

Cheshire West & Chester Council

Adult Social Care Non Residential
Charging Policy Consultation



Consultation Report

November 2020



Cheshire West
and Chester

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Introduction

Background

The Adult Social Care Non-Residential Charging Policy describes how the Council assesses service users' finances, to find out how much, if anything, they should be contributing towards the cost of their care. The aim of this policy is to provide a consistent and fair framework for charging service users who receive care and support, following an assessment of their individual needs and financial circumstances.

This consultation sought views on proposed changes to the way Cheshire West and Chester Council charge for care and support services, such as care received at home or within an extra care or shared lives facility, Council transport and support to manage finances provided by the Council.

How the consultation ran

The consultation took place over a 12 week period, which ran from 27 July to 18 October 2020.

A wide range of stakeholders were invited to take part including service users, carers, providers, professionals and partners. A detailed communication and engagement plan was used to encourage as many people as possible to share their views. The plan can be found in the appendix on page 18.

Consultation packs were sent to service users currently in receipt of non-residential adult social care services, including a consultation document, questionnaire and prepaid reply envelope. For wider stakeholders the consultation document and questionnaire were available on-line and in hardcopy on request. Easy read versions of the consultation document and questionnaire were also available online and on request.

Due to COVID-19 restrictions face to face engagement was not possible. However respondents had the option to telephone the Council to discuss proposals if preferred. To ensure the consultation was fully inclusive, telephone interviews were also conducted with a sample of service users who were identified as lacking capacity. For the purpose of these interviews the standard questionnaire was adapted to enable service users to have the option of only needing to answer the sections which were relevant to them. However, they still had the option of completing all sections if they wanted to.

Response to the consultation

- 400 respondents completed a questionnaire (372 on paper, 28 online)
- 30 respondents took part in telephone interviews
- One email response was received from Disability Positive. Their comments on the proposals have been summarised within the main finding of this report and their full response has been included in the appendix at the end of the report
- The highest response (46%) was from service users who are currently charged for a non-residential service.
- Just under half of respondents (44%) use the Care at Home service
- Three quarters of respondents (75%) said they had a long-term illness, health issue or disability.

Key Messages

Respondents were asked to what extent they agreed or disagreed with proposals relating to charges for six non-residential care service areas, as outlined in the proposed Charging Policy (details of each proposal can be found in the main findings section of this report).

- Overall, respondents were more likely to agree, than disagree with almost all of the proposals relating to the proposed changes to the non-residential Charging Policy.
- However views were mixed, with the level of agreement ranging from 68% of respondents to 23% of respondents across all the proposals.

Respondents were also invited to give comments on each of the proposals. Key themes that emerged across all the proposals included:

- **Additional charges** - Many people were against charges being incurred for using the Money Management service. Respondents were also concerned with the proposed weekly charge for service users who have a capital in excess of £1000, as they felt the threshold was too low.
- **Giving one weeks' notice to cancel a call or service** – Service users had concerns over this proposal which related to a number of service areas, as they felt it was unfair for people to be charged if they were unable to give one weeks' notice. It was felt that this proposal needed to be more flexible and the reason for cancellation taken into account, as people may become ill suddenly, or an emergency situation may arise when they are hospitalised.

The key messages from each of the service areas are summarised below.

Extra Care Housing

- Respondents were more likely to agree than disagree with the proposals for Extra Care Housing
- **Proposal 1b** had the highest level of agreement, with half of all respondents agreeing with this proposed change to how service users will be charged
- The majority of respondents who commented about the proposed changes to Extra Care Housing felt that families should not face a charge if they need to cancel their care due to the service user being ill or hospitalised.

Day Care

- Respondents were more likely to agree than disagree with the proposals for Day Care
- The highest level of agreement was with **proposal 2b**, with half of the respondents agreeing to this proposal related to day care allocation
- The majority of people who commented about Day Care felt there should be an element of flexibility with the one-week notice period and it should take into account the reason for the cancellation.

Care at home and supported living

- Respondents were more likely to agree than disagree with the proposals for Care at home and supported living
- The highest level of agreement was with **proposal 3a**, with nearly two thirds of respondents agreeing
- The majority of comments for Care at home and supported living were related to the one-week notice period for cancelling a care call or a care service and the charge associated with this. As with Day Care, people felt there needed to be more flexibility and emergency situations should be taken into account.

Transport

- Respondents were more likely to agree than disagree with the proposals for Transport
- There were similar levels of agreement between **proposals 4a (47%) and 4b (48%)**, with a lower agreement for proposal **4c (38%)**
- Respondents comments reflected overall agreement amongst the majority of respondents that there should be a level of flexibility within the one-week notice period, which should take into account the reason for the cancellation.

Shared Lives

- Respondents were more likely to agree than disagree with the proposals for Shared Lives
- The highest level of agreement was with **proposal 5c**, with over two thirds agreeing to the proposal that service users pay towards the cost of food and utilities
- There was little consistency in the comments for Shared Lives, but some people were concerned that Shared Lives Carers may be financially disadvantaged with what is being proposed.

Money Management

- Respondents were less likely to agree than disagree with the proposals for Money Management
- Just under a quarter of respondents agreed with the proposals for the Money Management Services
- The majority of people who commented were against any additional charges and were concerned that the charges suggested were unfair and excessive
- Many respondents felt the threshold of £1000 was too low, it was suggested that it would be fairer to raise the threshold, or to look at people's personal circumstances to work out how much they are charged.

Main findings

This section details the results of the consultation in full.

Survey respondents were asked to what extent they agreed or disagreed with proposals relating to charges for six non-residential care service areas, as outlined in the proposed Charging Policy. They were also invited to make comments on each of the proposals. Please note due to rounding and multi-response questions, percentages do not always equal 100%.

The policy proposes changes to charges for the following non-residential services:

- Extra Care Housing
- Day Care
- Care at Home and Supported Living
- Transport
- Shared Lives
- Money Management.

