



Proposed Changes to the Council's Fair Contributions Policy

Appendix to consultation analysis report

September to December 2019

Please note that due to the nature of the feedback received and the subject matter of the consultation, personal and potentially identifiable feedback has been redacted within this appendix.

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Owner: Northamptonshire Adult Social Services, Northamptonshire County Council

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1. Copy of questionnaire and full results

Proposed changes to the Council's Fair Contributions Policy

Overview

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.

Why we are consulting

What happens at the moment?

Social care is means tested. This means that everyone contributes what they can afford towards the cost of their care. This does not include services that are provided by the NHS, for example community nurses.

We want to make sure that we provide a fair service to all people who are eligible for Care and Support. We want those who can afford it to make a fair contribution towards the services they receive.

We are reviewing our Fair Contributions Policy and are proposing the following three changes, which we are consulting on:

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

Before completing this questionnaire, please read all of the supporting information for this consultation, including the equality impact assessments, which you can access by clicking on the Related Links below.

During the consultation period, we are unable to tell people how these proposed changes may directly affect them. If the proposed changes are agreed, we will write to all service users to confirm what changes are being introduced following this consultation and will let them know what, if any, changes will be made to their financial contributions towards their care and support.

Have your say

Please tell us your views by completing this questionnaire. We appreciate that some people find it hard to fill in questionnaires, so please feel free to ask a family member, friend or carer to help you complete this questionnaire. If you need help to complete this questionnaire and have no family or friends that can help you then please call us on 01604 365020.

Your feedback will be used to help us have a better understanding of people's views on the proposed changes to how we charge for services and will help inform the Council's decision on the review of the Fair Contributions Policy. Your feedback will be part of a report with many other people's feedback, so you will not be personally identified.

You do not have to answer all of the questions. If you don't want to answer a question, or don't know the answer, then move on to the next question.

If you have any queries, comments or would like a copy of this survey in another format (including easy read or large print) please contact us. There is also an [Easy Read version of this questionnaire](#) available online which you can access by clicking the link. You can also ask for an individual meeting, where someone will come to your house, explain it and note down your comments. You can also give us your views by emailing us or writing to us.

Our contact details are below:

Email address: FairContribPolicy@nass.uk.net

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Northamptonshire County Council

One Angel Square

Angel Street

Northampton NN1 1ED

Open: 11/09/19

Closes: 03/12/19

Public consultation events:

Consultation events open to the public to hear about the proposals from the Portfolio Holder for Northamptonshire Adult Social Services and the Assistant Director of Adults Finance Operations, ask questions and to give feedback. There is no need to book on to these sessions, but if you are planning to attend and have any special requirements that would help you to attend, please let us know by calling 01604 365020 or emailing

FairContribPolicy@nass.uk.net

- Riverside Resource Centre, Towcester
25th September 3:30pm to 5:30pm
- Patrick Road Resource Centre, Corby
9th October 3:30pm to 5:30pm
- Gladstone Road Resource Centre, Northampton
6th November 3:30pm to 5:30pm

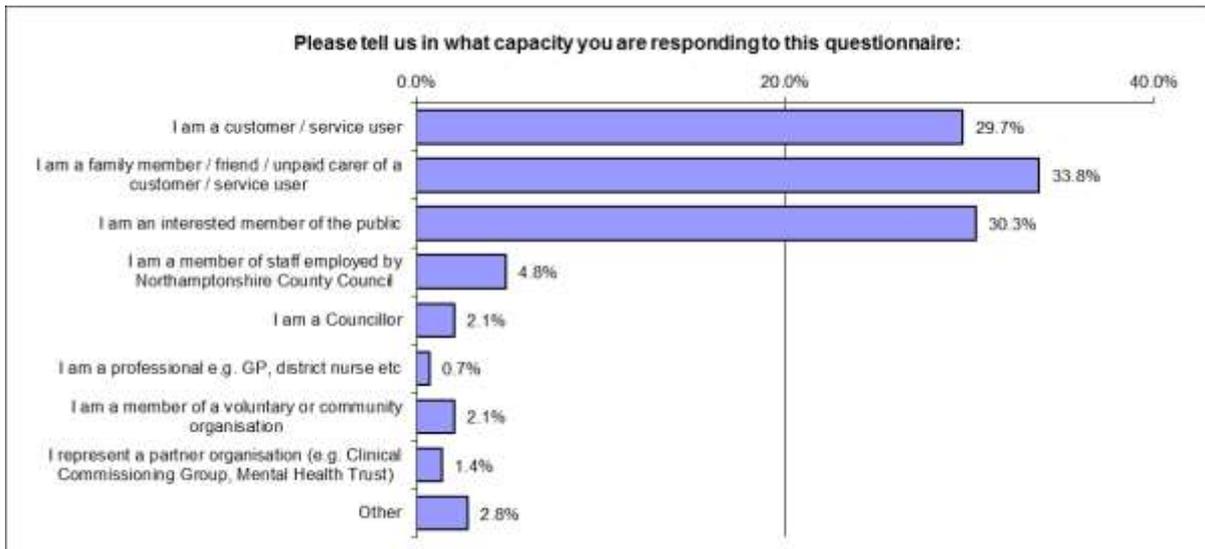
Related:

- [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](#)
- [Equality Impact Assessment - Review of the current model for residential college charges](#)
- [Frequently Asked Questions](#)
- [Fair Contributions Policy 2018](#)

About you

1) Please tell us in what capacity you are responding to this questionnaire:

There were 145 responses to this question, with respondents being able to select all that apply.



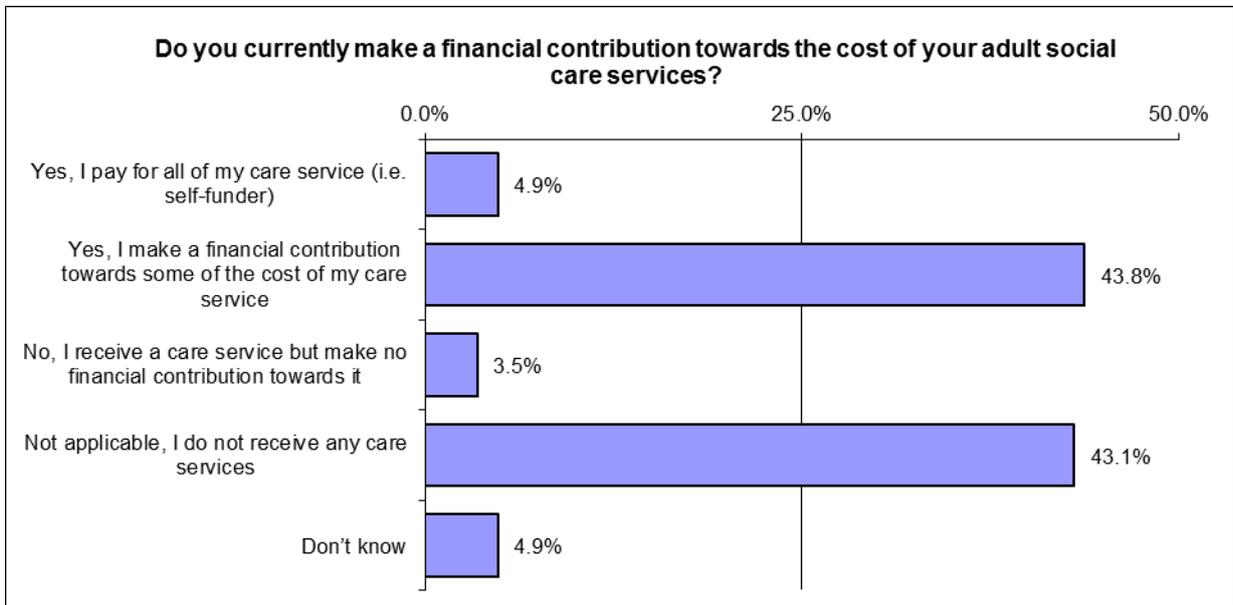
	Response number	Percentage (%)
I am a customer / service user	43	29.7%
I am a family member / friend / unpaid carer of a customer / service user	49	33.8%
I am an interested member of the public	44	30.3%
I am a member of staff employed by Northamptonshire County Council	7	4.8%
I am a Councillor	3	2.1%
I am a professional e.g. GP, district nurse etc	1	0.7%
I am a member of a voluntary or community organisation	3	2.1%
I represent a partner organisation (e.g. Clinical Commissioning Group, Mental Health Trust)	2	1.4%
Other	4	2.8%

'Other', please specify:

- Prefer not to say
- I look after my 94 year old [relative] and I monitor and pay the bills for [their] care package.
- I am the service user's appointee.
- Volunteer with homeless.
- Paid Support Worker of a service user.
- Parish Councillor

2) Do you currently make a financial contribution towards the cost of your adult social care services?

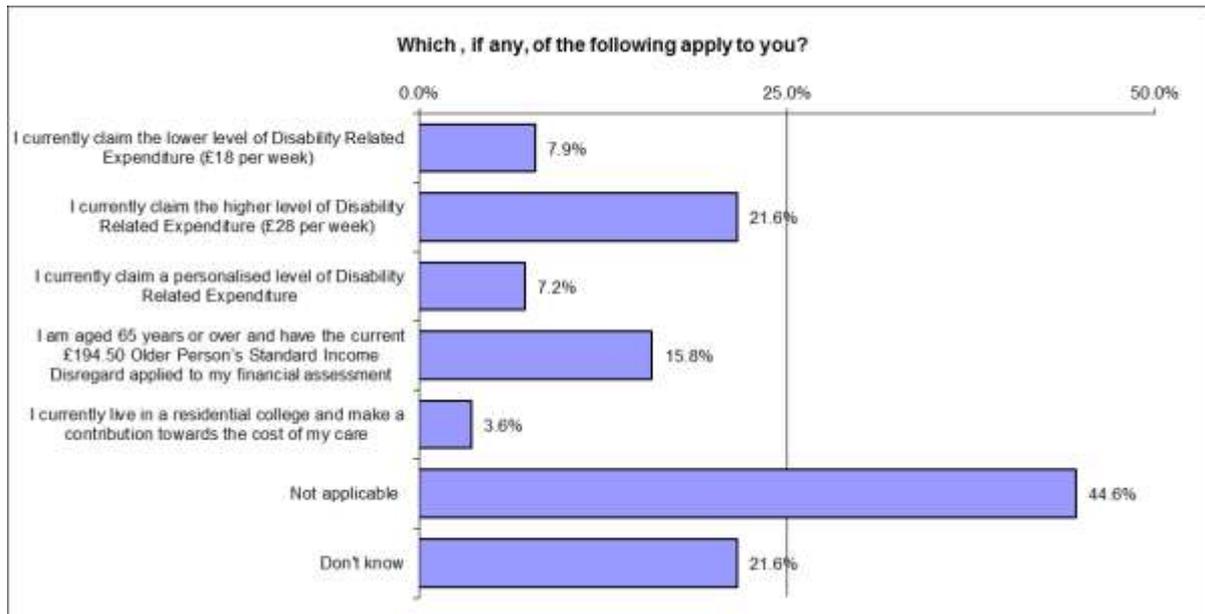
There were 144 responses to this question, with respondents being able to select one option.



