# **APPENDIX 12**

# ADULT SOCIAL CARE

- Appendix 12 Consultation Report
- Appendix I Equalities Impact Assessment
- Appendix II Consultation Plans
- Appendix III Update Final Version
- Appendix IV Indicative Costs



1)	Introduction1
2)	Background2
3)	Consultation Methodology2
a)	Consultation Advisory Group2
b)	Consultation Strategy2
c)	Documentation3
d)	Coverage, Events & Feedback numbers4
e)	Feedback about the consultation process itself4
4)	Feedback5
a)	Eligibility Criteria5
b)	Charging
c)	Westminster House9
d)	General comments12
5)	Summary and recommendations12
a)	Eligibility criteria:12
b)	Charging:13
c)	Westminster House:

# 1) Introduction

The purpose of this report is to provide confirmation of the recent council consultation on proposed changes in adult social care. The report covers:

- the consultation process itself
- the feedback received in response to the proposed changes to Eligibility Criteria, charging and the way in which the respite service for people with a learning difficulty is provided, and
- recommendations in the light of the feedback

The report should be read alongside Equality Impact Assessment (Appendix I) which has been informed by all inputs to date.

The report includes direct quotations from feedback in **bold italic**, those from organisations are identified but individual personal comments remain anonymous. Sections in *italic* represent the council's considered response to the feedback. These are also summarised in the final section of the report which includes recommendations in the light of feedback.



# 2) Background

The Isle of Wight Council, along with many other councils up and down the country, faces significant challenges to its finances. Over the next four years the council needs to save at least £32 million.

At the same time, the council is currently spending over £3.5million more than it has budgeted for adult social care services this year. With a growing elderly population and the number of people with a disability living longer, the demand for care services is increasing day by day and the council will find it increasingly difficult to provide the services to those most in need in the community. It has no option but to look at different ways of providing its services more cost-effectively, to ensure the most vulnerable people in the Island community can be looked after appropriately in the future. Put simply, there isn't enough money to continue to support people in the way that the council currently does.

In September, the council decided to have a 90 day consultation period for people who use these services, their carers and the wider community to comment on specific proposals to change the way social care is provided and charged.

# 3) Consultation Methodology

# a) Consultation Advisory Group

It was felt important from the outset that there should be a Consultation Advisory Group comprising representatives from Age Concern IW, Advocacy Trust, Carers UK, Johns Club/Mencap and LINk, together with legal and communications advisors, an identified consultation co-ordinator and Ian Anderson, the council's Strategic Director for Community Wellbeing and Social Care. The group was chaired by Councillor Roger Mazillius, Cabinet member for Adult Social Care, Community Services and Housing.

The purpose of the group was to quality assure the consultation process with a view to ensuring that all reasonable steps were taken to publicise the consultation, provide information about the proposals and enable as wide a range of people as possible to engage in the process.

The group met once before the consultation period started and a further four times between 15 October 2010 and 14 January 2011. In addition, it also met after the consultation period ended to discuss the results and consider a draft of this report to ensure it fairly represents the views expressed and process.

There will be a final meeting in March where the group will consider the consultation as a whole and record learning from the process which can be kept in mind for future consultations.

# b) Consultation Strategy

The agreed consultation strategy (see Appendix II) acknowledged the need for particular attention to be paid to ensuring that service users themselves would be aware of the consultation and be encouraged and supported to put forward their views. To that end, it



was agreed to commission the Advocacy Trust to offer independent advocacy support to service users to ensure that their views on the proposed changes to the Council's respite care provision were sought and reported back to Council. It is acknowledged good practice to use advocates to enable people with a learning disability to get their views across.

The needs of carers, care providers across all sectors, staff and members of the general public were also considered and steps taken to ensure that as many as possible of these people would be aware of the consultation and how to make their views known as efficiently as possible. This was done through a mixture of advertising in the key local media, encouraging articles and interviews, speaking at meetings of key people/organisations and through personal outreach via social care staff. A letter had previously been sent to all service users in September 2010 which had alerted them to the forthcoming proposals.

All materials were made available via the consultation pages of the council website and in writing. Recordings were also made of the main consultation documents and links to those were available online. Groups and organisations approached were invited to let their members know about the consultation, make the documents available or invite people to email or telephone the council for copies.

A budget of £10,000 was available to support the consultation, and (at the time of writing) £9,887 was spent.

# c) Documentation

In line with the agreed strategy, a number of documents were developed, most of which were shared in advance with user groups prior to the launch in order to ensure that they would be easily understood and fit for purpose. The council is grateful to those groups for their advice, particularly in relation to the development of the Easy Read documents. The documents produced were:

- a) Eligibility and Charging consultation document
- b) Easy Read version of the above
- c) Westminster House consultation document
- d) Easy Read version of the above
- e) Questionnaire regarding the Westminster House proposal in Easy Read
- f) Prompt sheet relating to Eligibility and Charging
- g) Easy Read version of the above

The last two were made available from January 4 2011 as an additional aide to remind and encourage people to give their feedback on the eligibility and charging proposals.

All documents remain available on request from the council.

# d) Coverage, Events & Feedback numbers

The attached Update (Appendix III) provides evidence of the considerable range of coverage which was generated in the course of these consultations across a range of media including the Island's main newspaper and radio station.

A number of key organisations also supported the consultation by including information in their newsletters or mailings encouraging people to "have their say".

In total, we are aware of twenty nine events around the Island which were either dedicated to, or included consideration of, the consultation subjects.

A total of 273 responses were received, including emails, letters, questionnaires, telephone calls and reports from organisations. In total these represented the views of over 500 people.

Full details of the coverage, events and feedback are available in the attached Update (Appendix III).

# e) Feedback about the consultation process itself

During the consultation, at Consultation Advisory Group meetings, feedback about the process itself was considered and actions taken. These were recorded in the action points of the meetings which are available on request.

There were many comments from people welcoming the opportunity to have their say and we received positive feedback from various individuals and organisations who felt that every effort had been made to ensure information was available in an accessible form, summed up by one respondent: "*I think that it is good getting the views of the users of Westminster House*".

Members of the Consultation Advisory Group expressed their satisfaction with both their involvement and the process itself.

There were some reservations expressed, including feedback from 3% of those who completed the Westminster House questionnaire who were concerned at the relevance of the questions themselves. There were also 5 comments doubting the costs identified for respite care stays in Westminster House and the Gouldings.

The involvement of an independent advocacy organisation in supporting service users of Westminster House, the Gouldings and the Adelaide was welcomed by a number of people, including Mencap in their report. The Mencap report also noted that "*the impartiality of Advocacy trust was questioned by parents and carers.*" It is hoped that the evidence contained within this report will serve to reassure people of their impartiality in carrying out the survey.

A minority of people responding found it difficult to judge the impact of eligibility criteria changes and this was also mentioned in the response from Age Concern Isle of Wight. However it was also acknowledged that this would be difficult given that each service user would need to be individually assessed to determine the outcome. It was felt that the fact that the proposal is to maintain only those aspects falling within the substantial



criteria which put people at greatest risk of losing their independence left some room for subjectivity.

The Mencap report also noted that some people involved in their events felt there was insufficient support for carers to respond to the consultation, which they felt de-valued their views because had not been separately and specifically sought. This was mainly expressed in the light of there being a specific programme intended to support the Westminster House service users themselves.

# 4) Feedback

For the purposes of this report and in the interests of ensuring that the fullest possible information is available to councillors who will be making decisions regarding the proposal, all feedback has been reviewed and the main themes are drawn out below, where possible using direct quotes. This feedback is also used to inform the Equality Impact Assessment attached at Appendix I.

# a) Eligibility Criteria

The proposal put forward was that from 1 April 2011 the council would continue to meet fully the needs of all people who have been assessed as critical. For those people who are assessed to have needs defined as substantial we would only meet those areas of need that place them at greatest risk of not being able to remain at home and be safe.

The following summarises the key points raised:

# i) "taking care away will mean people go into crisis and that will cost more"

Some of the coverage of this aspect picked up on this as being a move to critical only and responses expressed concern that this would be a false economy. One of the 11 recommendations in Mencap's response states: "*the local authority needs to use a preventive approach for those that fall outside the criteria to safeguard them*" and both Age Concern Isle of Wight and Mencap make reference to the fear that people may otherwise go into crisis through lack of support at an earlier stage.