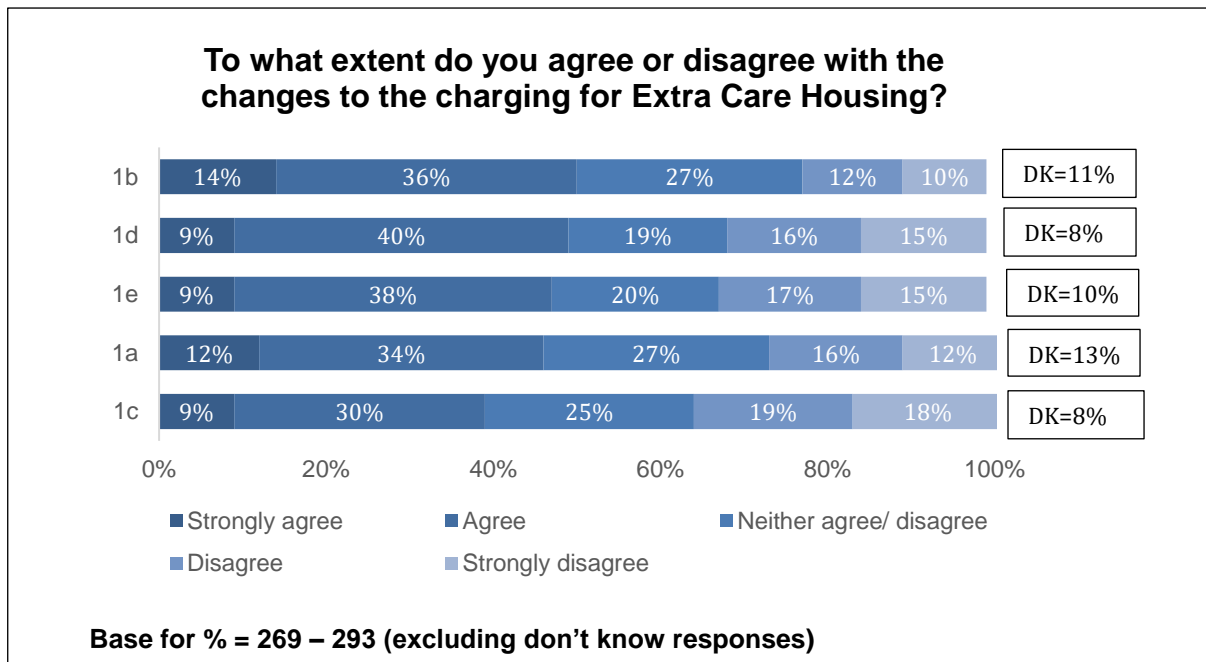
Section 1: Extra Care Housing

The policy proposes the following key changes to how we charge for services in Extra Care Housing:

- 1a Changes to how charging for emergency response services will be applied to service users **with** Care Act eligible care needs, as the financial assessment will calculate the charge applied for all services reflected in the care and support plan, inclusive of the charge for the emergency response services.
- 1b Service users will be charged for the total amount of care hours agreed in the care and support plan, instead of the midpoint of their assessed band.
- 1c The full cost of care agreed in the care and support plan will be charged for if the care call is cancelled or ended earlier than planned, unless one week's prior notice is given to the care provider.
- 1d Those receiving services arranged by the Council to meet Care Act eligible needs will be required to give a minimum of one week's notice to cancel or suspend a service, otherwise the full financial charge based on the financial assessment will still apply.
- 1e The removal of free support which has previously been provided for up to 6 weeks for those who need additional support on a temporary basis. Charges will be applied to these services based on a financial assessment.

Respondents were asked to what extent they agreed or disagreed with the proposed changes to the charges for Extra Care Housing.

Graph 1: Level of agreement with proposed changes to charges for Extra Care Housing.



- The highest level of agreement was with **proposal 1b** (50%), with 22 percent disagreeing with this proposal.
- The lowest level of agreement was with **proposal 1c** (39%), with 37 percent disagreeing with this proposal.

Differences by type of respondent

Of those who completed the questionnaire, 49 out of 430 respondents receive Extra Care Housing support.

Those who receive support from Extra Care Housing were more likely to agree with the proposals for this service, compared with **all respondents**.

Please note: The differences in the findings are not statistically significant due to the small number of people who receive the service.

Respondents were also invited to make any further comments relating to the proposals for Extra Care Housing. Key themes from the comments received across survey responses, telephone interviews and email responses are summarised in the table below.

Respondent comments

Proposal	Comments
1a - Changes to how charging for emergency response services will be applied to service users with Care Act eligible care needs, as the financial assessment will calculate the charge applied for all services reflected in the care and	<ul style="list-style-type: none"> • A small number of people commented that it was unfair for service users to be charged for emergency support and for some it would mean paying for a service they may never use

<p>support plan, inclusive of the charge for the emergency response services.</p>	<ul style="list-style-type: none"> • A small number of respondents were concerned that people may not use their alarm in an emergency for fear of being charged.
<p>1b - Service users will be charged for the total amount of care hours agreed in the care and support plan, instead of the midpoint of their assessed band.</p>	<ul style="list-style-type: none"> • A small number of respondents were unsure what was meant by the midpoint of the assessed band and there was no point of comparison as to what this would mean for a service user. • It was felt that the benefit of extra care is the flexibility in the care provided and that flexibility will be affected if service users are charged for the total amount of care.
<p>1c - The full cost of care agreed in the care and support plan will be charged for if the care call is cancelled or ended earlier than planned, unless one week's prior notice is given to the care provider.</p>	<ul style="list-style-type: none"> • The majority of respondents who commented felt that service users or their families should not face a charge if they need to cancel their care due to being hospitalised or if a service user dies. • Some respondents felt that the notice period for cancelling a call should be less than one week, as sometimes calls need to be cancelled at short notice due to an emergency, such as being taken ill or having to go into hospital unexpectedly. (These views were mirrored in some of the comments relating to proposal 1d)
<p>1d - Those receiving services arranged by the Council to meet Care Act eligible needs will be required to give a minimum of one week's notice to cancel or suspend a service, otherwise the full financial charge based on the financial assessment will still apply.</p>	<ul style="list-style-type: none"> • Many of the comments relating to this proposal were similar to those made for proposal 1c, with respondents emphasising that it is not always possible to give a weeks' notice • A couple of respondents mentioned that two days or even 24 hours' notice should be sufficient time to cancel a service • It was also mentioned that people who have complex needs cannot always provide one weeks' notice and that the charging should be fair for all clients
<p>1e - The removal of free support which has previously been provided for up to 6 weeks for those who need additional support on a temporary basis. Charges will be applied to these services based on a financial assessment.</p>	<p>Please note: Only a small number of people commented on this proposal.</p> <ul style="list-style-type: none"> • There was slight concern that if temporary care was required service users may refuse to leave hospital if they have to pay, which would lead to bed blocking • It was felt that it would be fairer to ask for a contribution towards the costs • Some suggested any temporary support should be an extension of NHS provision

