

Consultation Feedback Summary

The Council wanted to seek stakeholder views on some proposed options it was considering to make regarding chargeable contributions for some of the services delivered by NASS. The following is a summary of how the adult social care charging policy consultation was carried out and of the findings received.

Consultation Methodology

The consultation sought views on proposals relating to the following:

1. A change to the Fair Contributions Policy which will take into account the certain named benefits in full, in the calculation of a customer's financial contribution for the non-residential services they receive.
2. A new charge for all eligible customers who use the Assistive Technology Service.
3. An increase in the fee for appointeeship for customers with capital over £1,000.

The aim of the consultation was to inform stakeholders and residents of the County of the proposals; gain feedback on the options being considered for each of the above; and give respondents the opportunity to put forward any alternative options that they wished to propose. The consultation also sought to gain an understanding of whether or not respondents currently accessed and/or contributed towards the costs of the above services.

The consultation results would also be used to help inform the Equality Impact Analysis of the proposals and ensure that the Council is compliant with the requirements of the Equality Act 2010.

Due to the nature of the proposals and the potential impact on customers a letter was sent by the NASS Managing Director to every customer (or their carer where necessary) who may be affected by the proposals to inform them of the proposals and invited them to take part in the consultation. The letter explained the different ways people could participate with the consultation, including via a questionnaire and attending a public meeting. It also offered recipients the opportunity of a face-to-face visit in their own home to help explain the proposals and collect their feedback. A telephone helpline was also provided to offer support and further information. An easy read version of this letter was developed and sent to those customers where appropriate.

A questionnaire was devised, which included examples of how proposals could impact on customers. A supporting information document was also developed in support of the questionnaire which also included frequently asked questions and their answers. An easy read version of the questionnaire and the supporting information document was also developed.

These questionnaires, along with details of the consultation, including web links to the supporting information document, Equality Impact Assessment, and the September 2017 Cabinet paper were published on NCC's online Consultation Register, which is where all of the Council's consultations are published. Paper copies were available upon request.

The consultation was open to all, and as well as all customers and/or their carers, it was also promoted to the Council's Consultation Register members, the county's Residents' Panel, and local media.

Four specific public meetings were held to enable officers to explain the proposals, answer questions and receive feedback on the proposals. Three of these events were held across the county (in the north, south and centre). The fourth event was aimed at customers and carers with a learning disability and was hosted by the county's Learning Disability Partnership Board (LDPB) and promoted amongst its members.

The Council was also conducting phase 1 of its 2018-19 budget consultation at a similar time as this consultation. During the phase 1 2018-19 budget consultation, 4 drop-in events were held across the county where people could speak to officers and Councillors and provide feedback on the budget proposals. Although the adult social care charging policy consultation was not part of phase 1 of the 2018-19 budget consultation the Council took the opportunity to promote these charging proposals during these events. The phase 1 2018-19 budget consultation events were held at Northampton, Towcester, Wellingborough, and Corby, and most were held in Olympus Care Services day centres.

The consultation opened on 17th October 2017 and closed on 6th January 2018. The consultation was carried out in compliance with NCC's Consultation and Engagement Policy and Standard of Required Practice.

Summary of Feedback

Questionnaire feedback

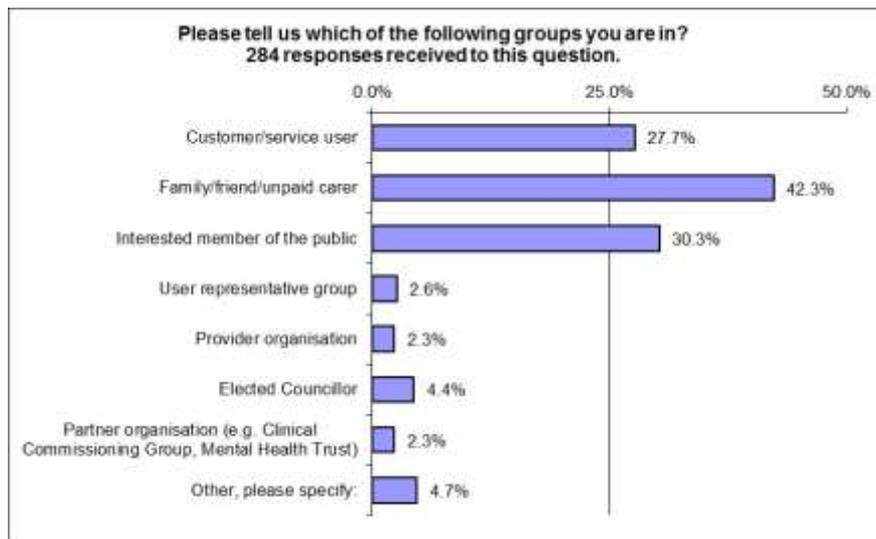
The following is a summary of the findings of both the standard and easy read questionnaire results. It should be noted that not all questions were answered by every respondent, and that the following percentages are representative of those respondents who answered the specific question(s).

