LEAD MEMBER FOR ADULT SOCIAL CARE



<u>DECISIONS</u> to be made by the Lead Member for Adult Social Care, Councillor Bill Bentley

THURSDAY, 31 MARCH 2016 AT 2.00 PM

CC2, COUNTY HALL, LEWES

AGENDA

- Decisions made by the Lead Member on 18 January 2016 (Pages 3 4)
- 2 Disclosure of interests

Disclosure by all Members present of personal interests in matters on the agenda, the nature of any interest and whether the Members regard the interest as prejudicial under the terms of the Code of Conduct.

3 Urgent items

Notification of any items which the Lead Member considers urgent and proposes to take at the appropriate part of the agenda.

- 4 Consultation in relation to charging for Learning Disability Community Support Services (Pages 5 126)
- 5 Any urgent items previously notified under agenda item 3

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21 March 2016

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Agenda Item 1

LEAD MEMBER FOR ADULT SOCIAL CARE

MINUTES of a meeting of the Lead Member for Adult Social Care held at County Hall, Lewes on 18 January 2016.

Councillor Ungar spoke on Item 4 (see minute 9).

7 <u>DECISIONS MADE BY THE LEAD MEMBER ON 17 DECEMBER 2015</u>

7.1 The Lead Member for Adult Social Care approved as a correct record the minutes of the meeting held on 17 December 2015.

8 REPORTS

8.1 A copy of the reports referred to below are contained in the minute book.

9 LEARNING DISABILITY DIRECTLY PROVIDED SERVICES' DEVELOPMENT PLAN

- 9.1 The Lead Member for Adult Social Care considered a report by the Director of Adult Social Care and Health regarding the next phase of the improvement strategy for Learning Disability Directly Provided Services.
- 9.2 RESOLVED to note: (1) the activity that will be undertaken as part of the next phase of the improvement strategy within Learning Disability Services;
 - (2) the consultation activity that will be undertaken

with:

- clients living within the three Learning Disability Group Homes, and their families or representatives, clients and their families or representatives, who access the day service at Southview Close;
- clients who access the Conquest Centre, in St. Leonards, and Beeching Park, in Bexhill, and their families, carers or representatives;
- staff working within the Learning Disability Group Homes and Day Service Centres.

(3) that the results of the consultation will be brought back to the Lead Member to consider on 9 June 2016.

Reason

9.3 It has long been recognised that Southview Close, as a building, is not a suitable site for a learning disability day service. Hookstead offers a viable and sustainable alternative site; initial drawings also indicate that it could offer newly refurbished accommodation to 15 people with a learning disability. Profiling of the Hastings and Rother area indicates that buildings can be rationalised, offering associated revenue savings.

(The meeting ended at 2.40 pm)

Agenda Item 4

Report to: Lead Member for Adult Social Care

Date: 31 March 2016

By: Director of Adult Social Care & Health

Title: Consultation in relation to charging for Learning Disability Community

Support Services

Purpose: To consider the results of the consultation and agree the

recommendation that will be made to Lead Member in relation to

charging for Community Support Services.

RECOMMENDATIONS

The Lead Member for Adult Social Care is recommended to:

- consider the feedback that has been received as part of the consultation process which sought comments and views about whether the Council should charge for the Learning Disability Community Support Service;
- introduce charges for the Learning Disability Community Support Service from 1 July 2016.

1. Background

- 1.1. On 16th December 2014, the Departmental Management Team agreed to undertake a public consultation on the proposal to levy a charge for Learning Disability Community Support Services (LD CSS).
- 1.2. Under the "Charging for Care and Support Policy", which outlines government legislation and guidance about how care charges should be determined, the service should be chargeable, so the key reasons for the proposed change are that it is fair and equitable under the charging policy.
- 1.3. A full consultation has been duly undertaken and the results of this are shown at Appendix B, a summary of which is given under Supporting Information in section 3 of this report. This information was derived from a range of feedback mechanisms developed to meet the different communication needs of the client group. This included a survey form that was available on the East Sussex County Council (ESCC) website, group and individual meetings. A consultation timeline is shown at Appendix C. All data and materials used in the consultation will be available to elected members prior to the Lead Member meeting.
- 1.4. An Equality Impact Assessment (EqIA) has been completed to identify what effect, or likely effect, the proposal to charge for the service may have on different groups accessing the service. The EqIA is shown at Appendix D.

2. Supporting information

- 2.1. In summary, 64 responses were received with the majority (48) from a respondent described as a 'community support service user'.
- 2.2. It is significant to note that all respondents have identified a connection with CSS apart from seven people, about whom a conclusion cannot be drawn.

- 2.3. In answer to the overall question 'Do you think we should ask people to pay for CSS?' 10 people responded yes; 34 no; 18 not sure; and 2 not answered.
- 2.4. Drilling down further, the top three reasons why people felt a charge should not be levied are shown below along with an initial response to the concern:

| Reason given | No. of responses | Comment |
|--|------------------|--|
| Expense | 13 | This will be mitigated by the financial assessment process |
| Unfair | 7 | All other similar, core services are chargeable |
| Service should be funded in other ways | 3 | There are no other means of funding |

- 2.5. The responses stating 'not sure' were analysed further and the results confirmed that the reason for this response was largely related to the fact that people did not know how much they would need to pay, rather than because people did not understand the question.
- 2.6. Finance staff supported the consultation events and offered to undertake outline financial assessments to help people to better understand how much they may be expected to pay. Nine people requested outline financial assessments during the consultation, one of whom experienced a positive outcome from the advice given during the outline assessment as it was found he was not maximising his benefits entitlement.
- 2.7. From the outset, it was acknowledged that not all clients had been through a financial assessment process, however undertaking financial assessments prior to consultation could have had an unfair impact on the results as it is anticipated that only 60% of all clients will need to contribute. Furthermore, we could not compel people to have an assessment undertaken prior to any agreement about charging for the service.
- 2.8. In response to the question 'would you stop using CSS if you had to pay for it?', 16 people said 'yes' and 23 'not sure'. To avoid the risk of clients becoming isolated, or their health deteriorating and their needs increasing as a result of charging, the EqIA action plan indicates that a full social care review should be undertaken for anyone who declines a service if the charge is implemented.
- 2.9. To allow time to ensure that all service packages can be reviewed and reconfigured if necessary, it is proposed that the charge is introduced on 1 July 2016, with all financial assessments completed during April and May 2016.

Financial Impact

- 2.10. The level of financial contribution each person will make, if it is agreed that a charge should be levied for the LD CSS, will vary as it is based on individual circumstances and affordability. A full financial assessment will need to be completed with each client to determine their individual contribution.
- 2.11. As LD CSS is not currently a chargeable service it is unclear at this stage how much income will be realised given that around 57% of clients have either not been financially assessed or do not have any current financial information available.

- 2.12. Clients who use another service, in addition to CSS, will have had a financial assessment completed if those services are chargeable, for example, day services and respite services.
- 2.13. Appendix A provides details of the level of income that could be achieved, based on financial assessment data from CSS clients for whom a financial assessment has already been completed, and estimating potential income using a variety of possible client contributions to illustrate that different levels of contribution are anticipated.
- 2.14. Based on data relating to people who already make a contribution to other services, it is estimated that clients will contribute between £0.00 and £97.81 per week, with an average contribution of £32.04 per week.
- 2.15. Using the calculations outlined in appendix A, implementing a charge for CSS could generate a predicted annual income up to £100,000.

3. Recommendations

The Lead Member for Adult Social Care is recommended to:

- consider the feedback that has been received as part of the consultation process which sought comments and views about whether the Council should charge for the Learning Disability Community Support Service;
- introduce charges for the Learning Disability Community Support Service from 1 July 2016.

KEITH HINKLEY

Director of Adult Social Care & Health

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Background Papers:

None

Appendices

Appendix A: CSS Potential Client Contributions

Appendix B: Learning Disability Community Support Service charging consultation – hub results

Appendix C: Consultation Timeline

Appendix D: Equality Impact Assessment



CSS Estimated Potential Client Contributions - January 2016 (based on client data December 2015)

| Potential Income Calculations | | No hours provided | | Estimated income if AVERAGE contribution is: | | | | | |
|---|---|-----------------------------|----------|--|------------|------------|------------|-------------|--|
| | | No. hours provided per week | £0 | £7 | £10 | £15 | £20 | £32.04* | |
| | | | per WEEK | per WEEK | per WEEK | per WEEK | per WEEK | per WEEK | |
| Clients who have not had a Financial Assessment | | 366.00 | £0.00 | £581.00 | £830.00 | £1,245.00 | £1,660.00 | £2,659.32 | |
| Estimated WEEKLY income | | | | | | | | | |
| Estimated income if it is assumed 60% of clients who have not yet had | | | £0.00 | £348.60 | £498.00 | £747.00 | £996.00 | £1,595.59 | |
| a FA will pay a contribution | | | | | | | | | |
| Estimated ANNUAL income | | | | | | | | | |
| Estimated income if it is assumed 60% of clients who have not yet had | | | £0.00 | £18,127.20 | £25,896.00 | £38,844.00 | £51,792.00 | £82,970.78 | |
| a FA will pay a contribution | | | | | | | | | |
| Income from Clients who have had a Financial Assessment and | 4 | 22.00 | | | £ΛΛ | 0.00 | | | |
| would be required to fully fund their support (self-fund) PER WEEK | required to fully fund their support (self-fund) PER WEEK | | 1440.00 | | | | | | |
| Total estimated ANNUAL INCOME | | | | | | | | | |
| CSS clients who have not had a Financial Assessment (60%) and | | | £0.00 | £41,007.20 | £48,776.00 | £61,724.00 | £74,672.00 | £105,850.78 | |
| clients who self-fund | | | | | | | | | |

| Raw data | | |
|---|--|--|
| Total Number clients | | |
| No. of Clients who have had a financial assessment (FA) and would be required to fully fund their support (self-fund) | | |
| No of clients who have not had a FA | | |
| No of client who have a completed FA and whom currently contribute £0.00 | | |
| No of clients who have a completed FA and whom contribute to other services | | |

| Supplementary information | | |
|--|--|--|
| No of clients who have a completed FA and whom contribute to other services 43 | | |
| No. of hours provided per week | | |
| Total Weekly Income to other Directly Provided services | | |
| * Average weekly client contribution (not including clients who pay nil contribution) £32. | | |

| Potential Income Calculations | | | |
|---|---|--|--|
| The figures used in the table below: | Notes: | | |
| > Exclude clients who already pay a contribution to other | Clients who already pay a contribution to LD DPS have been excluded from the data, as current income is split between chargeable services. If the proposal is agreed, | | |
| services (see Supplementary Information) | a proportion of this income (to be established) would be attributed towards the CSS moving forward. | | |
| > Includes the assumption that 60% of financial assessments | Current information from the financial assessment team indicates that approximately 60% of clients who have had a financial assessment will pay a contribution | | |
| completed will result in a client contribution being applied towards services. Therefore this assumption has been applied to the calculation of potential income as detailed in the table below. | | | |
| > Includes clients who have had a financial assessment and 4 / 145 clients have been identified as potentially self-funding, therefore the calculations in the table below include the assumptions that those clients | | | |
| would be required to fully fund their support (self -fund) full amount for their service. However, this may be subject to change once a full and updated financial assessment has taken place. | | | |
| > Includes average contribution figure derived from data of CSS | age contribution figure derived from data of CSS In order to gain an understanding of the potential income to CSS, an average of actual contributions made was taken from the data of the 43 clients who have | | |
| clients who have a completed financial assessment and completed financial assessment and contribute towards other services. (Clients who currently contribute nil were excluded from the calculations as the | | | |
| contribute towards other Directly Provided Services. for this factor is made via 60% reduction in assumed income) | | | |
| > Are based on current client numbers | | | |
| | into account as numbers at this stage are unknown. | | |

Appendix A

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Consultation results: Community support service consultation



Date: January 2016

Document summary

Results from the consultation on proposed changes to the Learning Disability Community Support Service

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CTRL and click on the table of contents to navigate.

Press CTRL and Home key to return to the top of the document

Press Alt-left arrow to return to your previous location.

Background

We asked for views about our proposals to ask people to pay for the Community Support Service (CSS). People would only pay as much as they could afford.

The CSS helps people to be more independent. The cost for the service is £20 per hour.

Why we are consulting

Everyone at the Council has been asked to find ways of saving money. People who have other services that are like the CSS have to pay for them. The money people pay for the CSS would be used to help run it.

What we consulted about

We asked people:

- Do you think we should ask people to pay for the Community Support Service?
- No one would be asked to pay for the service before April 2016. Is this enough time to get ready for the change?
- What can we do to help people get ready for the change?
- What do you (or the person you support) use the Community Support Service for?
- Are you happy with the service you get? Why do you feel this way?
- Would you stop using the Community Support Service if you had to pay for it? If you would stop, why do you feel this way?
- How would paying for the Community Support Service affect your life, or the life of someone you care for?
- Are there any further comments you would like to make?

Consultation process

The consultation started on 1 October 2015 and closed on 23 December 2015, meaning that it ran for 12 weeks.

How people could take part

Online survey

An online survey was available throughout the consultation period. People could also download a printable version of the survey from the website. We encouraged people to complete the survey as often as they wished, allowing for them to add to or change their views if they learned new information or changed their opinion during the consultation period.

Other forms of feedback

Those who chose not to complete the survey, but who wished to offer their views, were encouraged to do so by passing on verbal comments to the manager of the service, and written and email feedback.

A series of information events for clients, parents, and carers was held at a variety of locations. The dates and locations of the information events were:

| Date | Location | |
|-------------|--|--|
| 8 October | Conquest Day Centre, St Leonards on Sea | |
| 8 October | Bellbrook Centre, Uckfield | |
| 9 October | Sovereign Harbour Yacht Club, Eastbourne | |
| 9 October | Sovereign Harbour Yacht Club, Eastbourne | |
| | (Park Lane residents) | |
| 21 October | Bellbrook Centre, Uckfield | |
| | (Field Cottage residents) | |
| 23 November | Park Lane Residents Meeting | |

Following the meetings a list of Frequently Asked Questions was made available via the consultation website (see appendix 5).

Any client who didn't attend a meeting was posted a survey and pre-paid envelope. We also encouraged people to submit comments via members of staff and other supporters.

Where clients were concerned about the changes or the financial implications they were offered the option of talking to a care management worker or having a light-touch financial assessment.

Responses by method

Table 1: Responses by method

| Response method | Total responses or attendees |
|--|------------------------------|
| Survey responses | 64 |
| Emailed, written or verbal responses | 14 |
| Group attendees (see appendix 4 for details) | 39 |
| Total | 117 |

Key themes

It is clear from the consultation that people value the CSS and the service it provides. People particularly value the support it offers around developing life skills and the relationship that clients have with their workers.

Respondents are concerned about whether they would be able to afford the service if they were asked to pay. Some people say they would stop using the service in that case, although a lot of people are unsure about what they would do.

Over half the respondents don't think people should be asked to pay for the CSS. In many cases, this is because they feel that the proposals are unfair, with a few respondents suggesting that savings should be found elsewhere.

A small number of respondents think that people should be asked to pay for the service in light of the need to make savings.

There is also a significant minority who are not sure about the proposal and this reflects a key theme from the consultation: uncertainty. People are unsure about what the proposal would mean for them and want to really understand the financial and personal implications.

The main concerns about the proposal are the financial implications for clients and their families and carers. Many respondents said they do not have much money or are afraid they wouldn't be able to pay for the service. People also said that the proposals would affect their ability to spend their money on other things.

In terms of helping people to prepare for changes to the CSS, the most common suggestion is to provide information and advice on money. This is a reflection of the uncertainty people feel about what the proposals would mean for them personally.

Issues that would need clarification if the proposals went ahead are:

- the cancellation process and whether you would still be charged; and
- whether it would be possible to have group support

Comments

The following comments made during the consultation highlight some of the key themes.

Should people be asked to pay for the service?

- "I totally oppose this proposal which will affect people who are vulnerable and often have this service as part of their medical treatment. I am sure the consultation will reveal this is unworkable and unacceptable."
- "The cost seems high which may deter the people who really need it. This may lead to more loneliness and isolation."
- "I [am] on benefits. I have bills to pay. I would worry [whether] I have enough money."
- "Won't really know until I know what the cost will be."
- "If the service is good we should pay for it. But I do worry about how much. If you
 want something good in life you have to pay for it."

Views on the CSS

- "I like seeing new people. They have been helping me to learn new things. They help me with appointments and cooking."
- "I feel that I can cope with things [when] I have my support worker."
- "[It] encourages independence and confidence, and gives my daughter an opportunity to go out into the community in a normal and enjoyable manner."

How can we help people to prepare?

- "By giving us as much information as possible and for us to have the opportunity to discuss our own financial situation."
- "Explain why you have to start charging. Make sure the money is there (they can afford it). Talk them through it. Make sure they understand, or their carer/parent does. Obvious things really."
- "Give me more time and more information as to how much I may have to contribute."

How would it affect you or someone you care for?

- "As long as it is affordable, not too much."
- "Being out of money...would feel stressed."
- "I can't answer this question because I don't know how much I might be asked to pay."
- "I would have less money to pay for food, accommodation and social activities."
- "It would restrict what they could afford for pleasure and they might have to give up doing things they once could afford."

Any other comments?

- "Consultation should be directed to all on the voting register and include the
 question: "Would you be prepared to pay extra council tax to fund this service?"
 This very online consultation, analysis and presentation probably costs as much as
 the service it is trying to cut."
- "Parent carers like us already save the council a significant amount. As I do all of our daughter's personal care, to place this extra burden on us is a step too far."

Summary of consultation responses

Survey results

Number of respondents

64 people completed a survey (not everyone answered every question)

Three-quarters of those completing the survey (48 out of 64) use the CSS

2 people submitted the survey after the consultation closed

Should people be asked to pay?

34 (out of 62 who answered the question) did not think people should be asked to pay

10 thought they should and 18 were not sure

Those saying no were most likely to object due to the expense (13) or the proposal's lack of fairness (7)

Is there sufficient time to prepare?

Of 61 answering:

- 21 said yes
- 18 said no
- 22 were not sure

Ways to help people prepare for change

The most common suggestion – made by 18 respondents – was to provide information or advice on money

The offer of non-specific information, support, or communication was the next most common – suggested by 7 respondents

Use of the CSS

Over half of all respondents used it for:

- learning new skills (37);
- doing things in their local area (35);
- looking after health (35); and
- housing and money (32)

Satisfaction with the CSS, and reasons

47 (of the 57 who answered) were happy with the CSS and **2** said they were not happy

The most regularly occurring reasons for satisfaction were:

- the help that was offered around life skills (9 mentions); and
- the client's relationship with workers (8 mentions)

Would you stop using the CSS if you had to pay for it?

Of 56 answering:

- 16 said yes
- 17 said no
- 23 were not sure

Reasons why you would stop using it

The main reason ticked was because they didn't think they could afford it (17 people)

Others ticked:

- Didn't want to pay for the service (10)
- Didn't want a financial assessment (2)
- Preferred to use other services (2)

Effect of paying for CSS

The most regularly noted effects were:

- Respondents'/carers' worsening financial situation (17 mentions); and
- inability to spend money on other things (9 mentions)

Other comments

Invited to make any other comments, the majority were negative (12 of 14 comments) and focused on:

- incorrect public spending priorities (4);
- criticisms of the consultation (2);
- resistance to paying (2) or reluctance to pay by other means (1); and
- uncertainty over what non-payment would mean (1)

Other feedback

Number of respondents

- **39** people attended a consultation information event
- 14 other submissions were made through comments at events, by letter, email, phone or through talking to members of staff

Should people be asked to pay?