	<ul style="list-style-type: none"> • There was concern about whether the removal of free support meant an end to reablement, as this was seen as a preventative service that may reduce costs and care needs for the service user, by enabling them to get back to a level of independence
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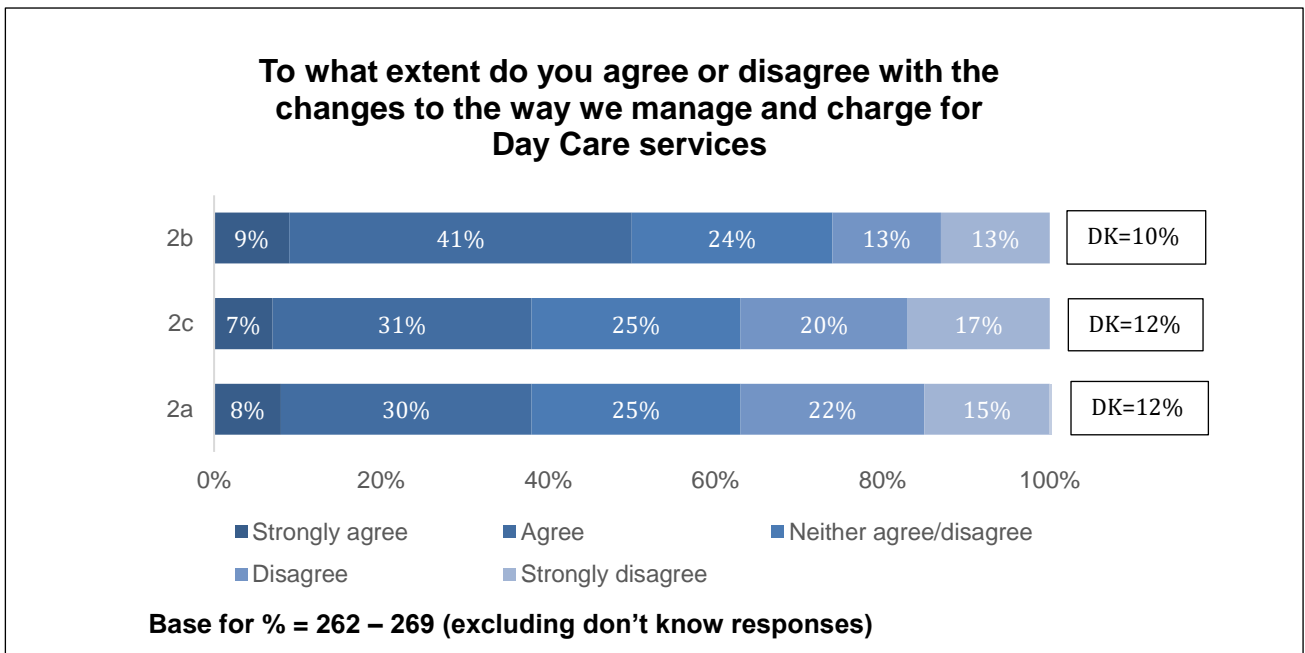
Section 2: Day Care

The policy proposes key changes to how we manage Day Care provision and how we charge for day services for service users with Care Act eligible needs, including:

- 2a To apply the full assessed financial charge for Day Care for up to 4 weeks, if a service user **with** Care Act eligible needs does not attend, or does not give 1 week's prior notice.
- 2b Day Care allocation will be cancelled if a service user is unable to attend for 4 consecutive weeks. In such circumstances, an assessment will be required to ensure that a service user's needs are being met and that risk to the service user is minimal.
- 2c One weeks' prior notice is required if a service user is unable to attend Day Care. If 1 week's prior notice is not given, the full assessed financial charge for that week will still apply.
- 2d No charge will be applied if the day centre is closed, for example on a bank holiday (no change).

Respondents were asked to what extent they agreed or disagreed with the proposed changes to charges for Day Care services.

Graph 2: Level of agreement with the proposed changes to the charging and management of Day Care services



- The highest level of agreement was with **proposal 2b**, with half of the respondents agreeing, and 26 percent disagreeing, as illustrated in the graph above.

- Over a third (38%) were in agreement with **proposals 2a and 2b**, with 37 percent disagreeing with both of these proposals.
- Across all the proposals for Day Care, a quarter of respondents neither agreed nor disagreed with the proposed changes to charges.

Differences by type of respondent

Of those who completed the questionnaire, 65 out of 430 respondents receive Day Care services.

Those who receive Day Care services were more likely to agree with proposals 2a and 2c, compared with **all respondents**, but less likely to agree with proposal 2b.

Please note: The differences in the findings are not statistically significant, due to the small number of people who receive the service.

Respondents were also invited to make any further comments relating to the proposals for Day Care. Key themes from the comments received across survey responses, telephone interviews and email responses are summarised in the table below.

Respondent comments

Proposal	Comments
<p>2a - To apply the full assessed financial charge for Day Care for up to 4 weeks, if a service user with Care Act eligible needs does not attend, or does not give 1 week's prior notice.</p> <p>2b - Day Care allocation will be cancelled if a service user is unable to attend for 4 consecutive weeks. In such circumstances, an assessment will be required to ensure that a service user's needs are being met and that risk to the service user is minimal.</p> <p>2c - One weeks' prior notice is required if a service user is unable to attend Day Care. If 1 week's prior notice is not given, the full assessed financial charge for that week will still apply.</p>	<p>There was little difference in the comments relating to each of the Day Care proposals, therefore these have been summarised together.</p> <ul style="list-style-type: none"> • The majority of people who commented felt there should be an element of flexibility within the notice period and that it should take into account the reason for the cancellation • Some respondents felt this should exclude periods when a service user is suddenly taken ill or hospitalised • Some felt the penalty for non-attendance at Day Care should be a percentage of the charge and not 100 percent • A few comments suggested that it would be unethical to charge for a service that isn't being used • A couple of respondents commented that if the provider cancels the service then no charge should be made

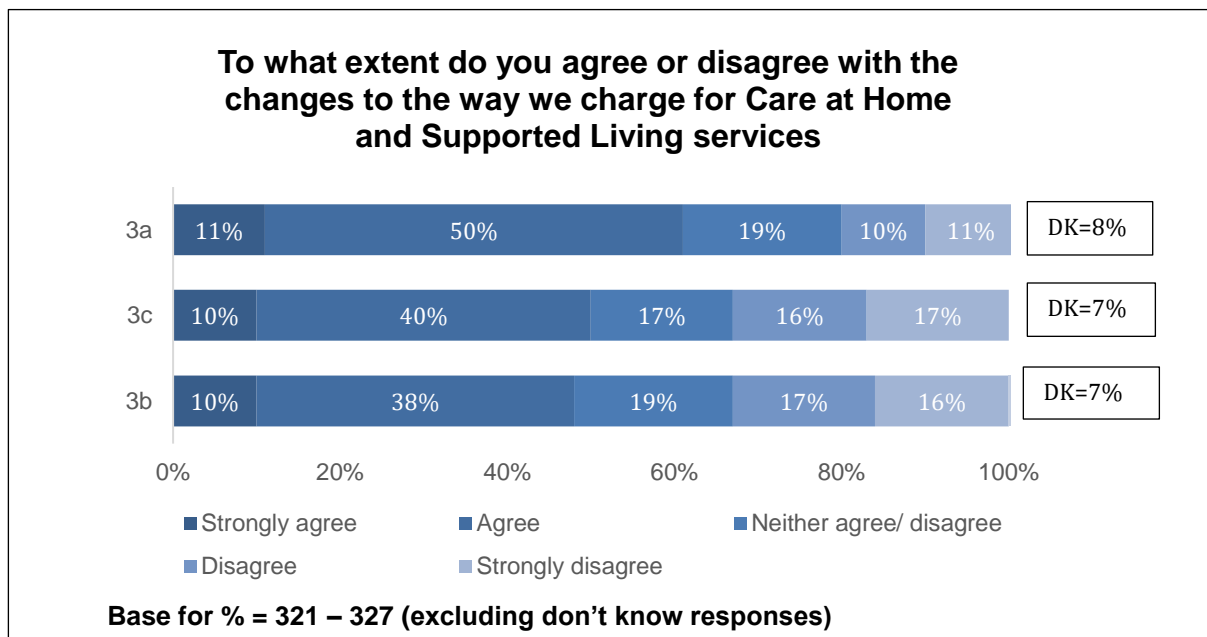
Section 3: Care at Home and Supported Living