A total of 399 respondents participated in the consultation via a questionnaire. However, due to an administrative error some copies of the paper questionnaire that were posted out during the first 22 days of the consultation period were missing some of the answer options

and were lacking the supporting information document. Unfortunately, in light of this it has been deemed that we cannot include their feedback as these respondents received incomplete information on which to provide their response. A total of 36 incorrect questionnaires were received. As such we have removed these questionnaire responses from the following analysis. Therefore the following is a summary of findings from the remaining 363 respondents (this is made up of 301 standard questionnaires and 62 easy read versions).

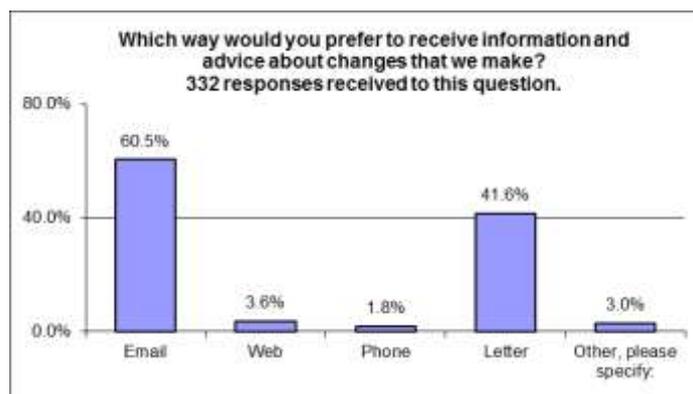
A total of 33 people were supported either over the telephone or via a face-to-face visit to help them provide their feedback, although some of these people only wanted the proposals explaining to them. Those enquiries that did result in a completed questionnaire have been included within the results below.

The questionnaire was set up in a way to distinguish which respondents were NASS customers and/or their family/carers and who was not. Responses were received from a variety of stakeholders although most came from family members/friends/unpaid carers (42.3%).



In addition to the options provided in the questionnaire, respondents included charities, appointees, community group, pharmacies and a parish council.

Respondents stated that they want to receive information and advice about changes the Council may make in a variety of ways. The majority of respondents (60.5%) said they would prefer to receive it via email. Although, respondents were also showing preference to receiving information via post (41.6%).

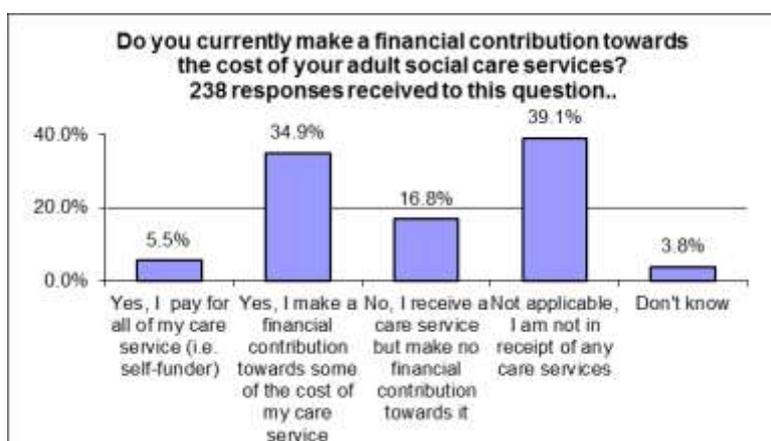


In addition to the options provided in the questionnaire, some respondents said that they would like to receive information and advice about changes face-to-face, one said via social media, specifically Twitter and one respondent said via a phone call with a letter for evidence.

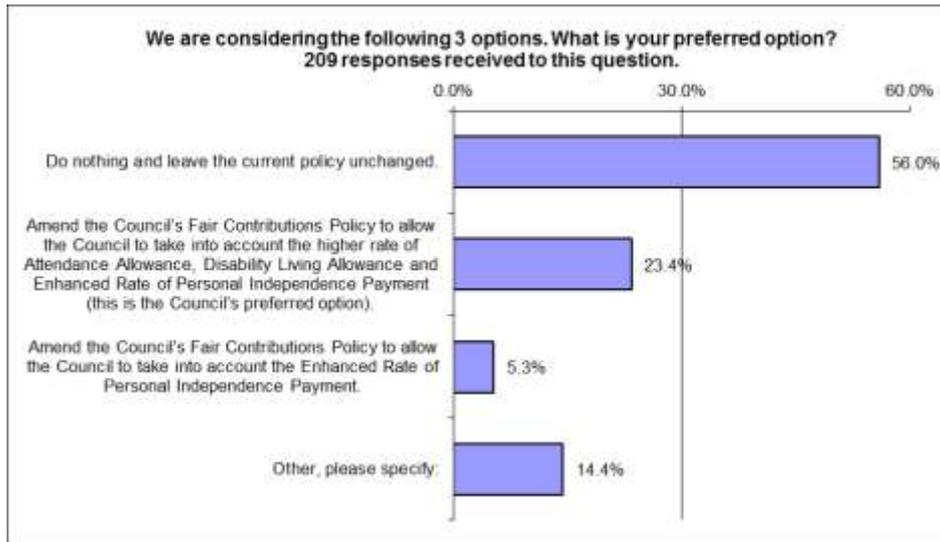
Fair Contributions Policy Amendment

A total of 251 respondents gave us their views on this subject.