The responses that addressed this element of the consultation said that people shouldn't be asked to pay

The main reason given is that it would be unfair to ask people to pay, although some people just raised the issue of affordability

Many of the responses also raised uncertainties about what the proposal would mean for them and their finances

Use of CSS and whether they would continue

A number of the responses talked about the value of the service and how they, or someone they care for, uses the service

Some people said they would stop using the service if they were asked to pay, while others said they would have to look at their options

Other issues and queries

Other issues and queries raised included:

- issues with the consultation process and timing;
- the cancellation process and whether you would still be charged; and
- whether it would be possible to have group support

What happens next

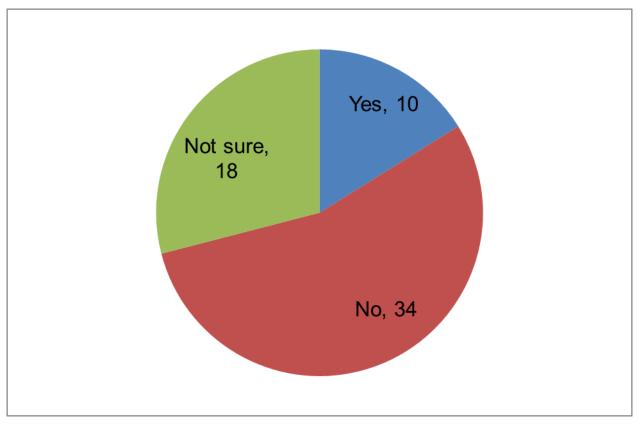
The consultation results will be considered alongside recommendations and an Equality Impact Assessment at the Lead Member meeting on 25 February 2016.

After the meeting, we will share the decision with everyone and let people know what is happening next.

Appendix 1: Survey results

Please note: There may be more themes than comments, as some comments gave rise to more than one theme. All raw comments have been edited to remove personal information.

Chart 1: Do you think we should ask people to pay for the community support service?



Note: 2 people did not answer the question.

Related comments on whether people should be asked to pay

The following three sections show the themes and comments from: 1) Respondents who thought people should be asked to pay for the CSS; 2) Respondents who thought they shouldn't be asked to; and 3) Respondents who weren't sure. In all cases, the themes are shown first and then the raw comments.

Reasons for saying people should be asked to pay

The themed reasons for asking people to pay were:

- Can afford it (4 mentions)
- Service is worth it (3)
- Will improve quality of life (1)
- No reason offered (2)

The table below shows people's raw comments.

Raw comments

Because I will be able to go out.

Because if there's no more money for the service, then we will lose it and that would be a great shame.

I can contribute more.

If the service is good we should pay for it. But I do worry about how much. If you want something good in life you have to pay for it.

Only if people can afford it.

People should pay but only if they can afford it.

They would value the service.

Those on higher incomes!

Reasons for saying people should not be asked to pay

The themed reasons for saying people should not be asked to pay were:

- Expense (13 mentions)
- Unfair (7)
- Should fund in other ways (e.g. council tax) (3)
- Service is not worth paying for (1)
- Previous assessment process was not straightforward (1)
- Effect on health and wellbeing (1)
- No reason offered (11)

The table below shows people's raw comments.

Raw comments

Because I can't afford to pay.

Because I don't think it's fair for people with a disability.

Because I'm on benefits.

Because I'm on benefits.

Because some of us don't have paid jobs so we don't get much money...for support.

Because some people can't afford it...that's why I said "No". It would be unfair if someone pays for [the] support service when someone can't pay for [the] service.

Because with all of the cuts people are on the receiving end of, making people pay extra costs for services which could directly affect their health and wellbeing seems very unethical. [Client] currently uses community support services to attend a swimming/hydrotherapy appointment, without which her health could decline further.

Extra time for me to think about.

I am not sure that I would be able to afford the support.

I believe it should be funded by an increase in council tax.

I do not think I could afford [to pay] as I am on benefits.

I don't know why.

I don't think it's fair.

I [am] on benefits. I have bills to pay. I would worry [whether] I have enough money.

I understand about raising costs and cuts, but I have real concerns about asking the most vulnerable people in our society to absorb these cuts. I help young people fill in their PIP forms – most don't understand about budgeting and yet they will have money cut from their slender pot. I actually broke down and cried when I heard about this as I worry tremendously about how my daughter will manage in the future when I am not around, as she probably won't qualify for full support, but will struggle by on a bit of Community Support which she [will] now have to pay more for. She already pays for Daycare support at St. Nicholas Lewes and it all feels like a very slippery slope. All the time I am alive I will absorb this for her, so in a sense it is a tax on me. It makes a bit of [a] mockery of the ESA and DLA that is given to her for essential living costs.

I will not have much money left.

Most people with special needs are on low incomes and can't afford to pay.

Some people's costs are not always...taken into consideration and if they are on benefits this is the income the government excesses [sic] them to need.

The community should support the disabled through the council tax; as I am well under the financial limit it may not affect me directly.

These are some of the most vulnerable adults in our society. We'd be happy to pay a small increase to help these people. This sounds like a PR exercise to sell a decision that has already been made.

Too much has been taken away from...vulnerable people already with the cuts on welfare.

We already pay for it with our taxes.

We do not want to pay for the service as it is getting wasted and we wanted it for other things.

When my daughter was asked to contribute before, the assessment for her income and expenditure was inept...after a long and stressful complaint she was assessed finally accurately with a nil contribution – as will many people with a learning difficulty.

Won't really know until I know what the cost will be.

[First respondent of two]: [No, as] I don't see why we should have to pay towards CSS wages. [Second respondent]: [Yes, as] I don't want to lose the service.

Reasons for not being sure whether people should be asked to pay

The themed reasons for people who are not sure were:

- Expense (9 mentions)
- Unfair (1)
- No reason offered (1)

The table below shows people's raw comments.

Raw comments

Because I already pay for use of a garage for my collection of books, mags etc.

I would prefer to keep my money.

It does depend on circumstances for the person concerned as each one is different. Rather than lose the service I would say "yes" if it's affordable for that person.

Most people can't really afford it.

Not sure about whether I should pay towards care...not sure if I could afford to?

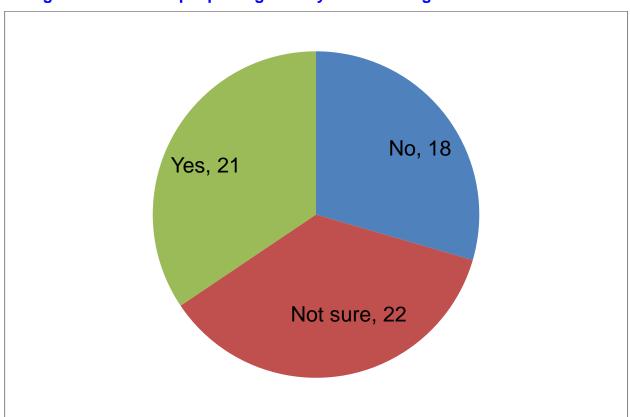
Some people may not be able to pay and will lose a valuable service.

The cost seems high which may deter the people who really need it. This may lead to more loneliness and isolation.

They might not have much money, in their pockets.

This all depends on how much we would be asked to pay.

Chart 2: No one would be asked to pay for the service before April 2016. Is this enough time to enable people to get ready for the change?



Note: 3 people did not answer the question.

What can we do to help people get ready for the change?

In all, 45 respondents answered this question. The themed reasons for helping people to get ready for the change were:

- Provide information/advice on money (18 mentions)
- Offer information/support/communication (non-specific) (7)
- Advise on how changes will operate (4)
- Provide sufficient notice of changes (4)
- Offer psychological support (2)
- Explore other ways of providing the service (2)
- Improve/amend current service (2)
- Don't know/No suggestions offered (11)

The table below shows people's raw comments.

Raw comments

Inform them using as many channels as possible to reinforce the message.

Tell people accurately the criteria you will use for their income and expenditure assessment and what they need to do in readiness to mitigate the impact on their budgets. Also allow for a social life budget. My daughter was allowed £3 per week for her social life in her original income and expenditure budget. Best practice does allow for a contribution towards the household if a service user lives at home. Also for Christmas birthdays and a summer holiday – you all have one don't you.

Negotiate with community organis[ations] who may be providing services that would help meet needs.

Put in place another strategy for helping [client] to maintain good posture.

Better service.

Seeing as the Community Support team are not allowed to handle money for their clients, it would seem like you would need to employ a specialist Money Adviser to go through clients' budgets with them. This is almost ok when their sole income is their benefits, as this is an amount that probably can be calculated publicly, but if it is a case of coming in to tell me what I have to cut back and start examining my spending and income, it is highly insulting and an [invasion of] my privacy.

?

Can't think of anything – whatever needs doing is being done by working out the finances.

| Don't know. |
|--|
| Don't know. |
| Don't know. |
| Don't knowwill need advice from CST. |
| I do not know. |
| I don't know. |
| No chg [sic]. |
| No chq [sic]. |
| Nothing. |
| Communication. |
| Give them as much support as they need on an individual basis. |
| Information. |
| Information. |
| Keep informed of any progress. |
| Talk to them about what they want. |
| Send round psychological support for all recipients to reduce suicide and potential for self-harm. |
| This will be such a shock to vulnerable people that one-to-one counselling will be needed to reduce suicide risk. |
| Give people plenty of notice. |
| Give them another year to get ready. |
| You could have at least given out the consultation dates to all members of the public well in advance of the consultations. I found out about this today. The consultations were last week. Reschedule new consultations and do it properly. |
| By helping them get more money i.e., help with getting job. |

Check finances.

Explain to us how it will work and where the money will go if we have to pay.

Explain why you have to start charging. Make sure the money is there (they can afford it). Talk them through it. Make sure they understand, or their carer/parent does. Obvious things really.

Give me more time and more information as to how much I may have to contribute.

Help people find financial assistance.

Identify those who will face financial hardship.

Look at finance.

More information on how much I pay.

More time and a breakdown of costs.

Personally I would need support so I can find out what extra money I could get to pay for any charges that may be made.

Say whether or not all my support will be stopped.

So that I can spend more money on food.

Tell me how much I am going to have to contribute towards my support.

To say you have to pay for service.

[First respondent of two]: By giving us as much information as possible and for us to have the opportunity to discuss our own financial situation. [Second respondent]: Yes, you could give us some idea how much the service would be.

Chart 3: What do you (or the person you support) use the CSS for?

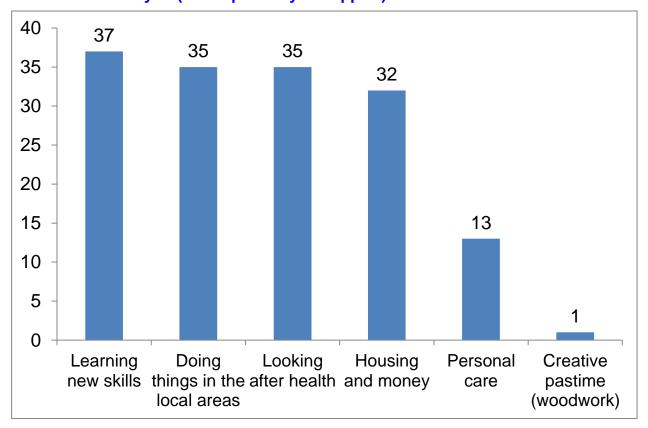
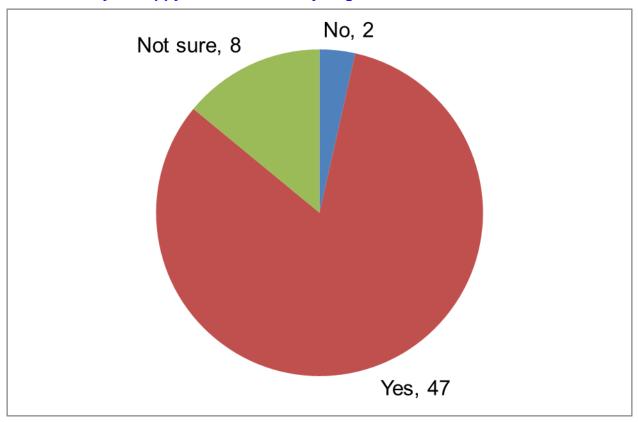


Chart 4: Are you happy with the service you get?



Note: 7 people did not answer the question.

Reasons for feeling happy with the CSS

The themed reasons for feeling happy with the CSS were:

- Helpful (life skills) (9 mentions)
- Worker relationship (8)
- Enjoyable (7)
- Helpful (non-specific) (6)
- Friendly (4)
- Helpful (personal care) (4)
- Helpful (pastimes) (3)
- Reliable (2)
- Encouragement (2)
- Helpful (emotional) (2)
- Budget advice (2)
- Continuity and regularity (2)
- No elaboration (3)

The table below shows people's raw comments.

Raw comments

Learning money skills. Dietary advice. Support to help sort out benefit problems.

Because [I'm] just happy with one support person once a week.

Because it has helped my son use the bus and his money better. Also he is doing cooking now, which he enjoys.

[It] encourages independence and confidence, and gives my daughter an opportunity to go out into the community in a normal and enjoyable manner.

I am happy with the service and I enjoy it.

My daughter enjoys her day centre, has had the service for 20 years, and would not be able to cope with having her services cut. [I] certainly wouldn't be able to pay extra.

Yes I am happy at my work.

Always friendly [and] helpful, with new ideas for making a more independent living for people with special needs.

Very friendly and helpful team of people who support me.

[Client] is very happy with the service she gets. Her support worker is friendly, helpful,

encouraging and motivating. [Client] looks forward to her swimming as it gives her relief from backache and keeps her supple – [she] has more freedom of movement in the pool. Very nice. I like seeing new people. They have been helping me to learn new things. They help me with appointments and cooking. My daughter is severely autistic with a profound learning difficulty. Autism Sussex centre, [which] she attends, helps her to find coping strategies for her stress. It is a calm, quiet and safe environment enabling her to make significant progress in life skills. It is helpful and it helps me to remain independent. They help me live independently. Without them supporting me, I'd be stuck. They help me with appointments. It would be useful to know who I'd got for support, so I can plan things. Sometimes I can only talk to certain people about certain problems. Because I get the help I need. Because when [they] show me something I do it on my own. Incredibly, they are an amazing bunch, and if I had the money I would happily pay more – but my daughter has already been means-tested for what she can afford to pay. Yes, because they help me. You are a good team. Keep up the good work. Day centres – Southview Close. Conservation. Look after Ashdown Forest. Because they assist and prompt with my daily personal care and hygiene and support me at the gym. Because they keep me in check.

Yes.

Fine just the way it is.

Fine just the way it is.

It's very good. They are always there when I need them.

I enjoy my time with my Community Support Worker. It helps me to feel independent and

we get on well together.

I feel that I can cope with things [when] I have my support worker.

I like the people who take me out as they are always happy to take me where I want.

Good key workers. Good service.

I like working with my keyworker.

Members of staff that support me...l get to know them, and get on with them better.

They are wonderful people.

Reasons for not feeling happy with the CSS

The themed reasons for not feeling happy with the CSS were:

- Restricted quality of life (1 mention)
- Insufficient choice (1)

The table below shows people's raw comments.

Raw comments

Because I can't go out and I have to use taxis. You used to take me shopping in your car.

I would like to be the boss.

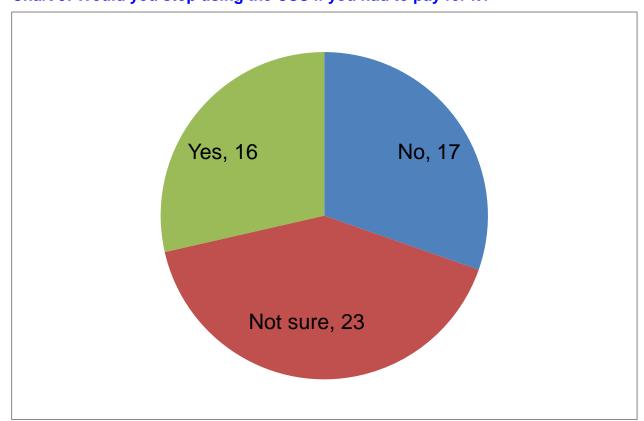


Chart 5: Would you stop using the CSS if you had to pay for it?

Note: 8 people did not answer the question.

Reasons why you would stop using the CSS if you had to pay

The survey gave people a list of options on why they would stop using the service. The reasons why people would stop using the CSS if they had to pay were:

- 17 respondents ticked: I don't think I could afford it
- 10 ticked: I don't want to pay for the service
- 2 ticked: I don't want to have a financial assessment
- 2 ticked: There are other services I'd rather use

People could also tick 'something else' and explain in the box below. The following other reasons/comments were made:

Raw comments

It's a bloody cheek asking people for money when they don't have it.

It's a bloody cheek asking people for money when they don't have it.

Other services I have used [are] cheaper and they take me in their car.

Depends how much.

For what [named person] reviews, I as his carer would carry on doing for [client].

I am happy as it is without messing it up – thank you.

I would like to keep my money in an envelope.

It would need to be seriously considered as other essential and maybe non-essential costs

would need to be cut and it would need serious consideration depending on how much extra was demanded.

How would paying for the CSS affect your life, or the life of someone you care for?

In all, 54 people commented, with the following themes on how they or someone they care for would be affected:

- Worse off financially (17 mentions)
- Unable to spend money on other things (13)
- Wouldn't/may not have an effect (9)
- Would damage health/wellbeing (5)
- Would restrict travel (3)
- Would damage living arrangements (1)
- Would improve it (1)
- Would/may not use the service (1)
- No elaboration/don't know (8)

Raw comments

I have a lot of other things to pay for. [Wrote "Not Paid."]

I have a lot of other things to pay for. [Wrote "Not Paid."]

?

As long as it is affordable, not too much.

Being out of money...would feel stressed.

Couldn't buy new boots.

CST I can now go to places by myself, I couldn't before.

CST I can now go to places by myself, I couldn't before.

Don't know.

Don't know – stop me doing other things I pay for at the moment.

Don't know until I know [how] much I will have to pay for my support.

Every penny is accounted for. So would mean going without food, gas or electricity. Live in poverty as it is now; can't take [any] more cutbacks.

Finances. I don't know; make me poor.

Hopefully no change.

I can afford to pay.

I can't answer this question because I don't know how much I might be asked to pay.

I don't know.

I don't know.

I don't really know.

I hope that it would focus on positive outcomes rather than maintaining the status quo.

I might have to miss out on other things.

I think I have already covered this. But for my daughter it would mean a lack of skills learning – cooking and travel, training and, as I work f/t, a lack of contact with the outside world, leading to isolation and return to depression and low mood. When put down in black and white, I probably wouldn't stop it for her – so it is a tax on me until I die, then poverty for her.

I will have less money.

I will have less money.

I would have less money.

I would have less money for my day-to-day living.

I would [have] less money to live on.

I would have less money to pay bills and household needs.

I would have less money to pay for food, accommodation and social activities.

I would not be able to do some of the things I do as well as having support because I wouldn't have the money.

I would stick with Eastbourne Community Support Team – ok to get on with and a good bunch of people. If I had to pay it would have to be by direct debit.

I wouldn't have as much money.

I wouldn't mind if the service had to close because of money.

If it was in my budget it would not affect me.

It is not going to affect my life, I am happy to pay for the service.

It means we as a family will have to support him at clubs.

It will leave me less money to live on each month.

It would leave me less money to spend on food, household bills, tv licence.

It would not have much of an effect on my life.

It would restrict what they could afford for pleasure and they might have to give up doing things they once could afford.

It wouldn't [sic].

Leave me with less money.

Less money to spend on me. I pay enough already for rent.

Maybe not use it so much.

Not sure; don't know. It would leave me with less money to spend on shopping bills, clothes, shoes for example.

Paying would take my savings down and make paying bills difficult.

Possibly increase her client contribution.

She wouldn't be able to afford it and as this was a cheaper option for the NHS than regular physiotherapy then this would affect [client's] posture more and give her more pain. If [client] had to pay for this service she wouldn't have enough money to access her day services and clubs.

Some people got upset about it.

The stress of the injustice would be crippling for every community-minded person. We pay for this service for EVERYBODY via our taxes. Stop trying to surreptitiously privatise health and social care.

We already supplement our daughter's income. I am now a pensioner. My husband is close to retirement. We still have a mortgage. I don't think we could keep our daughter at home any longer. She needs 24-hour care and, if not managed well, displays very challenging behaviour.

We are already budgeting our money. We do not need another bill?

Will not be able to go out so much.

It would add more stress on me as I sort out all the bills...It would be quite hard to find the money.

Is there anything else you would like to say?

A total of 32 comments were made in response to this question. These have been divided into three groups: positive, negative and neutral. The themes within the positive and negative groups are as follows:

Positive general themes (2 comments offered; 2 themes emerged):

- Good service (1 mention)
- Offers opportunities (1)

Negative general themes (12 comments offered; 14 themes emerged):

- Incorrect public spending priorities (4 mentions)
- The consultation is flawed (2)
- Resistant to paying for this service (2)
- Insufficient information received (2)
- Erratic timekeeping/service delivery (2)
- Unwilling to receive this service from another source (1)

• Uncertain over what non-payment would mean (1)

Three comments were classified as neutral, and the remaining 15 comments specified that the respondent did not wish to make any further points.