There were also concerns that this would put additional pressure on health services, summarised in Chale Parish Council's representation that the change to eligibility criteria might "*significantly increase the risks to their health and safety in the home, resulting in critical intervention or hospital admission, both of which would be far more costly*."

The council did note the importance of the above in the consultation documents and has committed both to sustaining significant elements of substantial care which might place people at great risk, but also to continuing with free re-ablement and preventive support. The establishment of a User Lead Organisation (ULO) with three organisations will also mitigate against this.



# "...it becomes even more important to assign resources to prevent 'Substantial' slipping into 'Critical,' and even more, endeavour to prevent a 'yo-yo' effect between the two."

In addition it is worth noting that, under new arrangements announced by government, the responsibility for care 30 days after coming out of hospital will be the responsibility of health services who are being provided with resources for that purpose. The council is working closely with the IW NHS to ensure there is improved support in the community including reablement services to avoid this. Additional funding has been allocated by government to support this.

ii) There was significant concern about the impact on mental health, crime, vulnerability, and personal safety if services were to be withdrawn. In particular it was felt that this should also be considered alongside the changes to mental health services and the availability of day centres.

Any person accessing metal health services is currently under review and being supported with a personal budget if eligible. Those who fall outside the eligibility criteria are being supported to access community resources.

*iii)* Consistency of assessments and the application of eligibility criteria was a regular concern expressed, summed up in the representation made following the event organised by the Voluntary Day Care Services Group at the Riverside: **"Several individuals were concerned regarding varied interpretations of eligibility by different Care Managers"**. There was also a feeling that it would be helpful to share how reviews would be done and when.

It is acknowledged that this will need to be a fair and transparent process and, should the proposal go forward, a risk assessment tool is being developed which can be easily understood by all and can be demonstrably fairly applied. This is being developed with the involvement of social care practitioners, service users and relevant organisations. In the light of concerns raised, we will be publicising how and when reviews will be carried out at the earliest appropriate opportunity.

iv) Reassurance was sought that as people's needs change and increase, there is a mechanism for a quick response. "*IW LINk recommends the Council sets itself strict targets on response times to individuals requesting a reassessment due to a change in circumstance or this could result in catastrophic outcomes for vulnerable people.*"

Referrals will continue to be prioritised, specifically regarding any risk of not being able to remain safely at home. The council is working closely with IW NHS both in terms emergencies (via an Emergency Hub) as well as through the existing Duty service which is available around the clock. We will increasingly be looking to streamline requests from whatever source to ensure that the right response is sent in a timely way.

v) The council did give a commitment that before any changes were made there would be an individual reassessment as well as a financial review. However, repeatedly



respondents were concerned to emphasise the importance of support to service users through any possible change: "only if the individual concerned is listened to and counselled before any cut in service is implemented".

vi) Respondents were also concerned that full information should be made available as soon as possible so as to minimise the period of anxiety which service users would face once a decision has been made.

Transitional arrangements would be put into place and agreed with those service users who face a reduction in their support. Full information about the individual service user would then be available and every effort would be made to listen to the concerns of the user and to identify different ways of addressing those concerns. We would hope to begin the process of reviewing, informing and discussing with people as soon as possible after the decision is made by Full Council.

vii) There was a significant level of concern expressed about the council's commitment to carers who, it is felt, save the authority a considerable amount of money through their continuing care role. Many felt that if services were no longer available then the additional pressure on carers might "*take them to breaking point*". Most often mentioned in this context was the availability of respite care for people with learning difficulties, together with access to day centres for people with mental health care needs.

Consultation documents stated "Support for carers and providing equipment.. will be important". In addition there was a clear commitment in the documentation that "There are therefore no changes currently planned to the arrangements for support provided to carers..."

viii) Respondents have highlighted the potential impact the proposed changes may have on the voluntary sector which may become a "safety net" for those no longer receiving services. The feedback encourages the council to consider how to make that work or to support them in light of their own financial constraints. "Conversations with the third sector (including faith groups) needs to begin now to see if ways can be found to continue to nurture this community model of care. Many churches, for example, have plant available that could be adapted for use as day centres of sorts, and have access to willing volunteers. If the state can no longer provide the support to vulnerable people that it once did, it has a moral obligation to assist others to do so (with all the necessary police and health and safety checks that also need to take place in such ventures)."

One specific suggestion from the IW LINk was that "*the Isle of Wight Council request all paid employees commit 1 day per month volunteering to support local residents.*"

The council is very conscious of the need to build community capacity and work alongside a range of organisations – this has been a feature of recent restructuring within the council. Clearly the decision to volunteer has to be an individual one, but the authority would want to promote volunteering.



# b) Charging

The proposals relating to charging included stopping homecare being provided free for people over 80 years old (who would instead receive a financial assessment and pay within their means in the same way as people under 80), removing the upper limit for charges made, charging service users on an equal basis (subject to their ability to pay) and charging people what services cost to deliver (again subject to their ability to pay).

Feedback ranged across all aspects, with the following key points:

i) Charging people over 80 for service was the area of greatest agreement with the following being typical of responses received: "*I acknowledge that the current policy and practice of free care for those aged 80 and over in the Island is probably unsustainable*"... "As a 66 yr old ..... I feel the Council cannot fund elderly just because they are over 80 yrs old. I feel we should all be responsible to some extent if we have the funds to self provide."

The council only received 3 expressions opposed to this. However, it was notable that many respondents emphasised the importance of charges taking into account the ability to pay.

Some also pointed out that providing free care for people of a certain age might be seen as discriminatory and should be stopped, including Age Concern IW who commented *"it is regrettable, but arguably results in a fairer system which does not discriminate depending on age!"* Another organisation commented "We have never supported the policy of free homecare for the over 80's and have always regarded this as *inequitable."* 

One proposal from LINk suggested that "those in receipt of savings (excluding any property value) in excess of £30,000 should not be entitled to free support whilst those with savings less than this should."

ii) 78% of those expressing a view regarding the removal of the upper limit were in agreement with the proposal, with comments such as "*people should pay what they can afford regardless*". Of those who expressed a view, only 22% were opposed to the removal of the upper financial limit with the stated view that "*There must be a maximum*". A third possibility was suggested by the IW LINk in its response, that the limit be set higher at £500.

*iii)* There was also support expressed for the proposal that the council make clear the full cost of providing services, without subsidising as expressed here "*people should know how much everything costs and be able to choose for themselves*" and "*The Council should not be subsidising any service user who can afford to pay the full cost. The money saved would benefit the really needy disabled/elderly service users.*"

This too included the proviso that people be fairly assessed and only be asked to pay at a level that they can afford. There were also concerns expressed about the costs of some services

The council acknowledges the importance of people knowing the true cost of services to ensure individual choice, with reablement remaining free. It has also made a clear commitment to the principle that people should only be asked to pay what they have been assessed as being able to afford.

iv) In respect of charging a number of people felt that there should be a right of appeal following the financial assessments and that this should be made clear to service users at the earliest opportunity.

The financial assessments are guided by government policy on Fairer Charging and there is now, and will continue to be, an appeals process which is detailed in the council's Fairer Charging policy.

v) In two of the reports made by organisations, concerns were raised that people who are self- funding must be able to be assessed and get advice about the appropriate services and some concern was expressed that this isn't happening now.

The council does recognise that this is important and the User Lead Organisation is being established. A wide range of advice is currently available via our website (www.iwight.com/living\_here/health-and-wellbeing/your\_care), including access to the Information Prescription and provider information.

vi) Representations emphasised the importance of transparent and consistent procedures for applying charging policies which could be understood by all concerned.

Staff responsible for financial assessments will receive training which will promote the consistent, fair and correct application of the charging scheme.

vii) Only a small number of people expressed general dissatisfaction with the principle of means testing people *"those who have been sensible with money shouldn't be penalised by paying more for care than someone who has spent everything"* 

# c) Westminster House

ISLE*of* WIGHT

The proposal under consultation was that the respite care service currently provided from Westminster House be relocated to the Gouldings and the Adelaide. Sadly, there was a tendency for this to be interpreted as "closure of Westminster House". This caused a degree of anxiety for people who feared the service was being removed which is clearly not intended in this proposal.

Of those who responded to the questionnaire, 46% said that, given the choice, they would choose somewhere other than a traditional respite care setting. Comments suggested that these service users would look forward to an alternative provision – for example: "*I would be happy to go anywhere as long as it was a rest for my family and a nice break for me.*" This echoes a number of comments both from service users and their family.