	Response number	Percentage (%)
Yes, I pay for all of my care service (i.e. self-funder)	7	4.9%
Yes, I make a financial contribution towards some of the cost of my care service	63	43.8%
No, I receive a care service but make no financial contribution towards it	5	3.5%
Not applicable, I do not receive any care services	62	43.1%
Don't know	7	4.9%

3) Which, if any, of the following apply to you?

There were 139 responses to this question, with respondents only being able to select all that apply.

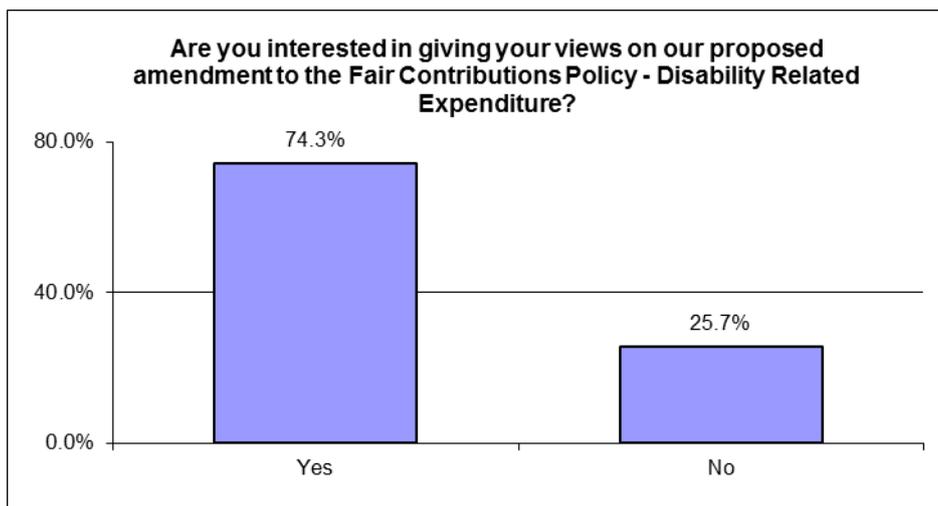


	Response number	Percentage (%)
I currently claim the lower level of Disability Related Expenditure (£18 per week)	11	7.9%
I currently claim the higher level of Disability Related Expenditure (£28 per week)	30	21.6%
I currently claim a personalised level of Disability Related Expenditure	10	7.2%
I am aged 65 years or over and have the current £194.50 Older Person's Standard Income Disregard applied to my financial assessment	22	15.8%
I currently live in a residential college and make a contribution towards the cost of my care	5	3.6%
Not applicable	62	44.6%
Don't know	30	21.6%

Disability Related Expenditure

4) Are you interested in giving your views on our proposed amendment to the Fair Contributions Policy – Disability Related Expenditure?

There were 152 responses to this question, with respondents only being able to select one option.



	Response number	Percentage (%)
Yes	113	74.3%
No	39	25.7%

Disability Related Expenditure

In line with national guidance, when we carry out a financial assessment, we allow service users to keep enough of their benefit to pay for disability-related expenditure (DRE) to meet needs which are not being met by the Council.

We currently offer two rates of DRE for service users, depending on the rate of benefit they receive. Having two different rates can be confusing for service users and also means they have to provide evidence about their disability-related expenditure to the Council.

The change we are proposing would introduce a single standard rate of DRE set between the two current levels, at £23 per week. This would mean that some service users would see their DRE would increase from £18 per week to £23, although some others would see their DRE reduce from £28 per week to £23. However, a request for a personalised DRE assessment can be requested at any time. This means that a full itemised list of expenditure would be needed, with evidence in the form of receipts etc, so that we can check all of the expenditure in line with a person's care and support plan.

Having a single standard rate would make DRE less complicated and would also result in a financial saving (estimated at £352,040 per year) for the Council and help to ease the current financial pressures in Adult Social Care.

Can you show me some examples?

The assessment process can be complicated as it takes into account a person's individual financial circumstances. Please see some examples below which shows how this may affect customers.

Example 1:

Under Current Rules:

Mrs Smith is a 74 year old lady who receives home care funded by the Council. She currently receives the lower rate of Attendance Allowance and has chosen to have the lower rate of DRE, which is £18. Her current financially assessed contribution is £29.50.

Under Proposed Rules:

The Council proposes to increase Mrs Smith's DRE allowance to £23 per week, meaning that her assessed contribution will reduce to £24.50 per week. This is £5 less than her current assessed contribution.

Example 2:

Under Current Rules:

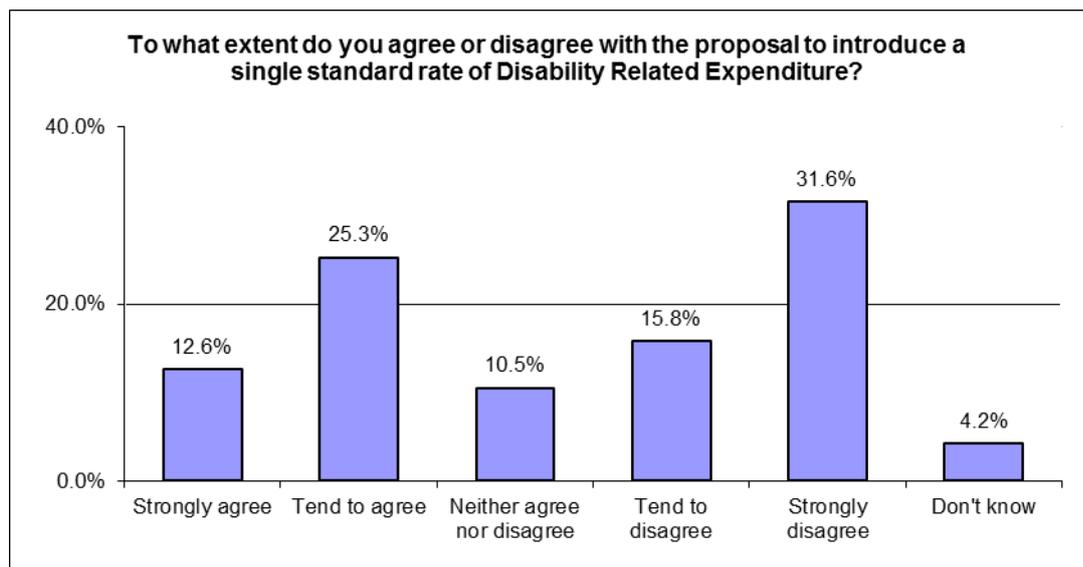
Mr Jones is a 37 year old man who receives home care funded by the Council. He currently receives the enhanced rate of Personal Independence Payment and has chosen to have the higher rate of DRE allowance, which is £28. His current financially assessed contribution is £8.50 per week.

Under Proposed Rules:

The Council proposes to reduce the amount of DRE allowance for Mr Jones to £23 per week meaning that his assessed contribution will increase to £13.50 per week. This is £5 more than his current assessed contribution. Mr Jones will be able to request a personalised DRE assessment if he feels that his new DRE allowance is not enough.

5) To what extent do you agree or disagree with the proposal to introduce a single standard rate of Disability Related Expenditure?

There were 95 responses to this question, with respondents only being able to select one option.



	Response number	Percentage (%)
Strongly agree	12	12.6%
Tend to agree	24	25.3%
Neither agree nor disagree	10	10.5%
Tend to disagree	15	15.8%
Strongly disagree	30	31.6%
Don't know	4	4.2%

6) If you would like to tell us why you answered the previous question in the way that you did, please do so here:

There were 57 responses to this question.

- The proposal comes across as the fairest approach for NCC to take, given the formidable pressures on resources.
- Because I think a single level of disability related expenditure does not truly reflect a persons circumstances and needs.
- Believe this would help 'less disabled' stay in their own homes for longer.
- But the change may disadvantage some on low pension income.
- It seems a fairer way of funding this making a level playing field.
- For those who can afford to pay more for care should. Those in care homes that have to pay a contribution for substandard care food It should be reviewed annually Many in care homes have very little to spend on them selves after paying for toiletries and clothing. It's not far that some people have £5.00 a week for sweets treats socialise. These people need more help. Not taking more off them.
- We are currently paying [amount] a month

- This appears to be fair, but would need to be flexible to suit an individual's circumstances.
- It is vital to simplify the various financial transactions between statutory organisations and the public. As long as there are safeguards to ensure people in difficulty can have bespoke assessments, I feel the clarity of standardisation is more preferable to a system that attempts to meet every conceivable need and circumstance.
- Provides equity and in line with other council's. Will be more efficient to administer and collect. Will provide savings.
- I have been waiting since July for a decision on my DRE !! All relevant evidence was given as proof of expenditure but haven't heard anything. I think there should be a single rate to make things fairer.
- because it does make sense to have a standard rate
- There should be a lot more easy read information & Rights & Life & Choice & Skills for me & Disability & Disabled People a long time go out in the community & Day Services for us a long time go and what will you do about it for us today now.
- Should be no differential in payments, do not agree with "means testing".
- Probably easier to understand .
- most people will get more money
- It is equitable and cuts down admin costs
- It would simplify this for everyone if there was only one sum
- Disabled adults with high needs or complex needs more expenditure compared to lower needs. So a blanket policy is not appropriate or legal
- On the lower benefits you are affected in many other areas already unlike the higher rate. This is penalising those who receive lower rate benefit too much.
- Cost increase unfair to those on lower incomes
- The cost of living has gone up, which means benefits do not stretch far enough, so any increase affects daily living, I feel like you don't care what poverty you put the disabled into, as long as you are making a profit, I feel exhausted with all your increases.
- Agree should be assessed but feel that the second example will lose out
- I was born with my disability so why the hell then should I have to make a contribution towards the care I need when all of it should be ENTIRELY FREE!!!!
The council waste enough money on other things when they should be getting their priorities right and I say again all my care should be ENTIRELY FREE OF CHARGE as I said I DID NOT ask to be disabled no one gave me a choice!!!!
- Because most elderly people are already paying enough contributions to their home care. My elderly friend is [number] years old, has worked from the age of [number], fought for his country, paid all his bills and taxes, never been in debt and already contributes over [amount] per week for his home care. This would then mean an increase in payments from him and I feel that he pays enough if not too much as it is.