Raw comments

Positive

I am happy with the service. It is very good.

I like working for the NHS two days: Wednesday and Friday.

Negative

Consultation is meaningless when it is carried out at a safe distance at the other side of the Internet. Every resident should have been consulted personally by letter and asked if they would be prepared to pay for the community support service via an increase in council tax. THAT would be democracy.

Consultation should be directed to all on the voting register and include the question: "Would you be prepared to pay extra council tax to fund this service?" This very online consultation, analysis and presentation probably costs as much as the service it is trying to cut.

People mess me about with the times. Times still change and I'm not told. There was a different time on my rota. When I phone I mostly get Hastings instead of Uckfield..lt doesn't help. Not helpful.

Council Tax should be increased to finance community care. The nation gives away money to other countries yet does not wish to support its own needy.

Parent carers like us already save the council a significant amount. As I do all of our daughter's personal care, to place this extra burden on us is a step too far.

The government doesn't prioritise the help needed with social care. They should stop giving aid to other countries and put people in our own country first. There are lots of other ways government could save money, come out of the EU and go after the tax avoiders.

I want more information before I can decide whether or not I can afford or would be willing to pay a contribution towards my support.

I would like more information [name and address added].

It is a shock to pay for something I got for free before.

I live at Park Lane. What would happen to me if I couldn't afford to pay? Would I have to move from Park Lane?

Neutral

I rely on support worker company and....supports.

I would like another cup of tea.

The dangers of burning fires.

Specified they had no other comments

No, don't think so.

[Put a line in the box]

| [Put a line through the box] | | | | |
|---|--|--|--|--|
| Don't think so; nothing I can think of. | | | | |
| No. | | | | |
| Nothing else. | | | | |

Appendix 2: Responses via other methods

The table below provides a summary of responses received via other methods.

Table 2: Responses via other methods

| No. | Method | Who from | Summary |
|-----|------------|--------------------|--|
| 1 | Phone call | Carer | They feel that the decision to charge is a done deal. The carer explained about the client's circumstances and the need to continue with swimming as per the GP's instructions. |
| 2 | Letter | Parent of client | The letter says this is the wrong area in which to make savings. It explains the positive effect of the CSS for his son – describing it as a 'lifeline'. It queries whether a medical service can be charged for. It says they oppose the proposal which will affect people who are vulnerable and often have this service as part of their medical treatment, concluding by saying that the consultation will reveal the plan is unworkable and unacceptable. |
| 3 | Email | Family of resident | The email expressed concern about the proposal and that her family member would not be able to continue living at the residence because of the cost. She said they would want to explore other options if it would mean paying the full cost of the service. |
| 4 | Discussion | Family of client | Until there is a financial assessment and he |

| | with member of staff | | knows how much he may have to contribute it is hard to say how he feels. |
|----|--|-----------------------------|---|
| 5 | Discussion with member of staff | Client | The client won't make any decisions until he knows what he may have to pay. He is seeking advice as to what to do if he did have to contribute. |
| 6 | Discussion with member of staff | Family of client and client | At this point, neither are in favour of paying for the CSS if he was assessed as needing to make a contribution. |
| 7 | Discussion with member of staff | Parent of client | Benefits are complicated and he is seeking answers to financial questions about existing and possibly changing benefits claims. |
| 8 | Comment | Parent of resident | They said that if we only give six months' notice of the change then that doesn't give people a lot of time to negotiate their way out of a number of other contracts, which might be a year or longer. |
| 9 | Email | Parent | The email said that they would make a legal challenge if their daughter is denied services she has been assessed as needing. |
| 10 | Letter | Client | They don't think people should be asked to pay for the CSS, as it is not fair. They say they are not going to pay for the service as they are a pensioner and don't have much money left after bills have been paid. They use the CSS to help them read their letters and bills. The letter asks what the Council will do with the money that is saved. |
| 11 | Letter | Involvement Matters Team | The group said that people with learning disabilities could have more difficulties if the Council make more changes. They may have to pay for the CSS, but people don't know exactly how much each of them might have to pay. People want to know exactly what it means for them. |
| 12 | Survey (wrote responses rather than completing it) | N/A | They don't think people should pay for the service, as it's not fair as people don't have much money. They say they don't want to pay for the service. |
| 13 | Email | Parent of client | The email said the client no longer wished to use the CSS because they feel they can't afford the proposed new cost. |
| 14 | Comment | N/A | The consultation is taking too long. People are worrying about what is going to happen. |

Appendix 3: Who took part

Survey responses

Completing the survey as...

Three-quarters of those completing the survey (48 out of 64) did so as a user of the CSS. A further 9 completed it as a carer or parent of a client. Another 5 ticked "Other" (of whom 2 added "No", while the other 3 did not elaborate). One person completed the survey on behalf of an organisation. The remaining respondent did not answer the question.

Table 3: Gender

| Gender | Respondents | Census |
|-------------------|-------------|--------|
| Male | 26 (41%) | 48% |
| Female | 29 (45%) | 52% |
| Prefer not to say | 0 (0%) | N/A |
| Not answered | 9 (14%) | N/A |

Transgender

No one identified as transgender. Most (51; 80%) said they were not, and 1 (2%) preferred not to say. The remaining 12 (19%) did not answer the question.

Table 4: Age

| Age | Respondents | Census |
|--------------|-------------|--------|
| under 18 | 0 (0%) | 19.8% |
| 18-24 | 2 (3%) | 7.3% |
| 25-34 | 8 (13%) | 9.6% |
| 35-44 | 3 (4%) | 12.5% |
| 45-54 | 8 (13%) | 14.2% |
| 55-59 | 7 (11%) | 6.3% |
| 60-64 | 6 (9%) | 7.5% |
| 65-74 | 8 (13%) | 11.2% |
| 75-79 | 2 (3 %) | |
| 80-84 | 0 (0%) | 11.6% |
| 85 plus | 0 (0%) | |
| Not answered | 20 (31%) | N/A |

Table 5: Ethnicity

| Ethnicity | Respondents | Census |
|------------------------------------|-------------|--------|
| White British | 54 (84%) | |
| White Irish | 0 (0%) | |
| White Gypsy/Roma | 0 (0%) | 98% |
| White Irish Traveller | 0 (0%) | |
| White other | 0 (0%) | |
| Asian or Asian British Indian | 0 (0%) | |
| Asian or Asian British Pakistani | 0 (0%) | 0.6% |
| Asian or Asian British Bangladeshi | 0 (0%) | 0.0% |
| Asian or Asian British other | 0 (0%) | |
| Mixed White and Black Caribbean | 1 (2%) | |
| Mixed White and Black African | 0 (0%) | 0.5% |
| Mixed White and Asian | 1 (2%) | 0.5% |
| Mixed other | 1 (2%) | |
| Chinese | 0 (0%) | 0.2% |
| Black or Black British Caribbean | 0 (0%) | |
| Black or Black British African | 0 (0%) | 0.3% |
| Black or Black British other | 0 (0%) | |
| Other | 0 (0%) | 0.3% |
| Prefer not to say | 2 (3%) | N/A |
| Not answered | 5 (8%) | N/A |

The "Mixed other" person further self-described as "Cape coloured".

Disability

Most (47) survey respondents considered themselves to be disabled, while 8 did not, and 2 preferred not to say. The remaining 7 did not answer the question.

Table 6: Impairment type

| Impairment type | Respondents |
|---|-------------|
| Learning disability | 42 |
| Physical impairment | 10 |
| Longstanding illness or health condition, such as | 4 |

| cancer, HIV, heart disease, diabetes or epilepsy | |
|--|----|
| Mental health condition | 3 |
| Sensory impairment (hearing and sight) | 3 |
| Other – comprising: | 10 |

People who ticked 'other' added the following information:

- My nerves/convulsions
- Angina
- Asthma
- Autism (x2)
- Diabetic and have bad legs
- Onset dementia, diagnosed 2013
- Poor eyesight

Table 7: Sexuality

| Sexuality | Respondents | |
|-----------------------|-------------|--|
| Bi/Bisexual | 0 (0%) | |
| Heterosexual/Straight | 45 (70%) | |
| Gay Woman/Lesbian | 0 (0%) | |
| Gay Man | 0 (0%) | |
| Other (unspecified) | 1 (2%) | |
| Prefer not to say | 9 (14%) | |
| Not answered | 9 (14%) | |

Religion

In all, 29 respondents (45%) considered themselves to have a religion or belief, while 23 (36%) did not; and 4 (6%) preferred not to say. The rest (8; 13%) did not answer the question. The table below shows the breakdown by religion type.

Table 8: Stated religion or belief

| Religion | Respondents | Census |
|----------------|-------------|--------|
| Christian | 25 (39%) | 60% |
| Buddhist | 2 (3%) | 0.4% |
| Roman Catholic | 2 (3%) | - |
| Hindu | 0 (0%) | 0.3% |
| Jewish | 0 (0%) | 0.2% |

| Muslim | 0 (0%) | 0.8% |
|---------------------|----------|------|
| Sikh | 0 (0%) | 0% |
| Other | 0 (0%) | 0.7% |
| No religion | 23 (36%) | 30% |
| Religion not stated | 4 (6%) | 8% |
| Not answered | 8 (13%) | N/A |

Appendix 4: Consultation information events

Numbers attending the events

| Date | Location | Number of people |
|-------------|---|------------------|
| 8 October | Conquest, St Leonards | 8 |
| 8 October | Bellbrook Centre, Uckfield | 11 |
| 9 October | Sovereign Harbour, Eastbourne | 5 |
| 9 October | Sovereign Harbour, Eastbourne (Park Lane residents) | 4 |
| 21 October | Bellbrook Centre, Uckfield (Field Cottage residents) | 4 |
| 23 November | Park Lane Residents Meeting | 7 |

Appendix 5: Frequently asked questions

These questions came up at the consultation information events and were posted on the consultation website.

1) What is the £23,250 threshold, above which a person will have to pay for all care themselves, based on?

Financial assessments are carried out in line with 'The Care and Support (Charging and Assessment of Resources) Regulations 2014'. This legislation states 'In assessing what a person can afford to contribute a local authority must apply the upper and lower capital limits.' The Department of Health sets the upper capital limit annually and this is currently set at £23,250. A person with assets above the upper capital limit is deemed to be able to afford the full cost of their care.

2) Various other services are paid for. Why have changes to this service been left until so late in the day?

CSS was originally set up using different funding streams and grants. It was offered as a time-limited service. However, CSS is now core funded (paid from the Council budget). CSS has evolved over time and now provides both ongoing and time-limited services, in

the same way as other Learning Disability (LD) services like Day Services and Respite Services, which are chargeable.

3) How is the £20.00 cost per hour for Community Support justified when Personal Assistant (PA) services cost around £12 per hour?

The CSS hourly cost has been calculated by taking into account staffing, service and management costs. We recognise that this rate is higher than the PA; however, the CSS provides a different scope of services from a PA support worker.

4) This proposal affects no more than 150 people across East Sussex. Is it therefore justified?

The council has to find savings of £70 to £90 million over the next three years. Services have been asked to review all possible areas where savings could be achieved. Initial calculations indicate that introducing charging could generate up to £50,000 a year which would be put towards the savings target. East Sussex County Council (ESCC) provides a range of support for vulnerable people but is reliant on income from charges to help pay for them.

5) Are there not large financial implications for ESCC in implementing Financial Assessment?

The council has a dedicated team who complete Financial Assessments and have the capacity to undertake these as part of their role. Nearly half of the clients who receive CSS have already had a Financial Assessment.

6) The projection is that this proposal would raise £50,000. Some may see this as low and ask whether it justifies the proposed change?

If CSS is able to find £50,000 in savings, this would be a significant contribution to the overall savings target for Learning Disability Directly Provided Services. If we are not able to find savings from implementing a charge for services, savings would need to be found elsewhere.

7) To achieve the £50,000 estimate, this appears to work out as £10 per week per person. So why not just ask for a £10 contribution from everyone?

ESCC have a "Charging for Care and Support Policy" which outlines government legislation and guidance about how care charges should be determined. The financial assessment looks at how much service the person receives and ensures that people are not charged more than it is reasonably practicable for them to pay; therefore charging rules are applied equally to each individual. This charge will vary, based on the individual's personal circumstances. People will pay either part of the cost, none of the cost or all of the cost of their service.

8) In Park Lane we were told when the residency began that we had to have CSS. Legally what happens if charging begins?

Park Lane has two elements of service:

- 1) The night-time support is a core service which is attached to the supported living scheme at Park Lane, and is provided by CSS. Tenants living at Park Lane would need to contribute towards this core service.
- 2) Day-time support hours are provided by the CSS main team. These hours are allocated to individual support needs and do not have to be provided by the CSS.

9) How often would money be taken?

ESCC would send invoices every four weeks in arrears.

10) Would payment be just by direct debit?

In addition to paying by direct debit there are several other ways clients can pay.

This includes:

- debit card:
- online;
- at the bank;
- at a post office; or
- by standing order.

All the options are shown on the back of your invoice. You may have to pay a charge for making the payment at a bank or post office.

11) Some day services charge, whether or not the client is in the service. How would the rate be affected if the client were i) on holiday; ii) did not want to attend something; or iii) cancelled something?

All chargeable services have a cancellations policy. At present the CSS does not have a cancellations policy; therefore this is in development and will be shared with clients and carers if the outcome of the consultation is that charging will be implemented.

The CSS will ask clients to provide notice if they want to cancel a support session. If less than 24 hours' notice is given, the client will still be charged for the support. This is how cancellations work in other charged-for services.

The way clients are charged depends on the amount they are assessed to pay compared with the cost of their care and support. If a person pays a contribution to support, this figure is calculated as an average over 12 months; therefore if a service is cancelled it might not change the amount that you pay.

If the amount you have paid at the end of the year is more than the cost of you care/support, the Financial Assessment team will adjust your contribution and refund the difference.

12) If support is received as part of a group, how does this affect costing?

As the CSS has not charged for services before, this question has not arisen previously. As this question has been raised, we will be looking at the charge for support provided as part of a group and will provide further information on this if the decision to charge is taken forward.

13) I had a Financial Assessment some while ago [2013]. It concluded that I should contribute, but I've seen no money towards the care go out. Does this mean I will need a reassessment?

If you have not received any other services from ESCC since your financial assessment you would not have been charged, as CSS has remained a free service. Where someone has already been financially assessed we will consider whether we need to carry out another financial assessment visit. In some cases we may be able to review the assessment based on the information we already hold and any information we can gather from the Department for Work and Pensions. If we don't need to visit you again, we will write to inform you how much you are assessed to pay based on the information we hold.

If you did not agree with this amount you could provide any additional information you wish us to consider, or ask us to carry out a full review of your financial assessment.

14) If a relative pays client contributions towards travel only, does that bypass the need for a Financial Assessment for the client?

All clients accessing CSS will need to have a financial assessment. Where ESCC provides travel, this is charged at a standard rate and is not subject to a financial assessment. Where travel is normally part of a support provision, for example with a day service, it is charged and this would be included in the financial assessment.

15) The assessment is completed on current income. This may fluctuate. Do we let Financial Assessment staff know each time this alters?

If income fluctuates, the financial assessment will be based on an average income. However, if there is any change in financial circumstances, clients will need to let the financial assessment team know, so that the contribution can be reviewed. Financial assessments are automatically reviewed each April in line with benefit changes and the Financial Assessments team will write to clients to let them know how much they have been assessed to pay. If the information used to calculate your contribution is not accurate, clients should send in up-to-date figures so it can be adjusted.

16) If a financial charge is decided, and relatives decide they cannot afford to pay, can they assess the different kinds of care they could afford?

Clients and carers can contact the Community Learning Disability Assessment team (CLDT), who will be able to review the client's needs and discuss the alternative support options that might be available. Most alternative services are chargeable.

17) What can be done to combat possible increase in vulnerability of those clients whose family may decide to fund their care independently?

ESCC have a statutory obligation to oversee clients' support and safeguarding needs. The CLDT will be involved in any changes to client care provision and will continue to review clients' care provision to ensure clients' needs are being met.

18) The National Health Service has an interest in these clients. Will the burden pass to it from ASC (e.g. more visits to GPs)?

Clients may seek support from other services if they choose not to have CSS. Support needs will be overseen by CLDT to ensure clients are aware of all the support resources available to them. CSS is a Social Care service. Clients are able to access the NHS for any health-related needs.

19) If the desired revenue is not achieved, what happens then?

We have to find savings from between £70 to £90 million, across the Council over the next three years. Some gaps in funding can be covered by generating more income. If this is not possible, then other means of finding savings will need to be considered.

SUMMARY OF CONSULTATION EVENTS Consultation Period: 1st October 2015 to 23rd December 2015

| Stage One – Proposal to Charge for Community Support Services | | |
|---|---|-----------|
| Date | Event | Detail |
| 16 th December 2014 | Recommendation Paper to Departmental Management Team | 1 meeting |
| | Recommendation to consult with clients on the proposal was agreed. | |
| 21 st July 2015 | Equality Impact Assessment Summary report taken to the Inclusion Advisory Group | 1 meeting |

| Stage Two – Formal Consultation | | | |
|---------------------------------|---|--|--|
| Date | Event | Detail | |
| 15 th September 2015 | Briefing to Adult Care Management (ACM) Community Learning Disability Teams (CLDT) | Email | |
| 18 th September 2015 | Briefing to LD DPS Managers | Email | |
| | Briefing to LD DPS Community Support Workers | Email | |
| 21 st September 2015 | Information to clients, and to individuals involved in supporting clients with finances. Including: Letter to clients/carers from Keith Hinkley dated 21 st September 2016 Easy Read Consultation Information Leaflet Easy Read Questionnaire | 145 copies to clients 75 copies to parents/ carers/ appointees | |
| 1 st October 2015 | Consultation launch and "Have Your Say" online questionnaire goes live on internet | | |
| | Client and Staff information posters on display in Countywide LD DPS Respite and Day Services | 2 Respite Services 5 Day Services | |
| 7 th October 15 | Individual client contact regarding the Consultation Information and Meetings | 78 clients/ parents/carers | |
| 8 th October 2015 | Meetings with clients and carers in Hastings and Uckfield | Hastings: 8 attendees Uckfield: 11 attendees | |
| 9 th October 2015 | Meetings with clients and carers in Eastbourne for the Eastbourne CSS (ECSS) and for Park Lane (ECSS Supported Living Scheme) | Eastbourne CSS: 5 attendees Park Lane: 4 attendees | |
| 21 st October 2015 | Meeting with clients in Uckfield for Field Cottage (Wealden CSS Supported Living Scheme) | Field Cottage: 4 attendees | |
| 23 rd November 2015 | Meeting with clients at Park Lane (ECSS Supported Living Scheme) Additional meeting requested by Park Lane clients | Park Lane (ECSS): 7 attendees | |
| 24 th November 2015 | Updated information regarding the CSS hourly rate Hand delivered to clients Posted on Consultation website | 145 clients | |
| 25 th November 2015 | "Frequently Asked Questions" document posted on the consultation Internet page | | |
| 12 th December 2015 | Meeting with client and carer in own home | 1 meeting | |



Equality Impact Assessment

Project or Service Template



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LD DPS Fees and Charges for Community Support Services

| File ref: | | Issue No: | Version 1.0 |
|----------------|--------------|--------------|-------------|
| Date of Issue: | January 2016 | Review date: | July 2016 |

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How to use this form

Press F11 to jump from field to field in the form.

There are comments on some questions which you can view by pressing the show/hide pilcrow icon in the tool bar of Word. Some of you may use this to show paragraph and other punctuation marks:

You can delete the comments as you would for normal text, but they will not show up if you print out the form.

Part 1 – The Public Sector Equality Duty and Equality Impact Assessments (EIA)

- 1.1 The Council must have due regard to its Public Sector Equality Duty when making all decisions at member and officer level. An EIA is the best method by which the Council can determine the impact of a proposal on equalities, particularly for major decisions. However, the level of analysis should be proportionate to the relevance of the duty to the service or decision.
- 1.2 This is one of two forms that the County Council uses for Equality Impact Assessments, both of which are available on the intranet. This form is designed for any proposal, project or service. The other form looks at services or projects.

1.3 The Public Sector Equality Duty (PSED)

The public sector duty is set out at Section 149 of the Equality Act 2010. It requires the Council, when exercising its functions, to have "due regard" to the need to

- eliminate direct and indirect discrimination, harassment and victimisation and other conduct prohibited under the Act,
- advance equality of opportunity and foster good relations between those who share a "protected characteristic" and those who do not share that protected characteristic (see below for "protected characteristics"
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it

These are sometimes called equality aims.