The policy proposes key changes to how we charge for Care at Home and Supported Living for service users with Care Act eligible needs, including:

- 3a Service users **with** Care Act eligible care needs will be subject to a financial assessment. The financial assessment will determine how much the service user will contribute towards the cost of their care. Charges will be based on the number of hours agreed in the care plan, unless a service user gives one week's prior notice of any changes to requirements.
- 3b If a service user cancels a care call, or ends their care call earlier than planned, without giving one week's prior notice, the full assessed financial charge will still apply.
- 3c If a service user cancels or suspends their care service without giving one week's prior notice, the full assessed financial charge will still apply.
- 3d If a carer does not turn up as planned the assessed financial charge will not be applied (no change).

Respondents were asked to what extent they agreed or disagreed with the proposed changes to charges for Care at Home and Supported Living services.

Graph 3: Level of agreement with the proposed changes to the charging for Care at Home and Supported Living services



- The highest level of agreement was with **proposal 3a** (61%), as shown in the graph above, with 21 percent disagreeing with this proposal.
- Half of all respondents agreed with **proposals 3b and 3c**, with 33 percent of respondents disagreeing with both of these proposals.

Differences by type of respondent

Of those who completed the questionnaire, 139 out of 430 respondents receive Care at Home and Supported Living services.

There was no difference in the level of agreement from those who receive Care at Home and Supported Living services, compared with **all respondents**.

Respondents were also invited to make any further comments relating to the proposals for Care at Home and Supported Living. Key themes from the comments received across survey responses, telephone interviews and email responses are summarised in the table below.

Respondent comments

Proposal	Comments
3a - Service users with Care Act eligible care needs will be subject to a financial assessment. The financial assessment will determine how much the service user will contribute towards the cost of their care. Charges will be based on the number of hours agreed in the care plan, unless a service user gives one week's prior notice of any changes to requirements.	<ul style="list-style-type: none">• A small number of people felt service users should only be charged for the care they receive and sometimes this is less than stated in the care plan• A few people thought that unforeseen circumstances would need to be taken into account, such as illness, hospitalisation or if their financial situation suddenly changes• There was concern from some respondents that the financial assessment doesn't always give a true picture of the ability to pay
3b - If a service user cancels a care call, or ends their care call earlier than planned, without giving one week's prior notice, the full assessed financial charge will still apply. 3c - If a service user cancels or suspends their care service without giving one week's prior notice, the full assessed financial charge will still apply.	<p>The comments across proposals 3b and 3c were very similar so these have been grouped together below.</p> <ul style="list-style-type: none">• The majority of people who commented on proposal 3b and 3c felt the one week notice period should be flexible and take into account emergency situations• Many people were keen to stress that service users or their families should not be charged if a service user is hospitalised or dies.• Many people commented that it is often impossible to give a week's notice, it was suggested by some respondents that 24 hours would be a long enough notice period.• Some respondents mentioned that if their care takes less time or a carer finishes their tasks early, service users shouldn't have to pay for this.

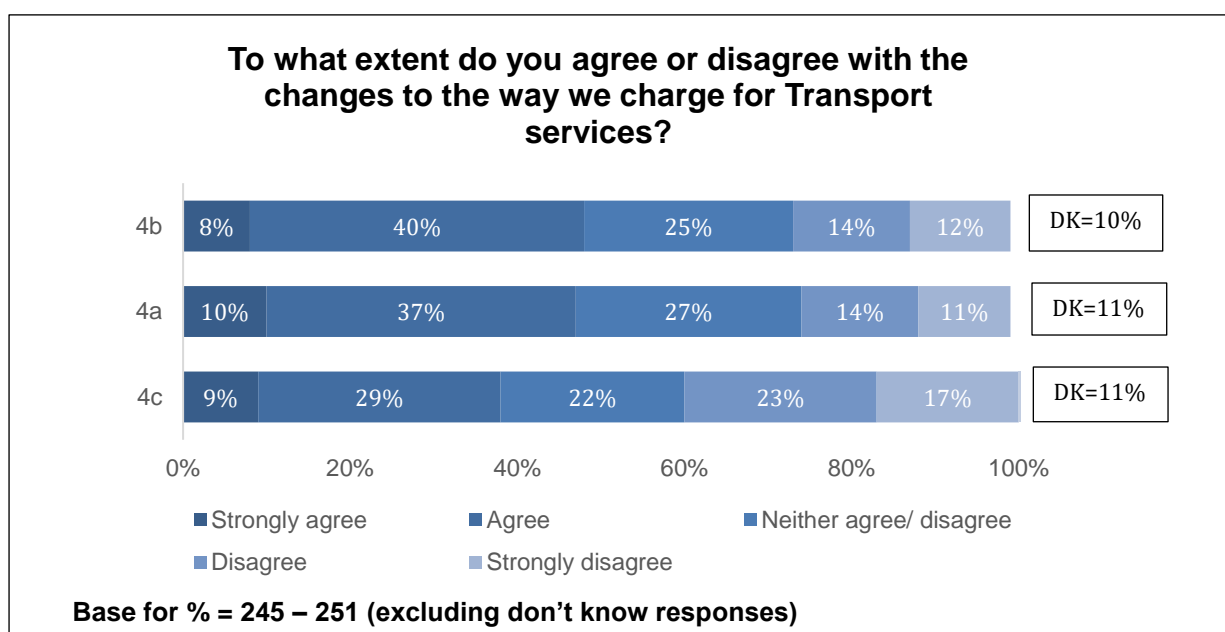
Section 4: Transport

The policy proposes key changes to how we charge for Transport including:

- 4a Service users with transport shown as a Care Act eligible care need will be subject to a charge for the transport services provided. A financial assessment will be carried out to determine the charge for transport.
- 4b Service users for whom the Council provides, or commissions transport will be subject to a charge for the transport service provided. These charges will be subject to a financial assessment.
- 4c One week's prior notice will be required to cancel a journey. If notice is not provided the service user will be charged the full assessed amount for transport.
- 4d Where the Council signposts service users to community transport or a public bus, when other personal forms of transport are not available, individuals will continue to be charged a fare which they are required to pay directly to the transport provider. These charges are not subject to a financial assessment (no change).

Respondents were asked to what extent they agreed or disagreed with the proposed changes to the charges for Transport services.

Graph 4: Level of agreement with the proposed changes to charges for Transport services



- There was a similar level of agreement with **proposal 4b** (48%) and **proposal 4a** (47%), as shown in the graph above, with a quarter of respondents disagreeing with both of these proposals.
- The lowest level of agreement was with **proposal 4c** (38%), with 40 percent of respondents disagreeing with this proposal.