- This appears to be a cost saving exercise to the detriment of those currently living on the higher rate of benefit without consideration of how it will impact on the needs of those individual.
- My [relative] was asked to make contributions only last year after being in either residential or supported living for approx [number] years. [They have] severe [disabilities and additional needs] and requires 1-1 care 24-7 and 2-1 for 4 hrs Monday to Friday [they pay] from [their] allowances for gas, electric, water, food, clothing, rent, TV license, petrol in mobility care and a small etc holiday break of 4 days per year. When [they were] asked by yourselves to start paying [amount] per week last year and this year has gone up to [amount] per month. Now [their] outgoings are more than [their] income. If you are now proposing to increase this to [amount] per week this will go up to [amount] every 4 weeks. [They] cannot afford to pay this proposed increased amount as [their] income (benefits received) will not allow for this. [They] will have to be overspending by [amount] plus each month which cannot be as [they do] not have any savings to sustain this.
- If the single standard rate of Disability related expenditure is introduced along with the reduction in older person's standard income disregard then I will have to pay [amount] a week more, which will increase my weekly charge to over [amount] per week which is more than the attendance allowance I get. So I would be better of not claiming AA and only paying [amount] a week for my care.
- You have conflated DRE with disability benefits. This is utterly, utterly, inaccurate. The two are explicitly unrelated in govt guidance on charging formulae. DRE is individually calculated, with the onus on the customer to calculate it & provide evidence. It has no link to disability benefit rates whatsoever. For eg: two people both on enhanced care PIP may have totally different DR needs. One may suffer from the cold and need higher heating costs, where the other does not. Or one may have incontinence problems and spend disproportionately on laundry & linen, another not. Or even, both may have higher DR heating costs but one person lives in an energy-efficient house & one in a draughtbox! The fundamental terms of your consultation are invalid. Check your legal position.
- Everyone's circumstances are different and should be judged on merit.
- People claiming these benefits struggle to cope on what they receive at this moment in time to cut some people's benefit by ten pounds a week is not acceptable, you are targeting the most vulnerable people in society who through no fault of their own are suffering for the council's financial problems.
- The problems with the funding of social care need sorting out; you shouldn't be tinkering at the edges to try and save money.
- I already pay far more for my disability related expenses than the personalised allowances permit e.g. my cleaner costs twice as much as the cleaner allowance, my continence pads and continence products, skin care, wipes, cleansing foam etc cost almost 10 times the weekly allowance for continence pads. I have to pay for the cost of my carer when I use public transport, which isn't counted. I have a mobility car,

but have to use taxis on days when I don't have a carer who can drive, they are not part of my personalised DRE. I have to buy prepared meals which cost more than cooking from scratch because I do not have enough care hours for my carers to do this for me and although my clothes, bedding and furniture wear out much faster because of the constant washing and cleaning, only a tiny percentage of what that costs is included. There are costs associated with most of the groups I attend, either as a nominal charge, or in some cases for things like adult education, I can pay up to [amount] for a day long course which can't be counted either because it is not recognised as day care.

- This may cause everyone who has decreased DRE amounts to request personalised assessments. As someone who works in financial assessments (for [period of time]) this will create a massive backlog of work for the FA team, MAP and the LGSS finance helpdesk. The onus will be on clients to contact us who will demand re-assessments, thus doing all they can to reduce their contribution again. I feel this would put NCC employees under tremendous stress and increased workloads in already under-staffed teams.
- It is reducing the amount of money that those with the highest needs, therefore the most vulnerable people in the county, receive. They have no way of making up the difference. Those with lesser needs and the lower rate have more chance of finding additional support e.g. employment. It is totally unfair to penalise those with the most needs by reducing their income in favour of increasing income for those with a lesser need.
- Feel it totally unfair a) to increase allowances by taking off more vulnerable, frail clients and b) am angered by the amount of £189 per week that my [relative] is expected to live on, particularly knowing how much the abled body in the community have, how on earth are we able to not only survive but support ourselves in the future, knowing only too well more cuts are on the way.
- It is extremely unfair to decrease the DRE allowance by £5 per week for those with higher level needs. They are unlikely to be able to replace that money and it may lead to hardship
- This is not fair as it makes some individuals worse off and some better off.
- You should not be making people suffer on the wrong doings of the council who spend money in the wrong places. Maybe you should cut back on all the bosses wages and bonuses before cutting back and making people suffer.
- You are taking money from the most vulnerable people in society
- We pay [amount] already, and £28 dre, any rise we get in jobseekers etc is taken back in increases made by NCC, My [relative's] living costs increase elsewhere as well, but NCC take all [their] increases. so any more increases through the back door I will be appealing against
- I think older people shouldn't have to pay for care as they don't have much money. my [relative] has 24hour care and doesn't have to pay.

- We are struggling now never mind increasing our payment also next March we have to pay 15 a month TV License it's been financially a bad year my [relative] having [illness] didn't realise we could have asked for funding
- I think there should be a two levels of payment to reflect the severity of the disability. Having to ask for more money to cover their expenditure would not be taken up by most people as it would be difficult to prove, & therefore people with a severe disability would be £5 worse off per week
- Different levels of disability require different levels of support
- As I myself had this could not afford to even pay £28 as I have [illness] [relative] and to pay car to take me to see [them] cost me [amount] a wk which I really cannot afford but [they come] first to me neither of us have ever asked for help sick money or dole money I worked till I was [number] years [they] till [number] years old and [illegible] no help I do not and cannot wash my body or shower I am [number] years old disgusting we have been married [number] yrs and this is the way now take it or leave it?
- Nice if pay £18 week help eat people can afford it It big joke if me only get change can it £18
- Because all peoples needs are different
- Each persons expenditure and care needs, lifestyle are different so should be assessed individually
- I think it is fair for new users to have a standard rate but I dont think that the change should be made for existing users. It should not have been set up with two rates in the first place. It is not right to penalise existing users because it was.
- While some people may be disadvantaged by this change and others may benefit (there will be winners and losers), it would seem that many vulnerable people who cannot afford to pay extra for their care could be unfairly disadvantaged. Overall the administration costs of constantly making changes of this kind take up resources that would be better spent on the provision of care to the elderly rather than keeping administrators in work.
- It would make it easier for the county council however saving money and making easier does not mean that it will benefit all clients. With unity in 2021 I feel it should be left unchanged.
- Unable to give an answer as I do not understand what circumstances a person would be in to get the higher rate. This maybe very detrimental to them.
- Do not understand enough about how it will affect me. There could be some benefits or there could be some disadvantages to my situation.
- I don't think people should have to pay towards their care. People in Scotland don't and they are British too.
- I feel anything that makes social care for the disabled more expensive whether they can afford it or not is unacceptable. It's not a choice to be disabled.
- si can't understand it properly

7) If you feel this proposal would have a negative impact, please tell us what you think that impact would be, along with any suggestions on how any potential negative impacts could be mitigated?

There were 47 responses to this question.

- I can not see any significant negative impact.
- It should be done on an individual basis as it should be person centred by law
- I cannot meet current expenditure and have to go without for so many things.
- Financial hardship
- I feel that it would impose a negative effect in that some people would not have their full needs recognised and others would have funds that they would not actually need. I don't see the problem with the existing procedures.
- Would obviously have an impact on the 'more disabled', but other services are available to this group.
- May disadvantage some on low pension income.
A means tested sliding scale might be a fairer system.
- Negative impact does not go far enough, it should be reduced or no payment whatsoever, quality of life is reduced when you increase payments, do you realise how difficult it is, properly not!!.
Disabled people can't get high flying well paid jobs, when they can't work, imagine food poverty, or not being able to do what everybody else enjoys, so stop increasing payments to pay for care, we are one of the worst countries in the world just read the United Nations report, on how we treat the disabled, perhaps cutting a few salaries to the fat cats might help the disabled in this county..
- Users are out of pocket while the council saves money. Negative impacts could be mitigated by only implementing the change to new users
- Perhaps more people will need to have a personalised DRE assessment to enable them to afford to contribute to their care without moving into poverty? However, the additional administrative costs in doing this would be better spent on direct care.
- If clients are worse off then there should be a grace period.
- I feel that whilst some will benefit others will lose out
- Potential negative impacts would be mitigated by making all care free of any charge!!!
- Means tested is better after all some people have savings or more income than others. Fairer system needs to be introduced. Also NHS trust should be more accountable for funding. Sharing the cost between social and health care would be a better way of funding.
- Extra cost
- No
- My elderly friend wouldn't be able to socialise as much as he does which would be detrimental to his mental health as a dementia sufferer.
- Not sure of the impact as said above it is circumstantial- I am happy to pay what I am paying but would be unhappy if that increase due to benefit review

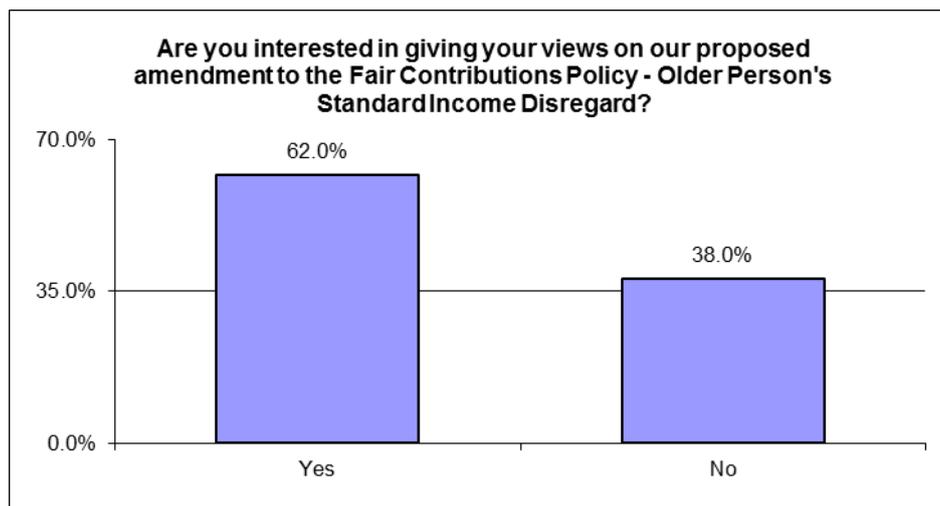
- In effect you are taking money from people who in many cases are struggling to survive in a world with the ever increasing cost of living. You should be looking to raise the lower rate to the higher rate and not rob Peter to pay Paul.
- Once the single rate of DRE is set, any negative impact experienced by users can be investigated by a bespoke assessment. This negative impact may be of a material nature and not just because they object to the single rate policy.
- As above- the proposed increase cannot be met as her allowances(benefits received) only just cover the essentials for living currently. All utility bills are going to increase again year on year and are uncontrollable costs her allowances are not going to keep up so the potential of her not being able to sustain payments is very great and that could impact greatly on her health and well being if she cannot get out and about in the community if her was to be relinquished.
- Please see above I would be worse off by [amount] a month which is a lot of money for a pensioner. If I stop claiming AA then the Local Authority will be worse off as they will not be receiving my current weekly payment of [amount]
- The negative is that it would cost more money each week which is never a good thing especially when things are hard
- It would in effect abolish DRE by missing out one step of the financial contribution formula. Again, check your legal position.
- It would treat everyone equal but circumstances are very different
- for the last 2 years you have taken more money than the annual rise of the state pension
- This proposal would have a negative impact making life even more harder for people who are already finding life difficult.
- In the past (last five years) I have a number of friends who have been in the Social Care System of NCC. Not good, poor service too little much too late. You are a ""FAILED"" Council after all! What is of concern is after the demise and the two new outfits..... It's very likely that it will be the same people in the same buildings delivering the same service!!!!!!!!!!!! Along with the same elected councillors.....
- There will be a lot more Personal Assistant PA Worker & PA Staff and a lot more hours & Money for me & Disability & Disabled People today now.
- The impact will be a loss of spending power. At [age] this seems harsh. Social care needs proper funding. At the moment my [relative] is topping up the inadequate continence resources provided by the NHS. If [they] can't do that then [they] will die quicker from the associated problems. This may be what the council and NHS want.
- If the personalised rate of DRE was to be removed, I think I would need to contribute as much as an extra [amount] per week towards my care. The only way I could afford that is if I stopped doing a lot of the things I do now and/or sent my motability car back. If I can't get out and about or do things that keep my mind active, I think my wellbeing would deteriorate and there is a real possibility that my previous mental health issues would resurface.
- Don't know
- This proposal will have a negative impact on those with the most needs. You are proposing a reduction without taking other things into account e.g. rise in cost of living, council tax, utility bills etc. There are no mitigations.