1.4 A "protected characteristic" is defined in the Act as:

- age;
- disability;
- gender reassignment;
- pregnancy and maternity;
- race (including ethnic or national origins, colour or nationality)
- religion or belief;
- sex;
- sexual orientation.

Marriage and civil partnership are also a protected characteristic for the purposes of the duty to eliminate discrimination.

The previous public sector equalities duties only covered race, disability and gender.

1.5 East Sussex County Council also considers the following additional groups/factors when carry out analysis:

- Carers A carer spends a significant proportion of their life providing unpaid support to family or potentially friends. This could be caring for a relative, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems. [Carers at the Heart of 21stCentury Families and Communities, 2008]
- Literacy/Numeracy Skills
- Part time workers
- Rurality

1.6 Advancing equality (the second of the equality aims) involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristic
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people including steps to take account of disabled people's disabilities
- Encouraging people from protected groups to participate in public life or in other activities where their participation in disproportionately low
- NB Please note that, for disabled persons, the Council must have regard to the possible need for steps that amount to positive discrimination, to "level the playing field" with non-disabled persons, e.g. in accessing services through dedicated car parking spaces.

1.6 Guidance on Compliance with The Public Sector Equality Duty (PSED) for officers and decision makers:

- 1.6.1 To comply with the duty, the Council must have "due regard" to the three equality aims set out above. This means the PSED must be considered as a factor to consider alongside other relevant factors such as budgetary, economic and practical factors.
- 1.6.2 What regard is "due" in any given case will depend on the circumstances. A proposal which, if implemented, would have particularly negative or widespread effects on (say) women, or the elderly, or people of a particular ethnic group would require officers and members to give considerable regard to the equalities aims. A proposal which had limited differential or discriminatory effect will probably require less regard.

1.6.3 Some key points to note:

- The duty is regarded by the Courts as being very important.
- Officers and members must be aware of the duty and give it conscious consideration: e.g. by considering open-mindedly the EIA and its findings when making a decision. When members are taking a decision, this duty can't be delegated by the members, e.g. to an officer.
- EIAs must be evidence based.
- There must be an assessment of the practical impact of decisions on equalities, measures to avoid or mitigate negative impact and their effectiveness.
- There must be compliance with the duty when proposals are being formulated by officers and by members in taking decisions: the Council can't rely on an EIA produced after the decision is made.
- The duty is ongoing: EIA's should be developed over time and there should be evidence of monitoring impact after the decision.
- The duty is not, however, to achieve the three equality aims but to consider them the duty does not stop tough decisions sometimes being made.
- The decision maker may take into account other countervailing (i.e. opposing) factors that may objectively justify taking a decision which has negative impact on equalities (for instance, cost factors)
- 1.6.4 In addition to the Act, the Council is required to comply with any statutory Code of Practice issued by the Equality and Human Rights Commission. New Codes of Practice

under the new Act have yet to be published. However, Codes of Practice issued under the previous legislation remain relevant and the Equality and Human Rights Commission has also published guidance on the new public sector equality duty.

Part 2 – Aims and implementation of the proposal, project or service

2.1 What is being assessed?

a) Proposal or name of the project or service.

ASC Learning Disability Directly Provided Services (LD DPS) Community Support Services (CSS)

b) What is the main purpose or aims of proposal, project or service?

CSS provide support to adults (aged 18 years and over) with a Learning Disability, who live in the community.

CSS support people to live independently either in their own homes, by helping people manage their home or money, or with families to learn independent living skills like cooking or going shopping. The services people receive might be short term, for example learning to use the bus, or long term, for example support with paying bills or maintaining good health, to help people stay living in their home. CSS enable people to have choice and control of their own lives, to achieve their goals and be involved in their community.

Community Support Services were originally set up as a time-limited service, from budget allocations attained via different funding streams (LDDF and Supporting People), and therefore it was decided it would be a non-chargeable service.

CSS is now core funded, and provides both short term and ongoing services, in the same way as other LD services like Day services and Respite Services, which are chargeable.

Unit costs for the CSS are, on average, £23.43 per hour (actual cost to run service at November 2015). £20.00 per hour is used within the indicative price list (cost charged for the service).

In April 2014 a full review of CSS was completed which looked at how the service was organised, how much the service cost, and how it could be improved. The review found that the CSS offers a range of flexible, responsive support which promotes the health, wellbeing, independence and rights of individuals who are at the heart of care and support, that people are treated with dignity and respect, and are safe from abuse and neglect.

The review also found that that there are a number of areas where the service could be improved to increase the efficiency, and cost effectiveness. The review recommendations were that the service could be more efficient by:

- becoming "Agile" (using laptops)
- reducing cancellations (unused support time)
- keeping support visits to local areas
- offering different kinds of support (Emergency services and Respite) and
- using extra hours to support other services.

The changes will make the cost of the service lower, allow support workers to spend more time with clients, and make the service more consistent for clients.

The review noted that the proposal to charge for the service would also make the service sustainable, by reducing the core budget needed to fund the service.

It has been agreed that the service will consult with clients on the proposal to charge for Community Support Services. This will also bring the service in line with comparable provider services

CSS has an overall budget of £1,219,700 (for 15/16including Supported Living Service Field Cottage).

Based on changes anticipated and implemented within the review - in the last three years CSS have already made savings of £120,500

Over the next three years the ASC LD DPS department has to make further savings. In 2016/2017 LD Community Support and Respite Services need to save £100,000.

It is anticipated that introducing a charge for the service could save approximately £50,000 from the overall CSS budget.

c) Manager(s) and section or service responsible for completing the assessment

Sue Booker, Operations Manager for LD DPS Respite and Community Support Services

Shirin White, Service Coordinator for LD DPS Respite and Community Support Services

2.2 Who is affected by the proposal, project or service? Who is it intended to benefit and how?

In general, clients whom already receive support from other LD services, who have a completed financial assessment, and have an agreed client contribution figure, may be less affected.

The above client group are aware of their client contribution and, where a charge is applied, are accustomed to paying for a service. Clients who already pay their maximum client contribution may only be affected if a review of the financial assessment results in a different charge.

Across CSS there are some exceptions to the above and the following people will be affected by the proposal:

- Clients who have had a financial assessment who would be required to fully fund the cost of the service (clients who self fund)
- Clients whose maximum contribution is above the cost of their current service provision.
- Clients who do not receive any other LD services, and/or have not had a financial assessment. These clients will need to be assessed to ascertain if a client contribution would be paid.

Parents and carers of clients who live at home and are involved in supporting clients with managing finances may also be affected- see 4.9.2 c).

The proposal has been considered under "Charging for Care and Support: Policy and Procedures" (replaces the 'Fairer Contributions Policy' in April 2015 which has been updated to reflect the Care Act).

The policy sets out the principles around charging which include:

- ensure that people are not charged more than it is reasonably practicable for them to pay,
- reduce variation in the way people are assessed and charged,
- be clear and transparent, so people know what they will be charged,
- promote wellbeing, social inclusion and to support the vision of personalisation, independence, choice and control,
- support carers to look after their own health and wellbeing and to care effectively and safely,
- be person-focused, reflecting the variety of care and caring journeys and the range of options available to meet the person's needs,
- apply the charging rules equally, so those with similar needs or services are treated the same and to minimise any inconsistencies between care settings,
- encourage or enable those who wish to stay in or take up employment, education or training, or plan for the future cost of their needs to do so; and
- be sustainable for ESCC in the long term.

Under the "Charging for Care and Support Policy" which outlines government legislation and guidance about how care charges should be determined, the service should be chargeable, so the key reasons for the proposed change are that it is fair and equitable under the charging policy.

Based on current information from the financial assessment team (July 2015), most of the people currently using the service would be likely to be asked to make the minimum payment. The number asked to pay full cost is likely to be low.

The proposal will contribute to the future sustainability of the service by reducing the core budget required to operate.

2.3 How is, or will, the proposal, project or service be put into practice and who is, or will be, responsible for it?

Sue Booker (Operations Manager) and Shirin White (Service Coordinator) will be responsible for putting the proposal into practice.

If the proposal to charge for the service is recommended and agreed, clients, and any individual involved in supporting clients with finances, will be sent letters that will include the following:

- Explanation that the decision that has been taken to charge for service and why
- Reference to the Consultation website to access full copies of the report that will include an easy read version
- Information on charges for the service, including a change made to group support charges (a reduction) as a result of the consultation

- Information about the process for financial assessments including how clients will be contacted, informed about client contribution and invoicing procedures
- CSS cancellations policy that explains what happens in the event of a client or service cancellation.
- Information about what to do if they do not wish to continue having the service and the follow up action that would be taken in this instance
- Support that clients can access to understand this information (including reference to Advocacy)
- Dates of implementation.

To allow time to ensure that all clients have up to date information about their client contribution before the charge is implemented, it is proposed that the charge is introduced on 1 July 2016, with all financial assessments being completed during April and May 2016.

Letters and information will be in an easy read format.

Information will be updated on the Consultation website.

2.4 Are there any partners involved? E.g. NHS Trust, voluntary/community organisations, the private sector? If yes, how are partners involved?

No

2.5 Is this proposal, project or service affected by legislation, legislative change, service review or strategic planning activity?

No the project is not affected by legislation. The proposals were made following a local service review and the proposal is in keeping with the Charging for care and Support policy.

2.6 How do people access or how are people referred to your proposal, project or service? Please explain fully.

Referrals are made by Assessment and Care Management (ACM). People will have a diagnosed Learning Disability in order to be eligible for a service. The ACM will undertake an assessment to determine need. Following assessment, each service is tailored to meet client needs with an emphasis on enabling and supporting people to meet their full potential, providing opportunities to achieve meaningful social inclusion, choice and control, whilst also ensuring they are safeguarded from harm.

2.7 If there is a referral method how are people assessed to use the proposal, project or service? Please explain fully.

See above

2.8 How, when and where is your proposal, project or service provided? Please explain fully.

CSS provides support to adults with a Learning Disability who live in the community.

There are 3 registered Community Support Services (CSS) across East Sussex:

CSS Eastbourne – Covering Eastbourne, Polegate and Seaford Area including Park Lane Supported Living Scheme

CSS Wealden – Covering Lewes and Wealden area including Field Cottage,

Supported Living Accommodation

CSS Hastings – Covering Hastings, Bexhill and Rother areas.

The CSS scheduled hours are allocated to each client depending on individual assessed need and support requirements.

Individuals may be living in their own independent accommodation, or in supported living or with parents/families/carers. The service is providing support to a total of 146 clients with a wide range of abilities and needs.

The service provided to clients can range from ½ hour a week, to help with one particular task such as reading correspondence, to 15 hours a week to support people with a range of tasks such as daily personal care, shopping and general household management. The duration of the visits can vary from ½ hr to 4 hours per visit (not including travelling time).

Support is categorised as Long Term or Short Term:

- Long Term support means that it is likely the client will need ongoing support to
 develop or maintain levels of independence in their home or community, for
 example to manage finances and maintain a tenancy.
- **Short Term** support is specifically time limited pieces of work to be undertaken with clients, usually for skills development which can be from between 6 weeks and 6 months, for example Travel Training.

Park Lane is a supported living scheme owned by A2 Dominion. Park Lane does not have a continuous staffing presence. CSS provide sleep in staff cover, which is attached to the accommodation tenancy agreement.

CSS also deliver the daytime floating 1-1 support to individual tenants. Various levels of support are provided according to individual assessed need (ranging from 3 hours per week to 29 hours per week).

Field Cottage is a supported living accommodation supporting 6 tenants with varying levels of support needs.

Field Cottage has a discrete staff team that is managed via Wealden CSS. The team provide continuous staff cover, offering a core baseline support level of one staff member, 15 hours per day, plus sleep in cover. Additional staffing for group and individual support is allocated according to clients' needs (up to 3 staff members per shift).

Part 3 – Methodology, consultation, data and research used to determine impact on protected characteristics.

3.1 List all examples of quantitative and qualitative data or any consultation information available that will enable the impact assessment to be undertaken.

| | Types of evidence identified as relevant have X marked against them | | | | | | | | |
|---|--|---|---|--|--|--|--|--|--|
| | Employee Monitoring Data | | Staff Surveys | | | | | | |
| X | Service User Data | | Contract/Supplier Monitoring Data | | | | | | |
| X | Recent Local Consultations | | Data from other agencies, e.g. Police, Health, Fire and Rescue Services, third sector | | | | | | |
| | Complaints | | Risk Assessments | | | | | | |
| X | Service User Surveys | Х | Research Findings | | | | | | |
| | Census Data | | East Sussex Demographics | | | | | | |
| | Previous Equality Impact Assessments | | National Reports | | | | | | |
| | Other organisations Equality Impact Assessments | Х | Any other evidence | | | | | | |

3.2 Evidence of complaints against the proposal, project or service on grounds of discrimination.

None.

3.3 If you carried out any consultation or research on the proposal, project or service explain what consultation has been carried out.

The consultation launch date was 1st October 2015.

Clients, and anyone who is involved with supporting the client with their finances, were sent a letter and an Easy Read Leaflet explaining the proposal and inviting them to attend a meeting in October 15 for further information and support.

The consultation questionnaire was also sent out with this information. Example copies of these documents can be found in *annexes 1, 2 and 3*.

The service managers attempted to contact each client, (or clients parent/family/carer where appropriate) before the scheduled meetings, to check if the client had received the information, if they would like to attend a meeting, or have alternative support with the information, and if they needed any assistance with travelling to the meeting.

At the consultation launch meetings clients were given understandable information about the proposal, opportunity to meet with managers about the changes, and encouraged to feedback their view using the number of systems available. Advocacy support was also available at the launch meetings, and for individuals to request in 1-1 meetings

Managers from the ASC Financial Services and ASC Care Management Team attended the launch meetings and were available to offer information and support during this process to help clients understand how they might be personally affected by the proposed change. An example copy of the presentation can be found in *annex 4*.

In response to a request for further support, an additional meeting was arranged for the nine tenants living at Park Lane on 23rd November 2015. A copy of the meeting notes can be found in *annex 5*.

In total 34 clients/ parents/ carers attended meetings across the 4 events.

Follow up support to clients was offered, including the offer of 1:1 meetings, or telephone calls from a manager, to talk about the consultation and give feedback.

We were not be able to provide detailed/personalised financial assessment information for every individual, however if clients requested specific detail about their personal circumstances they were able to ask for an additional meeting with the financial assessment service and have an "initial" financial assessment.

Nine clients asked for this support and to date seven clients have had an initial financial assessment to provide information about how much their client contribution would be.

One client benefited from this process as the financial assessment team were able to identify some benefits the client was entitled to, but not accessing, resulting in the client being better off financially. This demonstrated that some clients might be positively affected from having a financial assessment.

Figures calculated from the seven financial assessments completed showed that an **average** of £24.26 per week **maximum** client contribution payment would be requested if the proposal to charge was agreed.

At the mid-way point of the consultation questions and comments from the meetings were collated and a "Frequently Asked Questions" (FAQs) document produced. The FAQs were shared with clients and placed on the consultation website. A copy of the FAQs and associated documents can be seen at *annexes 6 and 6A*.

We also sought feedback from managers by attending the ASC Inclusion Advisory Group (IAG) in July 2015. The IAG recommendations for the consultation were as follows:

- That any clients who withdraw from, or decline, as a result of the service charging, should this be agreed, are closely monitored.
- That client's have good access to Advocacy during the process of the consultation, and ongoing if required or requested.
- The clients have a good awareness of how to appeal the financial assessment decision if they do not agree with it, or feel that it adversely affects them.
- That there is a personalised approach to the consultation and that information is provided in an understandable and suitable way.

Following consultation and agreement, financial assessments will be recompleted, and support plans reviewed for all clients.

3.4 What does the consultation, research and/or data indicate about the positive or negative impact of the proposal, project or service?

Consultation Report Summary

In summary, 64 responses were received with the majority (48) from a respondent described as a 'community support service user'.

In answer to the overall question 'Do you think we should ask people to pay for CSS?' 10 people responded yes; 34 no; 18 not sure; and 2 not answered.

The top three reasons why people felt a charge should not be levied were as follows:

- Due to the Expense (13 respondents)
- It was Unfair (7 respondents);
- Service should be funded in other ways (3 respondents)

The responses stating 'not sure' were analysed further and the results confirmed that the reason for this response was largely related to the fact that people did not know how much they would need to pay, rather than because people did not understand the question.

In relation to this question, clients were invited to provide further information. Some of the client comments are as follows:

If you do think people should pay, why do you feel this way?

"Because I will be able to go out"

"Because if there is no money for the service, then we will lose it and that will be a great shame"

"If the service is good we should pay for it. But I do worry about how much. If you want something good in life you have to pay for it.

"Only if people can afford it"

If you do not think people should pay, why do you feel this way?

"Because I can't afford to pay"

"Because I don't think it is fair for people with a disability"

"Because I am on benefits"

"Because some of us don't have paid jobs so we don't get much money...for support"

In response to the question 'would you stop using CSS if you had to pay for it?' 16 people said yes and 23 not sure. To avoid the risk of clients becoming isolated, or their health deteriorating and their needs increasing as a result of charging, clients were advised that that a full social care review would be undertaken for anyone who declines a service if the charge is implemented – see FAQs in 3.3.

Key themes and concerns from the client feedback received from questionnaires, email inbox and meetings were as follows:

- Clients would not be able to afford to pay for the service.
- Clients would be left with less money for bills, day to day living costs and personal spending (including other activities).
- Clients might choose to stop having the service and therefore be more isolated

- That the individuals clients contribution would increase
- Clients might be upset or feel stressed (due to having less money) if they have to pay for the service.
- Clients health and wellbeing might be affected by having to pay extra costs

Individual concerns raised were as follows;

- Park lane if clients decided to have support from a different service during the day, this might disadvantage them from accessing any group support provided from the CSS.
- The financial assessment process is intrusive

Other comments included:

- "Too much has already been taken away from vulnerable people already with the cuts on welfare"
- "I will not have much money left"
- "We already pay for this with our taxes"
- "The cost seems high which may deter the people who really need it. This may lead to more loneliness and isolation"
- "...if this is a case of coming in to tell me what I have to cut back on, and start examining my spending and income, it is highly insulting and an invasion of my privacy" "It is a shock to pay for something I got for free before"

The consultation information showed that clients would not know exactly what affect charging for the service might have, until they knew how much they would need to contribute towards to support. In response to this, if the charging proposal is agreed, clients will be given the opportunity to have a financial assessment completed and information about what their client contribution might be at least 4 weeks before the charging policy is implemented.

Positive Impacts

Some clients might be positively affected from having a financial assessment as this process also supports clients to check they are accessing all the benefits they are entitled to, and can provide financial advice.

During the consultation an initial financial assessment was completed with one client (following a request). The assessment found that the client was not accessing all the benefits that he was entitled to, and found there would be an overall increase in his income (including the potential charge for CSS) once the benefits were in place.

A full copy of the Consultation report, including and easy read version, will be available on the consultation website in February 2016:

https://consultation.eastsussex.gov.uk/adult-social-care/community-support-service2015

Part 4 – Assessment of impact

- 4.1 Age: Testing of disproportionate, negative, neutral or positive impact.
 - a) How is this protected characteristic reflected in the County/District/Borough?

The overall population of East Sussex is **527,209** (2011Census data) and is projected to continue increasing over the next few years. The population by age breakdown for East Sussex is:

| Age | Population |
|-------|------------|
| 15-29 | 83,791 |
| 30-44 | 90,220 |
| 45-64 | 147,613 |
| 65+ | 120,722 |

People are living longer and by 2020, it is estimated that around 38% of the UK population will be aged 50 plus and in East Sussex the figure is likely to be as high as 50%.

We know that East Sussex has a higher than average older population with around 23% of people aged over 65, compared to the national average of 16%. There are 228,881 people aged 50+ (43.4%) in East Sussex, and 20,022 (3.8%) of these are aged over 85 – East Sussex has one of the highest populations of people aged 85+ in the UK. (2011 mid-year estimates, based on 2011 Census data). The highest percentage of people over 65 years of age is in Rother, where the figure is 28.6% of the total East Sussex population.