Differences by type of respondent

Of those who completed the questionnaire, 32 out of 430 respondents receive Transport services.

There was no difference in the level of agreement for those who receive Transport services for proposals 4a and 4c compared with **all respondents**, however they were more likely to agree with proposal 4b.

Please note: The differences in the findings are not statistically significant, due to the small number of people who use the service.

Respondents were also invited to make any further comments relating to the proposals for Transport. Key themes from the comments received across survey responses, telephone interviews and email responses are summarised in the table below.

Respondent comments

Proposal	Comments
4a - Service users with transport shown as a Care Act eligible care need will be subject to a charge for the transport services provided. A financial assessment will be carried out to determine the charge for transport. 4b - Service users for whom the Council provides, or commissions transport will be subject to a charge for the transport service provided. These charges will be subject to a financial assessment.	<p>The majority of comments relating to Transport services were concerning proposal 4c. Similar responses were given regarding proposals 4a and 4b, so these have been grouped together below.</p> <ul style="list-style-type: none">• A number of people felt that service users should not face an additional charge for transport if they have a Care Act eligible need, which should be detailed in their care and support plan.• It was suggested by a small number of respondents that everyone should pay the same charge for transport instead of being financially assessed.
4c - One week's prior notice will be required to cancel a journey. If notice is not provided the service user will be charged the full assessed amount for transport.	<ul style="list-style-type: none">• There was overall agreement amongst the majority of respondents that there should be a level of flexibility within the notice period, which should take into account the reason for the cancellation• Some respondents were concerned about service users who were hospitalised and felt they shouldn't be charged if this was the case.

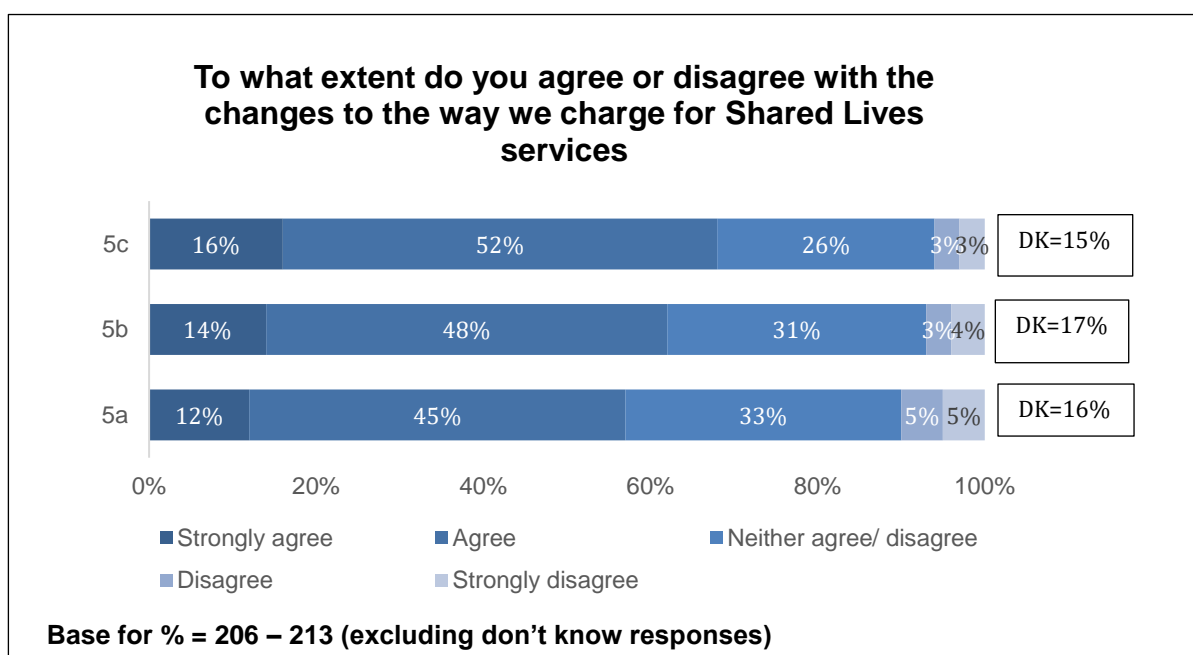
Section 5: Shared Lives Services

The policy proposes key changes to how we manage and charge for Shared Lives placements for service users with Care Act eligible needs including:

- 5a Where a service user **with** Care Act eligible needs lives permanently in a Shared Lives placement, steps will be taken to secure a tenancy agreement with the Shared Lives carer.
- 5b As a result housing costs will be claimed by the Shared Lives carer through benefits such as Housing Benefit or Universal Credit. The Shared Lives carer will not have the rental income they receive from Housing Benefit or Universal Credit deducted from their payment for care services.
- 5c Service users living in permanent Shared Lives placements will need to contribute towards the cost of food and utilities. Any specialist requirements will be identified in the care and support plan. The amount to be contributed will be determined following a financial assessment but will be within an agreed budget.

Respondents were asked to what extent they agreed or disagreed with the proposed changes to charges for Shared Lives services.

Graph 5: Level of agreement with the proposed changes to the charges for Shared Lives services.



- The highest level of agreement was with **proposal 5c** (68%), as shown in the graph above, with 6 percent of respondents disagreeing with this proposal.
- The lowest level of agreement was with **proposal 5a** (57%), with 10 percent of respondents disagreeing with this proposal.
- A high percentage of respondents, a quarter to a third, neither agreed nor disagreed with the proposals.

Differences by type of respondent

Of those who completed the questionnaire, 13 out of 430 respondents receive support from the Shared Lives service.

Those who receive support from the Shared Lives service were more likely to agree with all the proposals for this service, compared with **all respondents**.

Please note: The differences in the findings are not statistically significant, due to the small number of people using the service.

Respondents were also invited to make any further comments relating to the proposals for Shared Lives. Key themes from the comments received across survey responses, telephone interviews and email responses are summarised in the table below.

