



LEAD MEMBER FOR ADULT SOCIAL CARE AND HEALTH

DECISIONS to be made by the Lead Member for Adult Social Care and Health,
Councillor Carl Maynard

TUESDAY, 21 SEPTEMBER 2021 AT 9.15 AM

COMMITTEE ROOM, COUNTY HALL, LEWES

AGENDA

++Please note that this meeting will be taking place remotely++

- 1 Decisions made by the Lead Member on 16th August 2021 (*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 Residential and Nursing Care Contracts (*Pages 5 - 8*)
- 5 Service Model for Directly Provided Learning Disability Day Services (*Pages 9 - 72*)
- 6 Re-procurement of specialist sexual health services (*Pages 73 - 90*)
- 7 Any urgent items previously notified under agenda item 3

PHILIP BAKER
Assistant Chief Executive
County Hall, St Anne's Crescent
LEWES BN7 1UE

13 September 2021

Contact Harvey Winder, Democratic Services Officer, 01273 481796,

Email: harvey.winder@eastsussex.gov.uk

NOTE: As part of the County Council's drive to increase accessibility to its public meetings, this meeting will be broadcast live on its website and the record archived. The live broadcast is accessible at: www.eastsussex.gov.uk/yourcouncil/webcasts/default.htm

This page is intentionally left blank

LEAD MEMBER FOR ADULT SOCIAL CARE AND HEALTH

DECISIONS made by the Lead Member for Adult Social Care and Health, Councillor Carl Maynard, on 16 August 2021 at County Hall, Lewes

++Please note: the Lead Member took the decisions below remotely++

Councillor Maples spoke on item 5 (see minute 18)

14 DECISIONS MADE BY THE LEAD MEMBER ON 24TH JUNE 2021

14.1 The Lead Member approved as a correct record the decisions made on 24 June 2021.

15 DISCLOSURE OF INTERESTS

15.1 There were no disclosures of interest.

16 URGENT ITEMS

16.1 There were no urgent items.

17 TELECARE CONTRACT EXTENSION

17.1 The Lead Member considered a report seeking approval to extend the existing telecare contract to August 2023, to enable a comprehensive review of telecare provision in East Sussex to inform a full recommissioning exercise.

17.2 The Lead Member RESOLVED to:

1. Agree to the extension of the existing contract with the current provider, Welbeing, for the provision of telecare services until 31 August 2023; and

2. delegate authority to the Director of Adult Social Care to take all necessary actions to give effect to the implementation of the above recommendation

Reason

17.3 The current service is of a high quality and represents good value for money. The extension of the existing contract will:

- Enable the Council to undertake a full review of the market alongside key stakeholders and develop a specification that maximises the technical developments in this area;
- Provide an opportunity to upgrade all of the analogue telecare equipment in advance of the digital switchover in 2025; and

- Maximise the financial benefits of the current contract structure through ongoing reductions in unit costs as a result of the incremental increases in the number of connections against a static contract value.

18 HOUSING RELATED FLOATING SUPPORT SERVICES – CONTRACT AWARD

18.1 The Lead Member considered a report seeking approval to award the contract, for Housing Related Floating Support Services, to the preferred bidder after completion of a competitive tendering process.

18.2 The Lead Member RESOLVED to:

1. Agree the contract award for Housing Related Floating Support to the preferred bidder (Bidder A) as set out in paragraph 3.1; and
2. delegate authority to the Director of Adult Social Care to take all necessary actions to give effect to the implementation of the above recommendation

Reason

18.3 The outcome of the competitive tendering process identified a clear leader, which scored equal to or higher than the others in all criteria other than Social Value. Therefore, the unanimous recommendation of the Evaluation Panel is to award the contract to the Bidder A.

19 EXCLUSION OF THE PRESS AND PUBLIC

19.1 The Lead Member RESOLVED to exclude the public and press from the meeting for the remaining agenda item on the grounds that if the public and press were present there would be disclosure to them of exempt information as specified in paragraph 3 of Part 1 of the Local Government Act 1972 (as amended), namely information relating to the financial or business affairs of any particular person (including the authority holding that information).

20 HOUSING RELATED FLOATING SUPPORT SERVICES – CONTRACT AWARD – EXEMPT INFORMATION

20.1 The Lead Member considered a report containing exempt information relating to item 5 (minute 18).

20.2 The Lead Member RESOLVED to note the report.

Report to: Lead Member for Adult Social Care and Health

Date of meeting: 21st September 2021

By: Director of Adult Social Care

Title: Residential and Nursing Care Contracts

Purpose: To seek Lead Member agreement to consult with independent sector care providers and amend the Terms and Conditions for the Framework Contract following the outcome of the consultation.

Lead Member is recommended to:

- 1. Agree to consult with independent sector care providers from October-December 2021 in respect of amendments to the terms and conditions for the Residential and Nursing Care Framework Contract Agreement as set out in paragraph 2.1-2.7; and**
 - 2. Delegate authority to the Director of Adult Social Care to amend the terms and conditions, following consultation with care providers, and take all necessary actions to give effect to their implementation by March 2022.**
-

1. Background

1.1. The provision of residential and nursing care by independent sector providers is a key element of meeting vulnerable adults eligible care and support needs and fulfilling East Sussex County Council's (the Council) statutory duties under the Care Act 2014. At any one time there are, on average, 2,200 people placed in residential or nursing care supported by funding from the Council.

1.2. In financial terms, these placements make up a significant element of the Council's annual revenue budget. The table below outlines the gross annual expenditure over the last two years and forecast expenditure for 2021/22, including placements procured on behalf of, but funded, by the local NHS.

	2019/20 £'000	2020/21 £'000	2021/22 forecast £'000
Older People – Residential Care	37,550	36,709	39,466
Older People – Nursing Care	24,699	24,116	25,958
Sub-Total ESCC Funded	62,249	60,825	65,424
Older People – Discharge to Assess (NHS)	1,678	7,171 ¹	1,763
Sub-Total Older People	63,927	67,996	67,187
Working Age – Residential Care	47,927	43,485	49,365
Working Age – Nursing Care	7,126	6,358	7,329
Sub-Total ESCC Funded	55,053	49,843	56,704
Working Age – Discharge to Assess (NHS)	88	377	93

¹ This figure reflects the very high number of people discharged from hospitals into care homes during the first months of Covid

Sub- Total Working Age	55,141	50,220	56,797
Total All Adults – ESCC Funded	117,302	110,668	122,128
Total All Adults – NHS Funded	1,766	7,548	1,856
Grand Total All Adults	119,068	118,216	123,984

1.3. The service specification and contract terms and conditions for the provision of residential and nursing care give clarity to providers as to the Council's expectations in respect of a broad range of areas including quality, safety, personalisation and best practice. It is necessary to periodically refresh and update these conditions to reflect changes in regulatory requirements and legislation and new approaches to care and support.

1.4. The launch of the consultation on the Service Specification and Terms and Conditions for Older People's Residential and Nursing Care was suspended in March 2020 as it coincided with the beginning of the first Covid Lockdown. With the health and social care system returning to a new normal method of operation, it is now timely to undertake the proposed consultation and implement the agreed amendments.

2. Proposed Amendments

2.1. The following paragraphs summarise the proposed key amendments to the current terms and conditions.

2.2. There are currently several separate sets of Terms and Conditions for residential and nursing care for both working age and older adults. It is proposed to simplify and streamline these multiple documents by developing just two specifications:

- i) Adults (placed under local authority rates) primarily older people but will include some working age adults;
- ii) Specialist Adults (where fees negotiated separately) primarily, but not exclusively, people with learning disabilities.

2.3. A review of the Specification and Terms and Conditions in light of the Covid-19 pandemic will apply the lessons learnt by both commissioners and providers and ensure that the new contract is fit for purpose, should there be a further pandemic or other significant pressures on the health and social care system. This will include additional sections on infection prevention and control developed with the support of colleagues in Public Health and mandatory vaccinations.

2.4. The Terms and Conditions will be amended to include new requirements and service models arising out of this year's Health and Care Bill as follows:

- i) A separate specification for Home First Pathway 3 block purchased beds to support a "Discharge To Assess" model for people no longer requiring acute hospital care.
- ii) A requirement to regularly provide data for the NHS Capacity Tracker to understand current capacity and risk in the system (both local authority and privately funded care) and any future data capture requirements.

2.5. Changes to the way third party payments (Top-Ups) are administered is required by the Local Government and Social Care Ombudsman (LGSCO). This will mean that in the case where a client chooses accommodation which costs above the Council's agreed rates the top up amount, normally paid by a third party, will be paid to the Council rather than the provider. In turn this means the Council will pay the gross cost of the placement to the provider. Engagement with clients and providers who will be directly affected by these changes will be undertaken during October and November 2021.

2.6. There needs to be recognition that the needs of new clients can be different and more challenging than some providers may have previously experienced due to an increasing number of placements for people with multiple and complex needs. The specification will reflect this, including

providing clarity in respect of support plans that fully articulate each clients' needs and how they will be met.

2.7. A contractual clause in relation to climate reduction is being developed with a focus on Energy Efficiency Grants and Free Energy Audits available to businesses in East Sussex and signpost to resources that will support providers in reducing their carbon footprint.

3. Conclusion and reasons for recommendations

3.1. Clear, concise and current terms and conditions are a key element to a positive contractual relationship with the Councils' independent sector providers of residential and nursing care; as well as ensuring the delivery of high quality, safe and effective personalised services.

3.2. The proposed amendments to the current terms and conditions are necessary to reflect recent changes in legislation and best practice as well as incorporating the collective lessons learnt throughout the Covid-19 pandemic.

3.3. A detailed draft of the revised terms and conditions is being finalised alongside the completion of an Equality Impact Assessment with the intention of consulting with independent sector providers between October and December 2021 and implementation by March 2022.

3.4. The Lead Member is recommended to:

1) agree to consult with independent sector care providers from October-December 2021 in respect of amendments to the terms and conditions for the Residential and Nursing Care Framework Contract Agreement as set out in paragraph 2.1-2.7; and

2) Delegate authority to the Director of Adult Social Care to amend the terms and conditions, following consultation with care providers, and take all necessary actions to give effect to their implementation by March 2022.

MARK STANTON

Director of Adult Social Care

Contact Officer:

Tamsin Peart, Strategic Commissioning Manager, Tamsin.Peart@eastsussex.gov.uk

This page is intentionally left blank

Report to:	Lead Member for Adult Social Care and Health
Date of meeting:	21st September 2021
By:	Director of Adult Social Care
Title:	Service Model for Directly Provided Learning Disability Day Services
Purpose:	To seek Lead Member agreement to make permanent changes to the service model for the Council's Directly Provided Learning Disability Day Services, following a comprehensive consultation process.

RECOMMENDATIONS

Lead Member is recommended to:

- 1. Agree to the permanent change to Service Model for Directly Provided Learning Disability Day Services with effect from 18th October 2021, specifically to provide:**
 - the service across three sessions per day, rather than as whole days.
 - the service in 'support bubbles' of up to 15 clients.
 - sessions based in the community that are independent of the building-based service;
 - 2. Delegate authority to the Director of Adult Social Care to take all necessary actions to give effect to the implementation of the revised model of delivery;**
 - 3. note the summary of the outcome of the staff consultation (Appendix 1);**
 - 4. note the summary of the stakeholder consultation (Appendix 2);**
 - 5. note the report by POhWER, an independent advocacy service, as part of the consultation process (Appendix 3); and**
 - 6. note the summary of the Equality Impact Assessment (Appendix 4).**
-

1 Background

1.1 Throughout the COVID-19 pandemic East Sussex County Council's Directly Provided Learning Disability (LD) Day Services remained open to support the small number of vulnerable adults and their families who were dependent on the service. Throughout the first six months of the pandemic attendance at Day Services fluctuated, initially being low as clients and families 'locked down' and increasing as restrictions were lifted.

1.2 The Directly Provided LD Day Services are located at Beeching Park in Bexhill-on Sea, Linden Court in Eastbourne, St Nicholas Centre in Lewes and Hookstead in Crowborough.

1.3 During this period, work was undertaken to deliver a 'Covid secure' service with increasing numbers while managing social distancing and the associated restriction on the capacity of the day service buildings. The service model evolved alongside changing national guidance, with the key elements including:

- A reduction in the occupied capacity of Day Service buildings.
- Extending opening hours and delivering day services as three sessions per day to increase use of the building and mitigate against the capacity restrictions.
- The delivery of day service sessions in 'support bubbles' of no more than 15 clients.
- Delivering community-based sessions to start and end in the community, therefore not being affected by the limited building capacity
- Restricting numbers on the Day Service transport to aid social distancing.
- Staff use of PPE, temperature testing and COVID-19 testing.

1.4 In August and September 2020 clients, parent carers and staff were formally asked to support this model to assist delivery through the pandemic. At the time it was envisaged that this service model may have to be in place until Easter 2021. All parties were understanding and supportive of the approach.

1.5 In January 2021 Covid restrictions were introduced and it was apparent that Day Services would not return to pre-pandemic delivery in time for Easter 2021. There was also emerging evidence that some of the changes were having a positive impact on the way services were delivered and outcomes for clients. As such, a six month extension to the temporary model was agreed to ensure a 'Covid secure' service could be maintained and allow time to better explore any potential benefits of making elements of the temporary model permanent.

1.6 Consultation was undertaken with Clients and Parent carers alongside a staff consultation with a view to making permanent:

- Day Services across three sessions a day, a morning, afternoon, and twilight session
- Day Service sessions in support bubbles up to 15 clients
- Community sessions that start and end at the community venue

1.7 Having delivered this model for ten months, and taking formal and informal feedback throughout the period, it is believed that these changes do, and would continue to:

- Provide a more person-centred service to clients through smaller groups
- Provide a broader range of options as the twilight sessions have added a more social element to Day Services
- Offer improved opportunities for being within the community

1.8 This model of delivery would also ensure that the Day Services are well positioned to respond to further Covid restrictions or the potential impact of a new pandemic in the future.

2 Supporting information

2.1 Staff Consultation was carried out from 14th June 2021 to 6th August 2021. This focussed on a change to their working hours as staff would be required to permanently work until 7.30pm on some days. The general response to this has been positive with some colleagues having specific concerns about caring responsibilities and health requirements which would be addressed on an individual basis. A summary of the outcome of the staff consultation is contained in **Appendix 1**.

2.2 Client and parent carer consultation was carried out from 21st June 2021 to 6th August 2021. This was delivered in two phases, initially to ascertain stakeholders' general views of the concept followed by a second phase of consultation which focussed on the specific detail of the proposal i.e., the timing of the sessions. **Appendix 2** contains a summary of both phases of the stakeholder consultation and **Appendix 3** contains a report prepared by POHWER, an independent advocacy service, as part of the consultation process

2.3 The consultation process was undertaken using Microsoft (MS) Teams meetings, face to face meetings in day services, individual meetings where people couldn't access MS Teams either face to face or by telephone, online and paper questionnaires. The responses to the question '*How happy are you with our plans for learning disability day services?*' are summarised in the table below:

	Number of responses	Very Happy/Happy	Unhappy/Very Unhappy	Neither Happy nor unhappy	Did not answer
Clients	128	65%	8%	17%	9%
Parent/Carer	4	100%	0%	0%	0%
Other	2	50%	0%	50%	0%

(Note: This question was asked in phase 1 of the consultation. There was a higher number of responses to the more specific questions in phase 2 with 68 parent/carers and 8 stakeholders)

2.4 The positive responses cited clients thriving being in smaller groups, enjoying different sessions the increased flexibility of the timing.

2.5 The negative responses tended to be from clients and parent carers not liking the twilight sessions as they clashed with mealtimes or evening routines; clients struggling with change and the restrictions of the bubbles (although these will be eased when they aren't fulfilling an infection control function).

2.6 Access to day service transport was restricted during the pandemic and has been focussed on ensuring that clients with no other means to get to a building-based day service have been able to attend.

2.7 The community sessions in the new model are designed to enable most people accessing Day Services to have access to their community and some of the activities that are not available in the Day Service Building. This model does, however, create some challenges including:

- Accessing community-based sessions that are not accessible on public transport.
- Supporting clients living in rural areas to access community-based sessions.
- Supporting clients without transport and unable to access public transport to access community-based sessions.
- Ensuring clients who only access building-based services can still access the community.

