered to be a poor service. One respondent simply answered “Don’t know”.

3.1.3. Older Person's Standard Income Disregard

When respondents were asked if they were interested in giving their views on the proposed amendment to the Fair Contributions Policy – Older Person's Standard Income Disregard, 62% of 129 respondents said ‘Yes’.

These respondents were then presented with a reminder of the Older Person’s Standard Income Disregard proposal, along with an example to help demonstrate how the proposal may affect customers.

Respondents were then asked to what extent they agreed or disagreed with the proposal to reduce the Older Person’s Standard Income Disregard. A higher proportion of respondents were not in favour of the proposal put forward. A total of 94 respondents answered this question, with a total of 39.4% agreeing and 52.1% disagreeing.

Respondents were invited to provide comment as to why they either agreed or disagreed with the proposal. From the 46 respondents who provided comment, the most frequently
mentioned reason for people agreeing with the proposal to change the Older People’s Standard Income Disregard was the view that it was fair to bring it in line with the Department of Heath guidelines. One respondent considered that a £5 per week reduction was not much and another said that this would increase the income for the Council.

The most frequently mentioned reason for people disagreeing with the proposal to change the Older People’s Standard Income Disregard was that they believed it would cause financial hardship for those affected. Some observed that older people are already on a reduced income and this would reduce it further, while some others felt that the Council was only thinking of financial savings with regard to this proposal.

Other reasons mentioned included the view that older people should receive more money, not less; that people who need care should not be penalised for the Council’s financial situation; that some service users could be affected by this and the Disability Related Expenditure (DRE) proposal; that it is unfair to make people pay because they are elderly and/or disabled; that older people have paid into the system all their lives and shouldn’t have to pay more now; and that there are hidden costs which may be missed by this system.

Some also said that the disregard should not change for existing service users; that the amount service users are allowed to keep before they are financially assessed should be personalised; that the rate should not be changed; that social care should be provided free of charge; that the Department of Health minimum should increase in line with increased living costs; that the amount shouldn’t be changed just to be in line with the Department of Health and other authorities; and that management salaries should be reduced instead.

Respondents who said they neither agree nor disagree with the proposal gave a variety of reasons. One respondent said that they could see advantages to the Council but disadvantages to service users. Another respondent said they did not want to pay any more and another said the amount they get currently is enough. Another respondent disagreed with the concept of a national Department of Health figure because costs vary across the country, while another asked the Council to rethink the proposal.

The one respondent who commented as to why they said don’t know said they didn’t think it is fair.

Any respondents who felt the proposal would have a negative impact were then asked to tell us what they thought the impact would be, along with any suggestions on how any potential negative impacts could be mitigated. A total of 39 respondents provided comment. The most frequently mentioned impact mentioned by respondents to this question was the view that it would result in financial hardship for older people. Others simply stated that it would have a negative impact, along with expressing concerns that it would lead to older people having a reduced quality of life. It was perceived by some as taking money from those who are most vulnerable.
Other impacts that were mentioned included the cumulative impact that some service users could be affected by this and the DRE proposal; and that this could lead to more older people needing to live in care homes if they could not afford to remain independent in their own homes, costing the Council more in the long run. One respondent felt that the impact would depend on personal circumstances, while another felt there would be no negative impact.

Various potential mitigations were mentioned in response to this question. The most frequently mentioned was for there to be no change to the Older People’s Standard Income Disregard, followed by the suggestion that savings should be made elsewhere. Other mitigations mentioned were that the Older People’s Standard Income Disregard should be means tested and personalised, as wealthier people should not be treated the same as those with lower incomes (although there was a concern this could be stressful for service users and more expensive in the long run); that the rules should not be changed for existing service users; that social care should be provided free of charge; that the Council should make it clear to service users that the change would be in line with national rates and that additional money will be reinvested in Adult Social Care; that the Older Person’s Standard Income Disregard should be frozen until it comes into line with the Department of Health guidelines; that Adult Social Care should be better funded by the Government; and that the change should be phased in over two or three years.

Some respondents also made some general comments in response to this question. These included an observation that older people have worked all their lives, some longer than planned, and that some need support for longer and that this should be considered. Another felt that the true cost of adult social care should be fully reflected in future costs and benefits. Another respondent mentioned the difficulties in being a carer for someone with a disability.

3.1.4. Residential college charges

When respondents were asked if they were interested in giving their views on the proposed amendment to the Fair Contributions Policy – residential college charges, 39.7% of 121 respondents said ‘Yes’.

These respondents were then presented with a reminder of the residential college charges proposal, along with an example to help demonstrate how the proposal may affect customers.

Respondents were then asked to what extent they agreed or disagreed with the proposal to change the charging model for service users living in residential colleges. Respondents were
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mostly favourable towards the proposal put forward. A total of 45 respondents answered this question, with a total of 44.4% agreeing and 20% disagreeing.