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

Based on the following statistics: Clients with an open Service Agreements as at 20th November 2015, where supplier was a LD Community Support Team

Breakdown by age

| Age | No | % |
|---------|-----|-------|
| 18 - 49 | 92 | 63.0% |
| 50 - 64 | 39 | 26.7% |
| 65 - 74 | 11 | 7.5% |
| 75 - 84 | 4 | 2.7% |
| 85 + | 0 | 0.0% |
| TOTAL | 146 | |

c) Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

No

- d) What is the proposal, project or service's impact on different ages/age groups?
- 1) The proposal may impact clients within different age groups, due to parameters set out within financial assessment processes. Financial assessments take the following ages ranges into consideration:
 - 18-24
 - 25-64
 - 65+

Different age bands give rise to a different Minimum Income Guarantee (MIG). The MIG is the minimum amount we are required to leave the client with for day to day living costs when working out what they can pay.

The basic MIG for each age group is as follows

| Age band | Single person | Member of couple |
|-------------------------------|---------------|------------------|
| 18-14 | £112.75 | £100.55 |
| 25 to pension entitlement age | £131.75 | £100.55 |
| Over pension entitlement age | £189.00 | £144.30 |

2) If clients choose to cease having CSS, then there may be different ranges of alternative service available dependant on the client's age.

Older people may have more options of alternative services in terms of day and home care provision.

Working age people may have services available to them that are free (Homework's and Carers breaks) but that are time limited.

- 3) Older people may not have the same levels of family and carer support networks as working age adults.
- 4) Older people might be more vulnerable due to their frailty, if they chose to cease the service.
- e) What actions are to/or will be taken to avoid any negative impact or to better advance equality?
- 1) Financial assessments are carried out in line with 'The Care and Support (Charging and Assessment of Resources) Regulations 2014'. ESCC have a "Charging for Care and Support Policy" which outlines government legislation and guidance about how care charges should be determined.

This legislation states 'In assessing what a person can afford to contribute a local authority must apply the upper and lower capital limits.'

The financial assessment looks at how much service the person receives and ensures that people are not charged more than it is reasonably practicable for them to pay, therefore charging rules are applied equally to each individual.

This charge will vary, based on the individual's personal circumstances. People will pay either part of the cost, none of the cost or all of the cost of their service.

- 2) Clients will be signposted to all available alternative services, by Adult Care Management, Community Learning Disability Team (CLDT) and CSS, and supported to access these if required / requested.
- 3) and 4) Older people would have increased access to older peoples services of which there are larger numbers of services available. ESCC have a statutory obligation to oversee clients support and safeguarding needs. The CLDT will be involved in any changes to client care provision and will continue to review clients care provision to ensure the client's needs are being met. CSS will alert CLDT to any clients who choose to reduce or cease their service. CLDT will undertake a full assessment review to ensure that current needs are still met and monitored.

f) Provide details of the mitigation.

All clients will have the same access to the service and will have the same processes applied to financial assessment and all clients accessing CSS will need to have a financial assessment.

Under the "Charging for Care and Support Policy" which outlines government legislation and guidance about how care charges should be determined, the service should be chargeable, so the key reasons for the proposed change are that it is fair and equitable under the charging policy.

Clients level of service will not be affected, and there will be no disruption to services for people should the charging policy be agreed. Clients will still be able to use the service but may be reluctant to pay for them.

People who receive other services like the CSS have to pay for them.

When people are making choices about whether they would like to continue using the service, their mental capacity will be considered and assessed by CLDT to ensure that clients are able to make informed choices and understand the consequences of choosing to cease the service, compared to paying for it.

CLDT will also ensure that the clients support plan is fully reviewed to understand what support each individual needs.

g) How will any mitigation measures be monitored?

CSS will continue to monitor the service for all clients.

CSS will record and report on the following:

- Client contributions assessed and paid by clients
- Numbers of clients who have chosen to reduce or cease the service, in short and longer term.
- Follow up action and outcomes for clients who have chosen to reduce or cease the service, in short and longer term.
- Impact for clients who have had a financial assessment who would be required to fully fund the cost of the service (clients who self fund)

4.2 Disability: Testing of disproportionate, negative, neutral or positive impact.

a) How is this protected characteristic reflected in the County /District/Borough?

Residents(working age only) with limiting long-term illness in 2011 by districts (numbers)

| | | People with long- term health problem or | Day-to- day activities limited a | Day-to- day activities limited a | People without long-term health problem or |
|------------|------------|---|---|---|---|
| Type | All people | disability | little | lot | disability |
| Geography | | | | | |
| England & | | | | | |
| Wales | 56075912 | 10048441 | 5278729 | 4769712 | 46027471 |
| South East | 8634750 | 1356204 | 762561 | 593643 | 7278546 |
| East | | | | | |
| Sussex | 526671 | 107145 | 58902 | 48243 | 419526 |
| Eastbourne | 99412 | 20831 | 11209 | 9622 | 78581 |
| Hastings | 90254 | 19956 | 10375 | 9581 | 70298 |
| Lewes | 97502 | 19054 | 10583 | 8471 | 78448 |
| Rother | 90588 | 21242 | 11591 | 9651 | 69346 |
| Wealden | 148915 | 26062 | 15144 | 10918 | 122853 |

Residents (working age only with limiting long-term illness in 2011 by districts (%)

| | All | People with long-term health problem or | Day-to- day activities limited a | Day-to- day activities limited a | People without long-term health problem or |
|------------|--------|---|---|---|--|
| Туре | people | disability | little | lot | disability |
| Geography | | | | | - |
| England & | | | | | |
| Wales | 100 | 17.9 | 9.4 | 8.5 | 82.1 |
| South East | 100 | 15.7 | 8.8 | 6.9 | 84.3 |
| East | 400 | 00.0 | 44.0 | 0.0 | 70.7 |
| Sussex | 100 | 20.3 | 11.2 | 9.2 | 79.7 |
| Eastbourne | 100 | 21 | 11.3 | 9.7 | 79 |
| Hastings | 100 | 22.1 | 11.5 | 10.6 | 77.9 |
| Lewes | 100 | 19.5 | 10.9 | 8.7 | 80.5 |
| Rother | 100 | 23.4 | 12.8 | 10.7 | 76.6 |
| Wealden | 100 | 17.5 | 10.2 | 7.3 | 82.5 |

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

All clients receiving CSS have been assessed as having a Learning Disability.

c) Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

Yes. Clients accessing CSS will be affected by the proposal, and parent/carers who support that individual may be affected (see 4.9.2).

d) What is the proposal, project or service's impact on people who have a disability?

Implementation of means tested client contribution, where the service has previously been non-chargeable.

Clients with different individual needs may be impacted in different ways by the proposal:

Clients who already access other DPS, or chargeable services, will already have a completed financial assessment, will be aware of their client contribution and be accustomed to paying towards the service.

Clients who do not access any other DPS, and only require CSS to meet their needs will be more affected as they will need to have a financial assessment, and dependant on the outcome will need to start paying towards service that previously was not charged for.

Generally people who have been assessed as needing access to day services or respite services will be less affected as they are already paying client contribution.

e) What actions are to/ or will be taken to avoid any negative impact or to better advance equality?

To consult with clients to better understand negative impact of the proposal.

To equitably apply the ESCC process for Charging for Care and Support policy for all clients.

Some clients may benefit from the financial assessment process. During the consultation an initial financial assessment was completed with one client (following a request). The assessment found that the client was not accessing all the benefits that he was entitled to, and found there would be an overall increase in his income (including the potential charge for CSS) once the benefits were in place.

To provide additional support to clients via:

- 1:1 meetings or telephone contact with managers,
- individual support to understand the information by CSS workers
- Support during the financial assessment meeting by the CSS workers

- Referral and access to advocacy services
- Support with budgeting from CSS (or other requested service)

f) Provide details of any mitigation.

All clients will have the same access to the service and will have the same processes applied to financial assessment and all clients accessing CSS will need to have a financial assessment.

Under the "Charging for Care and Support Policy" which outlines government legislation and guidance about how care charges should be determined, the service should be chargeable, so the key reasons for the proposed change are that it is fair and equitable under the charging policy.

Client's level of service will not be affected, and there will be no disruption to services for people, should the charging policy be agreed. Clients will still be able to use the service but may be reluctant to pay.

People who receive other service like the CSS have to pay for them.

When people are making choices about whether they would like to continue using the service, their mental capacity will be considered and assessed by CLDT to ensure that clients are able to make informed choices and understand the consequences of choosing to cease the service, compared to paying for it.

CLDT will also ensure that the clients support plan is in place and reviewed to understand what support each individual needs.

g) How will any mitigation measures be monitored?

CSS will continue to monitor services for all clients.

CSS will record and report on the following:

- Client contributions assessed and paid by clients
- Numbers of clients who have chosen to reduce or cease the service, in the short and longer term.
- Follow up action and outcomes for clients who have chosen to reduce or cease the service, in the short and longer term.
- Impact for clients who have had a financial assessment who would be required to fully fund the cost of the service (clients who self fund)

- 4.3 Ethnicity: Testing of disproportionate, negative, neutral or positive impact.
- a) How is this protected characteristic reflected in the County /District/Borough?

The overall population of East Sussex is 527,209 (2011Census data) and is projected to continue increasing over the next few years. The population aged 65+ (males) and 60+ (females) by ethnic group for East Sussex is shown in the table in Section 4.1above, page 12. Census figures below demonstrate ethnic diversity in the area as 8.3% overall. Increases are particularly in the 'White other' and 'mixed' categories reflecting East European and other white groups migration and other societal changes. Largest overall minority populations are 'White other' and 'Asian and Asian British'.

Ethnic group in 2011 by districts

| Ethnicity | All people | British and Northern Irish | Irish | Gypsy or Irish Traveller | Other White | All Mixed | All Asian or Asian British | All Black or Black British | Other ethnic group |
|------------|------------|-------------------------------------|-------|--------------------------------|---|---------------------------------------|--|--|--------------------|
| Geography | рооріо | | | 114101101 | *************************************** | · · · · · · · · · · · · · · · · · · · | 2110011 | 21111011 | 9.045 |
| England & | | | | | | | | | |
| Wales | 100 | 80.5 | 0.9 | 0.1 | 4.4 | 2.2 | 7.5 | 3.3 | 1 |
| South East | 100 | 85.2 | 0.9 | 0.2 | 4.4 | 1.9 | 5.2 | 1.6 | 0.6 |
| East | | | | | | | | | |
| Sussex | 100 | 91.7 | 8.0 | 0.2 | 3.4 | 1.4 | 1.7 | 0.6 | 0.3 |
| Eastbourne | 100 | 87.4 | 1 | 0.1 | 5.6 | 1.8 | 2.8 | 0.8 | 0.5 |
| Hastings | 100 | 89.3 | 8.0 | 0.2 | 3.5 | 2.2 | 2.4 | 1.2 | 0.5 |
| Lewes | 100 | 92.5 | 0.8 | 0.1 | 3.2 | 1.3 | 1.4 | 0.4 | 0.3 |
| Rother | 100 | 94.1 | 0.7 | 0.1 | 2.1 | 1.1 | 1.2 | 0.3 | 0.2 |
| Wealden | 100 | 93.8 | 0.6 | 0.2 | 2.8 | 1 | 1.2 | 0.2 | 0.2 |

Ethnic group in 2011 by districts (%)

| Ethnicity | All people | British and Northern Irish | Irish | Gypsy or Irish Traveller | Other White | All Mixed | All Asian or Asian British | All Black or Black British | Other ethnic group |
|-----------------|------------|-------------------------------------|--------|--------------------------------|----------------|--------------|----------------------------------|----------------------------------|--------------------|
| Geography | | | | | | | | | |
| England & Wales | 56075912 | 45134686 | 531087 | 57680 | 2485942 | 1224400 | 4213531 | 1864890 | 563696 |
| South East | 8634750 | 7358998 | 73571 | 14542 | 380709 | 167764 | 452042 | 136013 | 51111 |
| East | | | | | | | | | |
| Sussex | 526671 | 482769 | 3966 | 815 | 17872 | 7473 | 9143 | 2912 | 1721 |
| Eastbourne | 99412 | 86903 | 978 | 66 | 5561 | 1791 | 2795 | 783 | 535 |
| Hastings | 90254 | 80624 | 702 | 150 | 3155 | 1948 | 2126 | 1065 | 484 |
| Lewes | 97502 | 90218 | 757 | 97 | 3087 | 1275 | 1400 | 416 | 252 |
| Rother | 90588 | 85279 | 596 | 134 | 1942 | 1031 | 1103 | 305 | 198 |
| Wealden | 148915 | 139745 | 933 | 368 | 4127 | 1428 | 1719 | 343 | 252 |

Ethnic group in 2011 by gender: Male

| | | | White: | | All Asian | | All Chinese or Other |
|------------|------------|----------|--------|--------|-----------|---------------|----------------------|
| Ethnic | | White: | Other | All | or Asian | All Black or | Ethnic |
| groups | All people | British | White | Mixed | British | Black British | Group |
| Geography | | | | | | | |
| England | 25514600 | 21065200 | 906400 | 481200 | 1623800 | 751400 | 424100 |
| South East | 4134900 | 3549400 | 154700 | 72200 | 182000 | 78700 | 58800 |
| East | | | | | | | |
| Sussex | 245100 | 219700 | 7200 | 3600 | 5900 | 4100 | 2500 |
| Eastbourne | 45600 | 39900 | 1700 | 800 | 1500 | 700 | 600 |
| Hastings | 42200 | 36600 | 1300 | 800 | 1000 | 1600 | 500 |
| Lewes | 46400 | 42100 | 1300 | 700 | 1000 | 400 | 500 |
| Rother | 42200 | 38400 | 900 | 600 | 1100 | 600 | 300 |
| Wealden | 68800 | 62700 | 1900 | 800 | 1500 | 800 | 600 |

Ethnic group in 2011 by gender: Male (%)

| | All | White: | White: Other | All | All Asian or Asian | All Black or Black | All Chinese or Other Ethnic |
|---------------|--------|---------|-----------------|-------|-----------------------------|-----------------------------|--------------------------------------|
| Ethnic groups | people | British | White | Mixed | British | British | Group |
| Geography | | | | | | | |
| England | 49.2 | 40.7 | 1.7 | 0.9 | 3.1 | 1.5 | 0.8 |
| South East | 49 | 42.1 | 1.8 | 0.9 | 2.2 | 0.9 | 0.7 |
| East Sussex | 47.9 | 42.9 | 1.4 | 0.7 | 1.2 | 0.8 | 0.5 |
| Eastbourne | 47.3 | 41.4 | 1.8 | 0.8 | 1.6 | 0.7 | 0.6 |
| Hastings | 48.6 | 42.1 | 1.5 | 0.9 | 1.2 | 1.8 | 0.6 |
| Lewes | 48.1 | 43.7 | 1.3 | 0.7 | 1 | 0.4 | 0.5 |
| Rother | 47.3 | 43 | 1 | 0.7 | 1.2 | 0.7 | 0.3 |
| Wealden | 48.1 | 43.8 | 1.3 | 0.6 | 1 | 0.6 | 0.4 |

Ethnic group in 2011 by gender: Female

| | | | White: | | All Asian | All Black or | All Chinese or Other |
|---------------|------------|----------|--------|--------|-----------|--------------------|----------------------------|
| | | White: | Other | All | or Asian | Black | Ethnic |
| Ethnic groups | All people | British | White | Mixed | British | British | Group |
| Geography | | | | | | | |
| England | 26295200 | 21828100 | 955400 | 475500 | 1542900 | 770000 | 427500 |
| South East | 4300800 | 3681700 | 180000 | 72700 | 175000 | 79300 | 66000 |
| East Sussex | 266900 | 238500 | 9100 | 3800 | 5800 | 4200 | 2900 |
| Eastbourne | 50900 | 44400 | 2100 | 800 | 1600 | 800 | 800 |
| Hastings | 44800 | 39000 | 1600 | 800 | 900 | 1600 | 500 |
| Lewes | 50000 | 45200 | 1700 | 700 | 900 | 400 | 500 |
| Rother | 47000 | 42700 | 1200 | 600 | 1000 | 600 | 400 |
| Wealden | 74300 | 67300 | 2500 | 800 | 1300 | 800 | 700 |

Ethnic group in 2011 by gender: Female (%)

| Ethnic groups | All | White: | White: | All | All | All | All |
|---------------|-----|--------|--------|-----|-----|-----|-----|
|---------------|-----|--------|--------|-----|-----|-----|-----|

| | people | British | Other White | Mixed | Asian or Asian British | Black or Black British | Chinese or Other Ethnic Group |
|-------------|--------|---------|----------------|-------|---------------------------------|---------------------------------|--|
| Geography | | | | | | | • |
| England | 50.8 | 42.1 | 1.8 | 0.9 | 3 | 1.5 | 8.0 |
| South East | 51 | 43.6 | 2.1 | 0.9 | 2.1 | 0.9 | 0.8 |
| East Sussex | 52.1 | 46.6 | 1.8 | 0.7 | 1.1 | 0.8 | 0.6 |
| Eastbourne | 52.8 | 46.1 | 2.2 | 0.8 | 1.7 | 0.8 | 8.0 |
| Hastings | 51.6 | 44.9 | 1.8 | 0.9 | 1 | 1.8 | 0.6 |
| Lewes | 51.9 | 46.9 | 1.8 | 0.7 | 0.9 | 0.4 | 0.5 |
| Rother | 52.7 | 47.9 | 1.3 | 0.7 | 1.1 | 0.7 | 0.4 |
| Wealden | 51.9 | 47 | 1.7 | 0.6 | 0.9 | 0.6 | 0.5 |

Vandu Language Services report the following languages to be commonly in use in the county:

- Arabic
- Bengali
- British sign language (BSL)
- Dari
- English
- Farsi
- Greek
- Italian
- Polish
- Portuguese
- Turkish

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

Based on the following statistics: Clients with an open Service Agreements as at 20th November 2015, where supplier was a LD Community Support Team

Number of people receiving a service by preferred language

| Preferred language | No | % |
|--------------------|-----|-------|
| Arabic | 0 | 0.0% |
| Bengali | 0 | 0.0% |
| British Sign | | |
| Language | 0 | 0.0% |
| Cantonese | 0 | 0.0% |
| Czech | 0 | 0.0% |
| Dari | 0 | 0.0% |
| English | 137 | 93.8% |
| Farsi | 0 | 0.0% |
| Greek | 0 | 0.0% |
| Hindi | 0 | 0.0% |
| Italian | 0 | 0.0% |
| Other language | 0 | 0.0% |
| Polish | 0 | 0.0% |
| Portugese | 0 | 0.0% |
| Sorani | 0 | 0.0% |
| Spanish | 0 | 0.0% |
| Not recorded | 6 | 4.1% |
| Unknown | 3 | 2.1% |
| Urdu | 0 | 0.0% |

Based on the following statistics: Clients with an open Service Agreements as at 20th November 2015, where supplier was a LD Community Support Team

Breakdown by ethnicity

| Dicaracwii by cullingity | | |
|--------------------------|-----|-------|
| Ethnicity | No | % |
| White British | 141 | 96.6% |
| White - other | 0 | 0.0% |
| Black / Black British | 0 | 0.0% |
| Asian / Asian British | 0 | 0.0% |
| Mixed | 3 | 2.1% |
| Any other ethnic group | 2 | 1.4% |
| Not stated | 0 | 0.0% |
| Total | 146 | |

| Ethnicity | No | % |
|-------------------------------------|-----|-------|
| White British | 141 | 96.6% |
| White - Irish | 0 | 0.0% |
| White - Gypsy / Romany | 0 | 0.0% |
| White - Traveller | 0 | 0.0% |
| White - Any other background | 0 | 0.0% |
| Black / Black British - African | 0 | 0.0% |
| Black / Black British - Caribbean | 0 | 0.0% |
| Black / Black British - Any other | 0 | 0.0% |
| background | | |
| Asian / Asian British - Bangladeshi | 0 | 0.0% |
| Asian / Asian British - Indian | 0 | 0.0% |
| Asian / Asian British - Chinese | 0 | 0.0% |
| Asian / Asian British - Pakistani | 0 | 0.0% |
| Asian / Asian British - Any other | 0 | 0.0% |
| background | | |
| Mixed - White & Black African | 0 | 0.0% |
| Mixed - White & Black Caribbean | 0 | 0.0% |
| Mixed - White & Asian | 0 | 0.0% |
| Mixed - Any other background | 3 | 2.1% |
| Any other Ethnic Group - Arab | 0 | 0.0% |
| Any other Ethnic Group - Other | 2 | 1.4% |
| Not Stated - Not Yet Obtained | 0 | 0.0% |
| Not Stated - Refused | 0 | 0.0% |
| Total | 146 | |

c) Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

No

d) What is the proposal, project or service's impact on those who are from different ethnic backgrounds?