2.8 To address these transport challenges, the following solutions will be implemented from the existing service budget:

- Enhance existing day service transport runs to include drop off points at some community based sessions.
- Review the fleet of day service vehicles to include a wider range of vehicles that support staff are able to drive, offering additional flexibility.
- Provide driver training to support staff to enable them to drive the larger 16-seater buses that are unused between core transport runs.
- Increase dedicated driver provision by 0.8fte driver across to provide transport to community activities for clients who only access building-based services, using existing day service vehicles on their closed days therefore maximising the use of an existing resource.

2.9 An Equality Impact Assessment was undertaken for the temporary delivery of this service model at the start of the pandemic and has been updated as part of the consultation process. It identified 'No major barriers to implementing this new service model'. A summary of the Equality Impact Assessment is contained within **Appendix 4** and an action plan has been developed to address the small number of concerns that were identified.

3. Conclusion and reasons for recommendations

3.1 Making the current changes to the service model for the councils Directly Provided Learning Disability Day Services permanent will improve the service offered to clients and parent carers by providing a broader range of options, hours of delivery and locations. Whilst the vast majority of clients, parent carers and staff are supportive of the service model which has effectively been in place for over a year, support will be provided to those who find this change challenging.

3.2 If agreed, the proposed service changes will be made permanent from 18th October 2021.

MARK STAINTON

Director of Adult Social Care

Contact Officer: Richard Lewis, Head of Learning Disability Services

Tel. No. 01273 337765 Email: Richard.LewisASC@eastsussex.gov.uk

Background Documents

Equality Impact Assessment and Consultation responses

Local Members

Cllr Hollidge, Cllr Tutt, Cllr Maples and Cllr Lunn



Learning Disability Services, Day Service Staff Consultation Summary

Introduction:

The consultation to implement permanent changes to the Day Service model included a change to the working hours of staff working in these services. As this would be a change to their contract a separate consultation with staff was undertaken to run in parallel with the consultation on the whole model. The changes would affect staff in the four ESCC Day Services and no posts were at risk in this proposal.

Day Service	Number of staff
Hastings & Rother at Beeching Park	31
Linden Court	28
St Nicholas	18
Hookstead	17
Total	94

Timelines:

Date	Day	
14 th June 2021	1	Launch Consultation Process (Issue 1)
14 th June to 21 st June		Group consultation meetings (details below)
22 nd , 23 rd , 24 th 25 th & 29 th June		Individual 1:1 consultation meeting upon request
25 th June 2021		Close of consultation on first draft proposals
28 th June 2021		Management consideration of comments
w/c 28/6/21		Revised proposals issued for comment (Issue 2)
9 th July 2021		Close of consultation on second draft proposals
12 th July		Management consideration of comments
w/c 19 th July		Final draft proposals issued (Issue 3)
28 th July		Close of formal consultation

Involvement:

Staff were involved in the consultation through group meetings, individual meetings and through being able to submit questions. The unions were involved from the outset to support staff in this process.

Staff were made aware of the support structures available to them, recognising that while no jobs were at risk a staff consultation can still cause some anxiety.

Feedback:

All staff questions were collated into a Frequently asked Questions document that was shared with staff as part of the process.

Of the 73 questions asked:

- 29 were about staff issues
- 21 were about client experience
- 13 were about the sessions delivered
- 8 were other areas such as transport.

Of the staff related questions half concerned the working hours with specific questions about individual circumstances. These were answered in the FAQ and where there are on-going concerns, such as managing caring responsibilities, these will be addressed with the individuals if the proposed model of delivery is agreed.

Other questions related to transport, ensuring that working at different times was shared fairly and the location of the work base.

There were three questions specifically about working in the community and re-assurance sought that staff would be safe. These sessions are risk assessed and 'lone worker' devices available when staff are working away from the building to ensure staff safety.

Conclusion:

The staff in the Day Services have shown great commitment and flexibility to deliver services throughout the pandemic. Through the engagement with staff the teams recognise that this is a positive development and are supportive of this.



LD dps day services consultation

Date: August 2021

Document summary

Results report from the consultation about the permanent service model for East Sussex County Council's directly provided learning disability day services

Contents

Background.....	5
Why we consulted.....	5
What happens next?	5
Consultation summary	6
About the consultation	6
Stage one of the consultation	6
Stage two of the consultation.....	6
Consultation activity	6
Stage one of the consultation	6
Stage two of the consultation.....	6
What people told us in the consultation	7
Overall summary	7
Stage one summary	7
Stage two summary	8
Appendix 1: Stage one survey.....	9
Client questions	9
Parent/carers questions.....	9
Stakeholder questions	10
Appendix 2: Stage one survey results	11
Client results	11
Who completed the survey	11
Which day service they attend.....	11
Their views on our plans.....	11
What they like	11
What they are worried about.....	12
What we could do differently.....	14
Parent/carers results	14
Which day service the person they care for attends	14
Attendance at the virtual meetings	14
Their views on our plans.....	14
What they like	15

What they are worried about.....	15
What we could do differently.....	15
Stakeholder results	15
Their views on our plans.....	15
What they like	15
What they are worried about.....	15
What we could do differently.....	16
Appendix 3: Stage one other feedback.....	17
Appendix 4: Stage two surveys	18
Client questions	18
Parent/carer questions.....	19
Stakeholder questions	20
Appendix 5: Stage two survey results	23
Client results	23
Who helped them if they had help to take part	23
Which day service they attend	23
Whether they like the sessions being 3 hours	23
Views on session start and end times (morning)	24
Views on session start and end times (afternoon)	25
Views on session start and end times (twilight)	26
Whether they have taken part in community sessions.....	27
What stops them taking part	27
What would make it easier to take part.....	28
Whether they would be happy to pay a bit more for community sessions	29
How much they would be willing to pay	29
Social activities for the twilight sessions	29
How can we make it easier for you to come to twilight sessions	30
Any further comments.....	30
Parent/carer results	31
Which day service the person they care for attends	31
Current length of sessions	31
Session start and end times	32
Whether transport has restarted for the person they care for	34
Participation in community sessions.....	34
Barriers to taking part in community sessions	34
Making it easier for people to take part in community sessions.....	35
Spend on community sessions	35
Activities that people are willing to spend more on	35
Social events at twilight sessions	36
Further comments	36
Stakeholder results	37
Current length of sessions	37
Whether the current start/end times are about right	37

Comments and suggestions about transport	38
Community session activities.....	38
Making it easier for people to take part in community sessions.....	38
Barriers to taking part in community sessions	38
Social events for the twilight sessions	39
Further comments	39
Appendix 6: Stage two other feedback	40
Beeching Park	40
Support bubble 1	40
Support bubble 2	41
Support bubble 3	42

About this document:

Enquiries: Consultation Team

Author: Cathy Heys

Telephone: 01273 418 565

Email: consultationASC@eastsussex.gov.uk

Download this document

<https://consultation.eastsussex.gov.uk/>

Accessibility help

Zoom in or out by holding down the Control key and turning the mouse wheel.

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

The service model for our learning disability day services was temporarily changed in response to the COVID-19 pandemic. This consultation asked people's views on our plans to make the new service model our permanent way of working.

Our day services are provided at: Beeching Park; Hookstead; Linden Court; and St Nicholas.

Why we consulted

Client and staff safety were the main drivers for the changes to our service model. What we've found though is that the new way of working appears to offer better outcomes for clients. In particular, the smaller support bubbles allow client interactions to be more meaningful and person-centred. This has been a consistently strong message from colleagues, clients, parents and carers.

We think that moving to this model permanently would provide more flexibility, deliver better outcomes for clients, and allow us to respond to the ongoing challenges presented by COVID-19.

What happens next?

This report brings together what people have told us across both stages of the consultation. The feedback shared with our advocacy provider isn't included here and is instead covered in two separate reports which will be shared with Members.

The Lead Member for Adult Social Care & Health will consider our recommendations, the consultation results and the Equality Impact Assessment on 21 September 2021. If Lead Member approves our plans, we would review the new way of working after around six months. This would mean asking for feedback from clients and parents/carers in March 2022.

Consultation summary

About the consultation

The consultation took part in two stages. This gave us time to respond to questions and amend our plans if needed.

Stage one of the consultation

Stage one ran for two weeks from 21 June to 2 July. A similar approach was used across the three surveys for clients, parent/carers, and stakeholders, although there were some small changes to the client survey to make it easy read.

People could take part in a variety of ways:

- **Clients:** We held facilitated meetings in the support bubbles to help people fill in the survey. People could also share their feedback with our advocacy provider or other staff members.
- **Parents/carers:** We held virtual meetings, offered phone calls and 1-2-1 drop-in meetings and made the survey available online.
- **Stakeholders:** We emailed stakeholders a link to the online survey.

Stage two of the consultation

The survey for stage two was developed in response to the feedback and issues that came up in stage one. Similar topics were covered across the different audiences. When we sent people their survey we also provided a summary of the results from stage one and frequently asked questions.

One of the day services also ran group discussions and our advocacy provider was available again to speak to clients.

Consultation activity

Stage one of the consultation

155 responses were received in stage one of the consultation. The majority of these were client surveys with 128 responses. Parents mostly took part through emails and conversations, although a few surveys were received.

Stage two of the consultation

195 responses were received in stage two (this doesn't include the group discussions). Clients were the largest group again with 119 responses. There was also a good response to the parent survey, with 68 taking part, and a small increase to stakeholder responses (up from 2 in stage one to 8 this time round).

What people told us in the consultation

Overall summary

Across all three groups, most people are supportive of making the COVID-19 temporary way of working our permanent service model. The majority like the support bubbles and many respondents made positive comments about their day service and the sessions. The main issue raised with the support bubbles is not being able to see their friends who are in a different support bubble.

Most people are happy with the length of the sessions and the start times. For the morning and afternoon sessions there were more mixed views on people's preferred end time. A small number of parent/carers said the session times impacted on their ability to work.

Views on the twilight sessions were more mixed for clients. Quite a few hadn't been to a twilight session and some people are unwilling to even try them. Transport was the top answer for things that would make it easier for them to attend. There were lots of ideas shared for social events at the twilight sessions.

A lot of the respondents haven't attended a community session, which reflects our limited ability to run them during the pandemic. There is some uncertainty about these sessions from clients and whether they will like them. The biggest issue raised about these sessions is around transport and people said improving this would make it easier for them to take part. The other barriers are cost and accessibility, although COVID-19 was also mentioned.

A reasonable number of clients would be happy to pay a bit more for community sessions. The biggest group of clients and parents/carers were willing to pay £4 plus on average, but there were also a good proportion who chose smaller amounts. The main things that parents/carers would be willing to spend more on is pub/refreshment trips, nature-related activities, and games/sports.

There were also lots of ideas shared about the sort of activities that people would like to take part in at the day services and at the community sessions.

Stage one summary

The summary focuses on themes mentioned by a reasonable number of people. For detailed themes covered across all comments please see appendix 2.

- **How happy they are with our plans:** Two thirds of respondents are 'very happy' or 'happy' with our proposals, while only 7% are 'unhappy' or 'very unhappy' with them. The remainder either chose a neutral option or didn't answer.
- **What they like about our plans:** People said they liked the support bubbles (94 clients), the twilight sessions (45 clients) and the community sessions (21 clients). Although quite a few people hadn't been to a community (37 clients) or twilight session (22 clients). They said that the plans would help people to stay together (25 clients), have the freedom to choose what to do (18 clients), and help people to feel safe (16 clients).
- **What they are worried about:** People are worried about missing their friends (15 clients) and not being able to see their friends (10 clients). Some people are worried about the timing of the twilight sessions (10 clients) and others say they are unwilling to take part in community sessions (7 clients).

- **What we could do differently:** The majority of the comments focused on specific activities they would like to take part in, either in the community (34 clients) or at day services (27 clients). The next biggest comment theme was people who said nothing needed to change (13 clients).

Stage two summary

The summary focuses on themes mentioned by a reasonable number of people. For detailed themes covered across all comments please see appendix 5.

- **Length of the sessions:** The majority of respondents are happy with the current length of the sessions, with 71% of clients saying that they like the sessions being three hours, 61 out of 68 parents/carers and 6 out of 8 stakeholders saying they are 'about right'.
- **Start and end time for the sessions:** The current start and end times for the sessions are broadly favoured by the majority of respondents. Just over three quarters of clients like the current start/end times for the morning and afternoon sessions. Views are more mixed for the twilight sessions, but this seems to be more a reflection of people's views of the session than wanting a different time. The majority of parents/carers who answered the question prefer the current start times for morning and afternoon sessions and the current start/end time for twilight sessions. The picture is more mixed for morning/afternoon end times, but slightly more people prefer the current end time. Stakeholders either agree that the current start/end times are about right or are neutral.
- **Taking part in community sessions:** Less than 20% of clients say they have taken part in community sessions. There weren't any strong themes in terms of what stops people taking part. The top answer for what would make it easier was improving transport (15 clients, 7 parents/carers, and 3 stakeholders).
- **Paying for community sessions:** There are mixed views on whether people are willing to pay a bit more for community sessions, with only 40% of clients saying 'yes'. We asked both clients and parents/carers how much more they would be willing to pay for community sessions and again the picture was mixed. While a good proportion were willing to pay £4 plus (33% of clients and 21 parents/carers) there were a few people who chose a variety of lower amounts (15% of clients and 22 parents/carers went for amounts below £4).
- **Attending twilight sessions:** The top suggestion for making it easier to attend was transport (21 clients). Suggestions for social activities included sports and games (24 clients, 12 parents/carers, and 3 stakeholders); films and entertainment (21 clients, 13 parents/carers and 1 stakeholder); taking part in performances (19 clients and 11 parent/carers); and refreshments (18 clients, 10 parents/carers and 2 stakeholders).
- **Transport to day services:** Some people said transport has not yet restarted for the person they care for (10 parents/carers). The main comment was that transport is currently limited (5 parents/carers).
- **Any further comments:** The top comments were positive comments about day services (15 clients and 10 parents/carers) or about the day sessions (14 clients).

Appendix 1: Stage one survey

Client questions

[Please note that the original survey included easy read pictures.]

Q1) Please tick this box if you are filling in the questionnaire on behalf of someone else:

I am filling in this survey on behalf of someone else

Q2) Which day service do you attend?

Beeching Park Hookstead Linden Court St Nicholas

Q3) How happy are you with our plans for learning disability day services?

Very happy

Happy

Neither happy nor unhappy

Unhappy

Very unhappy

Q4) What do you like about our plans?

Q5) What are you worried about?

Q6) What could we do differently?

Parent/carers questions

Q1) Which day service does your family member, or the person you care for, attend?

Beeching Park Hookstead Linden Court St Nicholas

Q2) Did you attend a Microsoft Teams parent/carers meeting?

[List of meeting times]

I didn't attend one of these meetings

Q3) How happy are you with our plans for learning disability day services?

Very happy

Happy

Neither happy nor unhappy

Unhappy

Very unhappy

Q4) What do you like about our plans?

Q5) What are you worried about?

Q6) What could we do differently?

Stakeholder questions

Q1) How happy are you with our plans for learning disability day services?

Very happy

Happy

Neither happy nor unhappy

Unhappy

Very unhappy

Q2) What do you like about our plans?

Q3) What are you worried about?

Q4) What could we do differently?

Appendix 2: Stage one survey results

Client results

We received 128 completed surveys. It should be noted that the report from our advocacy provider suggests some concerns about how well people understood the survey. Both reports will be shared with the Lead Member and councillors through Members Papers.