The below graph shows the percentage of respondents who currently make a financial contribution towards the cost of their adult social care services.

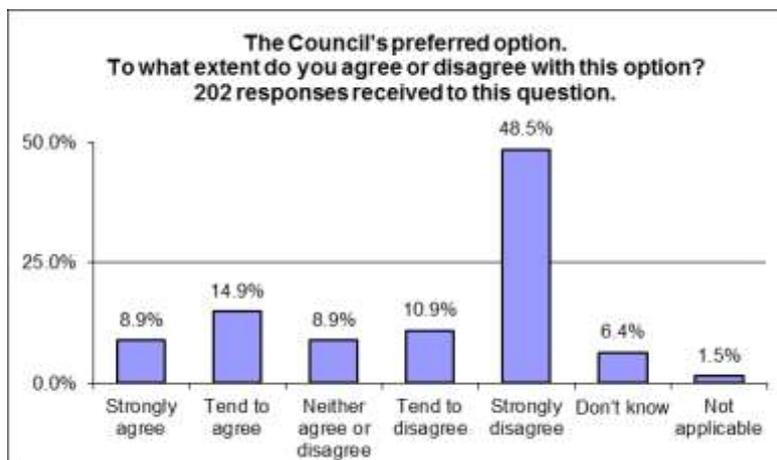


When presented with the 3 options regarding the Fair Contributions Policy Amendment proposal, the majority of respondents (56.0%) said they would prefer the policy to remain unchanged. A total of 23.4% opted to support the Council's preferred option of amending the Council's Fair Contributions Policy to allow the Council to take into account the higher rate of Attendance Allowance, Disability Living Allowance and Enhanced Rate of Personal Independence Payment.



When asked for alternative suggestions a number of people commented on the fairness of there being any contributions and/or greater contributions, as well as the differences in contributions made. Some people suggested that additional monies needed by the County Council should be found another way, specific examples included increasing Council Tax or cutting other, less dependent services for example. Some technicalities were highlighted; the most frequent concerned fairness of taking into account higher/enhanced rates that are for night care, in addition mention was made of the Minimum Income Guarantee and one person stated that the only contribution a vulnerable person should be assessed against is the care component of their PIP.

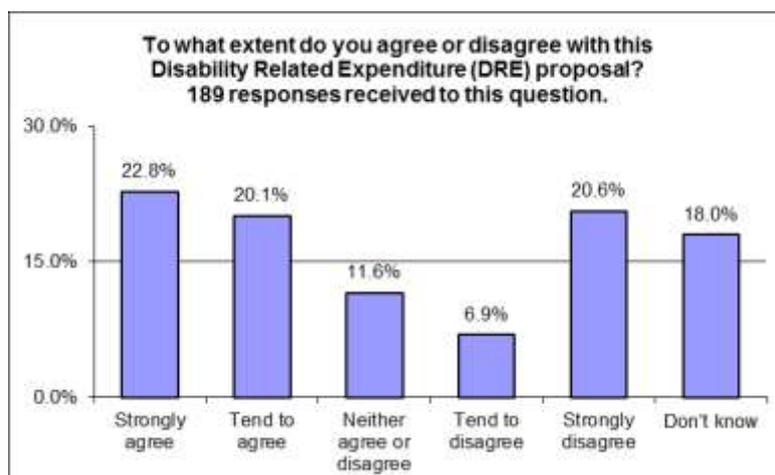
When respondents were directly asked if they agreed or disagreed with the Council's preferred option of allowing the Council to take into account the higher rate of Attendance Allowance, Disability Living Allowance and Personal Independence Payment, a total of 23.8% agreed and 59.4% disagreed.



A large number of respondents took the opportunity to explain their answer. Concerns highlighted in the comments to the previous question were more strongly and rigorously

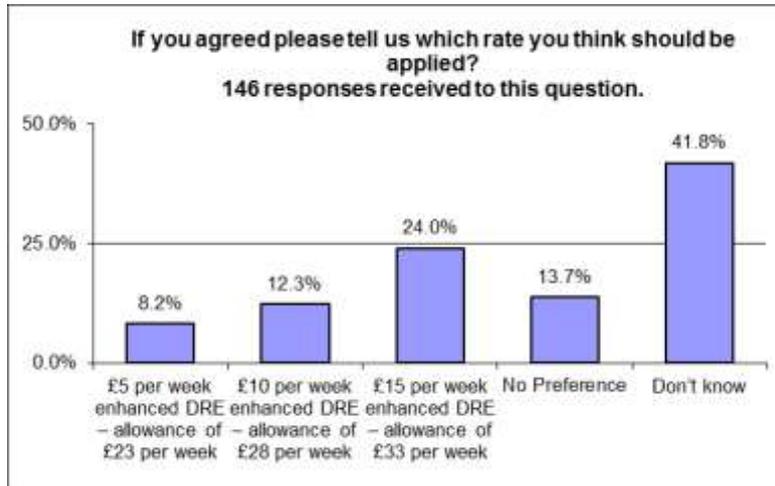
echoed in responses here. Approximately half of respondents said they thought it was unfair to take additional monies from people with disabilities and particularly those assessed as having higher needs. Some thought that the cost of contributions is already too high and were critical of the extent of the proposed increase. Some respondents questioned the legitimacy of increasing contributions in this way. Some thought additional money should be sought elsewhere, whether it be from wealthier tax payers or better financial management by the Council. A number of people commented on difficulty being able to afford additional contributions and some emphasised possible, associated adverse effects such as greater financial hardship, reducing take up of care services and overall reduction in quality of life for the service users and also their unpaid carer(s). On the reverse, some, albeit a small minority, of respondents did state their agreement with the proposed option, in some cases, subject to specific considerations or suggestions such as it being phased in, having an appeals process and specific consideration to financial hardship.