None.

e) What actions are to/ or will be taken to avoid any negative impact or to better advance equality?

CSS check if clients have any individual needs in relation to culture, language, religion or personal beliefs.

Additional communication services would be sought as required, for example translator services.

f) Provide details of any mitigation.

N/A

g) How will any mitigation measures be monitored?

N/A

4.4 Gender/Transgender: Testing of disproportionate, negative, neutral or positive impact

This protected characteristic is not specifically impacted by the proposals.

- 4.5 Marital Status/Civil Partnership: Testing of disproportionate, negative, neutral or positive impact.
 - a) How is this protected characteristic target group reflected in the County/District/Borough?

Marital status in 2011 – districts

| Marital Status | All people aged 16 and over | Single | Married | In a registered same-sex civil partnershi p | Separate d | Divorce d | Widowe d |
|-------------------|--------------------------------------|---------|---------|--|---------------|--------------|-------------|
| Geography | | | | | | | |
| England & | 4549678 | 1573027 | 2119668 | | | 409933 | 316966 |
| Wales | 0 | 5 | 4 | 104942 | 1195882 | 0 | 7 |
| South East | 6992666 | 2230242 | 3448947 | 16398 | 177075 | 637433 | 482571 |
| East Sussex | 435515 | 126922 | 210786 | 1471 | 11954 | 46470 | 37912 |
| Eastbourn | | | | | | | |
| е | 82691 | 27558 | 35418 | 290 | 2454 | 9487 | 7484 |
| Hastings | 73488 | 26836 | 28842 | 235 | 2731 | 9431 | 5413 |
| Lewes | 80534 | 23126 | 39956 | 403 | 2049 | 8225 | 6775 |
| Rother | 76359 | 18891 | 39152 | 247 | 1957 | 7871 | 8241 |
| Wealden | 122443 | 30511 | 67418 | 296 | 2763 | 11456 | 9999 |

Marital status in 2011 – districts(%)

| Marital Status | All people aged 16 and over | Single | Marrie d | In a registered same-sex civil partnershi p | Separate d | Divorce d | Widowe d |
|-------------------|-----------------------------|--------|-------------|---|---------------|--------------|-------------|
| Geography | | | | | | | |
| England & | | | | | | | |
| Wales | 100 | 34.6 | 46.6 | 0.2 | 2.6 | 9 | 7 |
| South East | 100 | 31.9 | 49.3 | 0.2 | 2.5 | 9.1 | 6.9 |
| East Sussex | 100 | 29.1 | 48.4 | 0.3 | 2.7 | 10.7 | 8.7 |
| Eastbourne | 100 | 33.3 | 42.8 | 0.4 | 3 | 11.5 | 9.1 |
| Hastings | 100 | 36.5 | 39.2 | 0.3 | 3.7 | 12.8 | 7.4 |
| Lewes | 100 | 28.7 | 49.6 | 0.5 | 2.5 | 10.2 | 8.4 |
| Rother | 100 | 24.7 | 51.3 | 0.3 | 2.6 | 10.3 | 10.8 |
| Wealden | 100 | 24.9 | 55.1 | 0.2 | 2.3 | 9.4 | 8.2 |

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

CSS support one client who is married.

c) Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

No

d) What is the proposal, project or service's impact on people who are married or same sex couples who have celebrated a civil partnership?

Regarding financial assessment - Anyone who is part of a couple, married or unmarried, is assessed based on their own resources only. We do not take account of their partner's income and capital. We also need to consider the impact of charging the client upon their partner though so if the partner does not have sufficient income to meet their own resources we may reduce the clients charge accordingly.

e) What actions are to/ or will be taken to avoid any negative impact or to better advance equality?

N/A

f) Provide details of any mitigation.

N/A

g) How will any mitigation measures be monitored?

N/A

4.6 Pregnancy and maternity: Testing of disproportionate, negative, neutral or positive impact.

This protected characteristic is not specifically impacted by the proposals.

4.7 Religion, Belief: Testing of disproportionate, negative, neutral or positive impact.

This protected characteristic is not specifically impacted by the proposals.

4.8 Sexual Orientation - Gay, Lesbian, Bisexual and Heterosexual: Testing of disproportionate, negative, neutral or positive impact.

This protected characteristic is not specifically impacted by the proposals.

4.9 Other: Additional groups/factors that may experience impacts - testing of disproportionate, negative, neutral or positive impact.

4.9.1 Rural population

a) How are these groups/factors reflected in the County/District/ Borough?

Population by age groups and gender in 2011

| Age | All people | 0-14 | 15-29 | 30-44 | 45-64 | 65+ |
|-------------|------------|---------|----------|----------|----------|---------|
| Geography | | | | | | |
| England and | | | | | | |
| Wales | 56075912 | 9891138 | 11183239 | 11515165 | 14263297 | 9223073 |
| South East | 8634750 | 1535168 | 1604028 | 1761278 | 2252256 | 1482020 |
| East Sussex | 526671 | 84910 | 83732 | 90763 | 147503 | 119763 |
| Eastbourne | 99412 | 15574 | 18407 | 18195 | 24933 | 22303 |
| Hastings | 90254 | 15659 | 17149 | 17677 | 24368 | 15401 |
| Lewes | 97502 | 15832 | 14854 | 16907 | 27755 | 22154 |
| Rother | 90588 | 13214 | 12047 | 13026 | 26538 | 25763 |
| Wealden | 148915 | 24631 | 21275 | 24958 | 43909 | 34142 |

Population by age groups and gender in 2011(%)

| | All | | | | | |
|-------------|--------|------|-------|-------|-------|------|
| Age | people | 0-14 | 15-29 | 30-44 | 45-64 | 65+ |
| Geography | | | | | | |
| England and | | | | | | |
| Wales | 100 | 17.6 | 19.9 | 20.5 | 25.4 | 16.4 |
| South East | 100 | 17.8 | 18.6 | 20.4 | 26.1 | 17.2 |
| East Sussex | 100 | 16.1 | 15.9 | 17.2 | 28 | 22.7 |
| Eastbourne | 100 | 15.7 | 18.5 | 18.3 | 25.1 | 22.4 |
| Hastings | 100 | 17.3 | 19 | 19.6 | 27 | 17.1 |
| Lewes | 100 | 16.2 | 15.2 | 17.3 | 28.5 | 22.7 |
| Rother | 100 | 14.6 | 13.3 | 14.4 | 29.3 | 28.4 |
| Wealden | 100 | 16.5 | 14.3 | 16.8 | 29.5 | 22.9 |

b) How is this group/factor reflected in the population of those impacted by the proposal, project or service?

Client locations at December 2015 can be seen at annex 7.

c) Will people within these groups or affected by these factors be more affected by the proposal, project or service than those in the general population who are not in those groups or affected by these factors?

Clients who live in rural areas, who choose not to have CSS, may be more affected if the proposal is agreed.

d) What is the proposal, project or service's impact on the factor or identified group?

Clients who live in rural areas may be impacted in the following way:

- Have less \alternative service options available to them
- Reduced public transport to access services in larger areas.

e) What actions are to/ or will be taken to avoid any negative impact or to better advance equality?

Clients will be signposted to all available alternative services, by CLDT and CSS, and supported to access these if required / requested.

Clients will still be able to access CSS.

f) Provide details of the mitigation.

All clients will have the same access to the service and will have the same processes applied to financial assessment and all clients accessing CSS will need to have a financial assessment.

Under the "Charging for Care and Support Policy" which outlines government legislation and guidance about how care charges should be determined, the service should be chargeable, so the key reasons for the proposed change are that it is fair and equitable under the charging policy.

Clients' level of service will not be affected, and there will be no disruption to services for people if the Charging Policy is agreed. Clients will still be able to use the service but may be reluctant to pay for them.

People who receive other services like the CSS have to pay for them.

When people are making choices about whether they would like to continue using the service, their mental capacity will be considered and assessed by CLDT to ensure that clients are able to make informed choices and understand the consequences of choosing to cease the service, compared to paying for it.

CLDT will also ensure that the clients support plan is in place and reviewed to understand what support each individual needs.

g) How will any mitigation measures be monitored?

Client's level of service will not be affected, and there will be no disruption to services for people should the charging policy be agreed. Clients will still be able to use the service but may be reluctant to pay for them.

4.9.2 Carers

a) How are these groups/factors reflected in the County/District/ Borough?

Provision of unpaid care in 2011 - districts

| | | | | | | Provides |
|-------------|------------|-----------|---------|----------|----------|----------|
| | | | | Provides | Provides | 50 or |
| | | | | 1 to 19 | 20 to 49 | more |
| | | People | People | hours | hours | hours |
| | | provides | provide | unpaid | unpaid | unpaid |
| Provision | | no unpaid | unpaid | care a | care a | care a |
| unpaid care | All people | care | care | week | week | week |
| Geography | | | | | | |
| England & | | | | | | |
| Wales | 56075912 | 50275666 | 5800246 | 3665072 | 775189 | 1359985 |
| South East | 8634750 | 7787397 | 847353 | 577114 | 96883 | 173356 |
| East Sussex | 526671 | 467262 | 59409 | 39537 | 6745 | 13127 |
| Eastbourne | 99412 | 88894 | 10518 | 6678 | 1261 | 2579 |
| Hastings | 90254 | 80812 | 9442 | 5708 | 1321 | 2413 |
| Lewes | 97502 | 86001 | 11501 | 8000 | 1197 | 2304 |
| Rother | 90588 | 79327 | 11261 | 7279 | 1250 | 2732 |
| Wealden | 148915 | 132228 | 16687 | 11872 | 1716 | 3099 |

Provision of unpaid care in 2011 – districts (%)

| Provision unpaid care Geography England & Wales South East East Sussex Eastbourne Hastings | All people 100 100 100 100 100 | People provides no unpaid care 89.7 90.2 88.7 89.4 89.5 | People provide unpaid care 10.3 9.8 11.3 10.6 10.5 | Provides 1 to 19 hours unpaid care a week 6.5 6.7 7.5 6.7 6.3 | Provides 20 to 49 hours unpaid care a week 1.4 1.1 1.3 1.3 | Provides 50 or more hours unpaid care a week 2.4 2 2.5 2.6 2.7 |
|--|---------------------------------|--|---|--|---|---|
| Lewes | 100 | 88.2 | 11.8 | 8.2 | 1.2 | 2.4 |
| Rother | 100 | 87.6 | 12.4 | 8 | 1.4 | 3 |
| Wealden | 100 | 88.8 | 11.2 | 8 | 1.2 | 2.1 |

a) How is this group/factor reflected in the population of those impacted by the proposal, project or service?

69 out of 146 clients live with either parents or carers.

b) Will people within these groups or affected by these factors be more affected by the proposal, project or service than those in the general population who are not in those groups or affected by these factors?

Potentially.

c) What is the proposal, project or service's impact on the factor or identified group?

Parents and carers for clients who live at home may balance household finances with the inclusion of the client's income.

Clients living at home with carer, with different individual needs may be impacted in different ways by the proposal.

Clients who already access other DPS, or chargeable services, will already have a completed financial assessment, will be aware of their client contribution and be accustomed to paying towards the service.

Clients who do not access any other DPS, and only require CSS to meet their needs will be more affected as they will need to have a financial assessment, and dependant on the outcome will need to start paying towards service that were previously not charged for.

Generally people who have been assessed as needing access to day services or respite services will be less affected as they are already paying client contribution.

Generally people living at home with carers do access other services.

d) What actions are to/ or will be taken to avoid any negative impact or to better advance equality?

Financial assessments are carried out in line with 'The Care and Support (Charging and Assessment of Resources) Regulations 2014'. ESCC have a "Charging for Care and Support Policy" which outlines government legislation and guidance about how care charges should be determined.

This legislation states 'In assessing what a person can afford to contribute, a local authority must apply the upper and lower capital limits.'

The financial assessment looks at how much service the person receives and ensures that people are not charged more than it is reasonably practicable for them to pay, therefore charging rules are applied equally to each individual.

This charge will vary, based on the individual's personal circumstances. People will pay either part of the cost, none of the cost or all of the cost of their service.

Clients will be signposted to all available alternative services, by CLDT and CSS, and supported to access these if required / requested.

e) Provide details of the mitigation.

Parents and carers were involved in the consultation process.

All clients will have the same access to the service and will have the same processes applied to financial assessment and all clients accessing CSS will need to have a financial assessment.

Under the "Charging for Care and Support Policy" which outlines government legislation and guidance about how care charges should be determined, the service should be chargeable, so the key reasons for the proposed change are that it is fair and equitable under the charging policy.

Client's level of service will not be affected, and there will be no disruption to services for people should the charging policy be agreed. Clients will still be able to use the service but may be reluctant to pay for them.

People who receive other services like the CSS have to pay for them.

When people are making choices about whether they would like to continue using the service, their mental capacity will be considered and assessed by CLDT to ensure that clients are able to make informed choices and understand the consequences of choosing to cease the service, compared to paying for it.

CLDT will also ensure that the clients support plan is in place and reviewed to understand what support each individual needs.

f) How will any mitigation measures be monitored?

CSS will continue to monitor services for all clients.

CSS will record and report on the following:

- · Client contributions assessed and paid by clients
- Numbers of clients, who live with carers, who have chosen to reduce or cease the service, in the short and longer term.
- Impact for clients who have had a financial assessment who would be required to fully fund the cost of the service (clients who self fund)

4.10 Human rights - Human rights place all public authorities – under an obligation to treat you with fairness, equality, dignity, respect and autonomy. **Please look at the table below to consider if your proposal, project or service may potentially interfere with a human right.**

| Articles | |
|-----------|---|
| A2 | Right to life (e.g. pain relief, suicide prevention) |
| А3 | Prohibition of torture, inhuman or degrading treatment (service users unable to consent, dignity of living circumstances) |
| A4 | Prohibition of slavery and forced labour (e.g. safeguarding vulnerable adults) |
| A5 | Right to liberty and security (financial abuse) |
| A6 &7 | Rights to a fair trial; and no punishment without law (e.g. staff tribunals) |
| A8 | Right to respect for private and family life, home and correspondence (e.g. confidentiality, access to family) |
| A9 | Freedom of thought, conscience and religion (e.g. sacred space, culturally appropriate approaches) |
| A10 | Freedom of expression (whistle-blowing policies) |
| A11 | Freedom of assembly and association (e.g. recognition of trade unions) |
| A12 | Right to marry and found a family (e.g. fertility, pregnancy) |
| Protocols | |
| P1.A1 | Protection of property (service users property/belongings) |
| P1.A2 | Right to education (e.g. access to learning, accessible information) |
| P1.A3 | Right to free elections (Elected Members) |

Part 5 – Conclusions and recommendations for decision makers

- 5.1 Summarise how this proposal/policy/strategy will show due regard for the three aims of the general duty across all the protected characteristics and ESCC additional groups.
 - Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010;
 - Advance equality of opportunity between people from different groups
 - Foster good relations between people from different groups
- **5.2 Impact assessment outcome** Based on the analysis of the impact in part four mark below ('X') with a summary of your recommendation.

| X | Outcome of impact assessment | Please explain your answer fully. |
|---|--|-----------------------------------|
| X | A No major change – Your analysis demonstrates that the policy/strategy is robust and the evidence shows no potential for discrimination and that you have taken all appropriate opportunities to advance equality and foster good relations between groups. | |
| | B Adjust the policy/strategy – This involves taking steps to remove barriers or to better advance equality. It can mean introducing measures to mitigate the potential effect. | |
| | C Continue the policy/strategy - This means adopting your proposals, despite any adverse effect or missed opportunities to advance equality, provided you have satisfied yourself that it does not unlawfully discriminate | |
| | D Stop and remove the policy/strategy – If there are adverse effects that are not justified and cannot be mitigated, you will want to consider stopping the policy/strategy altogether. If a policy/strategy shows unlawful discrimination it <i>must</i> be removed or changed. | |

5.3 What equality monitoring, evaluation, review systems have been set up to carry out regular checks on the effects of the proposal, project or service?

CSS will develop a spreadsheet to log any changes to clients support in relation to the implementation of charging- outcomes for clients and any follow up action taken. Support actions will be taken as required and the log will be reviewed every month from April 16-August 16 by managers and communicated to the CLDT and senior management where applicable.

The log will record and report on the following:

- Client age
- Client contributions assessed and paid by clients
- Numbers of clients who have chosen to reduce or cease the service, in short and longer term.
- Impact for clients whom self fund.
- Any alternative services referred /accessed

5.6 When will the amended proposal, proposal, project or service be reviewed?

6 months after implementation

| Date completed: | 20.01.16 | Signed by (person completing) | Shirin White |
|-----------------|----------|-------------------------------|-------------------------------|
| | | Role of person completing | Service Coordinator |
| Date: | 20.01.16 | Signed by (Manager) | Sue Booker Operations Manager |

Equality Impact Assessment

Part 6 - Equality impact assessment action plan

If this will be filled in at a later date when proposals have been decided please tick here and fill in the summary report.

The table below should be completed using the information from the equality impact assessment to produce an action plan for the implementation of the proposals to:

- 1. Lower the negative impact, and/or
- 2. Ensure that the negative impact is legal under anti-discriminatory law, and/or
- 3. Provide an opportunity to promote equality, equal opportunity and improve relations within equality target groups, i.e. increase the positive impact
- 4. If no actions fill in separate summary sheet.