Respondent comments

Proposal	Comments
5a - Where a service user with Care Act eligible needs lives permanently in a Shared Lives placement, steps will be taken to secure a tenancy agreement with the Shared Lives carer.	<ul style="list-style-type: none">• There was concern that if a person was unhappy in the tenancy they would not have the freedom to move elsewhere• It was suggested that all other residential options should also be considered
5b - As a result housing costs will be claimed by the Shared Lives carer through benefits such as Housing Benefit or Universal Credit. The Shared Lives carer will not have the rental income they receive from Housing Benefit or Universal Credit deducted from their payment for care services.	<ul style="list-style-type: none">• There was some concern that Shared Lives Carers would be financially disadvantaged with this proposal and some people emphasised that they didn't want this to happen.
5c - Service users living in permanent Shared Lives placements will need to contribute towards the cost of food and utilities. Any specialist requirements will be identified in the care and support plan. The amount to be contributed will be determined following a financial assessment but will be within an agreed budget.	<ul style="list-style-type: none">• There was concern about how much money would be taken off people towards the cost of food and utilities• There was a suggestion that there should be a reduced rate for some of the costs if person is in hospital

Section 6: Managing Your Money

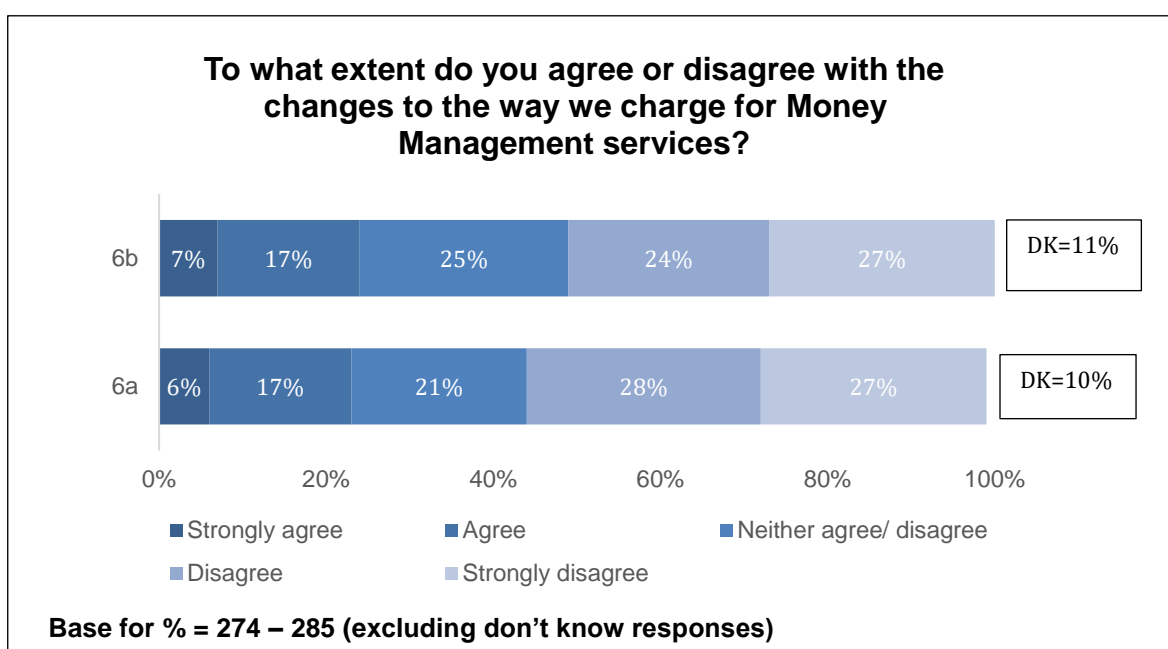
The policy proposes the implementation of a charge to assist service users to manage their financial affairs. The key changes include:

6a To introduce a weekly charge to act as an Appointee (provide a money management service) to services users who have capital in excess of £1000.

6b The charge for those living in residential care will be £4.50 per week whilst the charge for those living in the community will be £9 per week. The difference in the charges relates directly to the volume of work required for the two types of appointeeship (money management).

Respondents were asked to what extent they agreed or disagreed with the proposed changes to the charges for Money Management services.

Graph 6: Level of agreement with the proposed changes to the charges for Money Management services



- There was low level agreement with both Money Management proposals (24% and 23% respectively), as shown in the graph above.
- Over half of all respondents disagreed with the proposed changes to charging for Money Management services.
- Around a quarter of respondents neither agreed nor disagreed with the proposals.

Differences by type of respondent

Of those who completed the questionnaire, 7 out of 430 respondents receive a Money Management service

Those who receive a Money Management service were more likely to agree with the proposals for this service, compared with **all respondents**.

Please note: The differences in the finding are not statistically significant, due to the small numbers of people who use the service.

Respondents were also invited to make any further comments relating to the proposals for Money Management. Key themes from the comments received across survey responses, telephone interviews and email responses are summarised in the table below.

Respondent comments

Proposal	Comments
<p>6a - To introduce a weekly charge to act as an Appointee (provide a money management service) to services users who have capital in excess of £1000.</p> <p>6b - The charge for those living in residential care will be £4.50 per week whilst the charge for those living in the community will be £9 per week. The difference in the charges relates directly to the volume of work required for the two types of appointeeship (money management).</p>	<p>Many of the themes emerging from the comments about money management related to proposals 6a and 6b, therefore these have been summarised together below.</p> <ul style="list-style-type: none"> • The majority of people who commented were against additional charges and felt that the charges suggested were unfair and excessive. • Many respondents felt the threshold of £1000 was too low and suggested that it would be fairer to raise the threshold, or to look at people's personal circumstances to work out how much they are charged. • Some people commented that they, family members or other agencies would manage their money.

Additional Comments

Respondents were also invited to make any additional comments relating to the proposed Non-residential Charging Policy. The key themes from the additional comments are summarised below.

- Many respondents were concerned that the proposed charges were unfair and inflexible.
- There was some concern that service users are vulnerable and could be worried if faced with additional charges or being charged for services when they are in hospital.
- Many respondents again emphasised their concern about service users being charged if they are unable to give one weeks' notice to cancel a service.

Next steps

The consultation findings will be used to inform the development of the proposed Adult Social Care Non-Residential Charging Policy. The policy will be reviewed by the Council's Cabinet alongside the findings of this consultation in January 2021, to make a decision about whether to implement the policy. If the policy is agreed it will be implemented from April 2021. The results from the consultation will be available on the Council's website in January 2021.

Appendix

Consultation methods, Engagement and Distribution

Promotion and distribution:

The consultation was promoted widely throughout the consultation period to encourage people to take part and share their views. This included:

- Invitation letters sent directly to all non-residential service users
- Invitations cascaded through key partners, providers, groups and networks
- Attendance at team meetings to promote the consultation
- Signposting from the Council website
- Social media posts
- A press release
- A Member briefing note
- Staff 'Keeping you informed' emails and 'Keep in touch' messages
- Signposting from iWest (Council intranet)

The following table highlights the partners, providers, groups and networks invited to take part and cascade the consultation invitation.