- This box is not big enough for all the negativity we feel! How on £189 allowance can we not only live but keep a roof over our heads, there's no allowance for property maintenance, we've recently had to get builders in to repair [redacted], at a huge cost, either that or they fall down! Last week I had to have new [redacted] - a small job to some but to a disabled person where he can trip - £30. We've no resources for when [name] dies, how are we expected to save for funerals when it's being swallowed up?!!!
- It will lead to hardship and mean they have to give up an essential for their quality of life. The only way to mitigate any impact is to leave the DRE allowance as it currently stands.
- Initially difficult for those receiving the higher rate.
- £5 a week can make a huge difference to people and have negative impact on people's finances. £5 can pay for milk for two weeks or top up electricity or gas for the week. The proposal can negatively affect an individual with a strict budget. forgo certain things.
- You will have a negative impact on the people that need care. This plan should be avoided at all costs
- Get the Government to fund social care properly
- Living costs
- £5 more for care could stop a disabled person using their heating in the winter
- Everything is getting more expensive
- Cost of change got people going who don't work it other [ineligible] I pay for [relative] activities day centre [amount] month or if [amount] not fair
- People would have to pay more than they are and there are a lot of costs involved in being disabled
- Make sure anyone who would be worse off knows that they can be re-assessed and also provide support to make this happen.
- Paying for care means you have less money to do other stuff and might mean some people chose not to have the care they need.
- I think it would have a negative impact on the most disabled and vulnerable people who would struggle to cover care costs and would then have an effect on the care and support they need.

Older Person's Standard Income Disregard

8) Are you interested in giving your views on our proposed amendment to the Fair Contributions Policy – Older Person's Standard Income Disregard?

There were 129 responses to this question, with respondents only being able to select one option.



	Response number	Percentage (%)
Yes	80	62.0%
No	49	38.0%

Older Person's Standard Income Disregard

By law, we have to disregard (ignore) a certain proportion of a person's income in the financial assessment so that they have enough income to meet their normal living expenses such as food, utilities etc. This amount is known as the standard income disregard and is set by the Department of Health. The Council currently disregards £194.50 per week for older people, which is currently £5.50 per week above the minimum set by the Department of Health.

We are proposing to reduce our Older Persons Standard Income Disregard by £5.50 so that it is in line with the minimum set by the Department of Health, and most other local authorities responsible for Adult Social Care. This would generate additional income (estimated at £427,856) to help ease the current financial pressures in Adult Social Care.

Can you show me any examples?

The assessment process can be complicated as it takes into account a person's individual financial circumstances. Please see the example below which shows how this may affect customers.

Example:

Under Current Rules:

Mrs Taylor is an 81 year old lady who receives home care funded by the Council. Her current contribution is calculated as follows:

Weekly Income

- Retirement Pension £174.70
- Private Pension £55.63
- Attendance Allowance £58.70
- Her total weekly income is £289.03 per week

The Council must make an allowance for normal living costs in the financial assessment. The personal allowance for Mrs Taylor is £194.50 per week.

The Council also makes an allowance for any Disability Related Expenditure that Mrs Taylor may have. The allowance set for Mrs Taylor is £18 per week.

The financial contribution has been calculated as follows:

- Total assessable income = £289.03 per week
- Less personal allowance = £194.50 per week
- Less Disability Related Expenditure = £18 per week
- Fair Contribution = £76.53 per week

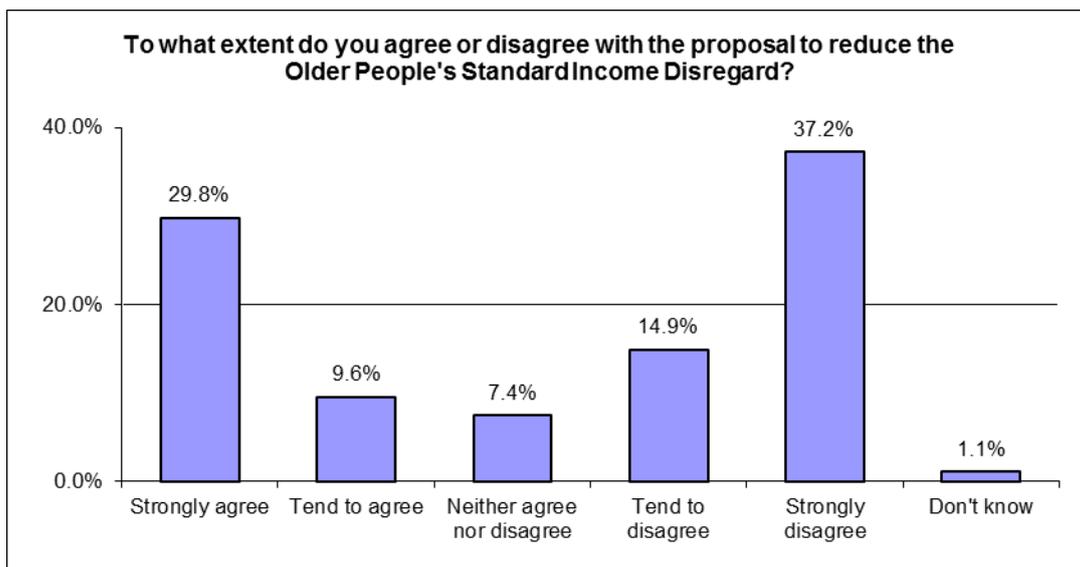
Under Proposed Rules:

The Council proposes to reduce the amount of personal allowance disregarded from the financial assessment to the Department of Health statutory minimum of £189 per week. This means that under the proposed rules, Mrs Taylor's contribution would be calculated as follows:

- Total assessable income = £289.03 per week
- Less personal allowance = £189 per week
- Less Disability Related Expenditure = £18 per week
- Fair Contribution = £82.03 per week

9) To what extent do you agree or disagree with the proposal to reduce the Older People's Standard Income Disregard?

There were 94 responses to this question, with respondents only being able to select one option.



	Response number	Percentage (%)
Strongly agree	28	29.8%
Tend to agree	9	9.6%
Neither agree nor disagree	7	7.4%
Tend to disagree	14	14.9%
Strongly disagree	35	37.2
Don't know	1	1.1%

10) If you would like to tell us why you answered the previous question in the way that you did, please do so here:

There were 46 responses to this question.

- This seems the fairest course for NCC to take.
- Fair and equitable
- In certain circumstances with private pensions feel a contribution sd be made
My [relative] is [age] and currently receives home care and gets adequate allowance
- There are too many examples of, what can be best described as 'postcode' lotteries when it comes to services and assessments provided by statutory organisations. Once again I feel we need a standard approach to policies, protocols and working practices and any hardship experienced by the service user can be dealt with by investigation and intervention.
- Long more help & Support for us today now.
- Although this would cause to some clients being upset and angry, the £5 difference is a) not monumental in the grand scheme of care costs and b) a huge revenue boost for NCC.
- Keeping the disregard in line with the government recommendation makes sense.
- Causing financial hardship

- I feel that the older people's standard income disregard needs to be put up not down to reflect today's standard of living.
- Age progressively disables everyone, and older people are already on reduced income.
- Are you really expecting people to agree to this question, the older generation have to choose between eat or heat, who dreams up these stupid questions, some rich person perhaps.!
- Because the contribution by the older person will be more, at a time when everything is increasing in cost-heating, lighting, etc etc., these still have to be funded in their own homes. Any increase in pensions per annum is already being taken so the burden is increasing there. Also the cost allocated per hour for care for direct payments has not increased although the cost from the care companies has increased due to minimum wage increase. So it is a loser all round to supplement the council.
- It does not take into account the rise in general expenses an old person has. They would be financially at a disadvantage.
- Why was the disregard rate set higher than it needed to be in the first place. It is not right to change this for existing users.
- While I appreciate the need for the local authority to be able to fund social care and I understand that Northamptonshire has run out of money, a large number of elderly and vulnerable people will not be able to afford the related increase in their contribution to care costs. Writing on behalf of my [relative], [their] finances are finely balanced and any change in policy could leave [them] without the resources to pay for the other things [they] needs to be able to stay in [their] own home, such as cleaning costs, laundry costs, personal hygiene products and essential home maintenance. As a family, we are aware of [their] vulnerability and do everything we can to support [them] but the stresses of managing all of [their] needs and keeping [their] finances in balance are considerable, both for [them] and for us.
- These minimum government rates are out of date and have remained the same. This does not mean costs have not risen.
- As per usual all this is just a cost cutting exercise.
- Older people do not need to be penalised financially any more than they already are. If the council want to save money then try reducing management wages, pensions and bonuses.
- Why do the people who need the care services be expected to reduce the Council's expenditure. The Council caused the problem, don't penalise the people who had nothing to do with this overspend situation. Is there to be a safety net for increases in living expenses.
- As a council you have recognised the difficulty Many people experience living on the lower standard income disregard and have implemented a higher than minimum disregard payment. To in effect give the people a compulsory income cut on top of inflationary effects is simply unacceptable.
- If the single standard rate of Disability related expenditure is introduced along with the reduction in older person's standard income disregard then I will have to pay £10.50 a week more, which will increase my weekly charge to over [amount] per

week which is more than the attendance allowance I get. So I would be better of not claiming AA and only paying [amount] a week for my care.

- In my [relative's] case there is a lot of hidden expense that I think should be taken in to account eg. excessive amount of laundry that needs to be done because of [condition]. The washing machine and drier is on every day at least once. The added expense of cleaning and hygiene products, wear and tare on clothing and bedding which needs to be replaced more often. These issued are caused by my condition.
- Again everyone's circumstances are different
- I have a family member caring for [their relative] who has [illness] and [they] struggles financially just because other councils charge differently doesn't make it right.
- Again, this is to save the council money. Fund social care adequately. Put the users' needs first.
- Again this is targeting the most vulnerable people and for people on a low income to lose £286 per year would have a disproportionate effect, particularly taking into account cost of living increases.
- It may only be £5.50 a week, but when living on the breadline £286 is a huge financial burden, bearing in mind many, including us, don't have luxuries such as holidays, maybe that £286 would give us a well-earned weekend break, it seems the disabled are not allowed that! You could say you can approach charities, yes you can but you are told when to go and where would the powers that be choose this life? I doubt it!!
- When someone requires services to enable them to have a reasonable quality of life, it is unreasonable to reduce monies available to them that will have an impact on that quality of life. To mitigate any impact leave as it is.
- I don't think vulnerable people should even have to contribute towards there care- it is not there fault that it is needed. I feel even more sorry for the elderly who need a lot more care
- It will make some individuals worse of
- These people through no falt of their own are havnig to pay extra for their care
- The elderly have enough trouble working out their finances as it is an there should not be any reduction in their circumstances.
- £22 per month less means a person may not eat enough or be cold in winter or not have enough money to mix with other people
- With cost of living going high and now more money needed it frightens you about keeping ourselves warm, my wife and I on special food
- This is disgusting as we pd over our life for this
- All costs are increasing so why should the elderly suffer a cut in their allowance?
- This amounts to a shopping trolley of food a month, why penny pinch from the disabled and elderly. The central government have no idea how people live. NCC were better. £5.50 a week is a deduction too far. Millions were lost to NTFC. Why not fine them when they draw and give a heftier fine when they lose? That could encourage a better standing in the league.
- Cost of living and daily expenditure continues to rise year on year and Nass have recently increased my [relative's] contributions towards [their] care costs already

even though [their] savings have gone down owing to [them] having to pay a top up fee to [their] care fees. This would be another cost implication for [them] .