Please ensure that you update your service/business plan within the equality objectives/targets and actions identified below:

| Area for improvement (considerations in relation to protected characteristics) | Changes proposed | Lead Manager | Timescale | Resource implications | Where incorporated/flagged? |
|--|--|------------------|--------------------------------------|-----------------------|---|
| NAge Clients of different | - The financial assessment looks at how much service the person receives and | Shirin White. | All clients have a scheduled review, | CSS staff and | CSS will develop a spreadsheet to log any |
| ages could be | ensures that people are not charged more | vviile. | within the service, | managers CLDT | changes to clients' |
| differently affected | than it is reasonably practicable for them | | every 6 months | | support in relation to: the |
| as: | to pay, therefore charging rules are | | and any changes | | implementation of |
| -Different financial | applied equally to each individual | | to support, or | | charging; outcomes for |
| assessment limits | - Clients will be signposted to all available | | need, will be | | clients; and any follow up |
| are applied - Different ranges of | alternative services, by CLDT and CSS, and supported to access these if required / | | monitored via this process. | | action taken. Support actions will be |
| alternative service | requested. | | - If clients choose | | taken as required and the |
| are available | - Older people would have increased | | to cease services | | log will be reviewed every |
| dependant on the | access to older people's services. | | this will be | | month from April 16- |
| client's age. | - ESCC has a statutory obligation to | | recorded including | | November 16 by |
| - Older people may | oversee clients' support and safeguarding | | reasons and follow | | managers and |
| not have the same | needs. CLDT would undertake a full social | | up action. | | communicated to the |
| levels of family and | care review for anyone who declines a | | -This information | | CLDT and senior |
| carer support | service. CLDT will continue to review | | will be reviewed | | management where |

Equality Impact Assessment

| networks as working age adults. - Older people might be more vulnerable due to their frailty, if they chose to cease the service | clients care provision to ensure the client's needs are being met. CSS will alert CLDT to any clients who choose to reduce or cease their service to ensure that current needs are still met and monitored. -When people are making choices about whether they would like to continue using the service, their mental capacity will be considered and assessed by CSS/ CLDT. This will ensure that clients are able to make informed choices and understand the consequences of choosing to cease the service and receive the appropriate support if it is considered they lack capacity. | | every month from April 16-November 16 by managers and communicated to the CLDT. | | applicable. The log will record and report on the following: - Client age - Client contributions assessed and paid by clients - Numbers of clients who have chosen to reduce or cease the service, in the short and longer term Impact for clients whom self fund Any alternative services referred /accessed |
|--|--|-----------------|--|---|---|
| Clients with different individual needs may be impacted in different ways by the proposal: - Clients who do not access any other DPS, and only require CSS to meet their needs, will be more affected as they will need to have a financial assessment, and dependant on the outcome, will need to start paying towards | - To equitably apply the ESCC process for Charging for Care and Support policy to all clients. To provide additional support to clients via: -1:1 meetings or telephone contact with managers, - individual support to understand the information about financial assessment by CSS workers - Support during the financial assessment meeting by the CSS workers - Referral and access to advocacy services where required/requested - Support with budgeting from CSS (or other requested service) Some clients may benefit from the financial assessment process. CLDT would undertake a full social care review for anyone who declines a service. | Shirin White | Additional support will be provided between April 16 and November 16 when financial assessments are completed and the charging policy is implemented | CSS staff and managers. Financial Assessment team | CSS will record and report on the following: - Client contributions assessed and paid by clients - Numbers of clients who have chosen to reduce or cease the service, in the short and longer term. - Impact for clients that self fund. |

| services that were previously not charged for. Ethnicity None identified | CSS check if clients have any individual needs around culture, language, religion or personal beliefs. Additional communication services would be sought as required, for example translator services. | Shirin White | As required | CSS managers | CSS will record on the log if any clients require additional support in this area. |
|--|---|-----------------|--|------------------------------|---|
| Rural population Clients who live in rural areas, who choose not to have CSS, may be more affected if the proposal is agreed. | Clients will be signposted to all available alternative services, by CLDT and CSS, and supported to access these if required / requested. Clients will still be able to access CSS. Clients' level of service will not be affected, and there will be no disruption to services for people should the charging policy be agreed. Clients will still be able to use the service but may be reluctant to pay. | Shirin White | Additional support will be provided between April 16 and November 16 if clients indicate they would like to access alternative services. CLDT would undertake a full social care review for anyone who declines a service. | CSS staff and managers. CLDT | If clients choose to cease services this will be recorded including reasons and follow up actionThis information will be reviewed every month from April 16 to November 16 by managers and communicated to the CLDT. |
| Carers Parents and carers for clients who live at home may balance household finances with the inclusion of the client's income. Clients living at home with a carer, with different individual | Generally people living at home with carers do access other services and therefore would be less affected (due to already having a financial assessment/ contributions in place). To equitably apply the ESCC process for Charging for Care and Support policy for all clients. The financial assessment looks at how much service the person receives and ensures that people are not charged more | Shirin White | Additional support will be provided between April 16 and November 16 if clients indicate they would like to access alternative services | CSS staff and managers CLDT | CSS will continue to monitor services for all clients. CSS will record and report on the following: - Client contributions assessed and paid by clients - Numbers of clients who live with carers, who have chosen to reduce or |

| needs may be | than it is reasonably practicable for them | cease the service, in the |
|-----------------------|---|---------------------------|
| impacted in different | to pay, therefore charging rules are | short and longer term. |
| ways by the proposal | applied equally to each individual | - Impact for clients whom |
| (see information | - Clients will be signposted to all available | self fund. |
| under "Disability") | alternative services, by CLDT and CSS, | |
| | and supported to access these if required / | |
| | requested. | |
| | CLDT would undertake a full social care | |
| | review for anyone who declines a service. | |

6.1 Accepted Risk

From your analysis please identify any risks not addressed giving reasons and how this has been highlighted within your Directorate:

| Area of Risk | Type of Risk? (Legal, Moral, Financial) | Can this be addressed at a later date? (e.g. next financial year/through a business case) | Where flagged? (e.g. business plan/strategic plan/steering group/DMT) | Lead Manager | Date resolved (if applicable) |
|---|---|--|---|--------------|----------------------------------|
| As highlighted in Section 3.3(Consultation Questionnaire Results) 616 clients said they would stop using CSS if they had to pay for it. | Health and wellbeing | To avoid the risk of clients becoming isolated, or their health deteriorating and their needs increasing as a result of charging, a full social care review will be undertaken for anyone who declines a service if the charge is implemented. | EqIA DMT/Lead member recommendations report | Shirin White | |
| | | | | | |
| | | | | | |

Annexes

Annex 1: Client letter template

Annex 2: Client leaflet

Annex 3: Client questionnaire

Annex 4: Example presentation for CSS Charging Consultation Meeting

Annex 5: Park Lane meeting notes 23/11/2015

Annex 6: CSS Consultation Frequently Asked Questions

Annex 6A: CSS update of hourly rate

Annex 7: CSS Profile of client locations December 15

Adult Social Care

Keith Hinkley Director of Adult Social Care PO Box 5, County Hall St. Anne's Crescent

Lewes

East Sussex BN7 1SW Tel: 0345 60 80 190 Fax: 01273 481331

Date:

Our ref: Your ref:

Dear [Insert name]



Have your say about the community support service (which we will call CSS).

We are writing to you [and your parents/appointee] because you use the CSS.

(If we should be writing to someone else please let us know.)



We want to tell you about a consultation (time to have your say on an idea) on the CSS. It will start on 1 October 2015









The Consultation

We want to ask people to pay for the CSS. People would only pay if they could afford to.

We plan to ask people to start paying from April 2016.



Why are we asking people to pay?

Everyone at the Council has been asked to find ways of saving money.

The money people pay would be used to help run the service.

People who have other services that are like CSS have to pay for them.





Have your say about the community support service.

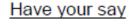
We have sent you a leaflet with this letter which tells you more about the consultation.



Your say:

We want to know what you think about this idea.

What you tell us will help us decide what to do next.





There are different ways for you to have your say. These are:

 Going to a meeting about the consultation.
 The times of the meetings are set out in the table below:



| Date | Location | Time |
|-----------|---|-----------------------|
| 8 October | Working Wonders Conquest Day Service Hastings | 10.00am to 12.00pm |
| 8 October | Bellbrook (Meeting Room 1) Uckfield | 3.00pm to 5.00pm |
| 9 October | Sovereign Harbour Yacht Club Eastbourne | 10.00am to 12.00pm |

We have sent you directions to the meeting in your local area. Please let us know if you need support to organise getting to a meeting.

If you would like to come to a meeting please let us know by email or telephone using the contact information below. Supporters are welcome to attend too.



Advocacy

An advocate will be at each meeting. Some ways the advocate will be able to help you at the meeting:

- Support asking a question
- Help to tell us what you think





We have sent you a copy of the Easy Read Questionnaire. We will use your answers to help us make a decision about our plan.

Please let us know if you would like any help to fill in the questionnaire. You can have help at the meeting or someone can visit you to support you with this.

You will be able to download the questionnaire from our website or fill it in online from 1 October: www.eastsussex.gov.uk/haveyoursay



- You can have a meeting with a manager of the CSS to talk about our plan.
- You can also write to us or telephone us at:

Community Support Service consultation, Linden Court, Birch Close, Eastbourne, BN23 6PE



Telephone: 01273 481 565

or e-mail:

ASCLDDPSConsultation@eastsussex.gov.uk



What we will do with your information

People will have 12 weeks to have their say about our plan. The consultation will end on 23 December 2015.

We will make a decision in February 2016.



We will write to everyone using the CSS in March 2016.

We will let you know what has happened.

It is important for you to know:

Even if we go ahead with our plan:



- We will keep the good things about the CSS.
- We wouldn't ask anyone to pay before April 2016.
- Changes would only happen after you've had a financial assessment.
- If you didn't want to pay for the service, you can talk to us about whether you can stop using it.

If you have any questions you can get in touch using the contact details in this letter.

Yours sincerely

Keith Hinkley Director of Adult Social Care





Have your say about the Community Support Service.



This information is written in Easy Read. You could read this information with a:

- carer
- support worker
- friend or family member
- advocate



We want to ask people to pay for the community support service. People would only pay if they could afford to.



Your say:

We want to know what you think about this idea.

What you tell us will help us decide what to do next.



What is the Community Support Service?

The community support service helps people to be more independent.

They visit people at home or in the community. People get support with things like:

- learning new skills
- housing and money
- doing things in the local area
- looking after health
- personal care



What will change?

At the moment people do not pay for the community support service.

We think that **people should be asked to pay** for this service.

People would only pay if they could afford to.

We plan to ask people to start paying from April 2016.



How much would the service cost?

The cost for the service is £18.30 per hour. People would only pay as much as they could afford.



Who would be asked to pay and how much?

We would look at how much money you have. This is called a **financial assessment**. It tells us what you can afford to pay towards your support.

If you have more than £23,250 you would be asked to pay for all of your care yourself.

If you have less than £23,250 Adult Social Care will help you pay for your service. We will tell you:

- how much we will pay towards your service
- how much you will need to pay (we call this your client contribution)
- Some people wouldn't be able to afford to pay for the community support service, so would not have to pay anything.



If you didn't want to pay for the service, you could talk to us about whether you could stop using it.

We will be able to tell you about other services that may be able to support you and how much they would cost.

You may have had a financial assessment before and already be paying a client contribution. The amount that you pay may not change.



Why are we asking people to pay?

We got money from the Government to set up the community support service. This meant that people did not have to pay.

The Council has less money now. We have to save £70 to £90 million over the next three years.



The money people pay would be used to help run the service. We are also making some changes to the way the service runs to save money.

This means we could keep offering a service that people think is good.



How many people will our plan affect?

Nearly 150 people are using the community support service at the moment.

People use the service for between one and 20 hours a week. Some people who use the service live with their family or friends and some people live on their own.



Why can't the service stay free?

Most people have to pay towards their care and support.

People who have other services that are like the Community Support Service have to pay for them.



Our 'charging policy' (our rules about which services people pay for) say that people should pay for this service.

We want to keep offering the community support service. We don't think that other people can offer all of the same help that we can.

What will happen if we do not charge for the service?

We might have to make some changes to the service, to save money in other ways.

Have your say



There will be meetings for people who use the community support service. We will talk about our plan.

We have sent a letter about these meetings to people who use the community support service. The letter is also on our website.

People can tell us what they think about our plan by filling in this questionnaire. The questionnaire is also on our website: www.eastsussex.gov.uk/haveyoursay



If you don't want to fill in a questionnaire

You can also talk to the manager of the community support service about our plan.

If you would like to talk to the manager please contact us by phone or email. We will arrange for the manager to phone you back or come and meet you.

Contact us

If you do not have anyone to help you take part, please phone or email and we will try to help.



Phone: 01273 481 565

Email: ASCLDDPSconsultation@eastsussex.gov.uk



Time to have your say

The **consultation** (time to have your say) will end on 23 December 2015.



When we will let you know

We will make a decision in February 2016.

We will write to everyone using the community support service in March 2016.

We will let you know what has happened.





Questionnaire

Have Your Say About the Community Support Service



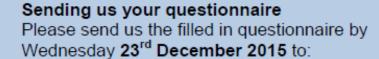
The following questionnaire asks you about our plan. You don't have to answer all of the questions.

By answering these questions you are not agreeing to anything, so please don't worry.



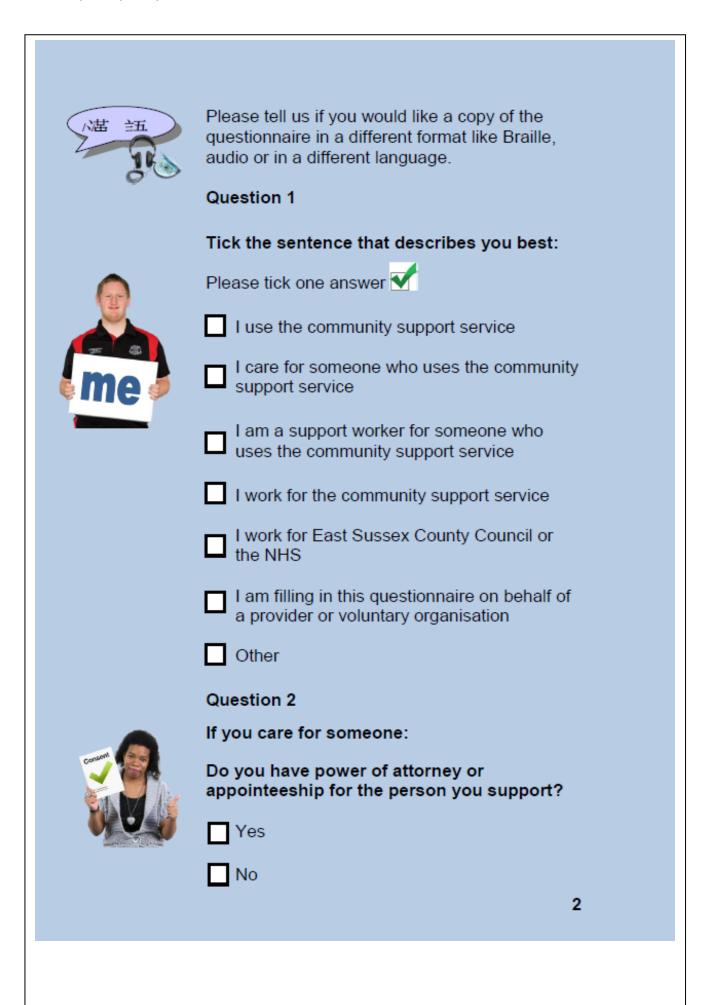
Confidential

What you tell us is private. We will use your answers to help us make a decision about our plan. We won't share your answers with anyone else.





Community Support Service Consultation Linden Court Birch Close, Eastbourne, BN23 6PE

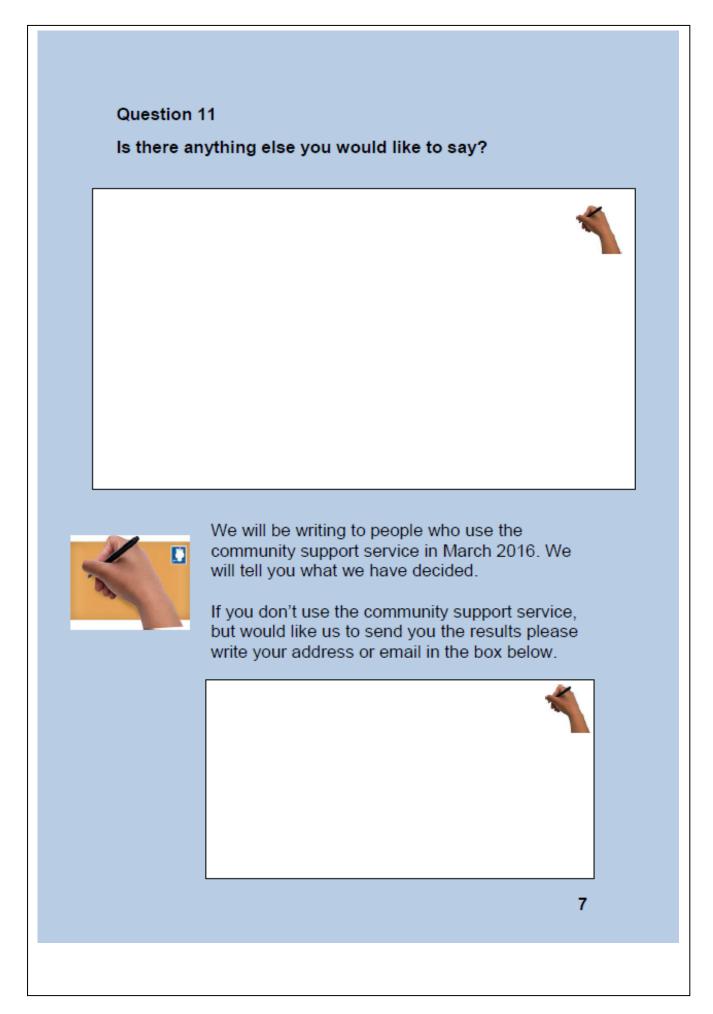


| | Question 3 Do you think we should ask people to pay for the community support service? Yes No No Not sure |
|---------------|---|
| Please say wh | Note: If you need more space to answer a question, please use a separate piece of paper. |
| April May | Question 4 We won't ask anyone to pay for the service before April 2016. Is this enough time to get ready for the change? Yes |

| August IV III III III III III III III III III | Question 5 What can we do to help people get ready for the change? |
|---|--|
| | ons 6 to 11 are for people who use the community service and their carers. Question 6 What do you (or the person you support) use the community support service for? You can tick more than one box Learning new skills Housing and money Doing things in the local areas Looking after health Personal care |

| Please say why here: |
|---|
| |
| Would you stop using the community support service if you had to pay for it? (You are not agreeing to anything by answering this question.) Yes No No Not sure |

| Question 9 If you said yes to question 8, please tell us why you would stop using the community support service? You can tick more than one box I don't want to have a financial assessment I don't want to pay for the service There are other services I'd rather use Something else (please tell us what below) Question 10 | | |
|---|-----|--|
| why you would stop using the community support service? You can tick more than one box I don't want to have a financial assessment I don't think I could afford it I don't want to pay for the service There are other services I'd rather use Something else (please tell us what below) Question 10 How would paying for the community support service affect your life, or the life of someone you care for? | _ 🔊 | Question 9 |
| I don't want to have a financial assessment I don't think I could afford it I don't want to pay for the service There are other services I'd rather use Something else (please tell us what below) Question 10 How would paying for the community support service affect your life, or the life of someone you care for? | | why you would stop using the community |
| ☐ I don't think I could afford it ☐ I don't want to pay for the service ☐ There are other services I'd rather use ☐ Something else (please tell us what below) Question 10 How would paying for the community support service affect your life, or the life of someone you care for? | | You can tick more than one box |
| I don't want to pay for the service There are other services I'd rather use Something else (please tell us what below) Question 10 How would paying for the community support service affect your life, or the life of someone you care for? | | I don't want to have a financial assessment |
| There are other services I'd rather use Something else (please tell us what below) Question 10 How would paying for the community support service affect your life, or the life of someone you care for? | | I don't think I could afford it |
| Question 10 How would paying for the community support service affect your life, or the life of someone you care for? | | I don't want to pay for the service |
| Question 10 How would paying for the community support service affect your life, or the life of someone you care for? | | There are other services I'd rather use |
| How would paying for the community support service affect your life, or the life of someone you care for? | | Something else (please tell us what below) |
| support service affect your life, or the life of someone you care for? | | Question 10 |
| 6 | ? | support service affect your life, or the life of |
| 6 | | |
| 6 | | |
| | | 6 |
| | | |





Questions about you Equality questionnaire

We want to make sure that everyone is treated fairly and no one gets left out. We ask the following questions to check that everyone is getting involved.



This information is only for us. We will only use it to help us make our services better. No one else will see it.

If you don't want to answer any of these questions, you don't have to.