Most respondents (42.9%) were in favour of the Council offering a higher standard rate of Disability Related Expenditure (DRE) allowance for those who are assessed against the high / enhanced rate of their disability benefits (on top of the standard DRE allowance of £18 per week) to help mitigate the financial impact on customers.



A common theme in the comments to the above question regarding the Disability Related Expenditure proposal centred around the practicalities of administering the change, advocating a fair process, good quality of assessment and timeliness of DRE reviews. Some respondents thought the additional administrative burden and associated, additional stress for the applicants would outweigh the benefit of the proposal. A number thought that the proposal would be ineffective and not enough of an increase to outweigh, proposed higher contributions. A number of respondents commented on the scope of DRE in terms of difficulties in determining and evidencing disability related expenditure and urged that the scope of DRE be broad enough to cover differing needs of different people and their disabilities and that evidencing the need for DRE to be proportionate and unburdensome.

The majority of respondents' preference (24.0%) was for a £15 per week enhanced DRE – allowance of £33 per week.



When asked if they wanted to make any others comments about the amended Fair Contributions Policy proposal, on the whole, comments received in response to previous questions were reiterated and reinforced. A common theme was around fairness of charging people with disabilities more and 'targeting already vulnerable people'. A number of people thought that there should be no charge for adult social care in the first place. Respondents reiterated their disagreement with increased contributions, unaffordability and wider implications. Whilst some people were sympathetic to increased financial pressures faced by Council's, a number of respondents believed strongly that the council should be looking to make required savings elsewhere. One person suggested that the policy should be reviewed as/when the Council's financial position is improved. Other suggestions included clearer advice on what support options are available to those in receipt of social care and setting of budgets after support plans are created, an increase in the Direct Payment rate, simplification of the benefits system and extra training for assessors in dealing with really complex health and social problems and disability related costs being considered at the point clients are assessed to self-fund.

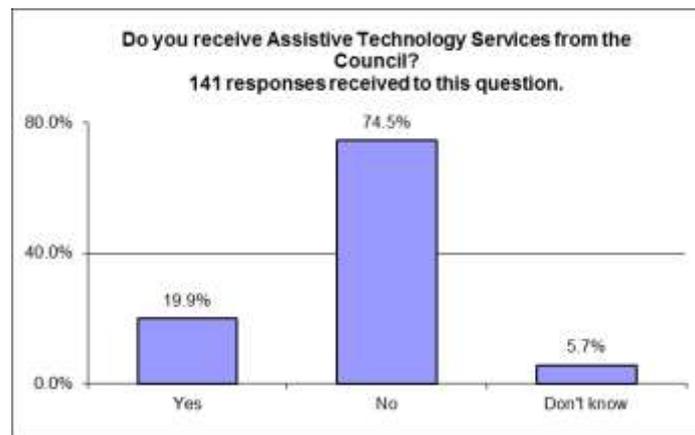
Assistive Technology

A total of 144 respondents gave us their views on this subject.

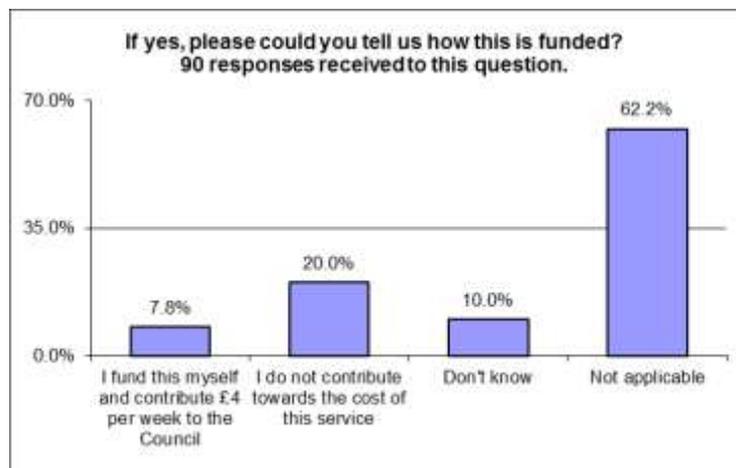
Although the standard questionnaire was correct, regrettably there was an error within the consultation supporting information documents and easy read materials at the outset of the consultation, as they quoted a proposal of a weekly charge of £2 per item instead of a £2 flat rate. This error was identified and amended on 3rd November 2017. As previously stated the standard questionnaire had the correct information throughout the consultation period and the majority of respondents completed this questionnaire, although it is not possible to

measure how much of an impact this error might have had on people’s responses. As a £2 per item charge could be considerably more than a flat rate, especially if a customer has several items, and for the avoidance of any doubt, where appropriate the analysis to this set of questions has been split to help demonstrate the responses received prior and after the correction was made within the supporting information documents and easy read questionnaire.