Stakeholder
Adults Services
Finance Services
Domiciliary Care Providers
VIVO
Commissioning (adults)
Commissioning (children)
Learning Disability Partnership Board
Alzheimers Disease Society
Cheshire Advocacy
Cheshire Asian and Minority Communities Council
Children Halton and Warrington Race and Equality Centre
Cheshire Voluntary Action

Deafness Support Network
IRIS Vision Centre
Carers Federation
Cheshire Centre for Independent Living (CCIL)
Age UK
DIAL House
Warrington Carers
Citizens Advice Bureau
MIND
Information Advice and Support Services (IASS)
Public Health Service
Children and Families Services
Cheshire West and Chester Equality and Diversity Team
Mental Health Partnership Board
NHS Organisations
Health and Wellbeing Board
Adult Social Care and Health Stakeholder Group
Transport Providers
Extra Care Housing Providers

Consultation methods

Consultation method	Description
Consultation booklet and questionnaire	<p>Booklet setting out the proposed changes to the way the Council charges for different services and accompanying questionnaire to feedback views on proposals.</p> <p>Those service users who currently receive a non-residential service were sent a consultation booklet and questionnaire to their home address.</p> <p>Hardcopies were also made available for anyone on request from the Council's Contact Centre.</p>
Online	The consultation was also made available to access online, including online versions of the consultation booklet and questionnaire.
Easy read	The consultation was also made available in easy read format both online and in hardcopy on request.
Telephone interviews	Due to COVID-19 restrictions it was not possible to carry out face to face consultation. As an alternative, telephone interviews were undertaken with a sample of service users who were identified as lacking capacity.
Email and letter	A dedicated email and postal address was set up to enable people to submit their views in writing.
Telephone	The Council's Contact Centre telephone number was made available for people to request a paper copy of the survey, speak to someone to share their views, or ask questions about the consultation.

Profile of respondents

Table 1: Type of respondent

Type of respondent	Number of respondents	Percentage of respondents
Service user who is charged	159	46%
Service user who is not charged	51	15%
Unpaid carer	102	29%
Paid carer	16	5%
Resident of Cheshire West	44	13%
An employee of Cheshire West and Chester Council	11	3%
An elected Member	1	0%
A Town or Parish Councillor	1	0%
A representative of a voluntary organisation	4	1%
An organisation providing care	9	3%
Other	12	3%
Base for % = 349		

Table 2: Services received

Type of service	Number of respondents	Percentage of respondents
Care at home	139	44%
Supported housing	89	28%
Extra care housing	41	13%
Shared Lives	13	4%
Day Care	65	20%
Transport	32	10%
Respite	8	3%

Telecare	18	6%
Direct Payments	64	20%
Maintenance	1	0%
Money Management	7	2%
Joint Funded	5	2%
Base for % = 318		

Table 3: Gender profile of respondents

Gender	Number of respondents	Percentage of respondents
Male	138	37%
Female	224	60%
Prefer not to say	9	2%
Base for % = 371		

Table 4: Age profile of respondents

Age group	Number of respondents	Percentage of respondents
Under 16	0	0%
16-25	12	3%
26-34	19	5%
35-44	36	10%
45-54	0	0%
55-64	119	32%
65-74	66	18%
75 and over	109	29%
Prefer not to say		
Base for % = 371		

Disability

Three quarters of respondents (75%) said they had a long term illness, health issue or disability that limits their daily activities or the work they do.

Ethnicity

The majority of respondents (95%) identified as 'White British'.

Religion

Over half of respondents (54%) said they were 'Christian', 19% said they followed no religion and 10% said they preferred not to say.

Table 5: Sexual Orientation of respondents

Sexual orientation	Number of respondents	Percentage of respondents
Heterosexual/straight	290	83%
Gay/Lesbian	7	2%
Bisexual	2	1%
Other	3	1%
Prefer not to say	49	14%
Base for % = 351		

Email response from Disability Positive

Disability Positive Cheshire West and Chester Council Social Care Charging Policy 2020 Consultation response October 2020

About us

We are Disability Positive.

Disability Positive is the new name for Cheshire Centre for Independent Living (CCIL)
We are a charity based in Cheshire and work mostly in the North West.

We provide services, opportunities and a voice to people living with disability or long-term health conditions and their families.

We have services to help people with everyday life, being part of their local community and looking after their own wellbeing.

We can offer advice, help with practical tasks and advocate for people in lots of different situations.

We listen and share people's experiences to influence positive change in government policy. We know it matters, because we live with disability and long-term health conditions too.

Consultation Response Overview

We very much welcome the opportunity to contribute to this consultation.

We have set out our response with 6 broad recommendations under two key themes as well as specific responses to each of the changes currently proposed.

Theme 1: Social Care Charging

As a general principle, we are strongly against charging for social care when people have an assessed need. Doing so represents a tax on disability as well as an pg. 2 unfair burden on people who have to provide more information for financial assessments.

We believe that the NHS's 'need, not ability to pay' principle should be extended to social care and the service should be fully funded as part of a 'new social contract' between the citizen and the state (as recommended by the 2018 Darzi review of health and social care).

The Care Act 2014 states that direct payments are the preferred method of receiving social care because they provide choice and control. However, the Social Care Charging disincentivises direct payments by making it less costly to take care home based provision.

We do understand that councils look to find savings to manage the shortfall in social care funding, however this is not inevitable. Hammersmith and Fulham Council scrapped social care charging in 2014.

However, assuming Cheshire West and Chester Council does continue to charge;

Recommendation 1: The council should be to be clear about their reasons for social care charging, and;

Recommendation 2: The council should make sure that it minimises the overall impact of the current changes proposed by conducting a thorough impact assessment, as it is required to do under the Equality Act 2010 and the Public Sector Equality Duty. After the proposed changes

come into effect the council should monitor the numbers of people no longer using care services as a result of the changes.

The Independent Living Strategy Group (chaired by Baroness Jane Campbell) commissioned a study in 2018 which found that the majority of people are critical of the local charging policy in their area. Just under two thirds of people viewed their policy as poor or very poor in terms of fairness (64%) and approaching three quarters rated it as poor or very poor in terms of being easy to understand (71%).

It is also important to recognise that whilst the minimum income guarantee (MIG) is mentioned in the policy, being a disabled person is expensive. Disability related expenditure is difficult to understand in the way it is presented in the policy and not wide ranging enough.

Recommendation 3: The section on Disability Related Expenditure (DRE) gives more accurate examples of what constitutes DRE, and that it recognises that there are some things that cost more in everyday life for a disabled person that are not DRE.

At point 12.13 in the Social Care Charging Policy it states that income from earning does not form part of the assessment, but that income from various benefits does. Whilst we understand this distinction is part of the Care Act guidance, we question why this should be the case, and feel that this has the effect of penalising people who are not in work or who are not able to work, and further discriminates against people reliant on benefits. pg. 3

Theme 2: Communication about the policy

Recommendation 4:

It is important that the council communicates the policy clearly. We note that the council has produced an easy read version, but the main document is written in complex inaccessible government language.

We recommend the use of plain English so that the document is easy to refer to for people with differing levels of literacy, easy to understand and easy to explain.

We would also recommend taking care in the document to be clear who the document is for. If it is intended for the people using the services, it would be preferable to refer to 'you' rather than 'people' or 'service users'.

The consultation questionnaire uses a series of survey questions which do not give people a meaningful opportunity to respond to the changes. The survey asks 'To what extent do you agree with the changes' against each proposal, which is not easy to understand, particularly given the group most affected by the changes to the policy. In future it might be better to consider asking- 'How would this affect you?'.

Recommendation 5:

We would recommend a short-term dedicated helpline for people concerned or unclear about the changes when they come into force.

Recommendation 6:

The policy has a review date of October 2021 but makes no mention of the Covid- 19 pandemic. Given the unprecedented impact the pandemic has had on social care and disabled people, this feels a serious omission. In particular, the policy should seek to address the funding of PPE.