- people would struggle to pay Bills cover medical supplies, to cover the cost of the care they need
- People have different needs and expenditures not necessarily known to council
- I can understand why the Council feels it is appropriate to fall in line with Government guidelines given the pressure on care budgets. However, it is also true that this reduction would put further pressure on my [relative's] financial position.
- I'm [number] yrs and I wouldn't want to pay any extr
- Every person has different requirements as far as pensions they have paid their contributions . Old age is a frightening experience especially if you lack finance , I urge yiu to rethink this proposal and allow our old age pensioners some dignity and as much financial security as possible having that little bit extra gives them peace of mind , not a lot to ask in your final years .
- Where has the Department of Health got its figure from? Surely there will be differences across the country as some areas have higher living costs.
- I care for my [relative] 24/7 and I don't get anything for it my [relative] has carers twice a day just for [their] hygiene needs pad change and wash they come for 30mins morning and 30mins evening [they] pays [amount] pound a month on average [they] gets [amount] a week pension and [amount] pounds attendance a week I feel this is enough for [their] care I cook clean and do all [their] needs I don't c the council paying me
- My [relative] [name] [they do] not understand about things when come home day centres looks in fridge and see what on telly or DVD to watch when start pay for service It not fair

11) If you feel this proposal would have a negative impact, please tell us what you think that impact would be, along with any suggestions on how any potential negative impacts could be mitigated?

There were 39 responses to this question.

- I can not see any significant negative impact.
- If these proposals are to a way of saving money then I think that savings should be made elsewhere and should not impact on older helpless people. A longer working life has already been forced on people who are often finding that along with age they suffer with debilitating conditions making it impossible for them to work and consequently needing disabled income support. When the pensions age was put up these benefits should have been taken into consideration as needed more often.
- Don't know. Well-off older people should not receive blanket benefits.
- How would you feel about choosing eat or heat, quality of life for the elderly is appalling, so what do you propose, cutbacks push the elderly into more poverty, perhaps if they all died at 70 you would be happy, as it would save you money, never mind they have paid the system their whole life, seems it doesn't matter about these surveys, as I bet you cut back anyway, it's disgusting how we are lagging behind the rest of Europe.

- Be realistic on costs in the current climate, as stated above, any reduction in payment can only be a disadvantage . The revised quoted figure is £ 189, this will at least need to increase annually in line with inflation to partially offset the effect, or do not take the pension increase. There needs a realism of the true cost of care for the elderly .
- The old person would still have to meet other bills which would rise with inflation and this change in disregard would negatively impact them. It would be best to leave the disregard as is and raise needed funds from other directions.
- People have budgets and may be using all their income each month reducing this rate will impact their finances. This could place them in financial difficulty if for example they have loans to pay off. People work hard all their lives for their pensions and have a right to enjoy it. When you are in a position that you need care there are less opportunities to enjoy yourself to the same extent and potentially it may be costlier to do so. For example if you want to go out you may need taxi's which are not cheap and you might not be left with enough to enable this. It is never right to change the ground rules for existing users unless it is to improve their position.
- The only way to mitigate the potential negative impacts would be greater means testing of elderly and vulnerable people which will be extremely stressful for them and very costly for the local authority. Once again, the money involved in doing this would be better spent on simply providing care and not funding additional administration. As above.....While I appreciate the need for the local authority to be able to fund social care and I understand that Northamptonshire has run out of money, a large number of elderly and vulnerable people will not be able to afford the related increase in their contribution to care costs. Writing on behalf of my [relative], [their] finances are finely balanced and any change in policy could leave [them] without the resources to pay for the other things [they] needs to be able to stay in [their] own home, such as cleaning costs, laundry costs, personal hygiene products and essential home maintenance. As a family, we are aware of [their] vulnerability and do everything we can to support [them] but the stresses of managing all of [their] needs and keeping [their] finances in balance are considerable, both for [them] and for us.
- This policy will make pensioners poorer creating financial burden on other family members.
- Feel in some circumstances where people struggle financially cd result in them struggling financially
- Make all care free of charge
- Any further financial cuts for older people always affects them in negative ways, elderly people always worry about money and may stop eating or putting the heating on if they are expected to pay more towards their care.
- It's impossible to quantify the impact across the many varied situations people find themselves in, some may manage while others will be burdened with increasing dept. Taking money from the vulnerable in society is simply unacceptable.
- As above.
- As stated above, it would clearly have some negative impact as my [relative's] income is fixed. Also, as my [relative] is [age], and still wanting to stay in [their] own home, I can only see that [their] needs will increase in the future. Furthermore, the

costs of care continue to rise, whereas [their] care package reduces in line with any pension increase. The reality now being that each year [their] own contribution increases two-fold - one from the increase in care costs and two from the reduction in the package. This proposal will only add further to the problem.

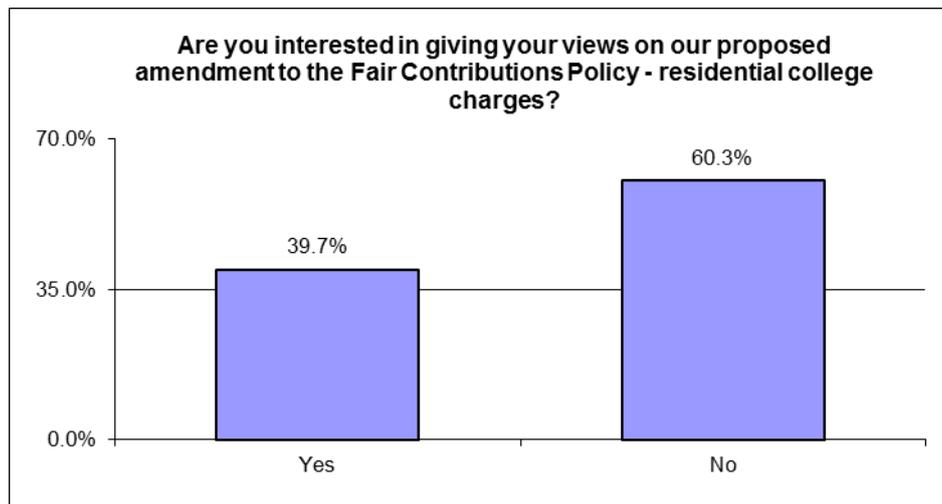
- As previously stated, the Local Authority would be worse off if I stop claiming my AA by my payment of [amount] per month. I don't think it is fair to hit people who need care with both increases. My elderly [relative] does most of my day to day care which also saves the Local Authority money by me not being in a care home full time.
- I try to take my [relative] out at least once a week, as [they] can no longer go out alone, just for tea and cake. A loss of income would affect this
- It would leave some people worse off
- same answer as the last question
- I feel this would have a negative impact and could be mitigated by not implicating this proposal.
- Another £5.50 per week lost reducing purchasing power to provide for my [relative's] needs. At [age], [they] should be able to enjoy what few years [they] has left.
- Outline this to service users through clear communication. Outline how we are charging national rates and this is in line with all other councils. People will just believe this is NCC just taking more money, but outline how this can be re-invested in the elderly and the town itself
- It does not take into account cost of living increases. To bring it in line with other authorities and DoH guidance it could be frozen until it does come into line rather than penalising individuals with a total income reduction.
- Of course, the higher rate client, it will have a negative impact, we're constantly facing rising costs, any extra has an impact. It seems that the vulnerable, elderly and their carers are the first to be hit when there's cuts, these are the people that worked and paid their taxes to this country, now they need a little help they are treated with disrespect. Many will just accept these proposals as they are, afraid to speak out or don't even know how to defend themselves - they're vulnerable!
- Leave thing as they are
- £5 can make a big difference on individuals finances.£5 could be spent on milk for the whole week or even two weeks.£5 could top up electric or gas for a whole week.
Could
- It would most defiantly have an
- Get the Government to fund County Council services properly
- I have made my comments in earlier request.
- £22 per month less means a person may not eat enough or be cold in winter or not have enough money to mix with other people
- Keep things how they are
- Older people have been used to getting a set amount & a reduction of £20 per month would be difficult for some elderly people who have no family to help them with an unexpected expense.
- Carer for my [relative] [name] can be hard work Northampton County Council do not understand it is my job for [them]

- Do not change
- Older people living on low incomes will be worse off. Could this be phased in over two - three years?
- By not reducing the allowance for vulnerable people. It doesn't take much to make depressed people worse.
- It would be a further financial worry for elderly people already struggling. It could potentially mean cutting down on essentials for everyday living and unnecessary spending &/or re evaluating outgoings to accommodate the extra expense. Elderly/frail residents in the county already find it difficult to maintain a financial balance to sustain their independence in their own home. This will further impact on their ability to do so.
- It would have a negative impact on elderly, disabled, vulnerable people on low incomes who may struggle to cover living and care costs
- Each individual should be seen and assessed as to their needs. It may be chiropody, hair dresser, small things not allocated by the council but essential to a decent existance

Residential college charges

12) Are you interested in giving your views on our proposed amendment to the Fair Contributions Policy – residential college charges?

There were 121 responses to this question, with respondents only being able to select one option.



	Response number	Percentage (%)
Yes	48	39.7%
No	73	60.3%

Residential college charges

Statutory Guidance provides no advice on charging service users living in residential colleges while studying so the Council has previously used its discretion to apply charges in these circumstances and has charged for these services in the same way as residential care. However, in reviewing the charges, the Council feels that the charging rules could be changed so that service users are charged in the same way as domiciliary care (care given in someone's home). This will benefit service users because they will be able to keep more of their income when working out how much they should contribute towards paying for their care (estimated to cost the Council approximately £10,000 to change these rules).

Can you show me any examples?

The assessment process can be complicated as it takes into account a person's individual financial circumstances. Please see the example below which shows how this may affect customers.

Example 1:

Under Current Rules:

Mr Patel is a 19 year old man who lives in a residential college during term times. When he is not at college, he lives with his mum and dad and he receives a Direct Payment to help meet his care and support needs. His current contribution towards his residential college is calculated as follows:

Weekly Income:

- Employment and Support Allowance £127.15
- DLA Mobility Low £22.65 - disregarded (ignored) in the financial assessment
- Please note that Mr Patel stops receiving his DLA Care Component while he is in a residential college

By law, the Council must allow a minimum personal expense allowance of £24.90 per week for someone who is in a residential setting.