The majority of respondents (74.5%) said they were not in receipt of Assistive Technology Services from the Council.

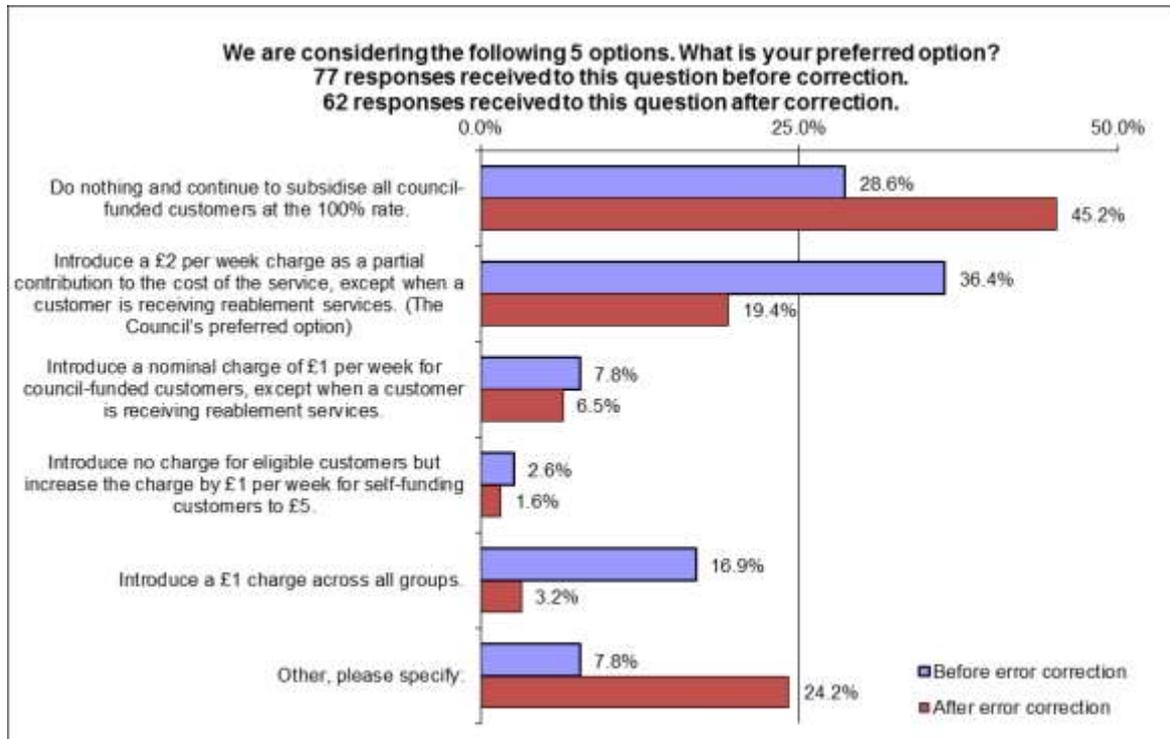


The below graph shows the level of respondents who contribute towards the cost of their service.



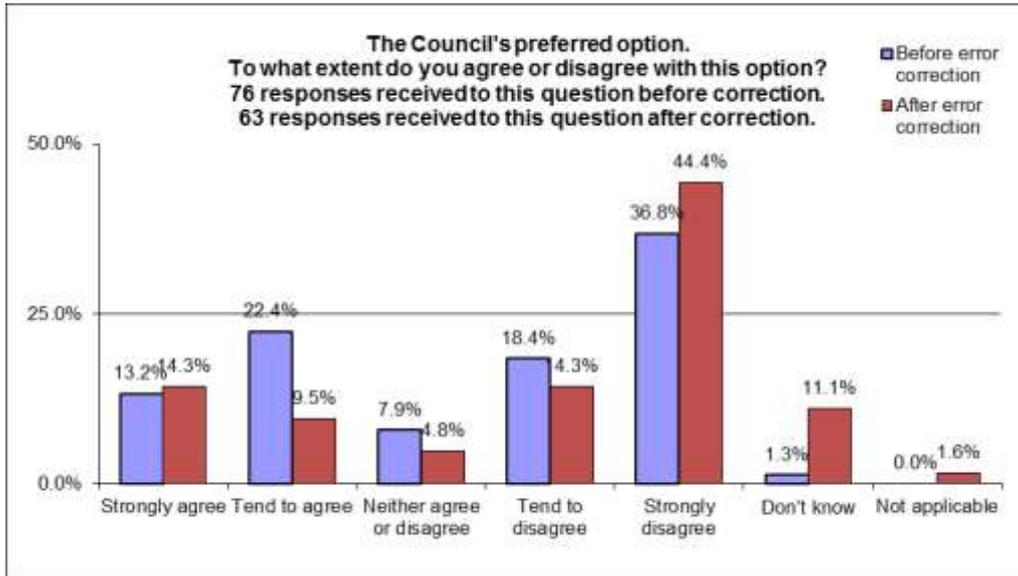
When presented with the 5 options regarding the Assistive Technology proposal, there was a difference of opinion between those who responded prior to the correction and those who responded after the error was amended. Prior to the correction the majority of respondents (36.4%) opted for the Council’s preferred option of introducing a £2 per week charge as a partial contribution to the cost of the service, except when a customer is receiving reablement services. In contrast, after the correction was made on the supporting information documents and easy read questionnaire the majority of respondents’ preference was to ‘Do nothing and continue to subsidise all council-funded customers at the 100% rate’ with 45.2% of

respondents choosing this option, and 19.4% supporting the Council’s preferred option of introducing a £2 charge.



When asked for alternative suggestions the small number of comments received prior to the correction included concern over affordability, unfairness and stress to the recipient. One respondent thought that payment should only be made if the recipient can afford to do so. Comments received after the correction included a number of respondents thinking that it was fair to pay something, with differing opinions on amounts and whether this should involve some form of means testing. There were some concerns over affordability and some people felt that they shouldn't have to pay anything. Two people suggested basing it on an individual assessment of each person's circumstances.

When respondents were directly asked if they agreed or disagreed with the Council’s preferred option to introduce a £2 per week charge as a partial contribution to the cost of the service, except when a customer is receiving reablement services, the majority disagreed both before and after the correction was made (55.3% and 58.7% respectively).



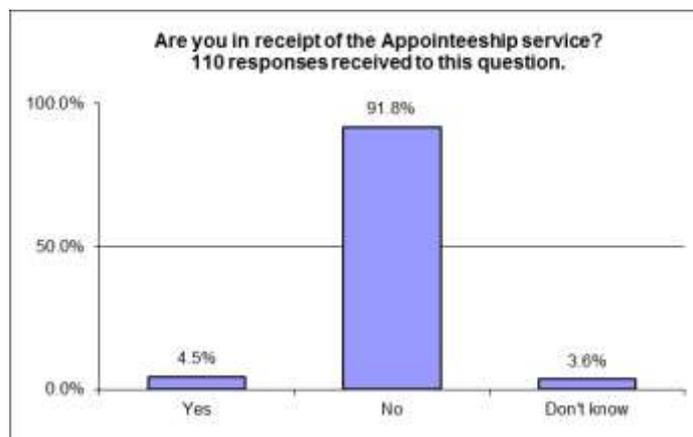
When asked why, the most frequent comments received before the correction focused on people's agreement with this additional charge in principle as being fair. Some questioned whether the costs of administering these charges would negate the savings made and some thought that the Council could and should be looking to save £52,000 elsewhere. Mirroring comments to previous questions around fairness, some people thought it unfair to apply additional charges to people with disabilities and vulnerabilities. A couple of respondents questioned what the savings would be used for. Respondents who commented after the correction was made raised frequent concerns in their comments about the Council's preferred option of introducing a £2 a week charge in relation to affordability. Some were concerned that it would deter take up of Assistive Technology. Some respondents questioned whether the costs of administering these charges would negate the savings. Whilst some people agreed in principle, others reiterated their opposition to applying additional charges to people with disabilities and vulnerabilities.

There were only a limited number 'others comments' about the Assistive Technology proposal prior to the correction being made. These were mostly unsupportive of the proposal on the principle of fairness and affordability. More comments were received after the correction was made with a number of respondents taking the opportunity to emphasise how essential Assistive Technology is in maintaining their safety, independence and reducing the cost of care. This was the most common theme in relation to 'any other comments'. A few respondents reiterated their concern around the cost of administering these charges in relation to the expected savings, a perceived lack of fairness to vulnerable and disabled people and that they thought savings should be found elsewhere.

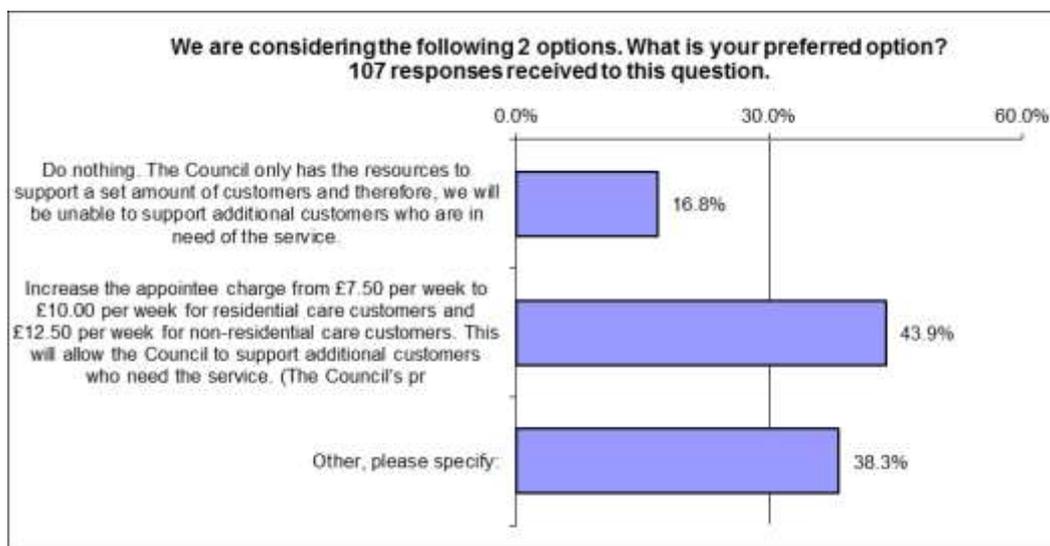
Appointeeship Service

A total of 110 respondents gave us their views on this subject.

Only 4.5% of respondents identified themselves as being in receipt of the service.



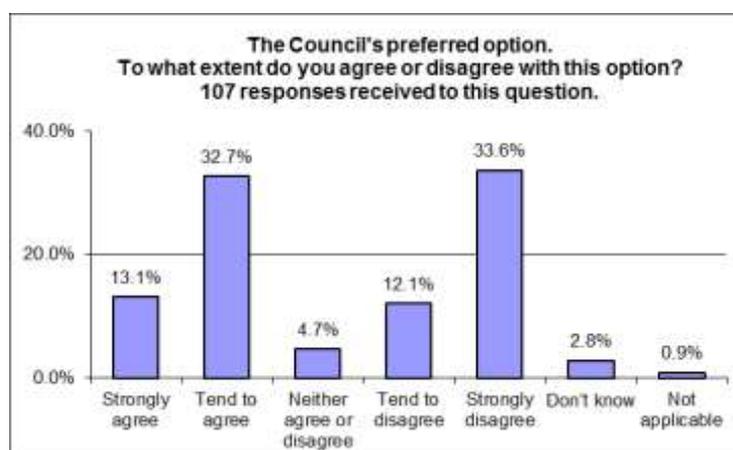
When presented with the 2 options regarding the Appointeeship Service proposal, the majority of respondents (43.9%) opted to support the Council's preferred option to increase the appointee charge from £7.50 per week to £10.00 per week for residential care customers and £12.50 per week for non-residential care customers to allow the Council to support additional customers who need the service.



When asked for alternative suggestions the most common themes within the comments centred around: finding an alternative solution to increasing charges, charge people the same amount (whether residential or non-residential) and, again, fairness in relation to charging vulnerable people more. A number of suggestions were made around alternative solutions, including: looking to the voluntary sector; diverting Council monies from other budgets; a

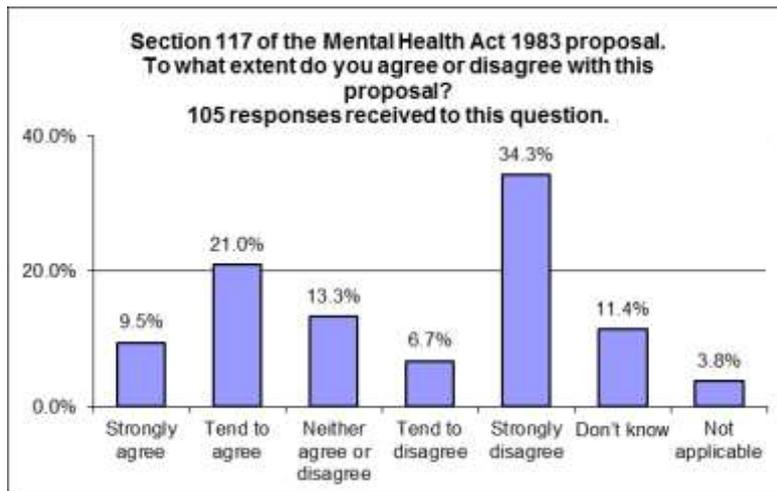
rigorous review of the service; working in partnership with banks and utility companies to help service users manage own money, operate a tiered service; structure charges differently with an upfront cost for initial set up, followed by a regular, lesser maintenance fee; introducing a smaller amount for everyone, including those who currently get the service for free; and subcontracting the service out to 'professionals'. Some respondents thought that the savings threshold should be higher. One respondent asserted that the budget setting (higher charges or not) should follow the care needs identified in support plans.

When respondents were directly asked if they agreed or disagreed with the Council's preferred option to increase the appointee charge from £7.50 per week to £10.00 per week for residential care customers and £12.50 per week for community care customers a total of 45.8% agreed and 45.8% disagreed.



When asked to explain their answer many of the themes from the comments to previous question were reiterated, such as fairness, affordability and not having a difference in charges for residential and non-residential customers. However, more respondents communicated their support for increasing charges within their comments here including comments around the charge not having been changed for a number of years and that the Council should be able to cover its costs. One respondent stated that other appointeeship services charge a lot more.

Respondents were then asked if they agreed or disagreed with the Council applying an appointeeship charge for all customers who are under Section 117 of the Mental Health Act 1983, where the Section 117 doesn't apply. For example, the mental health element of support is free but if a customer is having personal care support which is classed as a social care need then a charge will be applied. Most respondents (41.0%) disagreed with this proposal, with 30.5% agreeing.