However, there was a strong expression of support for not relocating the respite care service. Mencap comment in their response following consultation with 90 plus people: "*none of the attendees at the two consultation meetings held by John's Club, Isle of Wight Mencap and Mencap nor those individuals and families that have contacted us have wanted*  *Westminster House services to relocate.*" This is reinforced by 56% of those completing the online questionnaire who said that they would choose to use their personal budget to attend Westminster House.

The range of concerns and reasons were:

i) **Location was far and away the biggest concern** and moving the respite care service to Freshwater gave rise to a number of concerns around:

- The cost of transport and time spent travelling, as well as the increased ecological impact of additional travelling. People felt this might be exacerbated by the possible loss of the Wightbus service.
- Proximity to activities access to shops, day centres and leisure facilities were frequently mentioned, particularly by service users themselves (30%). "*I Want to stay in Newport where we can walk into town for coffee, shops, cinema.*" Mention was also made of proximity to the hospital which it was felt was important in the case where service users may be peg fed, epileptic or have other significant health needs.

*ii)* By far the majority of those expressing a view wanted to maintain the respite service at Westminster House, in Newport, and respondents felt there should "be a way" of achieving this. There were several suggestions in favour of social enterprise or partnership approach: ".....give more time to become a social enterprise in the existing buildings obviously in time the council won't run respite services as this can be done cheaper by the private sector so if you just gave westminster one more year to set it self up in the private sector the saving would be made by the council the following year." Similarly, Mencap recommends that the council carries out an assessment of alternative provision before making changes/closures.

iii) Views about providing services on one site to both older people and people with a learning disability varied. Just over half (51%) of those completing the questionnaire felt that there would be a big problem in co-locating services, most often expressed in terms of problems which older people at the Gouldings might experience: "*I think the older people using the Gouldings would have a problem with the noisy people with learning difficulties*". 19% felt there would be no problem (*"I like old people, I live with a lady who's 70."*) and 30% didn't express a view. Overall the written representations (both by email or letter) most have reservations about supporting services for older people and younger adults with learning difficulties on the same site despite the undertaking made by the council that the facility would be on the separate lower ground floor.

iv) Staffing issues were raised by users, families, carers and professionals alike. One particular former health worker summed these up: *"The needs of these two client groups are vastly different as are the skills needed by staff supporting the service. It has taken years to educate people to this fact and to develop appropriate services for each."* 



There were several references to the fact that the proposal might result in the loss of experienced staff and there was the suggestion that staff at the Gouldings would not want to work with people with a learning difficulty.

The council believes that people with learning difficulties have the right to live in society as fully empowered individuals. Members of staff and other professionals, as well as members of the public, must ensure that people with learning difficulty are not marginalised – raising awareness and greater understanding must be part of an inclusive society.

v) A number of the representations raised concerns that the cost of refurbishment for the Gouldings would not be limited to £50,000. Mention was made of the offer of a donation to fund refurbishment of Westminster House and a significant minority of those expressing a view felt the £50,000 the council proposes to spend on the Gouldings should instead be invested in Westminster House.

*vi*) Nearly a third (32%) of those completing the questionnaire made a specific mention of the importance of social activities with friends: *"I would like to spend my money seeing my friends. They are important to me."* This also included concern about the future of clubs being run from Westminster House in addition to respite care. The report from Mencap also reflects this concern "*the friendships and social networks that the people who use Westminster House have made in the local community of Newport will inevitably be lost."* and was mentioned in feedback from the event held at the Riverside.

*vii)* 22% of those responding via the questionnaire said they would like to have the opportunity to stay somewhere other than either Westminster House or the Gouldings, typified by this comment: "*I want to spend time with my friends and find other places to go because Westminster House is a bit boring.*"

viii) Feedback mirrored concerns raised in section 4a) vii (page 7) in terms of the additional pressures which the proposal would put onto families and carers. This was in terms of the financial strain (cost of travel), time and the fact that some users may be reluctant to go to a new place. There were a number of comments reflecting the fact that people with a learning difficulty find change very worrying and may resist any new provision.

The council is committed to supporting carers and we recognise that change can be a challenge for people with a learning difficulty, but we do have examples where lives have been improved as a result of change.

ix) Specific mention was made by 5 respondents to the fact that Westminster House was given to the council by Mencap on the basis that it would be run as a service for people with learning difficulty "in perpetuity". Though this was acknowledged to be a verbal agreement, it was felt that it should be honoured.

The council is investigating this and will take account of the views expressed when making a final decision in this regard.



- x) Other concerns raised by smaller numbers of people included
  - the need for emergency beds to be available in a familiar surrounding ie where people have their regular respite
  - Health and safety of service users in respect of kitchen and ensuite facilities
  - Several people made comment about the suggestion that respite care should also be geared to providing learning opportunities for service users "*Carers felt that this was not the purpose of respite, but that it was for everyone concerned to be able to take some time out to relax.*"

# d) General comments

There were a small number of more general comments made by respondents regarding the overall prioritisation of expenditure including requests to minimise the impact on adult social care "the most vulnerable". Suggestions included reducing the number of councillors and that the council stops bringing in consultants who were seen as expensive.

Only one person commented against the provision of free welfare advice, suggesting that this should be provided by Broadlands House and not by the council. Of those who expressed a view, some 94% were in favour of the council continuing to provide such advice free of charge.

Mencap reported that some people with learning difficulty felt pressured to move to a personal budget, with concerns that services might be reduced and that there need to be services available to choose from. Whilst this was not the specific subject of the consultation, the council has taken note of the comments. It is noted that there are also examples of considerable improvements experienced by people moving to a personal budget and the recent conference for service users included such examples.

# 5) Summary and recommendations

# a) Eligibility criteria:

The consultation served to highlight a range of concerns and the council believes that it will be able to put the necessary arrangements in place to mitigate those concerns, including:

- Retaining a programme of preventive work, and working with health colleagues who will have responsibility for the first 30 days post discharge
- Monitoring the impact on people with mental health needs
- Ensuring a consistent and fair application of the revised eligibility criteria through the use of a user-friendly risk-based assessment tool which workers will be trained to apply in a consistent, fair and correct manner
- Ensuring there is a timely and responsive referral system across both health and social care which means that people will receive an assessment as soon as possible once a concern is highlighted

- Making proper transitional arrangements with service users who face a reduction in care provided to help to identify alternative ways of addressing needs

With that in mind, council officers will recommend to members the acceptance of the proposed change to eligibility criteria.

# b) Charging:

SLE*of* VIGHT

The proposals which were put forward were that:

- people over the age of 80 would no longer automatically receive free homecare, but that the improved system of targeted care will continue to be developed to ensure that people can continue to stay in their own homes as long as they are safe and able to do so, regardless of their age.
- everybody supported by the council would be charged according to their ability to pay
- the maximum charge of £229.50 be removed
- the charge for services should be the same for people on a Personal Budget and those using traditional services and that we would work out how much people should pay based on the cost of the service they are receiving
- we would charge the true cost of the services that the council provides, so that it no longer subsidises services that people can afford to meet from the benefits and entitlements they receive

In all cases the most frequent concern expressed was that these be consistently, fairly and openly applied, always making sure that service users were properly financially assessed and were not asked to pay more than they can afford.

As a result, the council has made a clear commitment to ensuring that those responsible for undertaking financial assessments are trained to ensure the consistent, fair and correct application of the financial assessment framework.

With that in mind, council officers will recommend to members that the proposals be accepted and implemented with effect from 1 April 2011.

# c) Westminster House:

Representations received as part of the consultation, as well as some received prior to the official consultation period highlight the significant concerns about the location of a respite care service.

In a representation from members of staff of Westminster House, it was felt that a level of both savings and increased income could be identified which might allow time for the council to consider other alternatives which better meet the needs of service users. Interest was also shown from a third party in moving to a new management arrangement.

It is therefore recommended not to relocate the service as proposed, but to realise the savings and increased income identified at the earliest opportunity, allowing time to market



test the possibility of moving to either a social enterprise or other arrangement with a third party to establish a new management arrangement by the start of the 2012/13 financial year.

Transformation Manager Community Wellbeing and Social Care Directorate 28 January 2011

# Appendix I - Equality Impact Assessment

# Appendix II - Consultation strategies for both Eligibility and Charging, and Westminster House consultation processes

Appendix III - Update on Coverage, events & feedback numbers

# **Equality Impact Assessment Form**

APPENDIX I – Adult Social Care Consultation Report



Revised September 2010

(Equality target groups are those which cover the 9 protected characteristics under the Equality act 2010: age, disability, gender reassignment, marriage & civil partnership, pregnancy & maternity, race, religion/belief, sex (as in male or female) and sexual orientation)

When completing the equality impact assessment, please remove wording not applicable to what you are assessing e.g. service, policy, procedure, practice or project

# Part 1 Aims & implementation of the service, policy, procedure, practice or project

This section is the title of what is being assessed, responsible officers, purpose, where it fits within the council's wider aims and how it supports the legislation to eliminate unlawful discrimination and the promotion of equal opportunities. (*Please refer to the guidance for additional information*)

# 1.1 What is being assessed

Proposed adult social care changes

- eligibility criteria
- charging policy
- relocation of Westminster House respite care service

# 1.2 Officer(s) and section or service responsible for completing the assessment

Rosie Barnard (Lead Officer, Diversity & Wellbeing), Janet Paine (Principal Lawyer, Social Care Legal Team) & Kim Ball (Transformation Manager)

### 1.3 What is the main purpose or aims of the review?

The overall purpose of the review is to ensure that the resources available to the authority to support adult social care are fairly and equitably distributed across the island population, in light of current budget limitations.

# 1.4 Who is affected by the review? Who is it intended to benefit and how?

It will affect all current adult social care service users within the island adult population and potential future service users, carers and their families. It may also affect staff.

Benefits will be identified as the proposals are developed following consultation.

# 1.5 Has the review been promoted or explained to those it might affect directly or indirectly?

There has been extensive consultation with both public and staff. See attached Consultation Update for further detail.

# **1.6** How does the review contribute to better community cohesion?

Via the consultation process, including the involvement of various stakeholders and community groups, we have informed the local community as to the current financial situation and explained the council's proposals for the transformation of adult social care. The feedback from this consultation will be used to inform the future delivery of services.

Community cohesion has been enhanced by the involvement of the community in the consultation process itself.

### 1.7 How does the review fit in with the council's wider aims?

• The changes work toward the Eco Island aim of promoting a healthy and supportive Island, and the Transformation of Adult Social Care agenda.

Equality Impact Assessment – Adult Social Care Changes (28-1-11)

- This fits in with the Council's aim to Transform Social Care and to provide sustainable services.
- To ensure that we operate within a legal budget
- 1.8 What is the relevance of the aims of the review to the equality target group and the council's duty to eliminate unlawful discrimination and promote equality of opportunity?

The review is to ensure that future service delivery is on an equitable basis in line with the requirements of The Equalities Act 2010.

### 1.9 How is, or how will the review be put into practice and who is responsible for it?

Following the consultation process the feedback will be collated into a report which will be presented to Cabinet on 8<sup>th</sup> February 2011 for decision and ratification by the Full Council on 23<sup>rd</sup> February 2011.

Responsibility for operational delivery following the members decision lies with the Strategic Director for Community Wellbeing and Social Care.

.....

# Part 2 Consideration of data and research

To conduct the assessment, you will need information about service users and staff that provide the service. This section is to help you identify the sort of information that will be needed to help you assess whether there may be barriers to different equality groups who access your service, policy, procedure, practice or project. (*Please refer to the guidance for additional information*)

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

Please refer to attached Consultation Update.

### 2.2 Equalities profile of users and beneficiaries

All service users, carers, families, staff and other professional bodies

# 2.3 Evidence of complaints against the review on the grounds of discrimination

None have been received.

# 2.4 What does the consultation, research and/or data indicate about the negative impact of the proposals contained in the review

Please see the full report for a detailed response to this, a summary of the main concerns would be:

a) eligibility criteria:

- concern that those who no longer meet the critical criteria will be at risk of going into crisis which will be life changing and also expensive

- people who do not meet the criteria may not have access to information to enable them to access services elsewhere

- that this may place a greater burden on carers who might be pushed to breaking point

- that this will put pressure on voluntary sector bodies who may become a "safety net"
- b) charging:

- people (including those over the age of 80) who may be required to pay for services in future may decide against receiving support as a result

- people who have lived carefully may feel penalised for so doing when asked to contribute towards their care

- those people who are identified as self-funding may not receive an equal level of support in terms of advice and information to ensure they purchase the most appropriate care

c) Westminster House:

- service users and families/carers felt the location would be a problem in terms of both cost and time

- reduced access to the sorts of activities which service users currently enjoy at the Newport location (cinema, range of shops and leisure facilities were specifically mentioned)

- service users, families/carers and staff felt that there might be a subsequent loss of experienced staff who would not wish/be able to move to the new location

- that this may place a burden on carers who might be pushed to breaking point

# 2.5 What does the consultation, research and/or data indicate about the positive impact of the review

Eligibility criteria and charging:

- there was significant recognition from people responding to the consultation that there
  had to be some changes in order to protect those at the very greatest risk in our
  community
- moving to a system whereby all eligible people would be asked to pay towards their care in line with their ability to pay, regardless of age or circumstances was identified as a positive move towards removing discrimination as well as fully complying with equalities legislation

# Part 3 Assessment of impact

Now that you have looked at the purpose etc of the service, policy, procedure, practice or project (part 1) and looked at the research (part 2), this section asks you to assess the impact, positive and negative, of the service, policy, procedure, practice or project on each of the protected characteristics of the Equality Act 2010.

# 3.1 Complete this section with the following information – relating to all of the identified groups Equality Act 2010 (protected characteristics) *(please refer to the guidance for additional information)*

Protected				
Characteristics	Negative	Neutral	Positive	Comments
Age	x		x	Proposals are to remove the availability of free homecare to people over the age of 80 which impacts negatively. The current policy of providing free homecare for people over 80 discriminates against people under the age of 80. The proposal will mean that resources available are distributed more fairly on the basis of need and ability to pay. Proposals to change the eligibility criteria threshold could impact negatively on people whose needs will no longer be met.
Disability	× ×			Proposals to change the eligibility criteria threshold could impact negatively on people whose needs will no longer be met. Proposals to re-locate Westminster House could impact negatively on disabled groups as they are the only users of this service.
Gender Reassignment		х		
Marriage & Civil Partnership		х		
Pregnancy & Maternity		х		
Race		х		
Religion / Belief		х		
Sex (male / female)	x			Due to the disproportionate number of females amongst the population of service users, informal carers and care staff, there may be a negative impact on women resulting from the proposed changes.
Sexual Orientation (LGB&T)		Х		

Part 4 Measures to mitigate disproportionate or adverse impact or improve on neutral or positive impacts: (*Please refer to the guidance for additional information*)

# 4.1 If there is any negative impact on any target equality group identified in part 3, is the impact intended or legal?

In as much as there are negative impacts identified above (section 3), the intention of the review proposals is to ensure that the council complies with its legal duties to operate within limited financial constraints whilst taking steps to mitigate against any negative impacts on any particular group.

Part 3 (above) has identified that these proposals are likely to have a negative impact on 3 groups – age, disability and sex.

### Proposals to cease free home care for the over 80s:

Age Equality Duty: A decision to introduce a home care charging policy for the over 80s age group would have a negative impact on those current and prospective service users in this age group who would be asked to pay, depending on their ability to do so. In particular, a home care charging policy would have a negative impact on those service users in this age group whose income only just exceeds the charging threshold as set down in the Fairer Charging Guidance.

This negative impact needs to be balanced against the future ability of the Council to meet the population's growing adult social care needs. Therefore a home care charging policy which is consistent across the population group as a whole would ensure that the most vulnerable people, regardless of age, continue to have access to and benefit from the services that they need. It will allow fairer access to resources by all, regardless of age.

### Proposals to change the eligibility criteria threshold:

Disability Equality Duty/Age Equality Duty/ Sex Equality Duty

Proposals to change the eligibility criteria threshold could impact negatively on people whose needs will no longer be met. This will have a greater impact on the elderly and disabled people. It will also have a greater impact on the female population as there are a greater number of females than males who are aged over 65 and above on the Island.

This negative impact is objectively justified when assessed against the Council's future ability to meet the population's growing adult social care needs. The consultation process has identified that there are steps that could be taken to minimize this negative impact and these are outlined in the Action Plan in Part 6 below

# Proposals to re-locate Westminster House:

Disability Equality Duty:

As the Westminster House service is only open to disabled persons, there will be an impact upon this group in particular if proposals to re-locate go ahead.

This impact can be objectively justified by the fact that the building is not currently fit for purpose and by consolidating the service at the Gouldings we can offer this group an environment which is better suited and compatible with access needs.

The consultation process has identified that there are steps that could be taken to minimize this negative impact and these are outlined in the Action Plan in Part 6 below

# 4.2 Specify measures that can be taken to remove or minimize the disproportionate or adverse effect identified in part 3. If none were identified, identify how disproportionate or adverse effect could be avoided in the future.

In terms of the application of revised eligibility criteria, the intention is to work with a carefully constructed risk-based assessment to ensure that those people with the highest level of need are properly supported.

There will continue to be signposting to other sources of support (help or advice) for those who do not meet the eligibility criteria proposed.

**4.3** If there is no evidence that the review promotes equality, equal opportunities or improves relations within equality target groups, what amendments can be made to achieve this? As 4.2 above.

4.4 If a neutral or positive impact has been identified, can that impact be improved upon (continuous improvement)?

As part of the ongoing transformation of adult social care, including integration with health, there will be regular reassessment of processes and policies.

4.5 How will the review be implemented?

See 1.9 above.

# 4.6 As 4.5 above please identify training requirements.

Ongoing training and development opportunities will be needed for social care staff, finance officers.

Equality and diversity training will continue as and when required for all staff.

Equality Impact Assessment – Adult Social Care Changes (28-1-11)

# Part 5 Conclusions & recommendations

This section ensures that what ever we are impact assessing, whether it be a service, policy, procedure, practice or project that ensure that we abide by the general and specific duties to promote race, disability and gender equality. (*Please refer to guidance for additional information*)

# 5.1 Does the review comply with equalities legislation?

There are areas of the review which will clearly impact more upon certain protected groups – in particular, age, disability and gender groups. However, following the results of the consultation, this document has made suggestions as to ways in which the impact on certain groups could be mitigated. These suggestions need to be carefully considered by the decision makers.

# 5.2 What are the main areas requiring further attention?

In terms of the application of revised eligibility criteria, the intention is to work with a carefully constructed risk-based assessment to ensure that those people with the highest level of need are properly supported.

There will continue to be signposting to other sources of support (help or advice) for those who do not meet the eligibility criteria proposed.

As part of the ongoing transformation of adult social care, including integration with health, there will be regular reassessment of processes and policies.

Account will be taken of all changes as part of the ongoing training and development opportunities of social care staff and finance officers.

Equality and diversity training will continue as and when required for all staff.

# 5.3 Summary of recommendations for improvement

As 5.2 above

# 5.4 What equality monitoring, evaluation, review systems have been set up to carry out regular checks?

See 4.4 above

# 5.5 When will the impact of the review be reconsidered?

See 4.4 above.

# Action / improvement plan Part 6

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

- Lower the negative impact, and/or
   Ensure that the negative impact is legal under anti-discriminatory law, and/or
   Provide an opportunity to promote equality, equal opportunity and improve relations within equality target groups, i.e. increase the positive impact

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

Area of negative impact	Changes proposed	Lead officer	Timescale	Resource implications	Comments
ec C	<ul> <li>the negative impact on people over 80 who would be charged (within their ability to pay) is objectively justified as it allows for a fairer access to resources by all, regardless of age. It is proposed that there be a managed transition period.</li> <li>In recognition of the impact which this would have on older people whose needs will no longer be met, the council needs to ensure that: <ul> <li>Access to information is readily available for all to be able to be self-supporting through the ULO and other mechanisms</li> <li>Referrals for assessment are responded to in a timely way</li> <li>Concerns that the eligibility criteria will not be eddressed through a programme of training and supervision of those staff involved.</li> </ul> </li> </ul>	Head of Commissioning for Adult Social Care will lead on all aspects	TBA	Within current resource allocation	
) - 74	correct application of the charging scheme.				

Page 8 of 12

respite care, therefore members need to and relocate the respite care service will which would mitigate the loss of access appropriate to those needs. Should the consider this when deciding whether to to the range & type of shops, as well as leisure facilities, for respite care service proposals go ahead, the lead officer will ensure there is a proper training plan in importance of properly assessing the shopping and leisure facilities, and use would be more limited. Members need to take account of this in their decision. There are no proposed changes which involved in travelling to Freshwater for The council ensures that staff working impact very badly on carers are based There are also no proposed changes Training of key workers undertaking on the fear that these services will no longer be provided. Proposed action: with people with particular needs are eligibility reviews to emphasise the eligibility criteria, charge for services of a minibus for group outings which Fears that the proposal to change would mitigate the cost and time users. There is access to some place to ensure this standard. proceed with the proposal. impact on carers Gender Reassignment <del>M</del>arriage & Civil Partnership Disability Carers

Equality Impact Assessment – Adult Social Care Changes (28-1-11)

Equality Impact Assessment – Adult Social Care Changes (28-1-11)

Pregnancy & Maternity			
Race			
Religion / Belief			
Sex (male or female)			
Sexual Orientation			
Geographical location			
All of the above			

# Part 6 continued – Equality Impact Assessment – Summary report

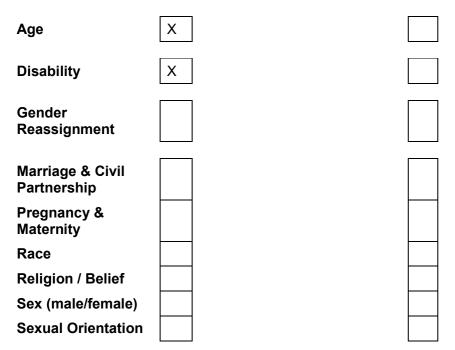
The results of equality impact assessments must be published. Please complete this summary, which will be used to publish the results of your impact assessment on the council's website. Please access the Work tab of the council's intranet and follow the instructions to upload your completed equality impact assessment on to the website.

Date of assessment	28 January	2011		
Officer's name	Kim Ball		Role	Transformation Manager, Community Wellbeing and Social Care
Service, policy, proce practice or project the impact assessed				are changes to eligibility criteria, charging Westminster House respite care service
Summary of findings		is to work w	ith a carefully	n of revised eligibility criteria, the intention / constructed risk-based assessment to e with the highest level of need are properly
				signposting to other sources of support who do not meet the eligibility criteria
		integration		ansformation of adult social care, including nere will be regular reassessment of
		•••	ining and dev staff, finance	velopment opportunities will be needed for officers.
		Equality and all staff.	d diversity tra	ining will continue as and when required for
• •				
Summary of recommand key points of act		- It is prop	osed that the	re be a managed transition period.
			o information orting throug	is readily available for all to be able to be h the ULO
		- Referrals	for assessm	ent are responded to in a timely way
		- Program eligibility		and supervision of those staff involved in
				ssessment staff who must be encouraged ir and correct application of the charging

scheme.

- Training plan in place to ensure those working with people with particular needs are appropriately trained
- Training of key workers undertaking eligibility reviews to emphasise the importance of properly assessing the impact on carers

# Groups that this policy will impact upon





# Adult Social Care - Eligibility & Charging <u>8 October 2010</u>

Name: Changes to Adult Social Care eligibility thresholds and charging policies
Ian Anderson – Strategic Director: Community services
Overall: To understand the views of all stakeholders on the proposed changes to the eligibility thresholds relating to adult social care services to inform the decision making by full council.
To comply with statutory consultation requirements relating to Fairer charging policies, in particular the following two sections:
98. Consultation with users and carers about charging policies and increases or changes in charges should follow good practice advice, for example, the
National Consumer Council's <i>Involving Users:Improving the Delivery of Local Public Services</i> . Consultation is one of the main principles, which should guide councils' Best Value reviews of local services.
99. Where changes in charging policies would result in significant increases in charge for some users, this should be specifically explained and considered as part of the consultation.
Additionally:
• To ensure all stakeholders are fully informed about the changes, understand the broad potential impact upon their personal situation and the rationale behind them
<ul> <li>To ensure all stakeholders feel that they have had sufficient opportunity to comment on the changes, identifying any preferences, issues and questions</li> </ul>
• To ensure all stakeholders feel that they have had the opportunity to have their say and have been listened to by the council
To ensure all stakeholders understand that no change is not an option
<ul> <li>Preparation w/c 4 October 2010</li> <li>Pre-launch consultations with reference group (14 Oct)</li> <li>Media briefing Wed 13 October</li> <li>Launch consultation on 15 October (online and press release)</li> <li>Vine/Bulletin/Mail2U 14 October</li> <li>Consultation documents distributed from 18 October</li> <li>County Press advertisement Friday 22 October</li> <li>Consultation period ends on 14 January - 13 weeks</li> <li>28 January Cabinet papers published</li> <li>8 February Cabinet makes recommendations to Full Council</li> <li>23 February proposals presented to Full Council</li> <li>1 April implement agreed changes</li> </ul>

Context	In light of the council's current financial pressures and in accordance with the July budget decisions a number of proposals for a revised approach to adult social care have been investigated and developed. The full year savings would be in the order of £3.6m
	These are also measures that complement the move to personal budgets and the transforming social care agenda: targeting the limited resources we have to supporting those clients with the greatest identified needs, and the most vulnerable.
	It also needs to be recognised that these proposals would bring us into line with many, if not the majority of other councils and, in the context of the current state of local authority finances, will be issues being grappled with across the country. Many of our costs compare
	unfavourably with other local authorities with spend on older people of $\pounds 236$ per head of population compared to the England average of $\pounds 187$ ; average spend on home care being $\pounds 82$ per head compared to $\pounds 64$ and a spend on learning disability of $\pounds 137$ per head compared to $\pounds 113$ .
	There are two key strands to these proposals:
	1.Raising the eligibility threshold to critical only
	2.Introducing/increasing charges for adult social care services in line with the Fair Access to Charging Policies
	1.Raising the eligibility threshold to critical only
	In line with Fair Access to Care Services guidance the Isle of Wight Council Community Services has set the local eligibility criteria as follows with Categories 1 and 2 being eligible for the provision of adult social care services. This limitation on eligibility is essential to ensure that the resources available are allocated to those most in need of help. This does not in any way affect the right for any vulnerable adult or carer to request an assessment of their needs, as any decision as to eligibility will be determined following such an assessment.
	The proposed change will see the eligibility of support being raised to the Critical category only, however, there will be a phased approach with service users only potentially changing their level of support when a review of their care is due to be assessed. The council will also look at those people who are assessed to have needs defined as substantial with a view to meeting those areas of need that place them at greatest risk of not being able to remain at home and stay safe.
	2.Introducing/increasing charges for adult social care services in line with the Fair Access to Charging Policies
	The proposal is to revise the council's charging policy so that all people are assessed to contribute to the cost of the support that they receive on the same basis, irrespective of their age, disability of health condition. This would mean that people aged over 80 years would be assessed on the same basis as those aged under 80 years. People will still only be charged in accordance with what they can afford to pay.
	The proposal is to also to revise the council's charging policy so that all people are assessed to contribute on the basis of the overall value of their allocated personal budget rather than how they are choosing to spend it. This would mean that whether people use their personal budget for homecare, day care, meals on wheels or any other support, they would be charged on an equitable basis and for the actual cost of those services.

Consultation strategy	This will form one of three separate consultation strands within Adult Social Care.
	<ul> <li>Proposed transfer of Westminster House service to The Gouldings and The Adelaide</li> </ul>
	Review of Charging Policy
	Proposals to raise support eligibility threshold to "Critical"
	Given that we are asking for qualitative views in relation to an overall proposal rather than setting out a series of choices, it is recommended that the approach be one of informing and seeking of views on the proposed changes via document and written representations rather than a questionnaire.
	Given that the audience for both is likely to be broadly the same, it is recommended that both these strands (charging and eligibility) are covered in the same consultation document.
	Our aim therefore will be to develop clear, easily accessible, unbiased informative materials (using plain English), which can be distributed to/ accessed by all stakeholder groups and interested parties in the most appropriate and cost effective formats (combination of print and electronic) and to make the results of the consultation accessible to all stakeholders.
	It is recommended that pre-launch consultation is undertaken with an advisory group of key stakeholders to ensure consultation tools are deemed fit for purpose.
Audience	Primary
	All service users
	All potential service users
	Carers and families
	Voluntary groups e.g. RCC/Age UK (Age Concern/Help the Aged)
	Council staff
	Key partners – health and their staff
	Members
	Advocacy Trust
	• Staff
	Secondary
	Provider organisations
	Wider community
	Action groups
	Media (local)
Consultation	All stakeholders
methodology:	Printed - Information document and comment form
	Content to cover:
	<ul> <li>Current situation</li> <li>Why the need to change</li> </ul>
	<ul> <li>What the changes are to the policy</li> </ul>
	<ul> <li>What the changes mean to you</li> </ul>

	• Next steps/time line
	• FAQs
	• Feedback form (allowing for written submissions)
	Total volumes est 3,000 (2,600 plus extras for wider distribution)
	Distributed via:
	Care staff during normal working routine
	Day care centres
	Residential care homes
	Providers (domiciliary care)
	Voluntary groups (via RCC and direct to key contacts)
	Libraries
	Help centres
	Leisure centres
	Doctors surgeries
	Hospital
	Online – see below
Communications	Promotion - communications support
support:	External
	<ul> <li>Advert in the County Press (including details on the ways to make your views heard) - part of a full page colour ad covering all three consultation strands and signposting people to how they can get involved (Date – Friday 22 Oct)</li> </ul>
	• Full media support (eg press release to all local media, follow-up interviews etc – to coincide with online launch Thursday 15 October)
	• Feature in November issue of One Island magazine on range of adult social care consultations, explaining proposals and detailing how to take part
	Internal
	Vine message Thursday 14 October with link signposting staff to consultation document (mirrored by health partners in Mail2U
	Bulletin message Thursday 14 October with link for members/parish clerks signposting to consultation document
	<ul> <li>Intranet/Extranet – link to consultations page on web flagged to all staff</li> </ul>
	And on-going reminders through both channels.
	Web
	• Create a consultation page under the banner 'have your say' allowing us the ability to promote all council budget consultations and direct the audience to one location. From this, produce a page for Adult Social Care charging and eligibility activity (include content from printed document and an online form for feedback)
	Link on ASC Health & Wellbeing web page on iwight.com
	http://www.iwight.com/living_here/health-and-wellbeing/
	<ul> <li>Link on iwight.com home page</li> </ul>

	Links on voluntary groups websites
	Links on key partner websites
	Links on LDPB website
	FAQs information featured on site and added to throughout the consultation process.
	This needs to be live from close of play Thursday 14 October (ready for launch Friday 15 October)
	All responses received by the council to receive an acknowledgement letter thanking them for their contribution and detailing the process/what happens next.
	Existing service users
	Face to face briefing with care worker visits
	Wider Community, partners etc
	<ul> <li>Open forum/drop in session to answer questions, and to help people who want to take part in the consultation</li> </ul>
	Service staff
	Face to face briefing with director/HoS/Managers – 2 way session
	<ul> <li>Electronic consultation 'pack' with copies of key consultation documents</li> </ul>
	Media (local)
	Face-face briefing to explain the proposal in depth and the consultation process (proposed as part of wider adult social care consultation briefing – Wed 13.10 –10-11am)
	Members
	Monthly update in briefing sessions
	Bulletin updates
	Opportunity for feedback via consultation process
	Post consultation
	<ul> <li>Use element of the above channels to communicate feedback along with next steps</li> </ul>
	Communicate final decision
Evaluation	Response rates
	Media coverage
	Consumer comments, complaints
	- I

# Consultation Plan Westminster House 8 October 2010

Project:	Name: Westminster House consultation
Client:	Ian Anderson – Strategic Director :Community services
Consultation	Overall:
objectives	To understand the views of all stakeholders on the proposed changes to the council's respite care service.
	Additionally:
	<ul> <li>To ensure all stakeholders are fully informed about the changes, understand the potential impact for and the rationale behind the proposed changes</li> </ul>
	• To ensure that existing service users understand that the way this service will be paid for in the future is changing (ie that they will be given a personal budget provided they are eligible and will be able to choose how to spend it. Also that they understand therefore the cost implications should they wish to purchase respite care from the council
	<ul> <li>To ensure all stakeholders feel that they have had sufficient opportunity to comment on the changes and that they have been listened to by the council</li> </ul>
	To ensure all stakeholders understand that no change is not an option
Timeline	Preparation w/c 4 October 2010
	<ul> <li>Pre-launch consultations 11 October (People First 7-9pm) plus reference group (14 Oct)</li> </ul>
	Media briefing Wed 13 October
	Launch consultation on 15 October (online and press release)
	Vine/Bulletin/Mail2U 14 October
	Questionnaires distributed from 18 October
	County Press advertisement Friday 22 October
	Consultation period ends on 14 January - 13 weeks
	28 January Cabinet papers published
	8 February Cabinet makes recommendations to Full Council
	<ul> <li>23 February proposals presented to Full Council</li> </ul>
	1 April implement agreed changes
Context	Broad background:
	In accordance with the July budget decisions a number of proposals for a revised approach to adult social care have been investigated and developed. The full year savings would be in the order of £3.6m
	These are also measures that complement the move to personal budgets and the transforming social care agenda: targeting the limited resources we have to supporting those clients with the greatest identified needs, and the most vulnerable.

	· · · · · · · · · · · · · · · · · · ·
	Many of our costs compare unfavourably with other local authorities with spend on older people of £236 per head of population compared to the England average of £187; average spend on home care being £82 per head compared to £64 and a spend on learning disability of £137 per head compared to £113.
	Specific context:
	This proposal would see the relocation of the respite care service currently provided at Westminster House to The Gouldings lower ground floor, in conjunction with re-registering and use of the flat at The Adelaide.
	The Gouldings lower ground floor benefits from a safe and pleasant environment with better facilities which will help the employee team promote independent living as well as facilitate the provision of respite care and support.
	On 14 Septemeber the Council's cabinet recommended to full council that Westminster House should be closed because it was deemed 'not fit for purpose' and its services relocated, along with staff, to the Gouldings at Freshwater and the Adelaide in Ryde. However, in response to a number of representations received, Full Council agreed on the 22 September to a further formal 90-day consultation process taking place with service users and the wider community around this preferred option.
Consultation strategy	<ul> <li>This will form one of three separate consultations within Adult Social Care.</li> <li>Proposed transfer of Westminster House service to The Gouldings and The Adelaide</li> </ul>
	Review of Charging Policy
	<ul><li>Review of Charging Policy</li><li>Proposals to raise care eligibility threshold to "Critical"</li></ul>
	Review of Charging Policy
	<ul> <li>Review of Charging Policy</li> <li>Proposals to raise care eligibility threshold to "Critical"</li> <li>Given that quantifiable, specific views need to be sought from service users (both existing and potential) it is recommended that a questionnaire format is used. An easy read format will need to be used</li> </ul>
	<ul> <li>Review of Charging Policy</li> <li>Proposals to raise care eligibility threshold to "Critical"</li> <li>Given that quantifiable, specific views need to be sought from service users (both existing and potential) it is recommended that a questionnaire format is used. An easy read format will need to be used in order that it is accessible to this audience.</li> <li>However, given the wider interest in this proposal and its perceived impact from family members/carers, Gouldings/Adelaide residents, other members of the community, it is also recommended that a consultation document reflecting the proposals in some detail, is issued</li> </ul>
	<ul> <li>Review of Charging Policy</li> <li>Proposals to raise care eligibility threshold to "Critical"</li> <li>Given that quantifiable, specific views need to be sought from service users (both existing and potential) it is recommended that a questionnaire format is used. An easy read format will need to be used in order that it is accessible to this audience.</li> <li>However, given the wider interest in this proposal and its perceived impact from family members/carers, Gouldings/Adelaide residents, other members of the community, it is also recommended that a consultation document reflecting the proposals in some detail, is issued together with an invitation for written comment or views.</li> <li>Additionally, a parallel staff consultation is required to understand how staff at Westminster House feel about both the proposal and changing work locations. It is recommended that this is approached as a face-face briefing session (potentially in more than one location) with an opportunity for formal feedback on the HR aspects for a period of 30 days. Staff will also have the ability to express their views on the proposal itself as part of the consultation document feedback over the</li> </ul>

	fit for purpose (propose to mail easy read version to People First for comments at their meeting Monday 11 Oct and to wider advisory group by email for the with a view to getting this group together on 14.10)
	Following evaluation, it is also important that the council makes the results accessible to all stakeholders.
Audience	<ul> <li>Primary</li> <li>Service users of WH</li> <li>Potential service users (transition group and some mainland contacts)</li> <li>Carers and families of WH</li> <li>Carers and families of WH</li> <li>Staff of Westminster House</li> <li>The Advocacy Trust</li> <li>Members</li> <li>Learning Disability Partnership Board</li> <li>People First</li> </ul>
	<ul> <li><u>Secondary</u></li> <li>Service users of Gouldings and Adelaide and their family/carers</li> <li>Voluntary groups</li> <li>Staff of Gouldings and Adelaide</li> <li>Wider community</li> <li>Media</li> </ul>
Consultation methodology:	Service users of Westminster House and potential users         Easy read questionnaire asking:         • Views on respite care in general         • Views on the use of their budget         • What's important to them         • Views on the proposal in general         All other external audiences:         Information document with form inviting written responses, asking their views on the proposal in general         Plus face-face briefing sessions in 4 groups:         • Gouldings         • Adelaide         • Community Group (Riverside)         These drop in sessions to take place in week 3 (w/c 25.10) following the consultation launch and billed as informal drop in sessions where these groups can ask questions and seek help in completing the questionnaires (service users existing and potential) or contributing their comments (all other external audiences).
	Staff of Westminster House

Information document with form inviting written responses, asking for their views on the proposal in general
+ face to face briefing/listening session with staff (with formal feedback on HR processes)
Media (local)
Face-face briefing to explain the proposal in depth and the consultation process (proposed as part of wider adult social care consultation briefing – Wed 13.10 –10-11am, embargoed until 15.10)
Members
Monthly update in briefing sessions
Overview and Scrutiny Panel briefing
Adult Social Care, Health & Housing Scrutiny Panel briefing
Bulletin information
Opportunity for feedback via consultation process
Materials and distribution
Easy read questionnaire issued to all current service users with accompanying letter inviting them to complete the questionnaire (and providing link to online version should they wish to complete it in this way).
Printed easy read questionnaires issued to staff at Beaulieu House to distribute to potential service users (transition group). Approx 250 printed (b/w) copies distributed from w/c 18.10
Main consultation document (information and comment form). Content to cover:
<ul> <li>Current situation</li> </ul>
<ul> <li>Why the need to change</li> </ul>
<ul> <li>What the changes are to the policy</li> </ul>
<ul> <li>What the changes mean to you</li> </ul>
<ul> <li>Next steps/time line</li> </ul>
o FAQs
• Feedback form (allowing for written submissions)
Small number of printed copies to be distributed to libraries, help centres, GP surgeries and given to members of the LDPB (50 copies)
Electronic version (PDF) mailed to partner organisations for onward dissemination/communication including police, health, probation, YOT, RCC, LINKS etc
All responses received by the council (with return details) to receive an acknowledgement letter thanking them for their contribution and detailing the process/what happens next.
Relevant health & Social Care staff to receive electronic 'pack' of materials to help them respond to frontline queries. Feedback encouraged to contribute to online FAQs.
encouraged to contribute to online FAQS.

Communications support	Promotion - communications support		
	External		
	<ul> <li>Advert in the County Press (including details on the ways to make your views heard) - part of a full page colour ad covering all three consultation strands and signposting people to how they can get involved (Date – Friday 22 Oct)</li> </ul>		
	<ul> <li>Full media support (eg press release to all local media, follow-up interviews etc – to coincide with online launch Thursday 15 October)</li> </ul>		
	<ul> <li>Feature in November issue of One Island magazine on range of adult social care consultations, explaining proposals and detailing how to take part</li> </ul>		
	Internal		
	<ul> <li>Vine message Thursday 14 October with link signposting staff to consultation document (mirrored by health partners in Mail2U</li> </ul>		
	<ul> <li>Bulletin message Thursday 14 October with link for members/parish clerks signposting to consultation document</li> </ul>		
	<ul> <li>Intranet/Extranet – link to consultations page on web flagged to all staff</li> </ul>		
	And on-going reminders through both channels.		
	Web		
	<ul> <li>Create a consultation page under the banner 'have your say' allowing us the ability to promote all council budget consultations and direct the audience to one location. From this, produce a page for Adult Social Care charging and eligibility activity (include content from printed document and an online form for feedback)</li> </ul>		
	<ul> <li>Link on ASC Health &amp; Wellbeing web page on iwight.com</li> </ul>		
	http://www.iwight.com/living_here/health-and-wellbeing/		
	Link on iwight.com home page		
	<ul> <li>Links on voluntary groups websites</li> </ul>		
	Links on key partner websites		
	Links on LDPB website		
	FAQs information featured on site and added to throughout the consultation process.		
	This needs to be live from close of play Thursday 14 October (ready for launch Friday 15 October)		
Evaluation	Response rates		
	Media coverage		
	Comments, complaints etc		





# Update on the Eligibility, Charging and Westminster House consultations

Throughout the consultation period we followed the strategy agreed with the Consultation Advisory Group to ensure that people are aware of the consultation, know how to get information about the proposals and how to register their views on them. Copies of those strategies are available on request.