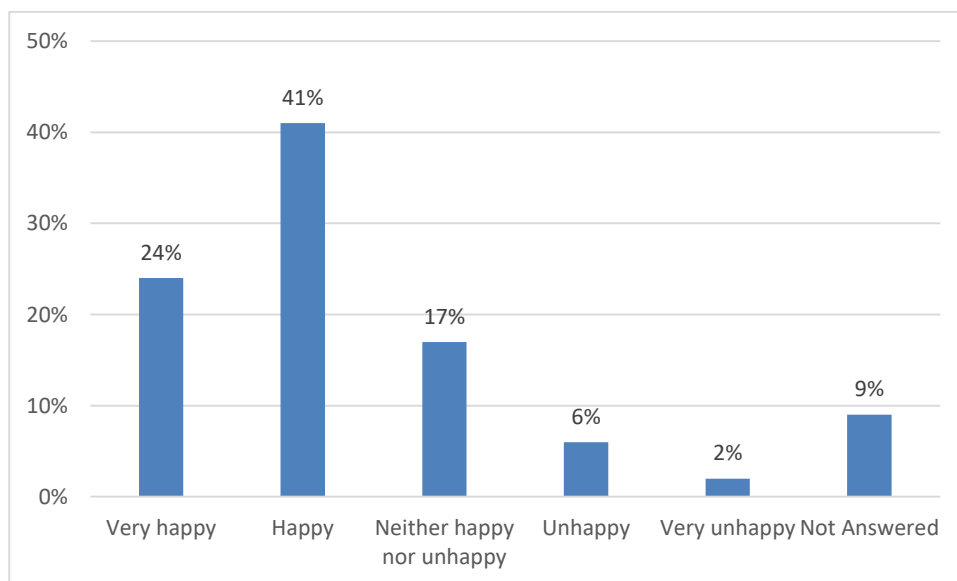
Who completed the survey

84 people said they were completing the survey on behalf of someone else.

Which day service they attend

Day service name	Number	Percentage
Beeching Park	39	30%
Hookstead	29	23%
Linden Court	20	16%
St Nicholas	38	30%
Not Answered	2	2%

Their views on our plans



What they like

There were 125 comments for this question. We have split the themes into topics.

Support bubbles:

- They like the support bubbles (94 people)
- They like them but don't want them to be forever (5)
- They don't like the support bubbles (4)

- They like them but want to be able to move around between support bubbles (3)
- They are not sure if they like them or not (1)
- They don't like them but think others might (1)

Twilight sessions:

- They like the twilight sessions (45 people)
- They haven't been to these sessions (22)
- They hadn't been to a session but didn't like them (16)
- They like the idea of them but haven't attended (9)
- They don't like them but think that others might (4)
- They are not sure if they like them or not (4)
- They didn't like them (2)
- They liked them but thought that maybe they should not be kept (1)

Community sessions:

- They haven't been to a community session (37 people)
- They like the community sessions (21)
- They like the idea of them but haven't attended (16)
- They are not sure if they like them or not (9)
- They are not sure if they like them or not and they haven't attended any (7)
- They hadn't been to a session but didn't like them (4)
- They didn't like them (1)

Other topics:

- The plans help people stay together (25 people)
- They have the freedom to choose what to do and where (18)
- They feel the plans helped them to stay safe (16)
- Praise for staff members (12)
- They miss their friends (8)
- They miss having the freedom to choose what to do and where (4)

What they are worried about

There were 99 comments for this question. We have split the themes into topics.

Support bubbles:

- They can't see their friends (10 people)
- They aren't worried about anything (8)
- They do not like support bubbles (2)
- They are not sure about them (3)

- They are confusing (1)
- They are too small (1)

Twilight sessions:

- They are worried about the timings of the sessions (10 people)
- They are unwilling to take part in these sessions (8)
- They aren't worried about anything (8)
- They are worried about the length of the sessions (3)

Community sessions:

- They are unwilling to take part in these sessions (7 people)
- They aren't worried about anything (4)
- They are worried about how busy they might get (3)
- They have mixed feelings about them (2)
- They are worried about how safe they are (1)

Choice of activities:

- They miss walking around the building (4 people)
- They are concerned that an activity they like has stopped (3)
- They miss taking part in an activity away from the building (2)
- They miss eating elsewhere (2)
- The impact of the weather (2)
- They miss meeting up with others (1)
- Criticism of an activity (1)
- There is not enough variety of activities (1)

Other topics:

- They are missing their friends (15 people)
- They are worried about staying safe from Covid-19 (6)
- They are worried about change of any sort (4)
- They are worried about noise and attention from others (3)
- Missing contact with others (3)
- They are worried about timing of an activity (2)
- Transport is hard to arrange (2)
- They are worried about transport (2)
- They are worried about the cost of transport (1)
- Missing a named person (1)
- They miss staff (1)

- They miss staff and need more of them (1)

What we could do differently

There were 100 comments for this question.

- They mentioned a specific community activity they would like to take part in (34 people)
- They mentioned a specific day services activity they would like to take part in (27)
- They said that nothing needed to change (13)
- They suggested the support bubbles should increase in size so they could see more friends (5)
- They said the use of the support bubbles should be decreased (2)
- Go back to how things were before the pandemic (2)
- Adjust continuous session or contact lengths (2)
- They would like the opportunity to work (1)
- They wanted to minimise contact with some other individuals (1)
- Adjust the session timings (1)
- Offer refreshments at the twilight session (1)
- Have gender-focused sessions (1)
- Have community sessions only with those in the same support bubble (1)

Parent/carers results

We received 4 completed surveys.

Which day service the person they care for attends

Day service name	Number
Beeching Park	1
Hookstead	0
Linden Court	0
St Nicholas	3
Not Answered	0

Attendance at the virtual meetings

One person attended the virtual meetings and the rest said they did not.

Their views on our plans

Two people said they were 'very happy' and two said they were 'happy' with our plans.

What they like

There were 4 comments for this question.

- They like the sessions (3 people)
- They like the support bubbles (2)
- The model is Covid-safe (1)
- They are happy with the service for now (1)
- The person they care for gets less hours than before (1)

What they are worried about

There were 4 comments for this question. All the topics were only covered by one person.

- Whether the person they care for will get the hours lost back (1 person)
- Nothing (1)
- Access to transport as not getting fully at the moment (1)
- COVID-19 but the service is doing the right things (1)
- There being less opportunity to make friends (1)
- Activities may become routine (1)
- May become less comfortable with bigger groups if keep to small support bubbles (1)

What we could do differently

There were 3 comments for this question. All the topics were only covered by one person.

- The services are doing a good job (1 person)
- Provide weekly feedback on what happened over the week
- No suggestions to make (1)

Stakeholder results

We received 2 completed surveys.

Their views on our plans

One person said they were 'happy' with our plans and the other said they were 'neither happy nor unhappy'.

What they like

There were 2 comments for this question. All the topics were only covered by one person.

- There is more flexibility for clients that attend from their service (1)
- The opportunities for community-based activities (1)

What they are worried about

There was 1 comment for this question. The person said they weren't worried about anything.

What we could do differently

There was 1 comment for this question. The person suggested the twilight sessions run all week to provide more flexibility for clients.

Appendix 3: Stage one other feedback

During stage one parents had the option of attending a virtual meeting, speaking to us over the phone and attending a drop-in to talk about the proposals. In total 21 parents/carers shared feedback with us during this stage.

The themes covered in the comments were:

- Overall positive comment about the service (15 people)
- Positive comment about the support bubbles (3)
- Other commitments make all/some session times impossible (3)
- Positive about the sessions but with certain scheduling preferences (2)
- Positive comment about the session timetable (1)
- Positive about there being three sessions during the day (1)
- The sessions don't cover enough of the day (1)
- The person they care for seems to be receiving fewer sessions than before (1)

Appendix 4: Stage two surveys

Client questions

Please note that the original survey included easy read pictures.

What is your name?

If you had support to fill in this form, please tick who helped?

Staff at service

Advocate

Family

Carer

Q1) What day service do you use?

Linden Court

St Nicholas

Beeching Park

Hookstead

Questions about the sessions

All sessions run for three hours at the moment. There are sessions and in the morning, in the afternoon, and twilight sessions.

Q2) Do you like that the sessions last for 3 hours?

Yes

No

Not sure

If you said no, why? Would you like them to be longer or shorter?

Q3) The morning sessions start at 9am and end at 12pm. Do you like these start and end times?

Yes

No

Not sure

If you said no, what would you like to be different?

[Note: people could choose their preferred start and end time.]

Start time: 9am

9.30am

10am

End time: 11.30am

12pm

12.30pm

Q4) The afternoon sessions start at 12.30pm and end at 3.30pm. Do you like these start and end times?

Yes

No

Not sure

If you said no, what would you like to be different?

Start time: 12.30pm

1pm

1.30pm

End time: 3pm

3.30pm

4pm

Q5) The twilight sessions start at 4pm and end at 7pm. Do you like these start and end times?

Yes

No

Not sure

If you said no, what would you like to be different?

Start time: 4pm

4.30pm

5pm

End time: 6pm

6.30pm

7pm

Q6) Have you taken part in any community sessions?

Yes No Not sure

If you said no, what is stopping you from taking part?

Q7) How could we make it easier for you to take part in community sessions?

Q8) Would you be happy to pay a bit more money for some community sessions?

Yes No Not sure

Q9) If you said yes, how much would you pay for each session?

£1 £2 £3 £4 £5 More than £5

For our twilight sessions we would like these to include you seeing your friends more. We call these social activities.

Q10) What sort of social activities would you like to do in the twilight sessions?

Q11) How could we make it easier for you to come to the twilight sessions?

Q12) Is there anything else you want to tell us about your day service?

Parent/carers questions

Q1) Which day service does your family member, or the person you care for, attend?

Beeching Park Hookstead Linden Court St Nicholas

Tell us what you think about the sessions

The morning, afternoon and twilight sessions all last for three hours and run from 9am-12pm; 12.30-3.30pm; and 4-7pm. We want to understand if we've got the balance right with the sessions and they work for the majority of people. If we do end up making changes to the session times and length this would not affect the amount we charge per session.

Q2) What do you think of the current length of the sessions?

They are about right They are too long They are too short

How long do you think the sessions should be?

Q3) What is your preferred start and end time for each of the sessions?

Morning start time: 9am	9.30am	10am
Morning end time: 11.30am	12pm	12.30pm
Afternoon start time: 12.30pm	1pm	1.30pm
Afternoon end time: 3pm	3.30pm	4pm
Twilight start time: 4pm	4.30pm	5pm
Twilight end time: 6pm	6.30pm	7pm

Please use the box below to add any comments:

Transport to and from day services

Transport to and from day services is now arranged around the three sessions. We think this approach gives us a more flexible offer and once social distancing is relaxed we should be able to fit more people on the buses.

Q4) Has the transport service for the person you care for started again, if it had to stop during the pandemic?

Yes No The person I care for doesn't get transport

If you said 'no', please tell us more:

Tell us what you think about community sessions

Community sessions are now starting in the community, rather than people coming to the day service first. This means that people have to arrange their own transport to the activity. During the pandemic this has made it possible to meet social distancing requirements on the transport and keep people safe at the day service.

We are planning to keep running community services like this, as it will allow us to maintain the small bubbles at the day services. We are looking at transport options for hard-to-reach community sessions, such as those that aren't on a bus route, as we know people have had problems getting to some sessions.

Q5) Is the person you care for currently taking part in community sessions?

Yes No

Q6) Has the person you care for faced any barriers to taking part in community sessions?

Yes No

Q7) If you said yes to the previous question, how can we make it easier for them to take part?

Community sessions sometimes include an extra cost for taking part in addition to the person you care for's client contribution. We want to get the balance right and make sure the sessions are affordable, but also interesting and fun.

Q8) How much are you, and the person you care for, willing to spend on average per session for community activities?

£1 £1.50 £2 £2.50 £3 £3.50 £4 plus Nothing

Q9) Which one-off or special activities would you, and the person you care for, be willing to spend more on? For example, a monthly trip to the pub for lunch or rock-climbing classes.

Making the most of the twilight sessions

People often tell us they want more opportunities for social activities at the day services. And one of people's main worries in the feedback was not seeing their friends. We think the twilight sessions are a good opportunity to develop and improve our social offer.

Q10) What sort of social events do you think we should offer at the twilight sessions?

Q11) Please use the box below to make any further comments and suggestions about the service model and our plans.

Stakeholder questions

Q1) Are you completing the survey as someone who works for:

East Sussex County Council

A community partner

Another provider

Other

If you ticked other please explain:

Tell us what you think about the sessions

The morning, afternoon and twilight sessions all last for three hours and run from 9am-12pm; 12.30-3.30pm; and 4-7pm. We want to understand if we've got the balance right with the sessions and they work for the majority of people. If we do end up making changes to the session times and length this would not affect the amount we charge per session.

Q2) What do you think of the current length of the sessions?

They are about right They are too long They are too short

Your comments:

Q3) How much do you agree or disagree that the current start and end times for the sessions are about right?

Strongly agree

Agree

Neither agree nor disagree

Disagree

Strongly disagree

If you disagreed, please tell us what you think needs to change:

Transport to and from day services

Transport to and from day services is now arranged around the three sessions. We think this approach gives us a more flexible offer and once social distancing is relaxed we should be able to fit more people on the buses.

Q4) Do you have any comments, concerns or suggestions about the plans for the transport service?

Tell us what you think about community sessions

Community sessions are now starting in the community, rather than people coming to the day service first. This means that people have to arrange their own transport to the activity. During the pandemic this has made it possible to meet social distancing requirements on the transport and keep people safe at the day service.

We are planning to keep running community services like this, as it will allow us to maintain the small bubbles at the day services. We are looking at transport options for hard-to-reach community sessions, such as those that aren't on a bus route, as we know people have had problems getting to some sessions.

Q5) What activities and outings would you like to see offered at community sessions?

Q6) How can we make it easier for people to take part in community sessions?

Q7) What barriers do people face to taking part in community sessions?

Making the most of the twilight sessions

People often tell us they want more opportunities for social activities at the day services. And one of people's main worries in the feedback was not seeing their friends. We think the twilight sessions are a good opportunity to develop and improve our social offer.

Q8) What sort of social events do you think we should offer at the twilight sessions?

Any other comments or suggestions

Q9) Please use the box below to make any further comments and suggestions about the service model and our plans.

Appendix 5: Stage two survey results

Two parent/carers surveys and one client survey reached us after the closing date. They aren't included in the analysis here, but they will be shared with the Lead Member and councillors through Members Papers.

Client results

We received 119 completed surveys. A small number of people completed a survey at the day service and another a survey at home. All are included below, as in some cases the answers were different.

Who helped them if they had help to take part

Who	Number	Percentage
Staff at service	45	38%
Advocate	11	9%
Family	32	27%
Carer	22	18%
Not answered	13	11%

Which day service they attend

Day service name	Number	Percentage
Beeching Park	24	20%
Hookstead	28	24%
Linden Court	21	18%
St Nicholas	44	37%
Not answered	2	2%

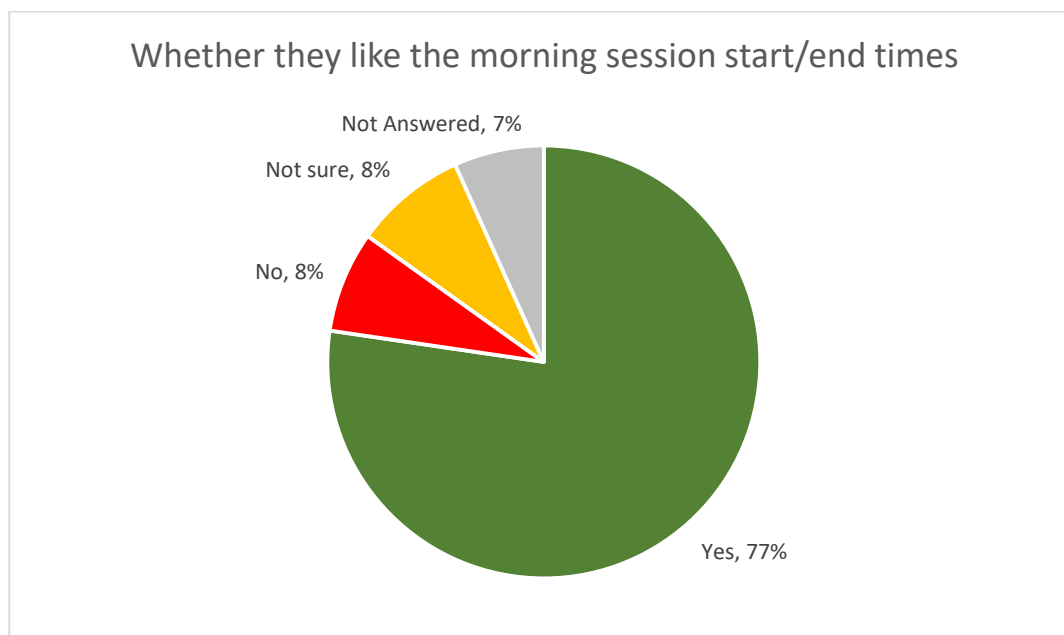
Whether they like the sessions being 3 hours

Yes	84	71%
No	12	10%
Not sure	13	11%
Not Answered	10	8%

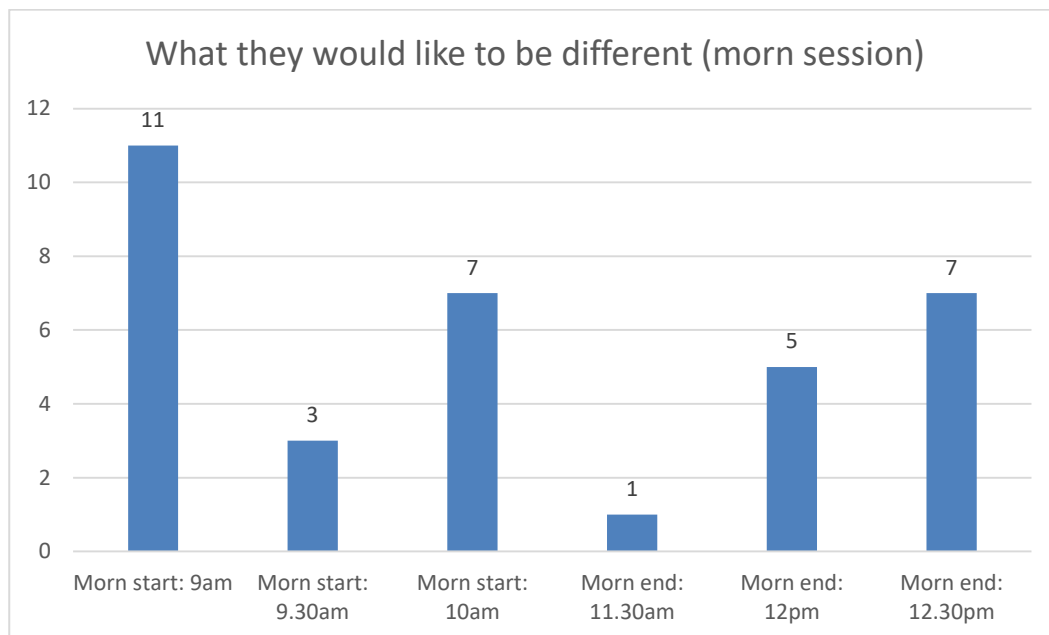
There were 29 comments for this question.

- Would like to go for longer (10 people)
- Would like to go for shorter (6)
- Positive about sessions (3)
- Mentioned activity types (2)
- Not sure understood the question (2)
- Yes, but dependent on timely transport (2)
- Misses seeing friends (1)
- Would like later finish (1)
- Will return after second vaccine (1)
- Ticked not sure: added "shorter" (1)
- Ticked not sure: added happy for usual 6-hour routine (1)
- Ticked yes: "never get hang of it" (1)

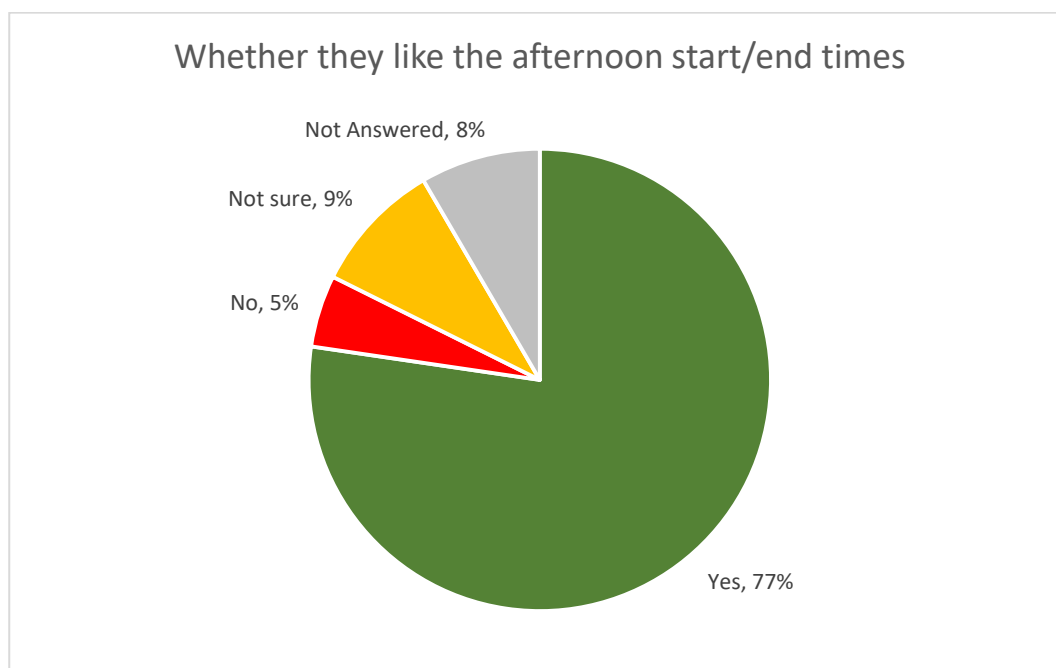
Views on session start and end times (morning)



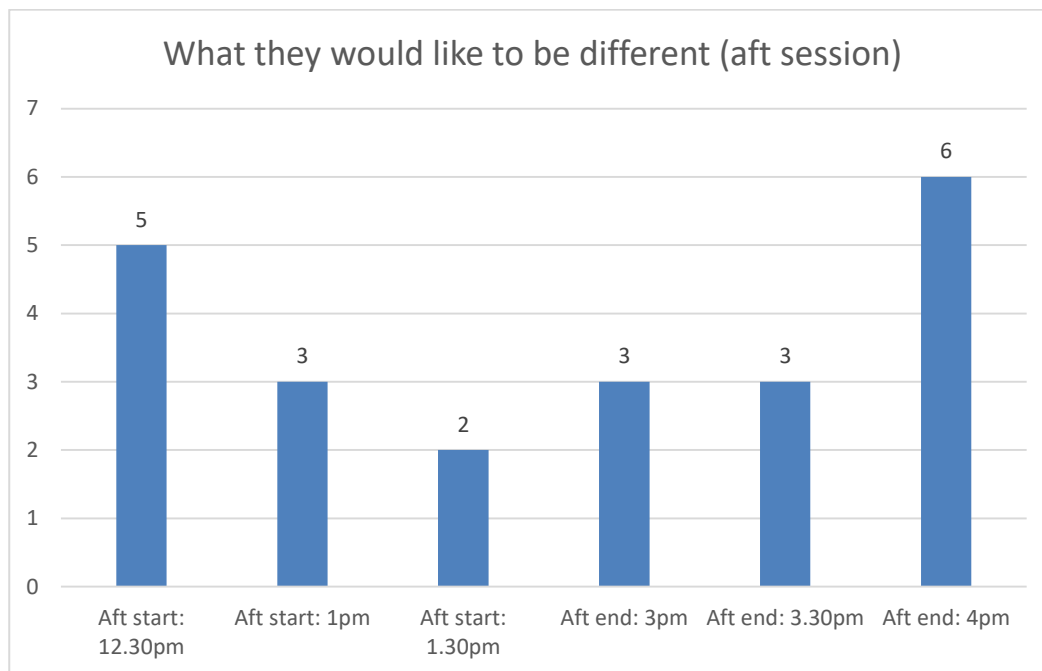
If they answered no to whether they like the current start/end times we asked what they would like to be different. Due to the low numbers who answered this question the chart shows whole numbers rather than percentages.



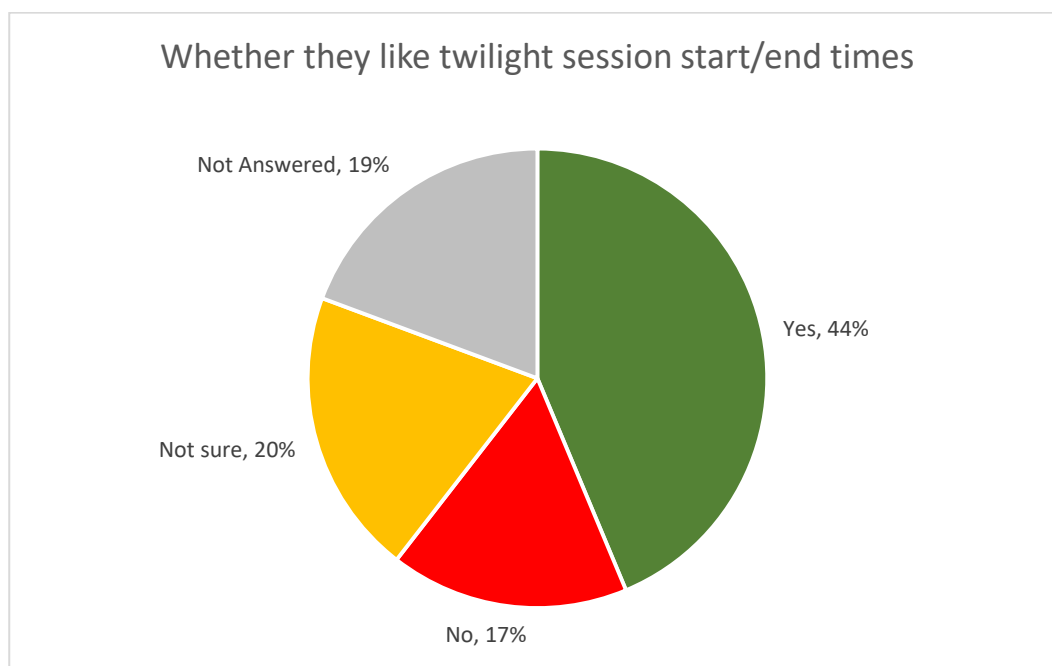
Views on session start and end times (afternoon)



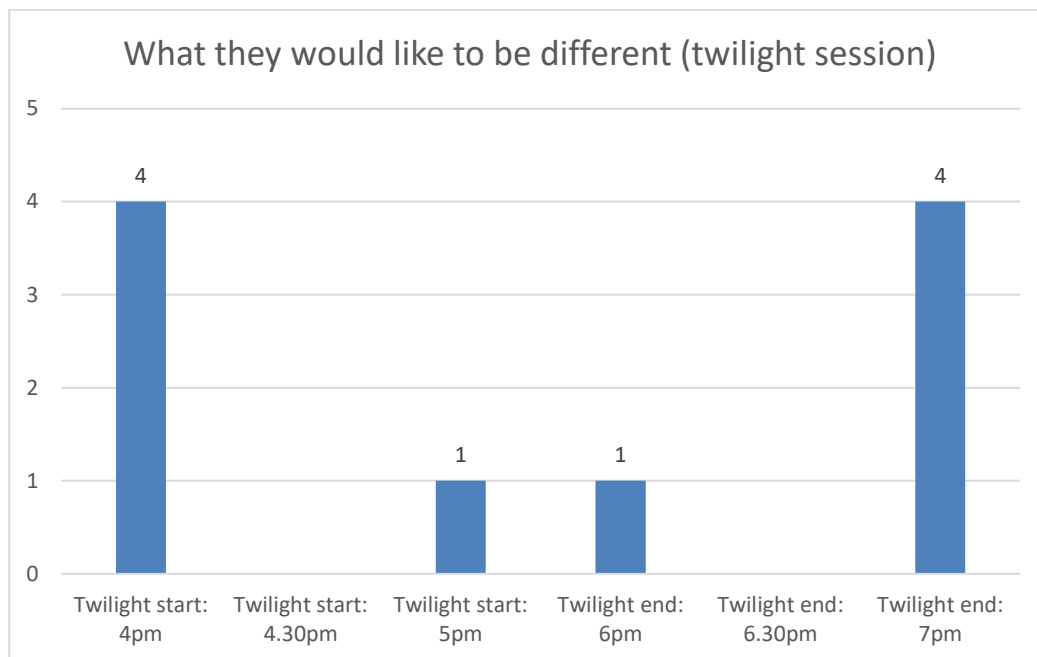
If they answered no to whether they like the current start/end times we asked what they would like to be different. Due to the low numbers who answered this question the chart shows whole numbers rather than percentages.



Views on session start and end times (twilight)



If they answered no to whether they like the current start/end times we asked what they would like to be different. Due to the low numbers who answered this question the chart shows whole numbers rather than percentages.



Whether they have taken part in community sessions

Yes	22	18%
No	70	59%
Not sure	16	13%
Not Answered	11	9%

What stops them taking part

There were 63 comments for this question.

- COVID-19 (8 people)
- Not enough choice (7)
- Transport (6)
- Comment on twilight session and being unwilling to attend (4)
- Not in my routine (4)
- Not interested (4)
- No suggestion but positive comment (4)
- No but is happy as they are (3)
- Would like to attend them (3)
- Prefers not to leave day service building (3)
- Venue issues (3)

- Feeling anxious (2)
- Numbers in the group (2)
- Comment on twilight session and being unable to attend (1)
- Comment on twilight session and wanting to try it (1)
- Can't go due to work (1)
- Don't like change (1)
- Don't like evening (1)
- My support staff's hours mean it can't be done (1)
- Number of staff (1)
- Only been to full day sessions so far (1)
- Presence and attention of people I don't know (1)
- Ticked yes, but reluctant to keep going after lockdown (1)
- Went but did not like it (1)

What would make it easier to take part

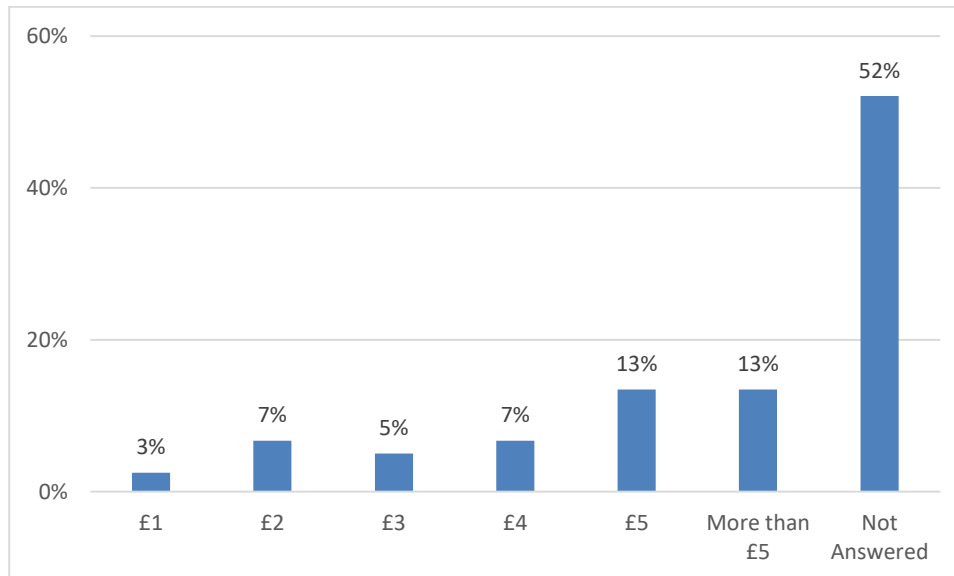
There were 44 comments for this question.

- Improve transport (15 people)
- Greater choice of activities (6)
- Company of trusted others (5)
- No suggestions but positive about going out (3)
- Don't know (2)
- More staff (2)
- Need suitable venue (2)
- Not too far to travel (1)
- Activities at certain times (1)
- Address perceived disability (1)
- Fewer people (1)
- Make clear what is on offer (1)
- No need as happy with them (1)
- Offer refreshment (1)
- Provision of equipment (1)
- Prepared to pay more for certain things (1)

Whether they would be happy to pay a bit more for community sessions

Yes	48	40%
No	21	18%
Not sure	22	18%
Not Answered	28	24%

How much they would be willing to pay



Social activities for the twilight sessions

There were 83 comments for this question.

- Sports and games (24 people)
- Films and entertainment (21)
- Taking part in performance (19)
- Refreshments (18)
- Cooking (11)
- Arts and crafts (9)
- Being with friends (7)
- Exercise and nature (5)
- Anything social (3)
- Like them as they are now (2)
- None, as too tired (2)
- Technology (1)
- Trips out (1)

How can we make it easier for you to come to twilight sessions

There were 52 comments for this question.

- Transport (21 people)
- Don't want to do them (14)
- No need as no issues (8)
- Transport - specifically by certain people (5)
- Certain times preferred (2)
- Don't know (2)
- Can't do them due to parents'/carers' commitments (1)
- Difficult as medication required at that time (1)
- Don't want to do them - dark and away from home (1)
- Have them nearer home (1)
- Larger sessions (1)
- Spend time with particular person/persons (1)
- Stay longer(1)

Any further comments

There were 73 comments for this question.

- Positive comment about their day service (15 people)
- Day sessions: positive (14)
- Activities: greater range (6)
- Like seeing friends (5)
- Would like to see friends again (5)
- Comment about difficulties in explaining things in the survey to the client (4)
- Support bubbles too restricting (3)
- Neutral comment on the service and how it is run (3)
- Would like return to pre-COVID-19 service (3)
- Activities they like (2)
- Positive comment about staff (2)
- Would like to try the twilight sessions (2)
- Would like better equipment/technology (2)
- Would like to go out (2)
- Would like to use service more often (2)
- Would like to use transport again (2)
- Unsure about community sessions (1)

- Unsure about twilight sessions (1)
- Activities: do not like some of them (1)
- Would like to try community sessions (1)
- Likes to give feedback (1)
- Happy to pay more for appropriate services (1)
- Like accommodation/facilities (1)
- Positive comment about the support bubbles (1)
- Include refreshments at twilight sessions (1)
- Twilight sessions take place too late (1)
- Twilight session is inconvenient (1)
- Question about future timings of twilight sessions (1)
- Would like explanation of why they now have fewer sessions (1)
- Would like to see more staff (1)

Parent/carer results

We received 68 completed surveys. Results are provided in whole numbers rather than percentages for clarity due to the response rate.

Which day service the person they care for attends

Day service name	Number
Beeching Park	25
Hookstead	14
Linden Court	13
St Nicholas	16

Current length of sessions

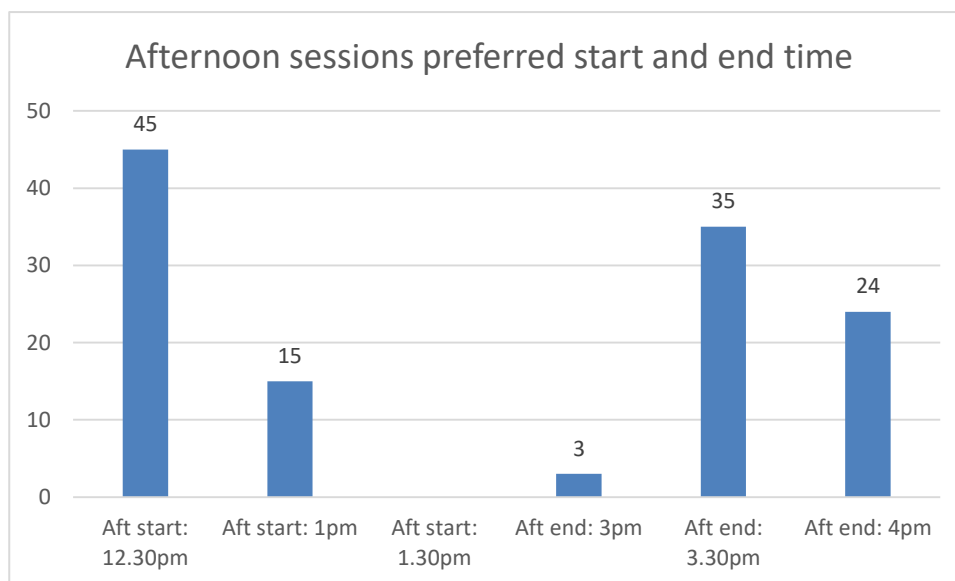
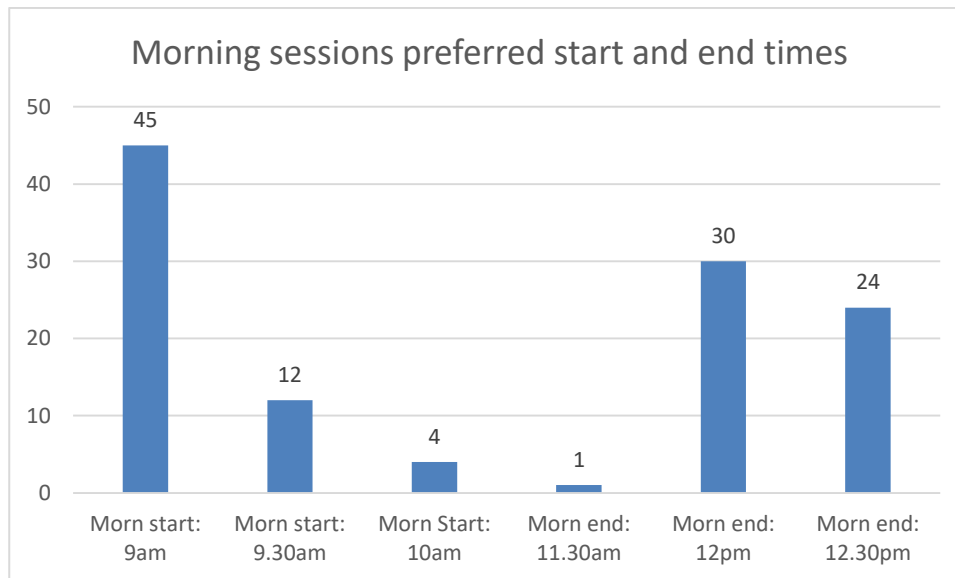
About right	61
Too long	0
Too short	6
Not Answered	1

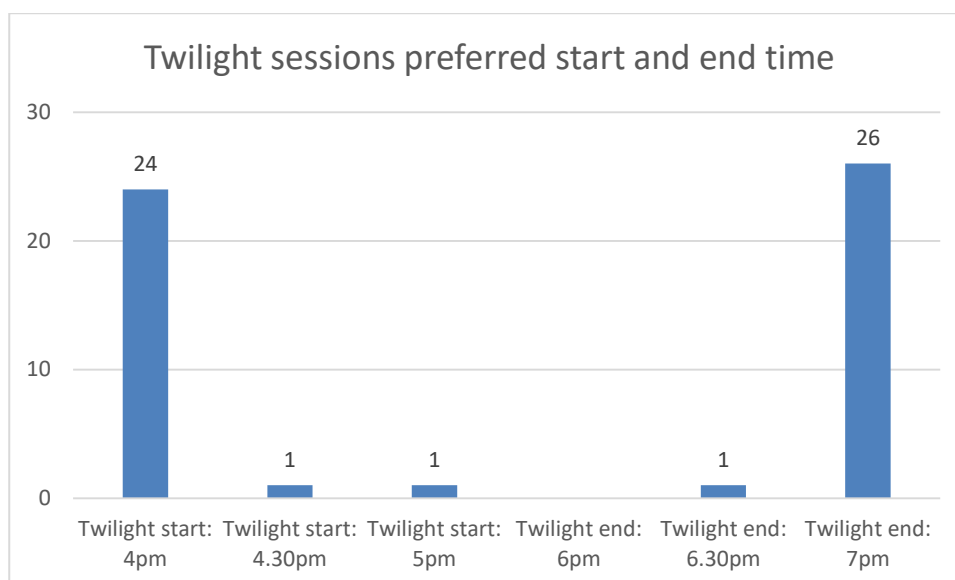
There were 10 comments for this question.

- They would like them to be longer and specified the number of hours (4 people)
- Comment that it now works out as shorter time than before (1)
- Length ok but adding two sessions together has been good (1)

- Length ok but could be longer (1)
- They would like it to be longer due to other commitments (1)
- They would be like it to be longer in the day and not have any twilight sessions (1)
- They specified their time preferences for sessions (1)

Session start and end times





There were 27 comments for this question.

- Twilight – person they care for does not want to attend (8)
- Twilight – not used as other commitments prevent this (3)
- Morning – this is dependent on arrival time following transport (3)
- General comment that they are happy with sessions (3)
- General comment on need for improvements (e.g., refreshments) (1)
- Longer day preferred and for separate sessions to be longer (1)
- Longer day preferred as then no wait between sessions (1)
- Longer day preferred as transport easier/cheaper (1)
- Longer day preferred due to other commitments (1)
- Morning – specified different preferred times (1)
- Twilight – happy to stay after day service (1)
- Twilight – not used as too tired (1)
- Twilight – not yet used (1)
- Twilight – only possible if transport provided (1)
- Twilight – specified different preferred times (1)
- Twilight – would like to try (1)

Whether transport has restarted for the person they care for

Yes	20
No	10
The person they care for doesn't get transport	36
Not Answered	2

There were 21 comments for this question.

- Transport offer currently limited (5 people)
- Cost (3)
- Not currently attending (3)
- Doesn't use transport – takes taxi (3)
- Ticked yes: transport unchanged (2)
- Doesn't use transport – takes public transport instead (1)
- Doesn't use transport – walks (1)
- Doesn't use transport all the time (1)
- Insufficient carers per client on the bus (1)
- Reluctant to drive in dark (1)
- Social distancing issues due to shared accommodation (1)
- Staffing issues can prevent transport availability (1)

Participation in community sessions

We asked whether the person they care for is currently taking part in community sessions.

Yes	6
No	59
Not Answered	3

Barriers to taking part in community sessions

We asked whether the person they care for has faced any barriers.

Yes	12
No	41
Not Answered	15

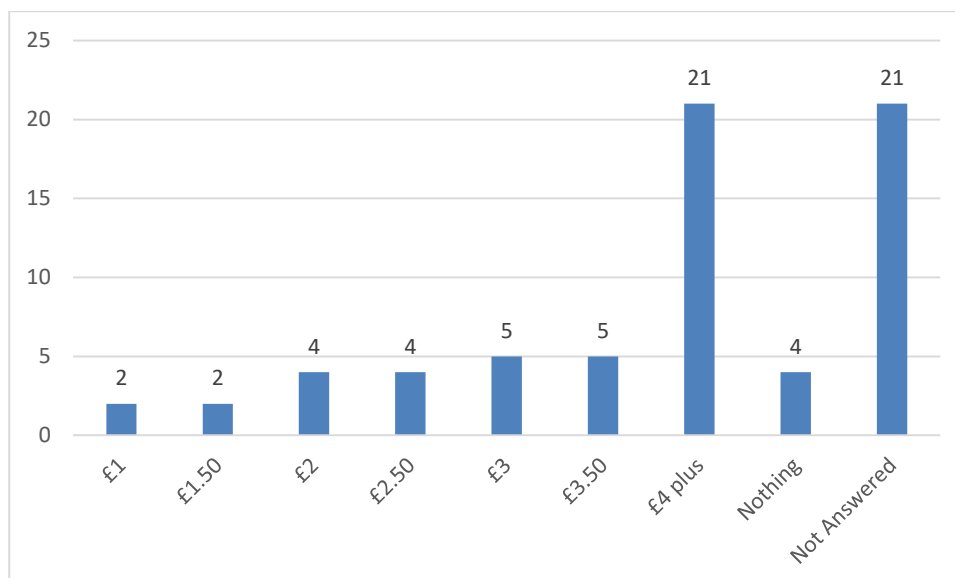
Making it easier for people to take part in community sessions

There were 21 comments for this question

- Improve transport (7 people)
- No suggestion, but comment about client routine and transport arrangements (2)
- COVID-19 risk reducing (2)
- No suggestion, but opportunity to go out welcomed (2)
- No suggestions – sessions not been offered (2)
- Provide more details on what community sessions are available (2)
- Ensure vetting of those providing community sessions (1)
- Increase staff (1)

Spend on community sessions

We asked people how much they are willing to spend on average for community sessions.



Activities that people are willing to spend more on

We asked people which community activities they would be willing to spend more on.

There were 49 comments for this question.

- Pub/refreshment trip (32 people)
- Nature-related activity (15)
- Games/sports/pastimes (13)
- Active entertainment/disco (5)
- Unspecified trips out (5)
- Rock climbing (4)
- Films and entertainment (3)
- Cooking (2)

- Artistic pursuits (1)
- Comment on insufficient staff numbers (1)
- Live performance (1)
- Shopping (1)

Social events at twilight sessions

We asked what sort of social events we should offer at the twilight sessions.

There were 44 comments for this question.

- Films and entertainment (13 people)
- Sports and games (12)
- Performances (11)
- Refreshments (10)
- Active entertainment/disco (5)
- Nature/exercise (5)
- No suggestions but unwilling to go to these sessions (5)
- Pub/refreshment trip (5)
- Cooking (4)
- No suggestions – has not attended (2)
- No suggestions but is happy with session (2)
- Arts (1)
- Friends/social (1)
- No suggestion – should be client-led (1)
- Rock climbing (1)

Further comments

There were 28 comments for this question.

- Positive comment about the service (10 people)
- Change of routine can be difficult for some clients (3)
- Increase flexibility in times and days attending (3)
- Resume specific refreshment-related activity (3)
- Resume trips out (3)
- Twilight is only possible if transport provided (3)
- Support bubbles too restricting and they see fewer friends (2)
- Additional daytime clubs with focus on certain activities (2)
- Positive comment about support bubbles (1)
- Support bubbles being permanent could negatively affect day service (1)

- Comment about difficulties with gathering clients' views (1)
- Comment about seeing worker (1)
- Concern regarding safety of client depending on who delivers session (1)
- Positive comment about staff (1)
- Suggestion to combine activities (1)
- Suggestion to have evening additional clubs with focus on certain activities (1)
- Suggestion to offer transport between activities (1)
- Suggestion to be prompt for session times (1)
- Does not want to attend twilight session (1)

Stakeholder results

We received 8 completed surveys. Everyone who responded works for East Sussex County Council.

Current length of sessions

About right	6
Too long	0
Too short	1
Not Answered	1

There were two comments about session length. All the topics were only covered by one person.

- About right and sufficient for individual focus (1)
- Too short for community sessions as takes time to organise groups and transport (1)

Whether the current start/end times are about right

Strongly agree	2
Agree	4
Neither agree nor disagree	2
Disagree	0
Strongly disagree	0

There were no comments for this question.

Comments and suggestions about transport

There were 5 comments for this question.

- Make available to people from supported living/wider spectrum (2 people)
- Positive that transport runs for all 3 sessions (1)
- Suggestion about transport to and from respite (1)
- Taxi costs can mount if using many times (1)
- Transport support is a help to working parents (1)

Community session activities

There were 6 comments for this question.

- It should be client-led as far as possible (2 people)
- Films and entertainment (2)
- Activities involving refreshments (2)
- Anything involving interaction with friends (1)
- Anything that build confidence/independence (1)
- Nature-related (1)
- Shopping (1)
- Sports/exercise (1)

Making it easier for people to take part in community sessions

There were 7 comments for this question.

- Improve transport (3 people)
- Accessible activities (2)
- Be client-led (1)
- Buddy up clients to share journeys (1)
- Large number of people taking part (1)
- Minimise cost (1)
- Repeated activities/visits to the same place (1)

Barriers to taking part in community sessions

There were 6 comments for this question.

- Transport to and from sessions (5 people)
- The cost of sessions (4 people)
- Low confidence (1)
- Perceptions of members of the public (1)
- Physical ability (1)
- Rurality (1)
- Accessibility of buildings/facilities (1)

- Weather (1)

Social events for the twilight sessions

There were 6 comments for this question.

- Parties and sociable get-togethers (4 people)
- Games and sports (3)
- Nature-related (2)
- Refreshments (2)
- Anything involving interaction with other members of the public (1)
- Artistic pursuits (1)
- Film/entertainment nights (1)
- Outside visitors to entertain (1)
- Protected characteristics to be considered (1)

Further comments

There were 4 comments for this question.

- Positive comment about community sessions (2 people)
- Positive about the opportunities to interact (2)
- Positive comment about the support bubbles (1)
- Positive comment about the twilight sessions (1)
- Positive about using service again (1)

Appendix 6: Stage two other feedback

One of the day services also had discussions about the proposals in the support bubbles.

Beeching Park

Discussions with first two support bubbles were held on 22 July and with the third support bubble on 5 August. Staff at the service asked the questions and recorded the answers.

Support bubble 1

Session length and times:

- Thumbs up.
- Just right.
- Too long too late 7pm.
- I like it this way.
- Nodded yeah.
- Not many people in the room come in at 9am!
- Apart from one client, all of the clients attended Twilight and were fine with this and times.

Community sessions:

- Yes
- No, I'd rather stay here.
- No.
- Yeah – need a wheelchair access and facilities.

Paying for community sessions:

- I don't know.
- Yeah.

How much they would pay:

- People appeared unsure about this.

Social activities they would like at twilight sessions:

- film night,
- music,
- wii games,
- dancing,
- disco,
- games,
- walk, and

- more activities around the building and mix with other people.

Support bubble 2

Session length:

- Just right.
- Right. Just Thursday.
- Too long.
- Too long.

9am – 12pm:

- Yes 9am
- 9.30am
- 9am
- 9am

12.30pm – 3.30pm:

- Keep it as at 12.30pm.
- 3.30pm.
- What time would you like to go home? 2pm.
- Stick with 3.30pm.

4pm – 7pm:

- I don't do evenings. I stay at home.
- Yes, I do (like a 4pm start).
- No, I'd say no.

No clients attended Community Sessions:

- No clients attended the community sessions.
- I live far away now. My lane is narrow.
- Not really sure.
- I like to do my own thing.
- Tried, I didn't like it too long, (tired).

Paying for community session:

- It would depend what it is.
- Not sure, I find it too much.
- I don't want to do that.
- Probably.

Social activities they would like at twilight sessions:

- I can't do evenings.

- No to evenings.
- Quiz, Bingo, Cooking, Games.

Support bubble 3

Session length:

- Just right.
- Too long.
- Too long.
- The same it's alright.
- Not sure.

9am – 12pm:

- A different time – 9.30.
- No. I don't do mornings.
- I can't get up.
- Nod of head.
- Yeah.
- Yes, it is.
- 9.30.

12.30pm – 3.30pm:

- Good
- Yeah
- Yep
- No – 12 noon
- I am in at 12:15
- It's fine to me
- Nod of the head
- 3:30 - Yep

4pm – 7pm:

- I love the twilight
- 4pm is good
- Yeah, it's good
- Thumbs up
- Another thumbs up
- 2 x don't do twilights

Community sessions:

- Discussed Community sessions and had few responses
- Discussed cost of Community sessions but no responses
- Walk.
- Bowling - yeah, yeah.

Social activities they would like at twilight sessions:

- supper Club – Food and drink,
- water fight,
- play on the Wii,
- table tennis,
- quiz,
- music,
- boccia,
- dancing,
- bowling,
- bingo,
- cricket,
- variety,
- bowls/Bowling,
- lots of dancing,
- pub evening,
- like Rock and Roll,
- movie night,
- exercising,
- fun and enjoyable, and
- relaxed fun.

This page is intentionally left blank

Learning Disability Day Services – Advocacy Reports

How we engaged with POhWER advocacy for the day support service consultation.

Lisa Smart - Community Manager, POhWER advocacy

Dawn Myers, Bella Tomsett and Ferda Erdemir – POhWER advocates

Beverly Scott – Operations Manager – ESCC, Learning Disability Services

Brian Clifford – Client Involvement Lead - ESCC, Learning Disability Services

Abbie Robson – Community Development Worker - ESCC, Learning Disability Services

Stage 1 of the consultation

Our engagement with POhWER advocacy service began on 7th June 2021.

Brian contacted Lisa Smart to request the support of POhWER advocacy at client meetings for the week commencing 21st June 2021. The proposal of changes to day support services was to be discussed during these meetings with clients in Lewes, Crowborough, Eastbourne and Bexhill.

A copy of an Easy Read letter that had been sent to clients was shared with POhWER that outlined the main points of the consultation. Before the meetings took place POhWER were provided with the Easy Read survey questions for clients that ESCC had written.

Brian liaised with the managers of the day support services and Lisa to set dates and times for the meetings. The meetings were planned to take place in services in each support bubble.

Brian let POhWER know that visitors to services are required to have their temperature taken on arrival and if crossing bubbles need to wear full Personal Protective Equipment. We also offered the option of a rapid flow COVID test.

In response Lisa confirmed that advocates would be available for meetings at St Nicholas, Linden Court and Beeching Park. There was no advocate available for the Hookstead meetings and it was agreed that an advocate would visit the following week to speak with clients.

The advocates (Dawn Myers, Bella Tomsett and Ferda Erdemir) contacted service managers directly to make final arrangements and supplied information posters about their visits.

The following meetings were chaired by the service manager or a team leader who showed clients a presentation on screen to explain the ideas they wanted them to think about.

23/6/21 – St Nicholas Day Service attended by Dawn Myers & Bella Tomsett from POhWER – Brian Clifford also attended these meetings (3 meetings between 11am and 3pm)

23/6/21 - Linden Court Day Service attended Ferda Erdemir from POhWER (3 meetings as follows: Bubble 1 - 10:00, Bubble 3 - 10:45, Bubble 2 - 11.30)

24/6/21 - Beeching Park Day Service attended by Ferda Erdemir from POhWER (4 meetings as follows: Dining Room 9:30 am, Art Room 10:30 am, Dining Room 1:00 pm, Octagon 2:00 pm)

25/6/21 Hookstead Brian Clifford attended these meetings. (3 meetings as follows: 3 meetings between 11am and 2pm). POhWER were not able to attend but Dawn Myers visited Hookstead on Friday 2nd July to talk through the consultation with clients.

8/7/21 – Lisa Smart emailed report of findings from Stage 1 through to Beverly Scott, Operations Manager

Stage 2 of the consultation

Beverly Scott contacted Lisa Smart on 8th July 2021 advising that the consultation is now moving to stage 2 and requested further advocacy support for clients from POhWER. Bev shared updated client information for the next stage of the consultation.

Abbie Robson worked with service managers and Lisa to set the dates and times of meetings. The turnaround time for the meetings was tight and the availability of advocates to be matched with the client meetings was a challenge.

Abbie and Lisa exchanged emails and phone calls and worked through to a solution. It was agreed that client meetings would go ahead in day support services, and where the advocates were not available to attend, they would visit on different days to talk with clients. Abbie requested information posters from POhWER about these visits. A poster was supplied by Dawn for the Hookstead visit but no other posters were received.

Service managers let clients know the dates and times that POhWER advocates would be visiting.

The following visits took place from advocates:

27/7/21 – St Nicholas Day Service attended by Bella Tomsett from POhWER at 1pm. Some client meetings had taken place in the morning. Bella visited all 3 bubbles in the afternoon.

3/8/21 – Hookstead attended by Dawn Myers from POhWER at 1pm. Dawn visited all 3 bubbles.

5/8/21 – Beeching Park attended by Ferda Erdemir at 10am. Ferda spoke to 10 clients.

6/8/21 – Linden Court attended by Ferda Erdemir at 10am. Ferda spoke to 5 clients.

16/8/21 – Lisa Smart emailed report of findings from Stage 2 through to Brian Clifford, Client Involvement Lead

Pohwer Community Advocacy Consultation support

As requested, the community advocacy team visited the four main centres in East Sussex during June and July.

Ferda Erdemir	23/06/2021	Linden Court
	24/06/2021	Beeching Park
Dawn Myers	02/07/2021	Hookstead
Dawn Myers & Bella Tomsett	24/06/2021	St Nicholas

They worked with the service users using a variety of methods making sure all communication was accessible as possible. Staff supported them with the more complex communication needs. The original feedback notes on following pages. The main points made were as follows.

- The lack of variety in the activities in the centres was an issue with people stating they were bored a lot of the time.
- Most people wanted more community activities especially those who used sports facilities and the Brighton and Hove football activities.
- People were also worried at what would happen to the community activities during the winter.
- One of the most popular sessions was the twilight session especially the supper and take away sessions although the music and film session was also very popular.
- There were mixed views about the bubbles. Most people could see why they were needed but they missed their friends, and it appears there needs to be more thought and planning into letting them spend time with their friends who may be in different bubbles. For example, most of the centres have outside space where socially distanced meetings could be arranged with their friends.
- The advocates were concerned that service users with more complex needs were not being supported to access the community for activities as much as they had been before COVID. The transport is still available, and it did not appear that they were being treated to the same level of inclusion as other more able service users.
- Staff fed back that they felt they had got to know better their clients and felt it was a more person-centred way of working. However, some staff also felt that the clients with more complex needs were being disadvantaged.
- “How can we know our comments and feedbacks are taken into consideration, will they let us know”?

Linden Court- 23 June

One service user in the first bubble asked during presentation “How can we know our comments and feedbacks are taken into consideration, will they let us know”?

I supported 9 service users to complete the forms- 8 of them answered “happy” to the question “How happy are you with our plans for your day service”.

One pointed “unhappy” then “very unhappy” emoji. However she was unable to tell why she was unhappy.

My observation was only two service users (1 in the first bubble and 1 in the third Bubble) appear to understand the majority of the questions but other 7 service users were just saying yes to all the questions and pointing happy face.

All 9 service users stated they like support bubbles, some of them provided following reasons:

- Activities in bubbles are good
- Like smaller groups
- Bubbles are for our safety
- More one to one support in bubbles
- Friends

Some of the service users stated they would like to be able to say “hello” to their friends in different bubbles.

Out of 9, only 3 service users join the Twilight session-

Feedback from them:

This session keeps me out for extra a few hours, I love it

I enjoy it but it would be nice to see more activities

I love them to carry on, specially Fridays

Like seeing staff and clients, like movie nights and Fish and chips

I want the twilight sessions to continue

There was not a community session in Linden court therefore no feedback for community sessions. As service users did not have experience for meeting everyone in the community sessions and not going to day service first, any response to this question did not appear to be a true reflection of service user’s feelings and thoughts.

More sign language, more Makaton needed

More activities in the twilight sessions, bowling, table tennis, boccia. Cinema

Sports, more movie nights

Beeching Park – 24 June

I thought presentation in Beeching Park was very good- it was not rushed.

Feedback and Questions during presentations in bubbles:

“Why are the sessions I chose not happening?”

“When am I going to be able to do the activities that I want to do”

“It was hard to choose the sessions”

“Activities in the bubble are not structured “

“Miss friends in other bubbles “

“Get tired in twilight sessions”

“Will there be any cookery?”

“Are we going to be allowed to go to park and bowling?”

“Will we be going out on mini buses on a Tuesday and Friday?”

“Twilight sessions- I love it”

“Support bubbles- small groups a lot better, less clients”

“Missing cooking”

“Missing music”

“Missing textile”

“Activities that they want to do: going out for coffee and ice-cream, afternoon team, BBQ, Xmas parties, various parties and celebrations, games and puzzles, putting on a show, social clubs”

“I missed bowling”

“Want to do archery”

Q2- 3 service users chose “happy” emoji only one of them appears to understand the question

1 service user pointed “very unhappy” then changed to “unhappy” but could not tell me why he was unhappy.

1 service user chose “neither happy nor unhappy” she sated “I am sometimes happy, sometimes unhappy” .

1 service user chose “very happy”

“I like going out in the garden and doing sports”

“I got used to it but took too long to get used to it”

“I like doing arts in bubbles”

“I like staying with my friends in my bubble”

3 service users stated they want to keep the support bubbles, 4 were unable to answer.

3 service users stated they like Twilight sessions and want them to continue- 4 service users were not sure if they join twilight sessions could not answer the questions.

“Some of it I like it; like supper, depending on who is on duty, like quiz and disco”

“I get tired, Friday I come 9 am till 7 pm so it is okay but it is tiring sometimes”

“Good, would want it to continue”

“Sometimes it is a bit too long”

“Yes I would like to keep the twilight sessions”

Community sessions- 4 service users do not join, not sure about 3 service users could not answer the questions.

“Bowling, swimming, quiz, games, acting”

“Games, cooking, putting on a show”

“Going to library, going to De La Warr Pavilion”.

St Nicholas Day Centre 24/06/2021

Bubble A

Discussion about community activities and transport. What do we do if we can't access public transport and our families / careers can't take us? Transport won't be available and you will continue to have activities based at St Nicks.

Missing activities with Brighton and Hove Albion.

Miss seeing friends; staff have supported clients to write letters and face time and have waved when passing by door or window.

Like the bubbles, feel safe in the bubbles, happy to stay until told it's safe to be without them.

Enjoy the activities

Bubble B

Enjoy the supper club at the twilight session

Enjoy the Link community session

Would like to go rowing

Would like to go out on a train in the community, meet at a train station and travel to another, visit and café and return.

Would like to return to the football club, but is worried if it's safe

Would like to return to the community activities they did previously – Newhaven fort, Paradise Park, football, unable to do these due to COVID-19 restrictions closing the community.

Bubble C

Talked about transport and lack of transport for community activities, what to do if can't access public transport and need the day centre bus to attend?

Swapping between day sessions and twilight sessions are confusing

Having to get used to the new day centre times

Bored of the activities on offer at the day centre

Would like more people to attend the community sessions

Enjoy the music evening at the twilight session

Miss friends, have talked to friends via FaceTime while at St Nicks

Attending the twilight sessions but am very tired as it makes it a late day for me

Hookstead 02/07/2021

Bubble A clients were supported by staff who expressed the views of the client group as well as those were not there on Friday:

Like the bubble as it's a smaller group

Missing friends

Missing girlfriends

Continue to be worried & upset about the new changes

What activities will run in the community on rainy days and the winter months

Can previous community activities return that the clients enjoy and can access (wheelchair users), bowling, pottery, let's do lunch group.

Clients who are wheelchair users as being unfairly treated due to transport....they cannot access community transport and rely on Hookstead transport to get them to and from the day centre. The proposal is that to access community activities you have to make your own way. This would mean that this client group will only have activities at the day centre.

Bubble B – I spoke with staff and on a 1:1 with some clients

Like their bubbles

Enjoy the music / disco evening with the Twilight session

Enjoying the twilight sessions because the client can get his chores and tasks completed in the morning or have a lay in before attending the day centre rather than rushing in the evening after the day centre.

Likes the supper club, take away night & music night as its more social

Got to know each other better due to being in smaller bubbles & more personal centred

Looking forward to the day centre returning to how it was pre covid

Miss friends who are in other bubbles

Don't like the fact that not everyone can be together

Are worried their carers don't know about the changes

Sad about not being able to hug or shake hands with friends when saying hello

Would like to return to sportivate (sports activity) & David Lloyd centre in the community

Would like different sessions offered to them in their bubbles, not much variety

Would like to return to Sheffield Park and the forest to work with the rangers

Would like to have the football tournament back with Brighton and Hove Albion, annoyed this has been cancelled

Staff: Worried that those who have been identified as having a building / sensory need will only be able to access the day centre and not the community. These clients also have a need to access the community and they were able to do this with the day centres support pre covid.

Those who live upstairs in the supported living may be able to get staff to support them to access community activities. But those who live with families / parents who work, can only do drop off and picks up at the start and end of the day due to work commitments.

Bubble C

I spoke to the group all together.

Like going out but not in the evenings when its dark so don't access the twilight sessions

Feel trapped downstairs

Bored of the activities at the day centre

Bubbles are ok to stay but would rather mix with everyone again

Miss friends who are upstairs in other bubbles

Would like to return to Sheffield Park, the forest and football tournaments with B&H Albion

Why can't we take part in community activities if we don't have transport, we used to arrive here and then go out on the bus (pre-Covid)

Why can't we see friends (from other bubbles) in the garden, socially distanced?

Pohwer Community Advocacy Consultation support 10th August 2021

As requested, the community advocacy team visited the four main centres again in East Sussex during July and August.

Ferda Erdemir	06/08/2021	Linden Court
	05/08/2021	Beeching Park
Dawn Myers	04/08/2021	Hookstead
Bella Tomsett	27/07/2021	St Nicholas

As before they worked with the service users using a variety of methods making sure all communication was accessible as possible. However it appears that in some groups this work was completed by staff before the advocate arrived. The original feedback notes are on the following pages.

I would draw your attention to a question that was asked at the last visit “How can we know our comments and feedbacks are taken into consideration, will they let us know”?

Two of the advocates were asked if they could support people individually with issues – they will be following up those referrals but this does underline the need for the team to be able to visit regularly to develop those trusting relationships.

One feedback “the other four wanted to speak to about their dogs, mum, and health conditions which was lovely, so they recognise me now after three visits.”

Bella Tomsett

St Nicholas Day Service

27 July 2021

I attended St Nicholas Day Service in Lewes during the afternoon session. Although I was expecting to attend the meeting with the clients and to support them to complete the consultation questionnaires, I was advised on my arrival that all the meeting had already taken place earlier that morning and most clients had an opportunity to fill out their questionnaires then. Client were all informed that I would be visiting in the afternoon, and were advised they will be able to talk to me about the proposed changes.

I attended the client meeting in Bubble 3, but this did not discuss the proposed changes. However, following the meeting, I was able to support some clients to fill out the questionnaires. After this I visited the other bubbles to offer clients an opportunity to talk to me. Clients in all of the bubbles appeared to be aware that I was visiting, and some wanted to speak to me.

Overall, clients expressed that they were happy with the service provision. Some clients were enjoying the twilight sessions, and others felt that these were too late for them to take part. One client commented that the activities currently on offer during the twilight session were the same as people could do at home (such as watching films), and she felt that it was not good value for money. Several clients said that they would like to do cooking or baking activities during these sessions.

Some clients wanted to engage with community session, while others reported to prefer coming into the centre. Lack of transport for community sessions remains a concerns for some clients. Some clients were looking forward to being able to go on days out from the centre on the minibuses.

Most clients said that they preferred the smaller groups (bubble). Some said that it made them feel safe, but others expressed that although they like that there is less people in each space, they were missing friends from other bubbles and wanted to have the opportunity to do things with them.

In Bubble 3, some clients expressed wanting to do more sports such as table tennis. They also currently cannot access their garden due to it requiring maintenance work. Staff advised that they are awaiting this to be done. In Bubble 1, clients discussed wanting to have drama activities.

Dawn Myers

Hookstead Day Services

3rd August 2021

I visited all three bubbles and I feel the same was said this time as my previous visits.

The clients want to see friends who are in other bubbles, in fact one lady would like to swap bubbles so she can be with her friend rather than waving at him through the door.

Many clients said how happy they were at the day centre and the times as they are. There may be issues about times the taxi's drop off clients.

The clients would like to return to community activities and meet at the day centre then go out on the day centres bus. They'd like to go: bowling, leisure centre, cinema, Sheffield Park, football, sports, and photography group.

In addition, some clients asked if the community session could start in Uckfield so they could attend and not worry about transport as that's where they live. They suggest: cinema, pub lunch, walk, leisure centre, the train station and maybe the library.

Lastly, a few clients asked why they are being restricted when they've had their vaccines. Why can't they go out while with the day centre?

Regarding the times of the sessions, no one had anything to say other than staff and that was to say there isn't enough time between the morning and afternoon sessions to support the morning clients with lunch and personal care. I shared that with the manger before I left and mentioned it was more of an in-house issue.

When I arrived I was told the clients had gone through the questionnaire with staff and their families/careers already and the feedback passed on. I therefore didn't go through each individual questions as I wasn't able to answer any counter questions they may have had.

Ferda Erdemir

Beeching Park and Linden Court

5/6th August 2021

I visited the Beeching Park for the consultation.

I spoke to 10 people all together, only two of them appeared to understand the questions. None of them attends the community sessions.

All stated they were happy about the 3 hourly sessions start and end time. Although it appeared most of them did not understand the concept of time.

I left the questionnaires with them to complete with staff if possible.

I have visited Linden Court, and spoke to 5 service users; only one of them was able to provide her views with regards to the sessions. The other 4 wanted to speak to about their dogs, mum, and health conditions, which was lovely, but not useful for the consultations.

One client stated she had started when bubbles and sessions started so she said “ I do not do anything different” and she said she was happy with sessions hours and start and end time. She only does morning and afternoon sessions and would like to be able to meet other people in the other bubbles. She said “it would be nice if I can see the other side of the building and people in different bubbles”. She told me she loves Linden Court and feels looked after there.

I am not sure if our views and observations count but still I will share mine. My observation is that community session question is confusing as there are no longer community sessions. One of the staff members told me that ‘community sessions’ means service users get on a mini bus which apparently many people loved to go to different places or activities. There is not such a thing now.

Answers to Q7 would be to make the sessions more accessible for people, and transport available again. The majority of the services users in Beeching Park and Linden Court are unable to formulate this response and actually unable to provide response to Q7 so I am just advocating for them. Support workers reported that service users loved going out before pandemic on a mini bus.



Equality Impact Assessment

Summary Report

Name of the proposal, project or service
Learning Disability Day Service Consultation

File ref:		Issue No:	1
Date of Issue:	17/08/2021	Review date:	Feb 2022





Summary of Equality Impact Assessment:

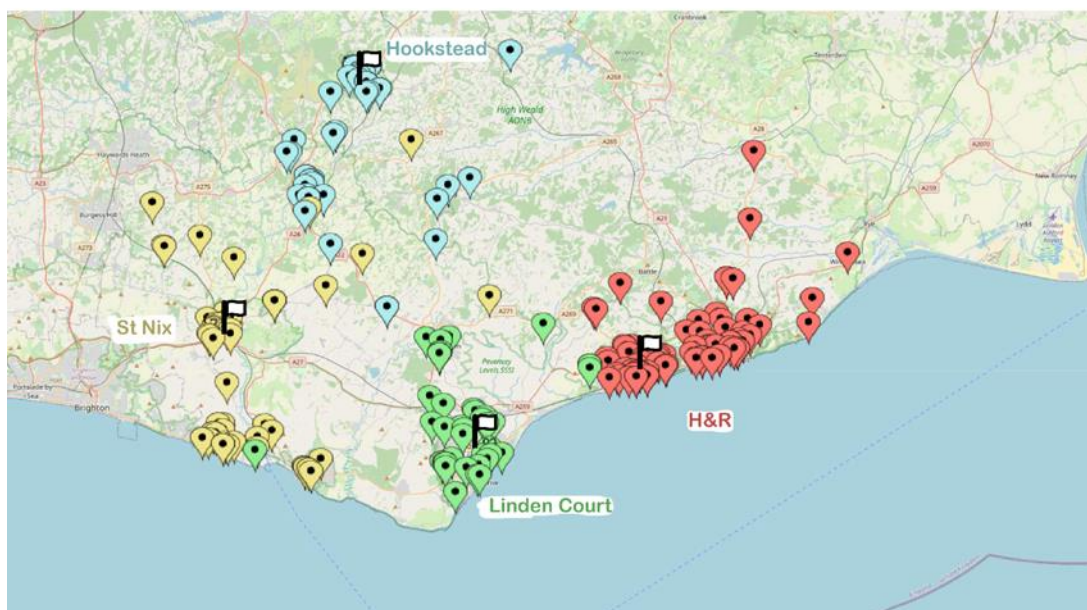
A comprehensive Equality Impact Assessment was completed for this piece of work. This identified two protective characteristics requiring additional focus which are rurality and disability, specifically for people with more complex needs.

All adults supported have a disability while several have an additional physical disability requiring access to specialised resource:

Day Service	Number of clients attending	Number of clients with additional physical needs and needing specialist equipment
Linden Court	41	4
Hastings & Rother	80	9
St Nicholas	63	11
Hookstead	51	7
Total		31

The map below describes where adults attending the day services live, although rurality is impacted by home address, access to public transport and the location of a community activity.

 - Service Users – Hastings and Rother	 - Service Users – St Nicholas	 Service Users – Hookstead	 Service Users – Linden Court
--	---	---	--



The table below from the action plan contained in section 6 of the Equality Impact Assessment identifies the areas of concern and actions to mitigate these.

Area for improvement	Changes proposed
Transport provision for hard to reach community projects	Increased Flexibility of Day service Transport Offer
Transport offer for clients with complex needs who are only able to access the building-based provision	Community Access to be included in the offer for complex clients attending building-based sessions, who are not able to access separate community sessions
Risk to low uptake for Community and Twilight sessions due to unfamiliarity	Taster session to be offered to clients Ongoing review of take up
Community Sessions sourced to include some where access arrangements are suitable for clients with complex needs.	Community Sessions to include some that are suitable for clients with complex needs

Report to: Lead Member for Adult Social Care and Health

Date of meeting: 21 September 2021

By: Director of Public Health

Title: Re-procurement of specialist sexual health services

Purpose: To seek Lead Member approval for the proposed service model changes for the new specialist sexual health service that will launch 1st October 2022.

RECOMMENDATIONS

The Lead Member is recommended to:

1. Approve the proposed changes for the new service model for the specialist sexual health service set out in paragraph 2.6 that will launch on 1st October 2022 following a procurement process;
 2. Delegate authority to the Director of Public Health to take all necessary actions to give effect to the implementation of the revised model of delivery;
 3. Note the summary of the Equality Impact Assessment (Appendix 1); and
 4. Note the consultation comments on proposed changes to the new specialist sexual health service model (Appendix 2)
-

1. Background

1.1. As part of the conditions of the Public Health grant, Public Health are mandated to provide specialist sexual health services to the residents of East Sussex. The specialist sexual health service contract is to be reprocured with the new service to launch on 1 October 2022. The value of the contract is £2,254,000 per annum.

1.2. The proposed new service model has changed significantly due to digital innovation, and COVID-19. Public Health has sought to make the changes prompted by the pandemic permanent within the new service model.

1.3. A public consultation ran for eight weeks, closing 22 July. It was promoted through established East Sussex County Council (the Council) channels and to service users, staff working in the service, specialist teams supporting harder to reach groups, partners, and voluntary sector organisations.

2. Supporting information

2.1. The current and future specialist sexual health service consists of three main elements as listed below. These elements are currently delivered and will continue to be delivered within the new service. However, many of the elements have been delivered in different ways over the last few years. This includes the use of online platforms to access services such as Emergency Hormonal Contraception (EHC) and Sexually Transmitted Infections (STI) tests which have replaced some face to face provision.

Specialist Sexual Health Service elements:

- ❖ Medical consultant led Genito Urinary Medicine (GUM) services which address:
 - assessment, testing, treatment of STI.
 - tracing of sexual contacts of those diagnosed with an STI.
 - management of ongoing chronic GUM conditions.
 - Hepatitis A and B and HPV vaccination of those at risk.
 - testing for HIV and provision of post exposure prophylaxis (PEP) and pre-exposure prophylaxis (PreP) to prevent transmission of HIV.
 - working closely with HIV treatment and care services; and
 - psychosexual therapy services.
- ❖ Consultant led complex contraception services which address:
 - ease of access to contraception, including initial assessment and provision of contraception and provision of long-acting reversible contraception for individuals unable to access a GP or where the GP is unable to offer the service; and
 - advice, and referral point for complex contraception issues.
- ❖ Clinical leadership and education for East Sussex health and wider workforce:
 - clinical leadership and training for primary care, specialist service catering for vulnerable clients and secondary health services such as maternity services, prison services, social care and third sector.

2.2. Prior to 2020 (and COVID-19), work was underway to review the way in which patients accessed services, e.g., face to face appointments or accessing services online and via post. Public Health has commissioned online STI testing services since 2015 which have proved popular and acceptable.

2.3. During COVID-19, specialist sexual health services, like many health services, effectively closed their doors to face to face clinics other than the most complex cases due to social distancing and mass redeployment of the staff team into the acute hospital setting. The online service was broadened, and individuals increasingly used the service to triage, test for STIs and HIV and access emergency hormonal contraception and a subsequent initial offer of contraception.

2.4. As part of the commissioning cycle, learning from the previous five years of service delivery, changes in delivery model in response to the COVID-19 restrictions, and national and regional peers, a new service model was developed. It is proposed that this new model is incorporated within the service specification that is to be repocured and mobilised from 1st October 2022.

2.5. A [Consultation](#) about the proposed model was developed and shared via the Council's consultation hub. The consultation document is attached as **Appendix 3** The way in which the service was adapted and delivered during the pandemic had already been considered as part of longer-term planning about delivery of the service. The consultation sought to understand how people would be affected if some of the clinics remained closed with continued online provision and drop-in services replaced by an appointment only service.

2.6. The updated service model includes:

- Retaining the appointment system for the hub clinics in Eastbourne and Hastings, rather than going back to a drop-in approach. Some evening appointments will be retained, but the Saturday morning clinics would not be reinstated.
- The part-time clinics that stopped operating during the pandemic will not reopen. These were provided at: Hailsham Health Centre (3 hours a week); Uckfield Minor Injuries Unit (4 hours); Bexhill Health Centre (2 hours); and Arthur Blackman Clinic (3 hours). Some of these services were already only offering a limited service and were not well used.
- For those who do not have a GP or are unable to see them, or those who have complex contraception needs requiring a face-to-face appointment, the service will assess them and provide the first prescription. After that people will be referred back to their GP for repeat prescriptions.

- Keep offering the online condom service to all ages rather than limit it to under 25s as previously.
- Maintain the online provision of emergency hormonal contraception and the availability of HIV post exposure prophylaxis (PEP) and pre-exposure prophylaxis (PreP).
- a limited drop-in face-to-face service for those who are phone or digitally excluded (see 2.12).

2.7. The public consultation received 20 responses and feedback was broadly positive. People feel that the service model should work well for most of the public who are online.

2.8. Key points of concern are shown below:

- vulnerable individuals or those who face access barriers, including people without internet access or their own GP may struggle to access the service.
- young people may find it more difficult to access the service and/or feel less supported with a virtual service.
- some people need, or prefer, face-to-face appointments. It is also harder to pick up on safeguarding issues over the phone.
- the location of the clinics is less accessible for those living in the north of the county. Closure of the Saturday clinics removes choice for patients.
- increasing pressure on primary care GP services and their ability to see more symptomatic sexual health presentations. In addition, offering support to key marginalised groups through support teams leaves the most complex patients being managed by inexperienced non-specialist staff.

2.9. In response to the consultation feedback, the service specification has been adapted to allow two drop-in clinics for all ages at each clinic site in Hastings and in Eastbourne, this is in recognition of people who are digitally excluded, do not have phones, or rely on limited phone credit or are genuinely unable to access their GP.

2.10. The Equality Impact Assessment (EIA) analysis demonstrated that the evidence shows no potential for discrimination and all appropriate opportunities have been taken to advance equality and foster good relations between groups. In summary, the service is not a new service and the sexual health system this service sits in has undergone changes within the last four years (during COVID-19 in 2020) that increased access and choice to many, such as online services, and enhanced Pharmacy/GP training provisions.

2.11. Heterosexual men remain a group who use sexual health services less. They tend to present at later stage of illness and experience health inequalities as a result. For example, they are more likely to be diagnosed with HIV later than homosexual males and heterosexual women. Acknowledging this, the new service model will include specific measures to monitor men's usage of the service and ensure heterosexual men have equitable access.

2.12. The service specification has been adapted post public consultation to consider the needs for a limited drop-in face-to-face service for those who are phone or digitally excluded.

3. Conclusion and reasons for recommendations

3.1. The proposed changes to the new service model builds on accepted innovations and developments within the specialist sexual health service. This includes the increasing use of online service provision and changes to the way patients access services due to the impact of COVID-19 restrictions. The new service model will increase access for residents in all parts of the county with sufficient mitigation through outreach teams and working with other services to develop clear pathways and a simple service to cater for disadvantaged groups.

3.2. The Lead Member is recommended to approve the proposed changes to the service model that will be repurchased and then launched on 1st October 2022; and to note the summary comments from the consultation and Equality Impact Assessment.

DARRELL GALE
Director of Public Health

Contact Officers: Tony Proom – strategic commissioning manager – sexual health
Email: tony.proom@eastsussex.gov.uk

BACKGROUND DOCUMENTS

Consultation report and Equality Impact Assessment

Appendix 1: Equality Impact Assessment Action Plan

Area for improvement	Changes proposed	Timescale	Resource implications	Where incorporated/flagged? (e.g. business plan/strategic plan/steering group/DMT)
Monitoring of transgender use of service	registration data changed April 2021 to include sex at birth and chosen sex now.	Commenced May 2021. Annual reports, monthly monitoring of comments .	Commissioner examining data and complaints and comment's themes. Managing through existing contract performance monitoring meetings	Service specification within contract. SMT/DMT/CMT lead member
Increasing access for those who do not live in the high population density areas	Work is already in place to increase access to services via online services offering self-sampling and triage. Future use may involve offer of posted medication for simple conditions. Already EHC and bridging supply of contraception is supplied online through the post	By December 2021	Commissioner examining data and complaints and comments themes managing through existing contract monitoring meetings for the named services	Service specifications within GP, Pharmacy, and online contracts. Service specification within contract. SMT/DMT/CMT lead member
Access for those who are digitally excluded and those unable to access phone triage	There will be a limited drop-in service targeted at these individuals. The service provider will work closely with organisations who work with more vulnerable clientele, such as the homeless and rough sleepers' teams, substance misuse teams and asylum seeker and refugee teams to support a clear pathway and or offer a direct service to these clients	By October 2021	Working with provider to trial and monitor activity and reported protected characteristics to gain a sense of any disenfranchised groups that may require more targeted work	Service specification within contract Service specification within contract. SMT/DMT/CMT lead member

This page is intentionally left blank

Appendix 2

Consultation summary

About the consultation

The consultation ran for eight weeks, opening on 28 May and closing on 22 July.

We promoted the consultation through established Council channels including our consultation website, to our People Bank volunteers, and by including stories in the Public Health Bulletin, our staff update To the Point, and the Health and Social Care Newsletter.

The consultation was promoted to people using the service through the sexual health website, online STI testing, and posters at clinics. We also promoted it to staff working in the service, specialist teams supporting harder to reach groups, relevant partners and voluntary sector organisations producing community newsletters.

Consultation activity

20 people completed an online survey. The biggest groups of respondents were people who had used one of the services (10 of 20 people) and staff working in sexual health services (also 10 people). Some people took part in more than one capacity.

What people told us in the consultation

It should be noted that the amount of people who took part in the consultation was low compared to the numbers who use the service. In addition, staff working in sexual health services made up half of the respondents.

Due to the number of respondents most themes were mentioned by a couple of people at most. The summary below covers topics covered by more than one person. You can find more detail in the appendix of all the issues raised.

Summary

On the whole, people feel that the service model should work well for the majority of the general public who are online. They are concerned though that the changes would have a negative impact on young people, vulnerable individuals, and those who don't have internet access.

Views on the proposal

Just over half of the respondents disagree that the service would provide easy access to specialist sexual health services in East Sussex (11 of 20 people). The majority of people with this view work in sexual health services. Of the rest, nearly a third think the proposals would provide easy access to services, while the remainder gave a neutral response.

The main concern is that the service model wouldn't provide easy access for vulnerable individuals and those who would face access barriers, including people without internet access or their own GP. Staff, and the organisation response, are particularly concerned about the impact on young people, both in terms of their

ability to access the service and how well the service would be able to support them virtually.

Both staff and clients made the point that some people need, or prefer, face-to-face appointments. Staff said it is also harder to pick up on safeguarding issues over the telephone.

A few clients said that the location of the clinics would be no good for those living in the north of the county. The organisation response says that the closure of the Saturday clinics is disappointing and removes choice for patients.

The organisation response raises the increasing pressure on primary care GP services and questions their ability to see more symptomatic sexual health presentations. It also says that offering support to key marginalised groups through support teams leaves the most complex patients being managed by inexperienced non-specialist staff.

How people would be affected

Clients said they would be able to access the online service, with some saying that it would make it easier for them.

Staff said the new model has increased their workload, made the service more remote from clients and made it harder to pick up on safeguarding concerns.

The organisation is concerned that patients would turn to out-of-area clinics like theirs if they can't get appointments locally. This would have cost implications and could affect future tendering in neighbouring areas.

Other comments and suggestions

Staff felt that the service should work better for the general public, but said that we need to ensure that we are still meeting the needs of vulnerable groups and young people. The organisation response is concerned that the proposed service model does not get the balance right between digital and face-to-face services.

Suggestions included: involving stakeholders in the remodelling; doing more drop-ins at schools, youth clubs, colleges and universities; advertising the face-to-face services; keeping the drop-ins for young people; keeping the Uckfield clinic open; offering appointments in the north of the county; and developing nurse-led outreach services in the areas that wouldn't have a local clinic.

Sample quotes from respondents

- “Many services have used online and phone based methods during the pandemic. As a resident this makes sense. Good to know that those that don't use a computer can still use a telephone too access support.”
- “It is great for the majority of people and a very safe way of working, regarding Covid, however, there are many vulnerable groups who are being missed and not accessing the service as they once would have.”
- “Vulnerable sectors are being completely missed. Including young people under 16. Homeless community and sex workers. People who are chaotic by their nature or circumstances are not able to access our services at all. How can a 14 year old who's parents are unaware they are sexually active have a

test kit sent to their home. Even if they do manage to call us they collect a kit, where are they able to complete it? in a public toilet?"

- "Young service users are penalised, they cannot attend confidential walk in services any more and be seen on the same day. Trying to phone and getting through is dependent on the amount of calls on the day. Patients complain they often are not getting through as phone lines are permanently engaged and they then have to wait for a call back and then to have an appt to be seen."
- "Clinicians working with young and other vulnerable people repeatedly tell us that phone calls miss vital visual cues, especially important where there may be safeguarding concerns. Young people are also more likely to downplay their needs and fears, which in a phone or digital consultation can result in inadequate and unsatisfactory assessments and consultations."
- "With a significant decrease in face to face appointments we are concerned that capacity for opportunistic SRH health promotion and risk reduction will be lost: LARC fittings; provision of emergency contraception; PEPSE and PrEP starters; CSE disclosures; sexual assault disclosures; and domestic violence disclosures."
- "If services are to be minimised re. face to face appointments/ booking appointments, there needs to be a big push towards sexual health promotion for all."

This page is intentionally left blank

Our service model for specialist sexual health services

Everyone in East Sussex should have easy access to specialist sexual health services that meet their needs. Do you think our updated service model will help achieve that aim?

Tell us what you think

We want to know what you think about our service model and whether it will allow everyone to get the support they need. We particularly want to hear from everyone who has used the service or will do in future. We are also keen to hear from people who would struggle to access phone and online services.

How you can take part

You can fill in the survey online or on paper, but you can also send us a letter or email – whatever works for you. **The consultation closes on 22 July.**

- Complete the online survey at: www.eastsussex.gov.uk/sexualhealth
- Email us your survey or feedback: public.health@eastsussex.gov.uk
- Post us your survey or feedback: Just write Freepost, East Sussex County Council, Public Health on your envelope (you don't need a stamp)

If you need to contact us email is better at the moment, as many of us are still working at home, but you can call us if you need to on 01273 336 036.

**If you need this information in another format or language,
or you need help to take part, please contact us.**

What will happen next

What you tell us will help us finalise the specification that providers will use to bid for the contract. Your feedback will be included in a consultation report and inform the Equality Impact Analysis action plan. All of these documents will be considered by the Lead Member for Adult Social Care & Health in September 2021.

Background

East Sussex Public Health is responsible for commissioning specialist sexual health services, including testing and treatment for sexually transmitted infections (STIs) and genital conditions, and some contraception. This complements the services provided by GPs, allowing people with complex needs to access specialist support.

The current contract comes to an end next year. We will publish the specification that providers will use to bid for the new contract in October. Before we do that, we want to make sure that our plans, which are informed by national guidance and local insight, are inclusive and accessible.

The impact of COVID-19

In order to keep people safe during the pandemic we have already had to change the service model. As a result, people mainly access the service over the telephone or online, and receive many physical items through the post or by collection.

Where people need face-to-face support this has still been on offer through the two main clinics in Hastings and Eastbourne, although all appointments now have to be booked in advance. The smaller clinics have been closed as they couldn't be operated safely.

Prior to the pandemic we were looking at introducing similar changes when the new contract started. So COVID-19 has basically sped up those changes. In case of future lockdowns or restrictions, we also need to ensure that access to the service remains safe and it isn't dependent on face-to-face appointments.

We are now looking to make the changes introduced during the pandemic permanent. It's important people have their say on the model before we do that.

The updated service model

Our [sexual health website](#) will act as the digital 'front door'. People will be expected to use it to carry out simple requests, such as non-complex STI and HIV testing, and condoms.

People who struggle to use the website or who aren't online will be able to access the same services through a telephone consultation via a freephone number.

Anyone identified through the online or phone consultation as having complex needs when they first access the service will be offered a telephone assessment and, if

needed, a face-to-face appointment. Booked appointments will take place as usual at the hubs in Hastings and Eastbourne.

We also want to make sure that people who are less likely to use the service can still benefit from specialist sexual health support. To do this we plan to directly support teams working with homelessness services, substance misuse treatment services, asylum support and youth services to develop their own sexual health signposting, self-help, and testing directly with their clients. This will allow sexual health to be considered as part of a wider health offer.

What would change

We have retained the appointment system for the hub clinics in Eastbourne and Hastings, rather than going back to a drop-in approach. Some evening appointments will be retained, but the Saturday morning clinics would not be reinstated.

The part-time clinics that stopped operating during the pandemic will not reopen. These were provided at: Hailsham Health Centre (3 hours a week); Uckfield Minor Injuries Unit (4 hours); Bexhill Health Centre (2 hours); and Arthur Blackman Clinic (3 hours). Some of these services were already only offering a limited service and were not well used.

For those who do not have a GP or are unable to see them, or those who have complex contraception needs requiring a face-to-face appointment, the service will assess them and provide the first prescription. After that people will be referred back to their GP for repeat prescriptions. We will keep offering the online condom service to all ages rather than limit it to under 25s as previously.

We intend to maintain the online provision of emergency hormonal contraception and the availability of HIV post exposure prophylaxis (PEP) and pre-exposure prophylaxis (PreP).

How this would affect people

Making the service online and telephone-based in the first instance should increase access to the service for those who are unable or unwilling to use face-to-face services. For example, it will increase access for people who don't live near a clinic, and allow those who commute, work, have caring responsibilities, or mobility issues to use the service when it suits them.

At the same time, we know there would be people who aren't online or who would struggle to access services this way; for example, those who don't have a smart phone or tablet and those who don't have internet access at home. For others, the barrier would be the lack of a fixed address where contraception or testing kits can be delivered.

By offering telephone access and keeping limited face-to-face appointments we think we can make sure that everyone has easy access to specialist sexual health services.

Why we are consulting

The way the service has been adapted and run during the pandemic is similar to some of the changes we were already planning. We are pleased to say that on the whole the new ways of working have proved more efficient and accessible.

It's important though to check that the new service specifications and ways of working are robust and inclusive in the long term. We also want to understand how people will be affected if some of the clinics don't reopen and others move to an appointment only system.

Specialist sexual health services questionnaire

This questionnaire is anonymous and we don't ask you to provide any personal information, although there is an optional 'about you' section at the end. Please ensure that any comments don't include any names or personal details of you or anyone else. You can find our privacy notice about how the data will be stored and processed by East Sussex County Council on our website (www.eastsussex.gov.uk/privacy/consultation-hub/).

Q1) Are you completing the survey as: (Please tick all that apply)

- ☐ Someone who has used specialist contraception services
- ☐ Some who has used sexually transmitted infection testing services
- ☐ Someone who works in sexual health services
- ☐ A General Practitioner (GP)
- ☐ An organisation providing sexual health services
- ☐ Other (please provide details below)

If you ticked 'other' please provide details in the box below:

Q2) How much do you agree or disagree that our updated service model will provide easy access to sexual health services in East Sussex?

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please use the box below to provide your comments:

Q3) How would you, or your organisation, be affected by our plans?

What you tell us will help us carry out an equality impact analysis. So please do let us know if the new model would make your life easier or harder and explain why.

Q4) Do you have any other suggestions or comments about our plans?

Thank you for sharing your feedback. If you would like to, please fill in the optional about you section on the next pages. Send your completed survey to: Freepost, East Sussex County Council, Public Health

About you questions

You don't have to answer the questions in this section, but it will help us to make sure that everyone is treated fairly and equally if you do. Your information will only be used and reported anonymously to support the consultation, engagement or feedback activity you are taking part in. We will keep your individual information for a period of up to five years and we won't keep it any longer than is necessary. Please get in touch with the named contact for this activity if you would like more information. Full privacy notice: www.eastsussex.gov.uk/privacy/about-you-survey/

Q1) Are you?

- ☐ Male ☐ Female ☐ Prefer not to say

Q2) Do you identify as a transgender or trans person?

- ☐ Yes ☐ No ☐ Prefer not to say

Q3) Which of these age groups do you belong to?

- ☐ under 18 ☐ 18-24 ☐ 25-34 ☐ 35-44 ☐ 45-54
☐ 55-59 ☐ 60-64 ☐ 65+ ☐ Prefer not to say

Q4) What is your postcode?

- ☐ Tick here if you prefer not to say

Q5) To which of these ethnic groups do you feel you belong?

- | | |
|--|---|
| <input type="checkbox"/> White British | <input type="checkbox"/> Asian or Asian British Indian |
| <input type="checkbox"/> White Irish | <input type="checkbox"/> Asian or Asian British Pakistani |
| <input type="checkbox"/> White Gypsy/Roma | <input type="checkbox"/> Asian or Asian British Bangladeshi |
| <input type="checkbox"/> White Irish Traveller | <input type="checkbox"/> Asian or Asian British other* |
| <input type="checkbox"/> White other* | <input type="checkbox"/> Black or Black British Caribbean |
| <input type="checkbox"/> Mixed White and Black Caribbean | <input type="checkbox"/> Black or Black British African |
| <input type="checkbox"/> Mixed White and Black African | <input type="checkbox"/> Black or Black British other* |
| <input type="checkbox"/> Mixed White and Asian | <input type="checkbox"/> Arab |
| <input type="checkbox"/> Mixed other* | <input type="checkbox"/> Chinese |
| <input type="checkbox"/> Other ethnic group* | <input type="checkbox"/> Prefer not to say |

*If your ethnic group was not specified in the list please describe your ethnic group.

The Equality Act 2010 describes a person as disabled if they have a longstanding physical or mental condition that has lasted or is likely to last at least 12 months; and this condition has a substantial adverse effect on their ability to carry out normal day to day activities. People with some conditions (cancer, multiple sclerosis and HIV/AIDS) are considered to be disabled from the point that they are diagnosed.

Q6) Do you consider yourself to be disabled as set out in the Equality Act?

- ☐ Yes ☐ No ☐ Prefer not to say

Q6b) If you answered yes to Q6, please tell us the type of impairment that applies to you. You may have more than one type of impairment, so please select all that apply. If none of these apply to you please select other and give brief details of the impairment you have.

- ☐ Physical impairment ☐ Sensory impairment (hearing and sight)
☐ Long standing illness or health condition, such as cancer, HIV, heart disease, diabetes or epilepsy
☐ Mental health condition ☐ Learning disability
☐ Prefer not to say ☐ Other*

*If other, please specify:

Q7) Do you regard yourself as belonging to any particular religion or belief?

- ☐ Yes ☐ No ☐ Prefer not to say

Q7a) If you answered yes to Q7, which one?

- ☐ Christian ☐ Hindu ☐ Muslim ☐ Buddhist
☐ Jewish ☐ Sikh ☐ Any other religion (please specify)

Q8) Are you?

- ☐ Bi/Bisexual ☐ Gay woman/Lesbian ☐ Gay Man
☐ Heterosexual/Straight ☐ Other ☐ Prefer not to say

Q9) Are you currently pregnant or have you been pregnant in the last year?

- ☐ Yes ☐ No ☐ Prefer not to say

Q10) Are you married or in a civil partnership?

- ☐ Yes ☐ No ☐ Prefer not to say

Thank you for providing this information.