Respondents were invited to provide comment as to why they either agreed or disagreed with the proposal. From the 16 respondents who provided comment, the most frequently mentioned reasons for people agreeing with the proposal to change the way that residential college charges are calculated were that it is fairer and simpler. Another respondent felt it would be positive for service users.

Despite indicating that they agreed with this proposal in the previous question, a few respondents seemed confused by it, as their comments indicate they did not fully understand the proposal. One respondent felt that people should make contributions in this situation, while another thought that service users in this situation shouldn’t have to make contributions but thought that under this proposal they would have to.

Respondents who made comments as to why they disagreed with this proposal gave a variety of reasons. One respondent thought that the Council’s approach to financial management only shifted payment responsibilities around and that the whole system needs reviewing, streamlining and improving before reviewing charges made to service users. Another respondent simply said that it is unfair.

Similar to those that agreed with the proposal, a few of the comments made by those respondents who disagreed suggested that the respondents were unclear about the proposal and its implications, some referring to residential care more generally, while another said it was unclear how this would affect service users and their families.

Of those who provided comments as to why they neither agreed nor disagreed with the proposal, one said that each individual’s needs and circumstances are different and should
be assessed accordingly. Some respondents said that they needed more information to be able to make a judgement while another said it was irrelevant to their own circumstances.

No-one that said “Don’t know” gave any comments.

Any respondents who felt the proposal would have a negative impact were then asked to tell us what they thought the impact would be, along with any suggestions on how any potential negative impacts could be mitigated. A total of eight respondents provided comment. One respondent said that the impact was unclear. In terms of mitigations, one respondent said that any negative impacts should be dealt with individually by reviewing on an individual basis.

Some respondents also made some general comments in response to this question. One respondent said that the current charging system leaves students poorer, and another said that people with care needs should still be entitled to go to college and have an education. Another respondent made more general comments about residential care.

3.1.5. Alternative suggestions

When respondents were asked if they had an alternative approach to the proposed changes to the Fair Contributions Policy which they would like NASS to consider, 28.2% said they did have an alternative approach, and 37.9% said they did not. The remaining 34% said they did not know.

A total of 35 respondents commented when asked to inform us of their alternative approach. Some of these also took the opportunity to make any further comments about the proposals. The most frequently mentioned alternative approach was a request for the Council to stop what was perceived as targeting vulnerable service users. Others advocated a personalised approach to financial assessments and the amount that people should contribute towards their care. Some felt there should be no change to the Fair Contributions Policy, or that the financial assessment rules should be changed. Others made comments about the benefits that are included as income in the financial assessment process.

Thinking about the social care system as a whole, some respondents thought that central government should fund the social care system, while others thought that social care should be provided free of charge. Some respondents felt that everyone should contribute towards the cost of social care because everyone is likely to need to access it at some point.

Other alternative suggestions included making sure the Council collects debts owed before increasing charges; that costs should be increased in line with inflation; that the true cost of adult social care should be calculated; that the changes should only apply to new service users; that no change should be made to the Fair Contributions Policy until the new unitary
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authorities are in place; and that the Council should revisit the earlier judicial review verdict on the Fair Contributions Policy to ensure that these current proposals are lawful.

Respondents also said that savings should be found from elsewhere; that staff terms and conditions should be reduced instead; that sufficient notice of changes should be given to affected service users; that the system needs to be fair to all service users; that the upper limits should be frozen until the lower limits come into line; that older people’s income should increase by inflation to offset contribution increases; and that disabled people and their carers should be supported.

Some respondents also made some general comments in response to this question. These included reference to the demographic questions in the questionnaire and concerns about the consultation and the examples used within it to illustrate potential impacts, as well as reiterating points made previously. Some respondents wrote of their difficulties in coping with their own disabilities or their caring responsibilities.

3.1.6. Demographic information

Respondents were asked if they were responding to the consultation as an individual or on behalf of an organisation or community group. A total of 112 respondents answered this question, with 97.3% identifying themselves as an individual and 2.7% saying they were responding on behalf of an organisation/community group.

Organisation/community group respondents were subsequently asked to provide the name of their organisations and their role. Out of the three organisations who completed the questionnaire the only one who identified themselves was Teamwork Trust. We have not included an analysis of respondents’ job titles or roles within this analysis in order to ensure respondents’ anonymity is retained, however, this information has been shared with NASS.

Equalities monitoring questions were asked of each questionnaire respondent who was responding as an individual, although not all respondents chose to complete this section of the questionnaire.

From the available completed responses, over half of the individual responses were female (56.9%). The majority of the respondents were aged between 50 and 64 years.