The financial contribution has been calculated as follows:

- Total assessable income = £127.15 per week
- Less personal expense allowance = £24.90 per week
- Residential College Contribution = £102.25 per week

Under Proposed Rules:

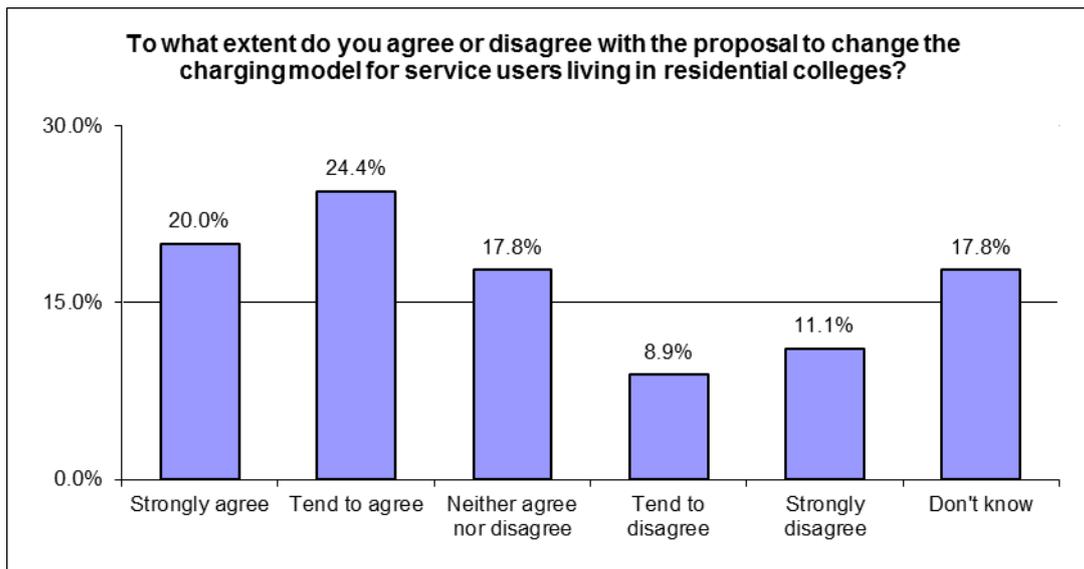
The Council proposes to change the Fair Contributions Policy so that Mr Patel would be financially assessed as if he is living in the community. This means that a greater personal allowance would be given in the financial assessment.

The financial contribution has been calculated as follows:

- Total assessable income = £127.15 per week
- Less personal expense allowance = £137.33 per week
- Residential College Contribution = £0.00 per week

13) To what extent do you agree or disagree with the proposal to change the charging model for service users living in residential colleges?

There were 45 responses to this question, with respondents only being able to select one option.



	Response number	Percentage (%)
Strongly agree	9	20.0%
Tend to agree	11	24.4%
Neither agree nor disagree	8	17.8%
Tend to disagree	4	8.9%
Strongly disagree	5	11.1%
Don't know	8	17.8%

14) If you would like to tell us why you answered the previous question in the way that you did, please do so here:

There were 16 responses to this question.

- I think that contributions should definitely be made. The benefits that students are already given are very generous.
- Provides greater fairness and is less complicated for recipient.
- Appears to be equitable.
- This seem to benefit the client.
- Once again, harmonising and simplifying our approach to these charging model will benefit the user and the administration of the process.
- Confused about this one. Surely they should be charged for what they do? So paid for care at home when they are not in college
- Going to college should be about helping me to be more independent, not treated me like i am in residential care. I don't think your information is right. I am [age] and I have to claim PIP not DLA now.
- It is unfair
- As a council you are just massaging the figures much like a balloon wherever you squeeze it it will pop out somewhere else. There is no escaping the hard reality of poor financial management and to think you can simply manipulate people's finances without seriously impacting on those people is nieve. Cost cutting should first be done by looking closely at those looking to save money and how they can improve and streamline what they themselves do. Only then can you justify attacking the living standards of the poorest in society.
- When people receive care in their own homes alot of the care falls onto members of the family and spouce's etc in an unpaid role. Even though I receive [number] care visits a day these total no more than [number]mins in 24 hours. The remaining care is given free of charge by relatives etc. If I was in a care home the care received by myself would be 24 hours a day by someone in a paid role and therefore you would expect to pay more for this level of care. Also all my food, washing etc would be covered by this payment whereas no I have to cover the cost of this myseld.
- The cost to the council is significant here, as long as residential homes are providing heating, an adequate room, food and showers/baths, the contribution should remain the same or reduce slightly. Whilst this may benefit people in the example, elderly people who reside in homes will be able to keep more money and pass this to family/friends.
- It is not clear what domiciliary rules will apply and whether this will in effect be a reduction in the long term and how this will affect individuals and their families.
- Perhaps we would need direct experience of this scenario to be able to comment more accurately and more specifically. In theory this sounds beneficial for those people affected but would it have the knock on effect of putting up care cost contributions for those receiving care in their own homes?

- I don't know anything about college students and I don't think I should be saying anything about which I know nothing. Your sample gives just the bare details, but you can't rely on that. You have to know more about the people concerned.
- I find this question irrelevant to our circumstances so cannot agree or disagree
- Each individual's care needs and circumstances are different and should be assessed accordingly

15) If you feel this proposal would have a negative impact, please tell us what you think that impact would be, along with any suggestions on how any potential negative impacts could be mitigated?

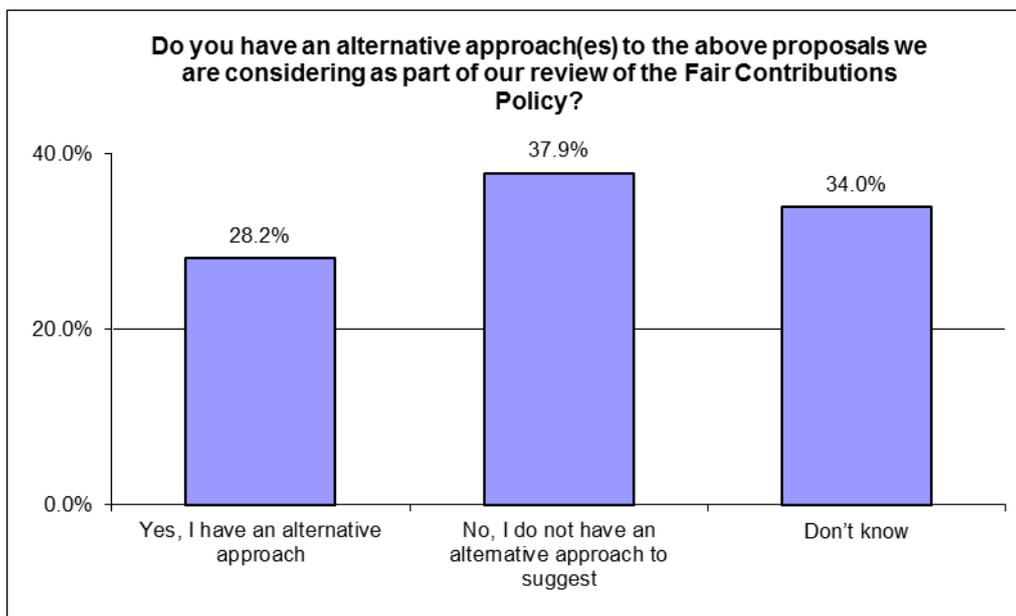
There were 8 responses to this question.

- Include in my previous statement
- Any negative impact that can be proven should be dealt with by an investigation and a bespoke solution to the problem.
- As above
- a) people who are wealthy in residential homes will keep their money within the family, thus widening the gap between wealth and poverty
b) services will suffer with a lack of reinvestment.
c) the council's estimated losses are not high enough, the figure will be more than this.
b) if people do keep more money, there is a high chance this will not be re-invested into the economy. Realistically, those in residential care are unable to visit the community often, meaning money will be sat dormant. At least with payments to the council, there is the potential for services to be invested.
- Unclear what impact this will have but it seems such a small amount to complicate the lives of 10 people over.
- n/a
- I think the old system would leave me without enough money to buy the clothes and toiletries I need and no money for doing what young people at college are supposed to do - have fun.
- People with care needs should still be entitled to go to college and have an education

Alternative suggestions

16) We have outlined above why we are considering these changes to the Fair Contributions Policy. However, we would welcome any alternative suggestions you would like us to consider. Do you have an alternative approach(es) to the above proposals we are considering as part of our review of the Fair Contributions Policy?

There were 103 responses to this question, with respondents only being able to select one option.



	Response number	Percentage (%)
Yes, I have an alternative approach	29	28.2%
No, I do not have an alternative approach to suggest	39	37.9%
Don't know	35	34.0%

17) If you have answered ‘Yes’, please tell us your alternative approach(es):

There were 35 responses to this question.

- Not applicable.
- Person centred approach according to levels of needs, individual income and level of services access
- I think getting the people who don't pay their contribution would be a good idea. Get the debts sorted out rather than penalise those who do pay already
- Stop!! Increasing the payments to care, stop putting the disabled into poverty, and affecting their quality of life, put yourself in their shoes, in fact live off what they have to live off per month, see how that affects your life, I find the whole money grabbing thing disgusting, go take from the rich, in fact charge more community tax to their great big houses, and make up the deficit to cover a he care for the disabled, you have already increased the poll tax, by £200 per year, because of your catastrophic mistakes, so let's just punish the disabled and vulnerable, pat yourselves on the back for that one.
- As above in older persons standard income disregard:-
Annual increase in line with inflation
Realistic view on true care costs .
- Only implement the changes for new users.
- Insist that central government fund a proper national care service to work hand in hand with both local authorities and the NHS. There should be a proper integrated

system of social care that removes some of the burden from local authorities. This should be funded from fair taxation and national insurance rather than directly by vulnerable people and their overstretched families and carers. A proper national strategy would mitigate the negative impacts of the current postcode lottery that we have in this country and remove both the stresses the current system places on vulnerable people and the constant need for local authorities to waste money reassessing care contributions.

- Wait until unitary when the policy will be changed again.
- Make all care free of charge
- Don't make cuts to social care, find the money from another source. It's a vital service and is not the clients choice.
- Without having full and complete knowledge and understanding of the real reason behind these proposals I do not feel in a position to offer alternatives.
It does appear to me as if the Council will be penalising people who can do nothing about it. Service users are probably the weakest sector of the community, so let's have a go at them.
- Stop scapegoating the poorest people in society for your financial incompetence, the vast sums of money that the council have squandered and lost is bordering on criminal. The council should start compensating society for its ineptitude by reducing annual leave by a week, cutting the salaries of the highest earners by 20% and middle management by 10%
- People with disabilities and their families should be treated with respect and each individual persons circumstances taken into account also all circumstances are different as are disabilities. - PLEASE TAKE THIS INTO CONSIDERATION AND DO NOT DO ACROSS THE BOARD INCREASES AS THIS WILL HAVE CATASTROPHIC CONSEQUENCES TO MANY PEOPLE.
- As the problem of caring for older and disabled people is a growing issue with more people living longer (and this now seems to effect more and more families) surely a small contribution by everyone that can afford it would help the situation
- Go back to the court ruling against you in 2016 (from memory) and follow the rules. Stop trying to break them. It costs more to continually [expletive] & get found out & challenged than to act honestly in the first place.
- leave it as it is
- Everybody's needs and circumstances are different, you can't treat everybody the same
- Raise the capital floor and means test the individual. Someone who has small savings, a minimum income and attendance allowance should not pay towards care. If you decide to introduce your measures, you need to give sufficient notice in order that people can understand and plan. Introduce a mandatory social insurance for people over 40 that will fund social care. This could be based on a percentage of income which makes it fair for all. It is also highly transparent.
- I think the disability premiums added to my ESA should not count as income for the purposes of fairer charging assessments. They are supposed to cover the additional costs I incur as a disabled person, not the actual cost of my care (if that is what they

were for, only people who need to have carers would receive them). My ESA is "Income related" so this is the amount the government believes I need to live on. I think the support with daily living part of my PIP should be considered (perhaps at a standard rate) with additional expenses being considered only if they are greater than the disability related premiums attached to my ESA. The money saved by reducing the number of people needed to process assessments/deal with payment etc would help to balance potential reduction in the charges received.

- I think the standard charges are ok but not really fair . Because some customers are getting a lot services more than others . I think that if a customer purchasing the service has more disposable income then they should contribute more for the service . This being the higher rate of £28.00 .But everyone needs to be assessed and then this will be fair . I know that people getting more monies are assessed as having higher care needs . This then makes the charging somewhat unfair as their parents and carers require more support . But if they have the higher levels of services then that's what their monies are for . Transport also needs to be taken into account and all customers need to pay the same amount except where a Taxi is provided then the customer needs to pay more . Customers also need to stay within our services provided by NCC . The monies given to customers should be standard and they should not receive more to purchase private services . If that is there choice then they should contribute the extra if it is higher than the Councils rates for Day Care . Money should try and stay within NCC and on the Block .
- £5 minimum contribution. Community care customers who choose to not receive benefits charged as if they are- they must claim the benefits, like residential clients and pension credit. Threshold of £14250 for the £1 tariff lowered- perhaps £11,000.
- Freeze current upper limits until lower limits come into line to mitigate those with the most need being penalised unfairly.
- N/A to question 11. This reply has been completed by my [relative] on my behalf. These last 2 pages [demographic information] in our opinion, are yet another waste of paper, time etc money used could have gone in the pot towards the cost of care for the disabled etc. We notice you haven't asked who or why is filling this form in, a far more important question than these questions overleaf! Apologies for the spill on the paper, my [relative] is unable to steady drinks, so unfortunately spilt some. Just to add one final comment - but an important one. The Council changed its policies for funding in 2015, it now includes a military pension to be means tested. A dreadful decision, yet another blow for people that have served their Queen and country, many losing their homes and families when they return to civvy street, now they need some help, once again they lose!! I will fight the government and councils until I no longer have breath in my body to get this changed. A service personnel should be treated with dignity and allowed the luxury of the pension they worked so hard for. I am signing this as I'm not afraid to be noticed. [redacted]
- I have a number of concerns about this consultation and the some of following points refer to the examples provided and consequently apply to the consultation. The others result from some of the wording in the consultation. They are listed below:
1 - The online Consultation states that "A carer for someone else and have personally received Adult Social Care Services in the last 2 years (but not currently)? And also "None of the above (if so, thank you for your interest but please do not complete this

survey as the questions do not apply to you)" This I believe to be limiting the number of people replying to this consultation. When you receive service for whatever reason there may be times when an improvement in your needs means you can manage without care for a period. Unfortunately this improvement may not last and services will once again be required. By excluding a contribution from these customers to the consultation you lose valuable feedback from those excluded.

2) The other point we would make is the wording used at the beginning of the consultation "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" My understanding is that when benefits such as Personal Independence Payment and Attendance Allowance are awarded, customers have already undergone a rigorous assessment of their needs at the time of application. This means that the customer is then assessed again by the Local Authority. However, they should all be treated equitably and fairly and according to their needs and what they can afford without the charges having an impact on their lives. I do not see the proposals in this Consultation doing that.

Page 5 - To have one rate of DRE Allowance may make it very administratively easy for those applying the rules to a Financial Assessment, thus making savings of time and money with regard to the administration. However it is grossly unfair to those with greater disabilities to reduce their DRE Allowance by £5 per week whilst increasing the Allowance to those with lesser disabilities by £5 per week. Given there are more customers who claim the higher rate of DRE Allowance, I am at a loss to understand how this can be justified as being fair or equitable to those with greater needs. It is likely to cause hardship and be detrimental to those with greater needs and because of their disabilities it is unlikely they can earn extra monies to make up for the shortfall in weekly income. I am of the opinion that this needs to be given some more thought to make sure it is fair to all parties.

Page 6 - The examples on this page show one customer will pay £5 less per week whilst the other will pay £5 more. This is another inherently unfair outcome. There is also another consideration here with regard to the second customer and that is there was also a consultation last year when the Personal Independence Allowance was consulted on and my understanding is that it was then taken into account when making the calculation for the charge to be made towards the cost of care. I find it hard to understand why the most vulnerable seem to be continually targeted to cover shortfalls. I understand that costs increase year on, year on and that customers should bear some of the increased costs as the monies available to them will have increased but this should be the same increase for all customers and not giving some more and reducing it for others.

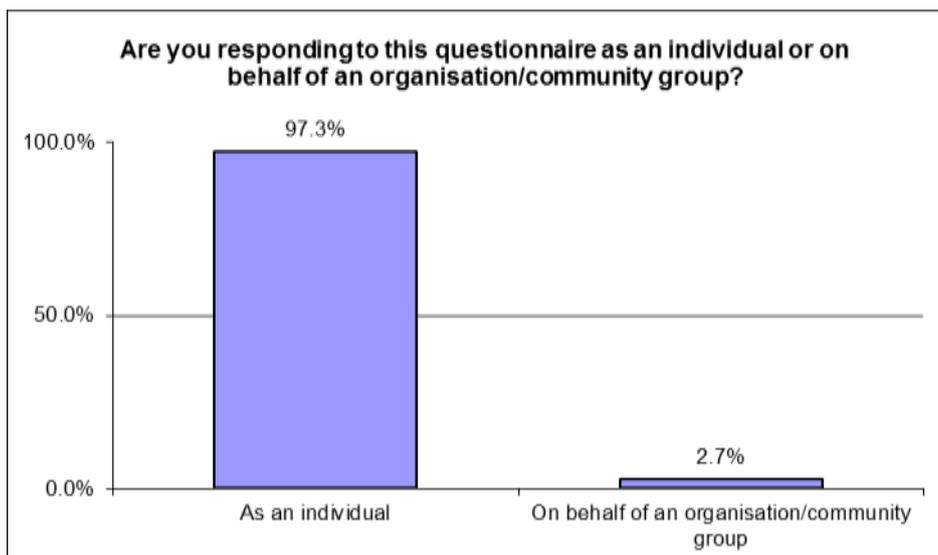
Page 8 - I have concerns about the Older People's Standard Income Disregard and the example shown. I have a problem with using the Department of Health Statutory Minimum of £189 per week which is a reduction of £5.50 per week. I also have a problem with the DRE Allowance of £18 per week. I fail to understand why you continue to use the figure of £18 per week when you are stating that you want to go on to a standardised figure of £23 per week. I do not see any logic in this and those in receipt of services will not understand why they are being treated differently. The total reduction quoted is £10.50 a substantial amount of money for anyone let alone those who require services in order to maintain a reasonable quality of life. I find it hard to understand why the most vulnerable seem to be continually targeted to cover shortfalls.

- Because the County councils have been underfunded for years. NCC has a serious funding problem. It's time this was ended and the Government funded it properly insted of papering over the cracks.
- Why take £5 off one group to give to the other, no doubt the NCC will be saving money as this will be a cost cutting excercise, people don't forget the football club and the lost money and also salaries paid to certain people in the council
- The people that are more vulnerable shouldn't have to pay for there care. The people able should pay a bit more to help the elderly.
- Being unable to walk and need to be washed dressed and help downstairs by the carers is not fun and games it's not fun at all my [relative] is unable to help as it takes all [their] energy levels so we rely on help which we are very grateful for but being short of money is no fun either and the elderly and disabled people seem to be targeted at. It would be nice to live free of worry
- no good you treat the right people badly
- It not fair for disabled community talk about speak for self all they want going to day centres doing things feel happy
- Each year you should ensure that the income of the elderly and the disabled increases by inflation and does not reduce
- I am severally disabled and I have to buy a lot of things out of my allowance that others may not have to buy, Expensive rubber gloves 3 boxes a week, incontinence pads 2 packs a week, Special straws so I can drink on top of food, clothes petrol for my car and insurance for carers to drive this is hard on what I have allowed
- Don't change it. When things are ordered online it is more expensive e.g. Tesco intead of Aldi. Catalogue shopping for clothes. Leave it alone.
- Care should be free. Disabled people need the support to have the same opportunities as people who are not disabled. If we are chargeed for care we will be poorer than people who have the same income but who do not need care or have someone who can support them for free. I don't want my [relative] to have to support me forever because it is cheaper. i want to be independent
- People with complex medical needs and disabilitys and low incomes should receive as much help and support financially and with care and so should family unpaid carers (they need help too)

Demographic information

18) Are you responding to this questionnaire as an individual or on behalf of an organisation/community group?

There were 112 responses to this question, with respondents only being able to select one option.



	Response number	Percentage (%)
As an individual	109	97.3%
On behalf of an organisation/community group	3	2.7%

19) If you're replying on behalf of an organisation please tell us the name of your organisation and your job title/role:

Organisation

There was 1 response to this question.

- Teamwork Trust

Job title/role

There was 1 response to this question. We have not listed the roles / job titles of respondents within this appendix in order to ensure respondents' anonymity is retained.

As an organisation, we collect specific demographic information from the people who participate in our consultations or complete surveys to build up an accurate understanding of the communities that we serve so that services and policies can be delivered to meet the needs of everybody, and ensure that everybody has an opportunity to have their voice heard. Please feel free to leave any questions which you do not wish to answer.

Any information you chose to provide will be treated confidentially and in accordance with data protection legislation and regulations.

20) Are you:

	Response number	Percentage (%)
Male	45	41.3%
Female	62	56.9%
Prefer not to say	2	1.8%

21) Are you currently Pregnant or have you had a baby in the last 6 months?

	Response number	Percentage (%)
Yes	4	4.0%
No	94	93.1%
Prefer not to say	3	3.0%

22) How old are you?

	Response number	Percentage (%)
0 to 9	0	0%
10 to 19	1	0.9%
20 to 29	4	3.7%
30 to 49	18	16.5%
50 to 64	35	32.1%
65 to 74	24	22.0%
75+	20	18.3%
Prefer not to say	7	6.4%

23) Do you have a disability?

	Response number	Percentage (%)
Yes	65	60.7%
No	37	34.6%
Prefer not to say	5	4.7%

24) If Yes, please tick the appropriate box(es) which best describes your disability?

	Response number	Percentage (%)
Mental Health	19	28.8%
Physical Disability	40	60.6%
Hearing Impairment	11	16.7%
Learning Disability	19	28.8%
Sight Impairment	4	6.1%
Other	7	10.6%

25) What is your religion or belief?

	Response number	Percentage (%)
None	30	29.4%
Christian	57	55.9%
Hindu	0	0%
Jewish	0	0%
Muslim	1	1.0%
Sikh	0	0%
Buddhist	0	0%
Prefer not to say	14	13.7%
Any other religion (please specify)	0	0%

Other:

- Spiritual rather than Religious
- Spiritualist (2)
- Wiccan
- Catholic

26) What is your ethnic origin?

	Response number	Percentage (%)
White	95	95.0%
Asian or Asian British	0	0%
Black or Black British	0	0%
Mixed / Multiple ethnic background	2	2.0%
Other ethnic group	0	0%
Prefer not to say	3	3.0%

Other:

- White English (3)
- Scottish

27) If you are 16 or over which of the following options best describes how you think of yourself?

	Response number	Percentage (%)
Bisexual	3	3.1%
Gay Man	1	1.0%
Gay Woman / Lesbian	0	0%
Heterosexual	79	80.6%
Prefer not to say	15	15.3%

28) Is your gender identity the same as the gender you were assigned at birth?

	Response number	Percentage (%)
Yes	93	93.9%
No	0	0%
Prefer not to say	6.1	6%

29) What would you describe your marital status as?

	Response number	Percentage (%)
Married	46	44.7%
Single	32	31.1%
Civil Partnership	0	0%
Co-habiting / Living together	2	1.9%
Widow / Widower	12	11.7%
Other	3	2.9%
Prefer not to say	8	7.8%

2. Consultation event feedback

Attendees' comments (as noted by officers):

- Attendee – customer. DRE - how to prove DRE expenses, make it really clear how DRE works. Disagree with the proposal. Disappointed that there is another change to the charging policy. Waiting for care assessment - wants Direct Payment. Issues with current care providers.
- Attendee - carer. [Relative] is in supported accommodation but hours do not cover care needed. Attendee also works for [organisation]. Took consultation survey and will post. Discussed all 3 points in consultation. Welcomes residential college proposal. Concerned about DRE for the elderly and [relative]. Concerned about Older Person's Standard Income Disregard. Care/Direct Payment discussed. Advised to call NASS Customer Services.
- Carer [Relative] in receipt of care. Wasn't sure what was going on so just wanted general understanding. Satisfied with consultation and satisfied with current circumstances.
- [Job Role] at [Organisation] (professional working with people with Learning Disabilities who have received the letter about the consultation). General advice and guidance to relay to customers at [Organisation]. Hadn't had access to easy read survey.
- Attending on behalf of customer - not deputy. Discussed option but didn't really understand the consultation. Took form to complete.
- Carer and [relative] Discussed impact of £28 to £23 - they didn't know about assessment but thought they paid amounts. Explained about personalised DRE - took form to complete.
- Carer – customer = [relative] Wanted to advise that [relative] contributes towards household - explained Minimum Income Guarantee set by the government but carer said [relative] may have to go in Residential Care and then would cost more.
- Carer – [relative] has Direct Payment, contributing towards care, no allocated, [amount] per week. Proposal 1 - some people will find this very confusing. Pleased that it has highlighted the DRE part. Proposal 2 - understand the Department of Health rates. Proposal 3 - like that. Would be interested for [relative]
- Carer – [relatives] receiving support at home, [relative] in residential care. [Relative's health condition] progressing - currently in respite. Currently getting support from NCC. [Relative] in private residential care. [Relative] at home also having difficulties. What happens if the Older Person's Standard Income Disregard is not enough? Concerned about the future because of [relative's] needs and [relative's] support needs.
- Student on placement in [location] - support for vulnerable adults - appointeeships. Has been speaking to customers about the proposals. Focus group - interviewed/discussed the proposals to get their views. Comments are re DRE. Most don't know what level they receive. They are happy to contribute towards the cost of their care but don't think it's fair that they contribute the same i.e. based on a % of the benefits they receive. Some thought disabled people shouldn't have to contribute with all their health issues. Some felt their DRE was not enough. It penalises people

who are severely disabled. You are also penalised if you work hard and therefore have money to contribute. Also a perception that assessors make judgments on what people spend their money on e.g. cigarettes

- [Customer]. Needs urgent care review. Disability badge - look at parking. [Health conditions]. Have to drive too far - lives on own. Personal Assistant doesn't stay. [reference to financial contributions] Reviews needed.
- Customer and carer. Home care [reference to financial contributions]. 1 - DRE - bit happier. If goes ahead she will struggle. Rather change didn't happen. 2 – Older Person's Standard Income Disregard – [customer] may be negatively impacted
- Customer. 1- DRE - not too bad, it's affordable. 2- Older Person's Standard Income Disregard - no impact. 3- Positive
- Carer. Would like a review of financial assessment DRE - home visit. Gone from [reference to care package] cannot afford changes. [reference to financial assessment]
- Carer – [relative] will be impacted by the change in DRE rates
- Customer and carer. Customer receives [benefit] - unfair this is taken into account. DRE - find it unfair costs are capped - things can cost more. Older Person's Standard Income Disregard - it is unfair to take extra of older people and reward others - 800 will benefit, 1200-1400 will lose out. £189.00 per week we will struggle to afford. Direct Payments - if customer is in hospital and has Direct Payment - agency says must give 7 days' notice so has to pay when in hospital and not getting service.

3. Written / emailed feedback

- Writing about changes do we pay more or less because it is not fair people who cannot afford pay put disabled who go to day centre somewhere to go when. [amount] month it is a lot to pay. I start pay but I not happy would pay [amount] month. My [relative] help me out on Bills and now I pay for his activities at [redacted] so be around [amount] month. It not fair now if don't pay send me reminder. Someone to knock on my door big joke because not fair have pay mistake that Northamptonshire County Council spent money we pay for these mistake that backs to. If I did not pack up my job my [relative] be at home I know that if he did go in home would not like one bit be stress out and not happy he play up be upset to. If do not pay send me letter go court no good for [relative] because he does not understand for him be day out because disable big boss Northampton County Council who have left they should pay back money spent so please think it not fair for carers don't work

A change to the rate of Disability Related Expenditure (DRE) to have a single standard rate of £23 per week.

A change to the level of Older Person's Standard Income Disregard which would bring the Council in line with other authorities and Department of Health guidance.

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.

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

Carers' Voice Northamptonshire have a number of concerns about this consultation and the following points refer to the examples provided and consequently apply to the consultation. They are listed below.

Proposal 1

To have one rate of DRE Allowance may make it very administratively easy for those applying the rules to a Financial Assessment, thus making savings of time and money with regard to the administration. However, we do not understand how this is justified, equitable or fair to those with greater disabilities to reduce their DRE Allowance by £5 per week whilst increasing the Allowance to those with lesser disabilities by £5 per week. Given there are more customers who claim the higher rate of DRE Allowance, we are at a loss to understand why those with greater needs are being targetted. It is likely to cause them hardship and because of their disabilities it is unlikely they can earn extra monies to make up for the shortfall in weekly income. We are of the opinion that this needs to be given some more thought to make sure it is fair to all parties.

Proposal 2

The examples given in the Consultation show one customer will pay £5 less per week whilst the other will pay £5 more. This is another inherently unfair outcome. All customers should be treated equally and fairly.

We also have concerns about the Older People's Standard Income Disregard and the example shown. We have a problem with using the Department of Health Statutory Minimum of £189 per week which is a reduction of £5.50 per week. We also have a problem with the DRE Allowance figure of £18 per week used in this example. We fail to understand why you continue to use the figure of £18 per week when you are stating that you want to go to a standardised figure of £23 per week. We do not see any logic in this and those in receipt of services will not understand why they are being treated differently. The total reduction is £10.50 a substantial amount of money for anyone let alone those who require services in order to maintain a reasonable quality of life. We find it hard to understand why the most vulnerable seem to be continually targeted to cover shortfalls.

We all understand that costs increase year on, year on and because of this the case needs to be made to the government to provide adequate funding so that the same customers are not continually being targeted to make up the shortfall in income.

Proposal 3

Carers' Voice disagrees with this because it is not clear what rules will apply and what the impact will be to these individuals and their families and also any future customers who may attend residential college.

We look forward to your response.

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)

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

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

Healthwatch Northamptonshire would formally like to respond to the three proposed changes to the Northamptonshire County Council's Fair Contributions Policy.

Disability Related Expenditure (DRE)

Healthwatch Northamptonshire strongly disagrees with the current proposal to bring in a standard rate of £23 per week. To have a single rate of DRE allowance we believe is unfair for those already assessed at the higher rate (having a greater disability) to have their allowance reduced, while those assessed at the lower/middle rate (not considered to have the same level of disability/complex needs) will receive an increase. This is unjustified, inequitable and unfair for those with (already assessed) greater needs. People on the lower rate may be able to get into employment and

seek additional support and subsidise their income while those on the higher rate, with the most needs are very unlikely to be able to so. The proposal is targeting people with higher needs and the most vulnerable people in society.

This will result in direct hardship as they are unlikely to be able to compensate for the shortfall in weekly income. More thought needs to be given to this to ensure that the policy is not arbitrarily penalising the most vulnerable. They have been assessed for their needs and those needs remain. Paying them less is not going to change their needs but affect their quality of life for themselves and their families. Additionally, this does not factor in other expenditure and increased costs e.g. increase in council tax, cost of living etc. for the affected individuals and their families.

Older Person's Standard Income Disregard

Healthwatch Northamptonshire strongly disagrees with the current proposal to deduct £5.50 per week from the older person's standard income disregard. Again, this is targeting the most vulnerable people and for people already on a low income to lose £286 per annum would have a disproportionate effect. If it is currently not in line with other authorities or Department of Health guidance it should at least be frozen until it does come into line rather than penalising those with the greatest needs.

Residential College Charges

Healthwatch Northamptonshire disagrees with this proposal. It is not clear what domiciliary rules apply and whether this will in effect be a reduction in the long term and how this will affect individuals and their families.

Other

Healthwatch Northamptonshire would also like to challenge the assumptions made. One of the key assumptions is that client levels remain the same. As Northamptonshire is a growing county with an ageing population who will likely have additional needs it is very unlikely that client levels will remain consistent for each cohort. The current client group is also not likely to remain static as their needs can also change with age.

Even if there are no changes in national allowances the increase in the cost of living has also not been factored into these assumptions and the effect this will have on people's incomes.

All three changes potentially also affect the same group of people – the most vulnerable in our county and this cannot be deemed to be either fair or equitable.

The vision for the Council is a county where everyone looks after each other and takes responsibility, protecting the vulnerable, yet the needs of these very vulnerable people will be impacted disproportionately and therefore we deem all the proposed changes as unfair and disproportionate.

Healthwatch Northamptonshire

4. Feedback collected by NASS

- In favour of DRE change- One standard rate would benefit circumstances
- Council is trying to take the money from the poorest people.
- [name] not happy with increases in [their] package.
- [name] phoned in regards to [relative] [name], [they are] concerned that [their relative's] care will increase and cannot afford this.
- [relative] is on benefits and would be worse off if [they] didn't receive the money to live on.
- [name] advised [their relative] would have a major financial impact if [their] living fee were to be reduced.
- "It is disgusting to charge people who are on pension credit. I already pay [amount] a month and I am not paying anymore." [name] also advise [they] will withdraw all [their] care if [they] has to pay more or receive less. Advised [they] wont be a victim of high charges and wants to be heard.
- "we don't need another bill".
- [name] informed that they cannot afford to pay any more contribution
- [name] said that [they are] low income and cannot afford the increases in [their] care package
- Not sure if this applies to [name], do not want any increase happening.
- Advised [they don't] want to pay more or have [their] spending money cut as [they have] took have dog walkers and money for dog food
- [Relative], [name], believes it wouldn't work for [them] and [their relative], [name], if the benefits they keep are reduced. [Name] does extra activities which [name] believes have benefited [their] life massively and as a single parent who's not working, [they're] already taking a lot of money out of [their] savings. [Name] doesn't receive any benefits because [they aren't] entitled apart from carers allowance. [Name] explained that the opportunities [name] gets are incredible and wouldn't be possible without the extra help they receive. [Name] is also on a gluten free diet which costs more to have.