The Advisory Group includes representatives from Age Concern IW, Advocacy Trust, Carers UK, Johns Club/Mencap, LiNK together with legal and communications advisors.

# Coverage:

Date	Medium	Description	
15/10/10	Press Release	Launch of major consultations on proposals to change the way it delivers and charges for adult social care services	
15/10/10	Isle of Wight Radio	£3.5m care cuts and a warning of even more to come	
15/10/10	Web article -Isle of Wight Radio online	£3.5m care cuts and a warning of even more to come	
15/10/10	County Press article (paper and online)	£3.5m care cuts needed	
15/10/10	County Press article (paper and online)	Social care looking for £3.5 million cuts	
15/10/10	Web article – Isle of Wight Chronicle	Consultations on social services care changes	
15/10/10	Web article – Ventnor blog	Consultation launched on social services changes	
22/10/10	County Press article (Paper and online)	Campaigner's anger over 'closure' of respite home	
22/10/10	County Press letter	Children who will never grow up	
22/10/10	County Press	Half page advertisement advertising all aspects of the consultation together with arrangements to access documentation and provide feedback	
November	One Island Magazine	Double page spread covering all aspects of the consultation, including arrangements to access documentation and provide feedback	
15/10/10	Vine	Update for staff giving links to the consultation documentation online	
15/10/10	Members Brief	Update for members including links to the online documentation	
Wk of 22/10/10	NHS staff news brief	Summary of the areas of consultation with online contact information	
November	RCC mailing	Summary of the issues being consulted on with information as to online, telephone and postal address for further information and feedback.	
November issue	Carers newsletter	Mention of the consultation process and encouragement to engage/send in views.	
12/11/10	County Press	Invited to Westminster House to view facilities for background	

		information.
17/12/10	Web article - Ventnor Blog	Consultation on Social Services Changes Continues
17/12/10	Web article - Ventnor Blog	John's Club and IW Mencap consultation – re events at Riverside on 18 <sup>th</sup> November
17/12/10	County Press	Promoting involvement in the consultation
18/12/10	Web article – IW Chronicle	Consultation on Social Services Changes Continues
20/12/10	Web article – IW Beacon	Consultation on Social Services Changes Continues
20/12/10	Web article - Ventnor Blog	Lack of response could stifle consultation (Rosenthal letter)
30 & 31/12/10	County Press article (Paper and online)	Have your say on social care cuts
6/1/11	Web article - Ventnor Blog	Adult social care cuts/Westminster house public meeting (updated) – re event on 10 <sup>th</sup> January 2011
12/1/11	Web article - Ventnor Blog	Concern over lack of response to Consultation on Social Care Cuts

# Website:

The analysis of website activity across the entire consultation period is as follows:

784 views of the eligibility & charging pages - average time on the page 1 minute 19 seconds 674 views of the Westminster House pages –average time on the page 1 minute 30 seconds

# Feedback: (total 273)

# Westminster House

# Via Advocacy Trust

- 35 questionnaires
- 18 emails
- 13 letters
- 2 reports
- 1 telephone
- 55 Total

- 105 Service users (inc 102 questionnaires re WH)
  - 44 Family members
  - 26 staff
- 175 Total

# **Eligibility & Charging**

- 19 emails
- 2 letters
- 1 telephone
- 2 reports
- 19 questionnaires
- 43 Total

# Meetings/consultation diary

Date	Venue	Meeting	Outreach
9/9/10		Initial letter from Ian Anderson to all service users advising of the forthcoming discussions around service provision and noting that a period of consultation would follow.	Circa 3,500
15/10/10	Consultation launched online	All service users, carers, families, service providers and residents.	
22/10/10	Newport – County Hall	Consultation Advisory Group meeting (Advocacy Trust, Age Concern IW, Carers UK, LINK, LD Partnership Group/Mencap, legal, HR and communications advisors from IWC)	
27/10/10	Newport – Riverside	Care Managers Briefing	61 staff
NOVEMBER		Item included in information circulated to Northwood & Cowes South residents from Councillor Mazillius	Circa 1,900
4/11/10	Newport	Homecare Provider Forum briefing	25 reps from providers
8/11/10	Westminster House	People First Group – service users (Advocacy Trust facilitating) – discussed proposals and invited back to complete consultation.	14 service users
9/11/10	Westminster House	Staff group briefing	All staff at WH
11/11/10	St Mary's Hospital	NHS Executive Briefing for senior managers	Circa 60 senior managers
11/11/10	Newport	Cllr Roger Mazillius spoke to Newport Older Voices about the consultation	15 people
12/11/10	Osel Enterprises	Advocacy Trust facilitated feedback from service users	3 service users 4 staff
13/11/10	Westminster House	6-8pm Advocacy Trust facilitated workshop for LD service users	7 service users 10 family
17/11/10	The Gouldings	10.30 – 12.30 Advocacy Trust facilitated workshop with Gouldings service users	24 service users 4 family 4 staff
18/11/10	Westminster House	2-4pm Advocacy Trust facilitated workshop for LD service users	3 service users 4 family 5 staff
18/11/10	Riverside	MENCAP facilitated meetings (2 sessions) for LD service users and their families/carers	80 people attended (across users, carers and families)
18/11/10	Newport	Isle of Wight Association of Local Councils (IWALC)	
18/11/10	Cowes	Cllr Roger Mazillius spoke to Cowes Older	10 people

		Voices about the consultation	
21/11/10	Westminster House	11am - 1pm Advocacy Trust facilitated workshop for LD service users	6 service users 9 family 3 staff
22/11/10	The Gouldings	10.30 – 12.30 Advocacy Trust facilitated workshop with Gouldings service users	23 service users 6 family 3 staff
22/11/10	People First	7-9pm meeting of service users of Westminster House.	11 service users 2 staff
22/11/10		Steve Beynon meets with the Local Council representatives	
23/11/10	Medina Centre, Newport	12.30 – 2.30pm Advocacy Trust facilitated workshop for LD service users	10 service users 2 family 2 staff
24/11/10	Riverside	10.00am – 12.00pm Advocacy Trust facilitated workshop for LD service users	5 service users 2 family
25/11/10	The Adelaide	Staff group meeting.	All staff available.
25/11/10	All Saints Church, Ryde	LINk Public meeting (advertised in CP) includes session on proposed changes.	
26/11/10	Medina Centre, Newport	12.30 – 2.30pm Advocacy Trust facilitated workshop for LD service users	5 service users 2 staff
1/12/10	The Adelaide	2-4pm Advocacy Trust facilitated workshop with Adelaide service users	5 service users 5 family
December	Newport	Learning Disability Provider Forum December meeting – presentation from Suzanne Wixey	
10/1/11	Riverside	Voluntary Day Service Group event, all day with introduction by Ian Anderson and workshops to discuss all aspects of the proposals. All welcome to attend – no advance booking required.	140 people in total – service users, carers and provider representives

At 26 January 2011

# **Appendix 12iv**



# Indicative Charges for Adult Social Care services based on the likely full cost of services

To further support an informed decision, Members are advised of the following indicative charges based on current full costs of providing services:

Daycare for older people will range between £30 and £40 per day for externally provided services. The actual cost will depend on the provider and extent of support required.

Daycare provided at The Goudings and The Adelaide currently costs £47 per day.

Charges for homecare and one to one support range between £9.50 and £15 per hour (per carer) depending on the provider.

Meals on Wheels presently costs in the region of £5 per meal to provide.

The cost for in-house council residential respite care is being reviewed to take account of the impact of proposed efficiencies and new income opportunities.

Other organisations change from £350 per week for residential care for older people, depending on the individual level of need of the customer and the provider themselves

Nursing care respite presently costs from £500 per week.

Residential respite for people with learning difficulties, which is provided by external organisations, costs from £430 per week depending on the individual level of need of the customer and the provider costs.