When asked why, a number of respondents talked about lack of fairness in the context of increasing charges for 'vulnerable people'. However, on the reverse, a number of people thought it was fair to apply a charge for all social care needs. A common theme centred around the practicality and legitimacy of making a distinction between personal care and mental health for people with mental health issues. Although when analysing the comments to this question there appeared to be some confusion by some respondents about this question as it would appear that some people did not understand what they were being asked.

A relatively small number of additional comments were made about the Appointeeship service proposals. These included reinforcement of the respondents' sense of unfairness at charging more to 'vulnerable people'. There were a few comments on the consultation process including structure of questions and amount of available information.

Event Feedback

During the consultation public events were held in Towcester, Corby and Northampton, including an event run by the Learning Disability Partnership Board, plus the Council's 2018-19 budget consultation phase 1 events. Feedback from these events is summarised as follows:

1: Fairer Contributions proposals

In relation to fairer contributions, the most common theme centred around the fairness of the proposals in terms of increasing contributions for vulnerable and disabled people. One person said this will affect people with the least amount of money and highest needs. This also included strong concerns voiced around disabled and vulnerable people being 'the easiest target' (for raising additional funds) and may even increase their needs. A number of people thought the money should be found elsewhere including efficiency savings from within the Council, Council Tax and greater pressure on Government with the support of the local community, in lobbying local MPs for example.

There were a number of comments around the assessment process in terms of justifying of a new assessment, duplication and support for service users with the assessment process. One person asked if Financial Assessment Officers have worked with people with learning disabilities before and will they know the communication barriers. Similarly a number of general comments were strongly voiced around whether people making decisions could properly understand and appreciate the needs of a disabled person.

2: Assistive Technology proposals

There was only a small number of comments about the Assistive Technology proposals during the public consultation events. There was not one overriding theme, however, a couple of people reiterated the view that the money should be sought elsewhere and that introducing a cost would create more bureaucracy. One person pointed out that using Assistive Technology already saves money and introducing a charge would risk deterring people from the take-up of Assistive Technology. One person also stated that Assistive Technology was a disability related expenditure.

3: Appointee Service proposals

There was also a relatively small number of comments specifically about the Appointee Service proposals during the public consultation events. A number of people commented on affordability and size of the increase (particularly to £12.50). Some people asked what the additional benefit/level of service would be for the extra contribution.

There was some concern raised around how accurately the decisions could be made on the basis of second hand feedback and how accurately the strength of emotion would be communicated. One person said how they wanted the decision makers to understand the depth of emotion as they were not at the meeting and could not hear the passion coming from the attendees.

Other general feedback included one person raising an issue of Direct Payments not increasing with no uplift since 2006; whilst another said they thought the proposals were reasonable provided the Council ensures people can afford to contribute the extra amount.

Written Responses

In addition to respondents completing the questionnaire, 9 respondents chose to write to us directly with their comments. Two thirds of the 9 email/letter respondents were from unpaid carers, plus one Parish Council and two who did not say. The common theme centred around the potential impact of greater contributions on the 'most vulnerable in society', with concerns about families/unpaid carers going into crisis and deterioration of quality of life. One

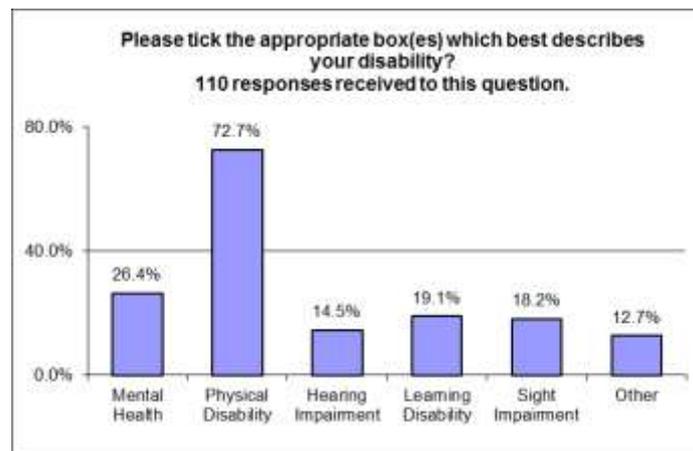
respondent was concerned about the impact on individuals who live and are looked after by parents at home and the inclusiveness of the consultation process.

Equalities Monitoring Statistics Summary

Equalities monitoring questions were included with each questionnaire. Not all respondents chose to complete this section of the questionnaire.

From the available completed responses, it can be ascertained that the majority of respondents were female (56.2%), with most of the respondents aged between 50 to 74 years (57.1%).

Just under half (48.4%) of respondents identified themselves as disabled, with physical disability being highlighted as the common disability (72.7%).



The most common religion identified was Christian at 56.0% with 25.9% of participants choosing 'None'. Predominantly respondents were White British 85.3%, with 10.1% of respondents preferring not to say. A total of 77.5% respondents said they were heterosexual, with 20.0% preferring not to say. 49.3% of respondents said they were married.

Appendix

- Standard consultation questionnaire
- Standard consultation supporting information document
- Easy read consultation questionnaire
- Easy read consultation supporting information document