Other identified equality monitoring information provided by respondents demonstrated that 60.7% were disabled, with physical disability being highlighted most frequently. The most common religion identified was Christian at 55.9% with 29.4% of respondents choosing ‘None’. Predominantly, respondents identified themselves as White (95%), with 2% from Black and Minority Ethnic groups (the remainder of respondents preferred not to say).
3.2. Consultation event feedback

A total of 24 people attended the three public consultation events that were held across the county. The events were delivered to enable attendees to discuss the proposed changes on an individual basis with officers. This arrangement allowed attendees to ask questions and provide their feedback directly to officers and the Cabinet member in attendance. Attendees were also encouraged to complete the consultation questionnaire. Some attendees had already done so, and took the opportunity to discuss their particular circumstances with officers, rather than feedback on the consultation.

Most people who attended and gave a view on the proposals disagreed with the proposed changes to Disability Related Expenditure (DRE), or said they were concerned about the impact it would have. Several people expressed the view that they or the person they care for would not be able to afford the change (as they currently receive the higher rate of DRE). Some attendees also made general comments about DRE, such as the view that they felt it was unfair that it was capped at certain rates, and also that a Military Pension was not disregarded as income as part of the financial assessment. One person was concerned people would find the change confusing, while another said that they were disappointed that the Fair Contributions Policy was being changed again. One attendee, who had come in the capacity of someone working with people with learning disabilities who had discussed the proposals as a group, gave general comments made by the group around DRE and financial contributions. The group had agreed that they think it’s fair to make contributions towards the cost of care, but it should be proportionate depending on their income, as opposed to paying the same amount as someone with a higher income just because it is considered that they can afford it. They also felt that the principle of DRE penalises people who are severely disabled, and that they felt it leads to judgments being made on what people spend their money on.

Some attendees disagreed with the proposal to change the Older Person’s Standard Income Disregard, or said they were concerned about the impact it would have. Several people expressed the view that they or the person they care for would not be able to afford the change. One person said they could understand the proposal to change the Older Person’s Standard Income Disregard to be in line with Department of Health guidelines.

Although no-one attending the events had direct experience of the residential college proposal, several people said they supported the change.
3.3. Written / emailed feedback

There were three direct written submissions that contained feedback which has been considered as part of the consultation findings, from Healthwatch Northamptonshire, Carers' Voice and a carer.

Healthwatch Northamptonshire considered that the proposed changes to Disability Related Expenditure (DRE) are unfair because those currently claiming the higher rate of DRE (because their disabilities are more severe) would have their DRE reduced while those currently claiming the lower rate would see their DRE increased. Healthwatch Northamptonshire perceived this to be targeting the most vulnerable who are not in a position to increase their income to compensate. It was concerned this would result in hardship. It noted that service users’ needs would not have changed but that their contributions or allowances would. It was also noted that other costs have increased while the Department of Health minimum income guarantee has not.

Healthwatch Northamptonshire also disagreed with the proposal to reduce the Older People’s Standard Income Disregard, again perceiving that it was targeting the most vulnerable. It suggested that the rate should be frozen until it comes in line with other authorities and the Department of Health guidance. Healthwatch Northamptonshire also disagreed with the proposal to change the way residential college charges are calculated. It said it was not clear if this will be a reduction in the long term and how it will affect people.

More generally, Healthwatch Northamptonshire challenged assumptions made in the supporting information in relation to client levels and said that the Council had not factored in increases in the cost of living for people. It said that all three changes could potentially affect the same people.

Carers’ Voice made similar comments, stating that it was unfair that those currently claiming the higher level of DRE because of their disabilities would have their DRE reduced, while those currently claiming the lower rate would receive an increase in their DRE. Carers’ Voice was also concerned with what it considered to be inequity in the examples used in the questionnaire to illustrate the potential impacts of the proposals. It was also concerned because the examples used the current DRE rates rather than the proposed single rate. It was concerned about the potential cumulative impact of the proposed DRE changes and the proposed changes to the Older People’s Standard Income Disregard. With regard to the residential college proposal, it felt that it was unclear what was being proposed.

The response from the carer set out their views that the proposals are unfair, and that the person they care for would not be able to afford them. This respondent said that being a carer prevents their relative from going into residential care and remaining in their own home is a better outcome for them.
3.4 Feedback collected by NASS

Eighty-six stakeholders also contacted the Council via the telephone number and email address provided, either for themselves or on behalf of service users. In most cases, this was to seek clarification about the letter they had received informing them of the consultation, or to discuss their personal circumstances rather than the proposals themselves. Service users were able to request a visit or support to complete the questionnaire if required, or could give their feedback via telephone or email. This feedback was recorded where received and has been considered as part of the consultation findings.

Most people who left feedback via this method said that they could not afford the proposed changes. Some said they disagreed with the proposals, while another said they refused to pay any further contributions. One person said they felt the Council was trying to take money from the poorest people, while another said this would reduce their relative’s quality of life. One person said they agreed with the proposed changes to DRE.