Responses to the changes proposed in this consultation

Proposal 1a

Changes to how charging for emergency response services will be applied

The council should clearly communicate this change

Proposal 1b

Service users will be charged for the total amount of care hours agreed in the care and support plan instead of the midpoint of their assessed band

It is very important that the impact of this proposal is properly assessed before implementation. Key questions we would raise are:

1. How many people will this change affect?

pg. 4

2. What is the average cost increase for people when the charge begins to reflect 'the true cost of care'?

Proposal 1c

If a Service user cancels (cuts short) a care call earlier than is planned, the full assessed charge will be applied unless one week's notice is given.

This change must be communicated clearly

Proposal 1d

Unless a minimum of one week's notice is given, service users will be charged for the total amount of hours agreed in their care and support plan

The requirement to give a week's notice or face a financial penalty is discriminatory. There are many reasons why there may be changes to a person's needs and plans, especially for disabled people.

We suggest instead that the financial penalty (i.e. the full charge unless a week's notice is given) is only used in exceptional circumstances, or that a 24 hour notice period is required instead to allow more flexibility.

Proposal 1e

The removal of free support which has previously been provided for up to 6 weeks for those who need additional support on a temporary basis

Whilst we understand that this change is being made to save money, we feel this change is unfair, particularly during the Covid 19 pandemic when there are likely to be many more instances of temporary support packages or temporary increases in support packages being needed.

Proposal 2a and 2b

To apply the full assessed financial charge to day care for up to 4 weeks if a service user does not attend and place will be cancelled

This change should be communicated clearly to service users to avoid any confusion

Proposal 2c

One week's notice is required if the service user is unable to attend day care.

If it is not, the full financial charge will apply.

As with proposal 1d, the requirement to give a week's notice or face a financial penalty is unfair. People's plans can change at short notice, but particularly for the people affected by this proposal. We would encourage the council only to apply this in exceptional circumstances or instead to considering requiring 24 hours notice. pg. 5

Proposal 2d

No charge will be applied if the centre is closed on a bank holiday

No comments on this proposal as no change is proposed

Proposal 3a

Service users with Care Act eligible needs will be subject to a financial assessment which will determine how much they will contribute. Charges will be based on numbers of hours agreed in the care plan unless the user gives one week's notice.

Again, as with proposal 1d and 2c, we think this change is unfair. Changes to plans happen often and may be particularly so for people who, for example, are autistic and those who have relapsing/remitting long term conditions. The care hours in question could be for activities, support to go shopping or similar and it is unreasonable to expect that plans may not change from time. We would again encourage the council only to apply this in exceptional circumstances or consider requiring 24 hours' notice to offer more flexibility.

Proposal 3b

If a service user cancels or ends their care call earlier than planned without giving one weeks' notice the full assessed charge will apply

We encourage the council to communicate this change clearly to avoid confusion, especially with relation to the potential review of needs that may happen as a result. As with the other proposals where one week's notice is introduced, we encourage the council only to apply this in exceptional circumstances The Care Act statutory guidance (2014) states that the council must 'be person-focused, reflecting the variety of care and caring journeys and the variety of options available to meet their needs.' Part of meeting this requirement is understanding that plans and needs change.

Proposal 3c

If a service user cancels or suspends their care service without giving one week's prior notice, the full assessed charge will still apply

As with proposal 3a, 1d and 2c, we have concerns about the application of a financial penalty unless 1 weeks' notice is given. We would again encourage the council only to apply this in exceptional circumstances or to consider asking for 24 hours' notice to provide more flexibility.

Proposal 3d

If a carer does not turn up as planned the assessed financial charge will not apply

We encourage the council to communicate this change clearly, particularly the requirement that the service user should tell the care provider and their social worker. pg. 6

Proposal 4a

Service users with transport as a Care Act eligible care need will be subject to a charge for the transport provided. A financial assessment will be carried out

We think the proposed change is unfair. Service users should not have to face an additional charge for using transport services when they have a Care Act eligible need and this need is detailed in their support plan. As detailed above, we considered such charges to represent a tax on disability. We are also concerned about the financial assessment to determine the charge, which adds additional burden and stress for users. We encourage the council to rethink this change.

Proposal 4b

Service users for whom the council commissions transport will be subject to a charge for the transport service provided

As with proposal 4a, we think the proposed change is unfair and the proposed requirement for financial assessment also adds additional stress and burden for the service user.

Proposal 4c

One weeks' prior notice will be required to cancel a journey. If notice is not provided the service user will be charged the full amount.

As with proposal 3a, 1d, 2c and 3c, we have concerns about the introduction of a financial penalty without one week's notice to cancel a journey. It is not unreasonable that people's plans may change at short notice, and particularly so for the people who use this service. We encourage the council only to apply this charge in exceptional circumstances or to considering requiring 24 hours' notice to offer more flexibility

Proposal 4d

Where the council signposts a service user to community transport or a public bus, individuals will continue to be charged a fare, not subject to financial assessment

No comment on this proposal as there is no change.

Proposal 5a

Where a service user with care act eligible needs lives permanently in a Shared Lives placement, steps will be taken to secure a tenancy agreement with the Shared Lives carer

Proposal 5b

As a result of proposal 5a, housing costs will be claimed by the Shared Lives carer through benefits. The carer will not have the rental income they receive from benefits deducted from their payment for care services

Proposal 5c

Service users living in permanent Shared Lives placements will need to contribute towards the cost of food and utilities. Any specialist requirements will be identified pg. 7 in the care and support plan. The amount to be contributed will be determined following a financial assessment but will be within an agreed budget

We agree with the council that the proposed changes 5a,5b and 5c will provide greater transparency for service users.

Proposal 6a

To introduce a weekly charge to act as an appointee (provide a money management service) to service users who have capital in excess of £1000

Many people rely on the services of an appointee to manage their money. Appointees generally offer this service free of charge, so we query why the council would need to apply a charge for this.

There is no additional financial cost to the council whether they are dealing directly with the service user or with an appointee.

We would also question why the weekly charge is applied to people who have capital in excess of £1000. We feel that means testing this service is fundamentally unfair and should be based on need.

Proposal 6b

The charge for those living in residential care will be £4.50 per week whilst the charge for those living in the community will be £9.00 per week. The difference in charges relates directly to the volume of work required for the two types of appointees.

As mentioned in response to proposal 6a, we question why the council should need to charge for this service when the services of an appointee are offered free of charge and it does not cost the council extra to deal with an appointee rather than directly with the service user.

Charging double for those living in the community compared to in residential care also directly disincentivises living in the community. pg. 8

Sources:

Independent Living Strategy Group (2018) Charging for Social Care: A tax on the need for support?

Care Act Statutory Guidance (2014)

Accessing Cheshire West and Chester Council information and services

Council information is also available in audio, Braille, large print or other formats. If you would like information in another format or language, including British Sign Language, please email us at:

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