Question 1

Who are you filling in this questionnaire for?

| | myself |
|---|---------------------|
| | for someone else |
| П | for an organisation |

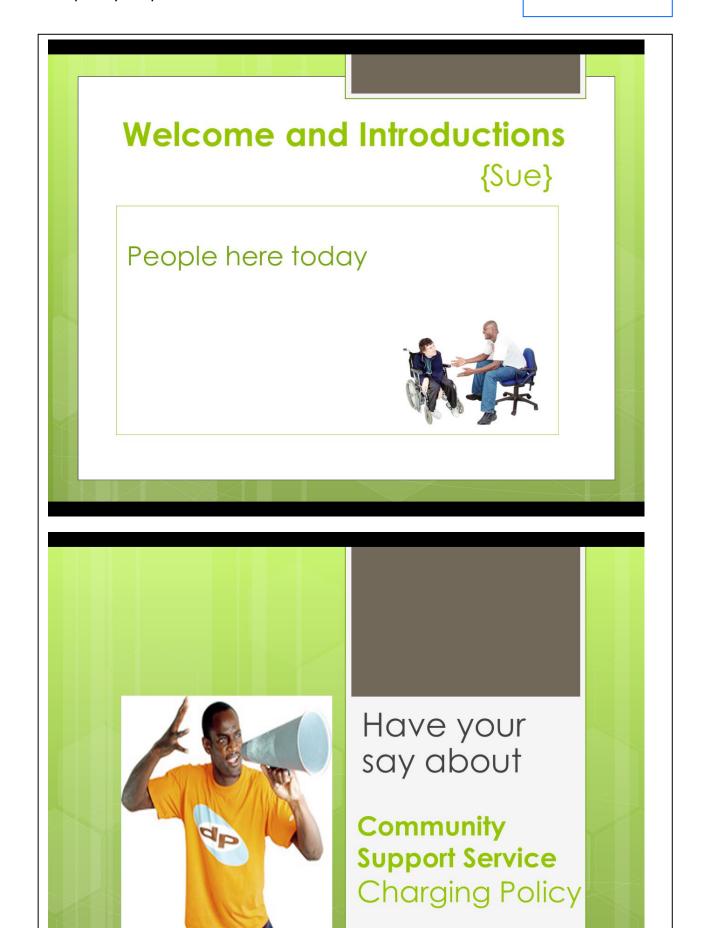
| | If you are filling in this questionnaire for an organisation please tell us which one: |
|--------------|--|
| | Your organisation's name: |
| | Your name: |
| organisation | Your position or job in the organisation: |
| | Contact details: |
| | If you are filling in this questionnaire for yourself or someone else please tell us: |
| | Question 2 |
| AA | Are you |
| | Male Male |
| T I | Female |
| | ☐ I would rather not say |
| | Question 3 |
| | Are you transgender? |
| | ☐ Yes |
| | □ No |
| 7 11 1 | ☐ I would rather not to say |
| | 10 |
| | 10 |
| | |
| | |

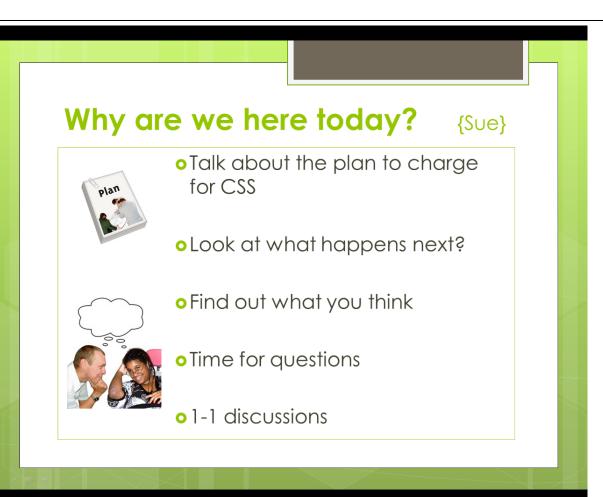
| | Question 4 |
|----------------------------------|--|
| | How old are you? |
| | ☐ I would rather not to say |
| R.Smith 2011 West Street LP1 5PD | Question 5 What is your postcode? |
| | ☐ I would rather not to say |
| | Question 6 |
| | Do you have a disability? (A disability is an illness or difficulty to do with your mind or body.) Yes |
| | ☐ No☐ I would rather not to say |
| | |
| | 11 |
| | |

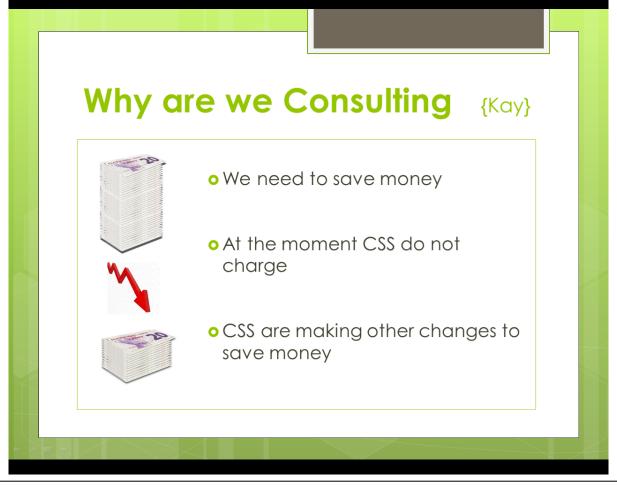
| If you have a disability, please tell us what kind of disability it is. |
|---|
| (You can tick more than one box.) Learning Disability Mental Health Condition Physical Impairment Sensory Impairment Long standing illness or health condition such as HIV, cancer etc I would rather not say If you have a disability that we have not listed you can tell us here: |
| |

| Question 7 Which of these ethnic groups do you belong to? (Your ethnic group is about things like where your family comes from and the language you speak.) | |
|---|--|
| White British | |
| White Irish | |
| White Gypsy/Roma | |
| White Irish Traveller | |
| ☐ White other * | |
| Mixed White and Black Caribbean | |
| Mixed White and Black African | |
| Mixed White and Asian | |
| ☐ Mixed other * | |
| ☐ Other ethnic group * | |
| Asian or Asian British Indian | |
| Asian or Asian British Pakistani | |
| Asian or Asian British Bangladeshi | |
| Asian or Asian British other * | |
| Black or Black British Caribbean | |
| Black or Black British African | |
| Black or Black British other∗ | |
| ☐ Arab | |
| Chinese | |
| I would rather not to say | |
| f your ethnic group was not listed or you chose something that has a ☀ next to it, please tell us what it is. | |
| 13 | |
| | |
| | |

| Question 8 Do you belong to a religion or belief? Yes No I would rather not to say | |
|---|----|
| Yes No I would rather not to say | |
| No I would rather not to say | |
| 16 | |
| If you have answered yes to question 8, whi religion or belief is it? Please select one box | |
| ☐ Christian ☐ Buddhist | |
| ☐ Hindu | |
| ☐ Muslim | |
| ☐ Jewish | |
| Sikh | |
| If you belong to a different religion, write it he Question 9 | |
| Are you? | |
| ☐ Bisexual | |
| ☐ Heterosexual/Straight | |
| Gay woman/ lesbian | |
| ☐ Gay Man | |
| Other | |
| ☐ I would rather not to say | |
| Thank you for giving us this information. | |
| | 14 |
| | |







Why are we asking people to pay? [Kay]



- Most people pay towards support
- Other services like CSS ask people to pay



- Charging would help pay to run the service
- What happens if we do not charge?

What would happen next?

{Kay}



- We check how much you would pay
- Financial assessment
- Ask you to start paying from April 2016



 People would only pay as much as they could afford

About Financial Assessments {Amelia}



- Meeting at your home
- We will look at:
- > How much money you have
- > Money from benefits or work
- > Your rent



- We will tell you
- > How much we will pay
- How much you will pay (your client contribution)

How much would I have to pay?

{Amelia}



• Up to £18.30 per hour



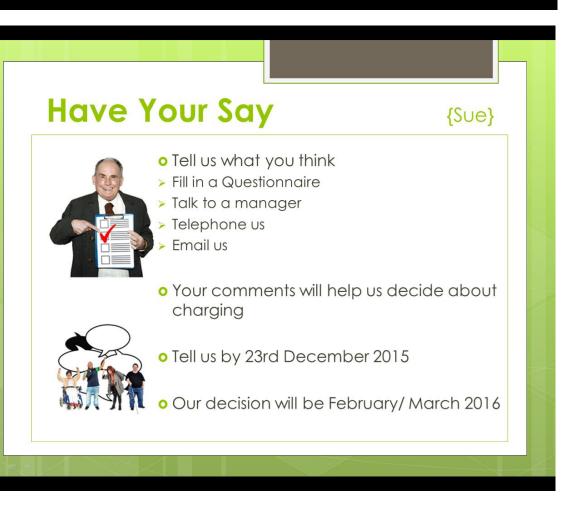
- People would pay either:
- > None of the cost
- > Part of the cost
- > All of the cost

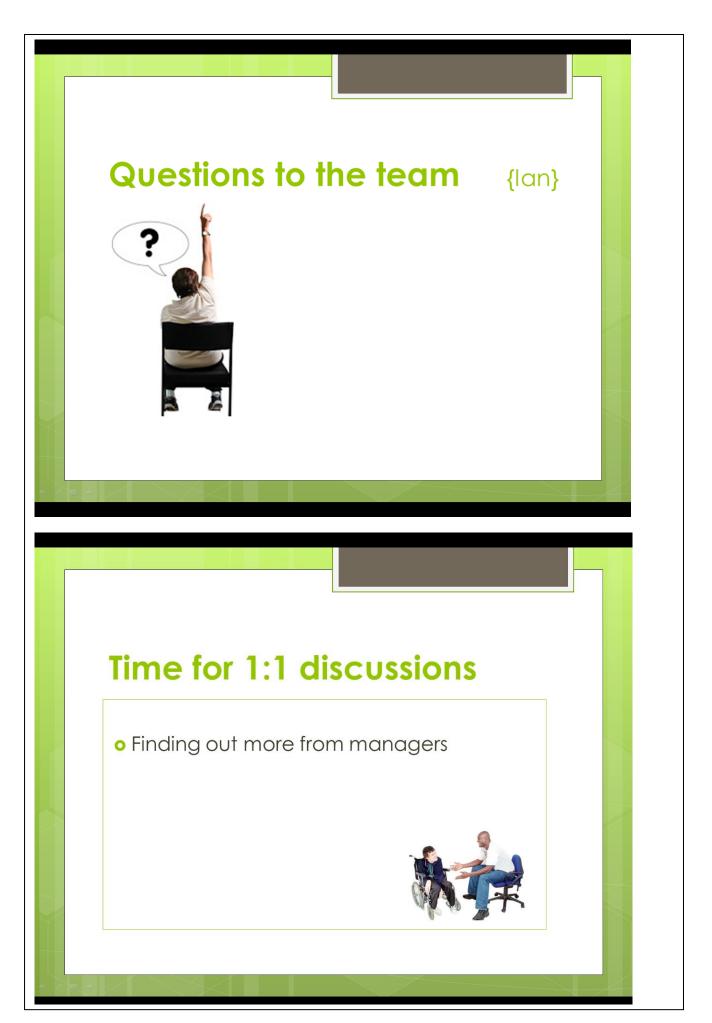


- What if I already have a financial assessment?
- What if I choose not to have a financial assessment?

Community Learning Disability Team Support {Emma} • We can review your support

- What happens if I want to stop having CSS?
- Finding out about your options
- Other services like CSS





CSS Charging Event & Residents Meeting

Park Lane 23rd November 2015 3pm

Attendees: Shirin White (SW) Service Coordinator Ian Hearnden (IH) Insight Officer Amelia Osmond (AO) Financial Assessment Team Miggie Bamford (MB) CSS DPS Manager

Notes: Nikki Spencer (NS) Admin Support

- There were 7 tenants in attendance
- SW talked through the presentation information given previously at the Sovereign Harbour Event and invited any questions about the consultation. SW explained how the CSS support hours and Park lane sleep-in hours would be charged, and the tenants options about their daytime support.
- SW also explained that unfortunately the wrong information was sent out about the hourly cost of the service (leaflet was shared). The hourly cost of the service is £20.00 per hour. AO explained that this may make no difference to the amount that you pay, but this would depend on your financial assessment.
- Some of the tenants have other services and some have had financial assessments already
- Tenants are interested in the bigger Consultation going on at the same time across the Council which may have more impact on their lives. Tenants were advised to also give feedback about the wider ASC consultation, and that CSS would support them with this.
- All the tenants who had not yet had a financial assessment, requested one, and passed their details to AO. AO will arrange for an assessor to visit the tenants and do all the individual financial assessments during one visit if possible
- > Tenants to speak to MB if they have any current concerns about their support visits.

Questions and areas of concern as follows:

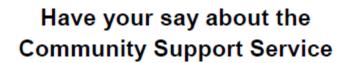
- What would happen if I chose not to use CSS? What if don't have an assessor?
 A: If needed you will be referred to CLDT who will allocate you a new assessor to talk to you about your options and support you through this process. If you choose not to use CSS anymore your assessor will complete an full assessment review to ensure that current needs are still met and monitored
- Will other services be exactly the same as CSS
 A: There are other services available that are similar to CSS but may not provide the same range and flexibility of support. Most other service like CSS charge for the support they provide.
- Would we get allocated a key worker with another service A: It would depend on the service.

- 4. If other services chosen would it be the same if cheaper A: This would depend on your financial assessment and your client contribution. You may pay the same amount each week for a different service.
- The support we have do we have a say in what we do, like goals as it's more focussed on practical things like cooking, cleaning and not so much on fun & leisure activities

A: The assessment team talk to you about your support plan and what support they will ask CSS to give you. CSS will still talk to you about your goals and how you would like to achieve them.

- 6. If I cancel my support worker, do I still have to pay?
 - If I have 2 hours support but end it earlier do I have to pay for the whole 2 hours allocated?
 - What if you cut the support short –do I have to pay for all of it or lose it?
 A: CSS are developing a cancellations policy that will be shared with clients. (See FAQs)
- 7. How will you know what support I've asked for and used A: We will record exactly how many hours of support you have had each week. This information will be sent to the FA team so that you are only charged for the support that you received.
- 8. What if we forget to pay and we keep forgetting to pay A: AO explained that clients would be supported with setting up payments, and making sure they are able to pay. If invoices are not paid this would be pursued, like any other unpaid bill.

Other comments about the consultation were: Its taking a very long to do – too long for this consultation We're all worrying about what's going to happen





Frequently Asked Questions

Thank you to everyone who came to our Community Support Service (CSS) consultation events. We wanted to let you know about the questions that were raised during the meetings and share the answers that were provided. This information has also been shared with staff, and will be included in the consultation feedback.

If you have any further questions about the consultation please contact us on:

Phone: 01273 481 565

Email: ASCLDDPSconsultation@eastsussex.gov.uk

1) What is the £23,250 threshold, above which a person will have to pay for all care themselves, based on?

Financial assessments are carried out in line with 'The Care and Support (Charging and Assessment of Resources) Regulations 2014'.

This legislation states 'In assessing what a person can afford to contribute a local authority must apply the upper and lower capital limits.'

The Department for Health sets the upper capital limit annually and this is currently set at £23,250. A person with assets above the upper capital limit is deemed to be able to afford the full cost of their care.

2) Various other services are paid for. Why have changes to this service been left until so late in the day?

CSS was originally set up using different funding streams and grants. It was offered as a time-limited service.

However, CSS is now core funded (paid from the Council budget). CSS has evolved over time and now provides both ongoing and time limited services, in the same way as other Learning Disability (LD) services like Day services and Respite Services, which are chargeable.

For more information about this please see the Adult Social Care "Charging for Care and Support" policy.

3) How is the £20.00* {£18.30} cost per hour for Community Support justified when Personal Assistant (PA) services cost around £12 per hour?

The CSS hourly cost has been calculated by taking into account staffing, service and management costs. We recognise that this rate is higher than the PA, however the CSS provide a different scope of services to a PA support worker.

* 25.11.15 Update about the CSS hourly cost

Unfortunately the information sent out about the cost of the service (£18.30 per hours) was wrong. The correct cost of the service is £20.00 per hour. This information is being explained to all clients and amended within the online consultation information (see *annex 6A*).

4) This proposal affects no more than 150 people across East Sussex. Is it therefore justified?

The council has to find savings of £70 to £90 million pounds over the next three years. Services have been asked to review all possible areas where savings could be achieved.

Initial calculations indicate that introducing charging could generate up to £50,000 a year which would be put towards the savings target.

East Sussex County Council (ESCC) provides a range of support for vulnerable people but is reliant on income from charges to help pay for them.

5) Are there not large financial implications for ESCC in implementing Financial Assessment?

The council have a dedicated team who complete Financial Assessments and have the capacity to undertake these as part of their role. Nearly half of the clients who receive CSS have already had a Financial Assessment.

6) The projection is that this proposal would raise £50,000. Some may see this as low and ask whether it justifies the proposed change?

If CSS are able to find £50,000 in savings, this would be a significant contribution to the overall savings target for Learning Disability Directly Provided Services. If we are not able to find savings from implementing a charge for services, savings would need to found elsewhere.

7) To achieve the £50,000 estimate, this appears to work out as £10 per week per person. So why not just ask for a £10 contribution from everyone?

ESCC have a "Charging for Care and Support Policy" which outlines government legislation and guidance about how care charges should be determined.

The financial assessment looks at how much service the person receives and ensures that people are not charged more than it is reasonably practicable for them to pay, therefore charging rules are applied equally to each individual.

This charge will vary, based on the individual's personal circumstances. People will pay either part of the cost, none of the cost or all of the cost of their service.

8) In Park Lane we were told when the residency began that we had to have CSS. Legally what happens if charging begins?

Park Lane has two elements of service:

- The night time support is a core service which is attached to the supported living scheme at Park Lane, and is provided by CSS. Tenants living at Park Lane would need to contribute towards this core service.
- Day time support hours are provided from the CSS main team. These hours are allocated to individual support needs and do not have to be provided by the CSS.
- 9) How often would money be taken?

ESCC would send invoices every 4 weeks in arrears

10) Would payment be just by direct debit?

In addition to paying by direct debit there are several other ways clients can pay. This includes:

- debit card
- online
- · at the bank
- at a post office or
- by standing order

All the options are shown on the back of your invoice. You may have to pay a charge for making the payment at a bank or post office.

- 11) Some day services charge, whether or not the client is in the service. How would the rate be affected if the client were
 - i) on holiday
 - ii) did not want to attend something or
 - iii) cancelled something?

All chargeable services have a cancellations policy. At present CSS do not have a cancellations policy, therefore this is in development and will be shared with clients and carers if the outcome of the consultation is that charging will be implemented.

The CSS will ask clients to provide notice if they want to cancel a support session. If less than 24 hours notice is given the client will still be charged for the support. This is how cancellations work in other charged for services.

The way clients are charged depends on the amount they are assessed to pay compared with the cost of their care and support.

If a person pays a contribution to support, this figure is calculated as an average over 12 months, therefore if a service is cancelled it might not change the amount that you pay.

If the amount you have paid at the end of the year is more than the cost of your care/support the Financial Assessment team will adjust your contribution and refund the difference.

12) If support is received as part of a group, how does this affect costing?

As CSS have not charged for services before, this question has not arisen previously. As this question has been raised we will be looking at the charge for support provided as part of a group and will provide further information on this if the decision to charge is taken forward.

13)I had a Financial Assessment some while ago [2013]. It concluded that I should contribute, but I've seen no money towards the care go out. Does this mean I will need a reassessment?

If you have not received any other services from ESCC since your financial assessment you would not have been charged as CSS has remained a free service.

Where someone has already been financially assessed we will consider whether we need to carry out another financial assessment visit. In some cases we may be able to review the assessment based on the information we already hold and any information we can gather from the Department for Work and Pensions.

If we don't need to visit you again we will write to inform you how much you are assessed to pay based on the information we hold. If you did not agree with this amount you could provide any additional information you wish us to consider or ask us to carry out a full review of your financial assessment.

14)If a relative pays client contributions towards travel only, does that bypass the need for a Financial Assessment for the client?

All clients accessing CSS will need to have a financial assessment.

Where ESCC provides travel this is charged at a standard rate and is not subject to a financial assessment.

Where travel is normally part of a support provision, for example with a day service, it is charged it and this would be included in the financial assessment.

15) The assessment is completed on current income. This may fluctuate. Do we let Financial Assessment staff know each time this alters?

If income fluctuates the financial assessment will be based on an average income. However, if there is any change in financial circumstances, clients will need to let the financial assessment team know so that the contribution can be reviewed.

Financial assessments are automatically reviewed each April in line with benefit changes and the Financial Assessments team will write to clients to let them know how much they have been assessed to pay. If the information used to calculate your contribution is not accurate clients should send in up to date figures so it can be adjusted.

16)If a financial charge is decided, and relatives decide they cannot afford to pay, can they assess the different kinds of care they could afford?

Clients and carers can contact the Community Learning Disability Assessment team (CLDT) who will be able to review the client's needs and discuss the alternative support options that might be available. Most alternative services are chargeable.

17)What can be done to combat possible increase in vulnerability of those clients whose family may decide to fund their care independently?

ESCC have a statutory obligation to oversee clients support and safeguarding needs. The CLDT will be involved in any changes to client care provision and will continue to review clients care provision to ensure the client's needs are being met.

18) The NHS has an interest in these clients. Will the burden pass to it from ASC (e.g. more visits to GPs)?

Clients may seek support from other services if they choose not to have CSS. Support needs will be overseen by CLDT to ensure clients are aware of all the support resources available to them.

CSS is a Social Care service. Clients are able to access the NHS for any health related needs.

19) If the desired revenue is not achieved, what happens then?

We have to find savings from between £70 to £90 million, across the Council over the next three years. Some gaps in funding can be covered by generating more income. If this is not possible then other means of finding savings will need to be considered.

Adult Social Care and Health

Learning Disability Directly Provided Services





Community Support Service Charging Consultation

Update about CSS hourly cost

25 November 2015

How much will the service cost?



We told you that the cost of the service was £18.30 per hour.



This information was wrong.



The correct cost of the service is £20.00 per hour.



What does this mean?

All the other information we gave you is the same.

People would only pay as much as they could afford.



We are sorry that the wrong information was sent out.

If this information changes what you think about the idea of charging you can still give us feedback (even if you have already filled in a reply).



Have your Say

- . Fill in a questionnaire
- Talk to a CSS Manager
- . Telephone the information line (01273 481 565)



The consultation (time to have your say) will end on 23 December 2015.

Service Delivery

Client profiles / Client Locations (December 2015)

In **December 2015** the CSS were providing the following support:

