Consultation on proposed changes to the Adult Services Paying for Care Policy: summary of responses

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Executive summary

The Consultation on proposed changes to the Adult Services Paying for Care Policy opened on 15 June 2016 and closed on 26 August 2016. The Consultation sought the views of adult social care users, residents and stakeholders on a number of proposed changes to the way Hampshire County Council charges for adult social care services. Paper copies of the consultation document were posted to 12,000 service users. An online version was made publicly available. The document was made available in alternative formats on request. The questionnaire for responses consisted of six closed questions and a box for comments. Respondents were given the option to answer as many or as few questions as they wished. Some chose not to answer all of the questions. Respondents who used the online version of the questionnaire were invited to email additional comments if they found the 2000 character limit of the comment box too small, and two individuals and one organisation chose to do so.

3,107 people responded to the consultation by completing a questionnaire.

- 1,169 people (40%) described themselves as clients of Hampshire County Council Adult Services.
- 924 (32%) indicated that they were responding on behalf of a client of Hampshire County Council Adult Services.
- 47 were responding as someone who currently receives a second-carer waiver.
- 578 (20%) described themselves as carers.
- 139 (5%) described themselves as Hampshire County Council employees.
- 46 were responding on behalf or an organisation or group.
- 748 provided comments.

General comments

The majority of comments on the proposals overall were on the theme of fairness: many people felt that the proposed changes were unfair and that the social care system of charging on the whole is unfair, particularly for those who have worked hard and been prudent (77 people) or paid tax and National insurance all of their life (46 people). Some commented that they felt that the proposals were discriminating against vulnerable and disabled people (46 people) and that they could impact negatively on quality of life (46 people).

Proposal 1: The cost of a second carer

Over half (52%) of respondents were in favour of charging the total cost of the care provided in new situations where two carers were needed. Over a third of respondents (34%) were against it. Amongst those respondents who answered this question and said they were in receipt of a second-carer waiver (45 people), 24 (53%) were against the proposal and 17 (38%) were in favour.

When given alternative options, the most popular option (33% of respondents) was to charge all clients (those with a new need for two carers and those who currently receive a second-carer waiver) the total cost of care where two carers were needed. The second most popular (31% of respondents) was that the County Council should make budget reductions elsewhere in order to cover the cost of a second carer for all who need one. Only 24% preferred the proposal to only charge clients with a new need for two carers the total cost. The majority (56%, 25 people) of people who are currently in receipt of a second-carer waiver thought that the County Council should make budget reductions from elsewhere in order to continue covering the cost of a second carer for all clients who need one.

The majority of comments on Proposal 1 expressed the view that it was not fair to charge people who became in need of a second carer (49 people), with many saying it is not the fault of clients if they need one. 28 said that it is usually not the service user that needs two carers, but Adult Services or care agency policy to insist on two carers to use equipment for health and safety reasons. They suggest that where it is not the individual who needs or wants two carers, but the organisation, the organisation should pay.

Proposal 2: Financial assessment based on a person's disposable income

Half (50%) of respondents thought the County Council should not take into account 100% of an individual's disposable income. 40% thought the County Council should take into account 100%, and 10% were undecided.

This proposal attracted the most comments. 140 people commented that they thought the County Council should not take into account 100% of a person's disposable income, but continue to allow people the flexibility, choice and financial leeway afforded by taking 95%. It was suggested by 101 people that the way disposable income is worked out is unfair, with too many things not taken into account and/or the amount allowed for general living expenses set too low. People said that if 100% was taken, disabled people would not be able to pay for any enjoyable things that non-disabled people take for granted – they would only have enough money to exist. Many suggested that those working-age people with learning disabilities and physical disabilities who are unable to work would be particularly disadvantaged if 100% of disposable income was taken into account as they would not be able to afford to socialise or get out into the community, and thus could experience greater social isolation and worsening wellbeing. There was also concern that people would experience financial hardship and distress because they would not have a margin to deal with unexpected or unplanned events, such as boiler breakdown and hospital visits.

Proposal 3: Charging clients in Hampshire County Council residential and nursing homes if they are away from the home

The majority (52%) of respondents thought that people should continue to pay their client contribution when they are away from their care home. 37% thought they should not be charged. There was support for charging a reduced rate instead (56 people) and some thought that, whilst it would be fair to charge when people are on holiday, it would be unfair to charge, or charge the full rate, while someone is in hospital.

Proposal 4: Taking rental income into account for Deferred Payment financial assessments

Some people commented that they found this proposal difficult to understand. The majority of respondents (57%) thought that income from letting out property should be taken into account when a person enters into a Deferred Payment Agreement to pay for care home costs. 19% thought it should not be taken into account. 24% said they didn't know. Those who thought income from letting should be taken into account were asked what percentage should be taken into account. Views were fairly evenly split three ways. The most popular answer, chosen by 30% of respondents, was that 100% of the rental income should be taken into account. The next most popular (26%) was that 80-90% should be taken into account, and third most popular (25%) was that less than 80% should be taken into account. Hence, just over half of respondents thought that less than 90% should be taken. 57 people commented that the income taken into account should be only the profit from renting, as renting out a property incurs many costs.

Suggestions for alternative ways of making savings in adult social care

There were a very broad range of suggestions made. Suggestions made by 10 or more people included:

- Cut admin, bureaucracy and red-tape.
- Reduce staffing costs, especially amongst higher paid staff.
- Improve the County Council billing and payments system.
- Stop contracting care to private profit-making companies.
- Cut care for certain groups.
- Involve families more in care.
- Crack down on abuses of the system and fraud.
- Raise council tax to pay for care.
- Protest to or lobby the Government about cuts to the budget or refuse to be complicit in the cuts.

General comments on the consultation process

36 people commented that the consultation document, or parts of it, was difficult to understand.

Background

The Consultation on proposed changes to the Adult Services Paying for Care Policy opened on 15 June 2016 and closed on 26 August 2016. The Consultation sought the views of adult social care users, residents and stakeholders on a number of proposed changes to the way Hampshire County Council charges for adult social care services. The Consultation Team attended ten meetings of user and carer groups around the County to present the consultation proposals and answer questions. The groups included the five Learning Disability Local Implementation Groups, the Learning Disability Partnership Board, the Hampshire Association of Older People's Forums, the Personalisation Expert Panel and two drop-in sessions arranged in partnership with local advocacy organisations. Paper copies of the consultation document were posted to 12,000 service users. An online version was made publicly available. The document was made available in alternative formats on request, alongside help to complete the questionnaire from independent advocates. The questionnaire for responses consisted of six closed questions and a box for comments. Responses received up to 4pm on 30 August were accepted to make allowances for any postal delays.

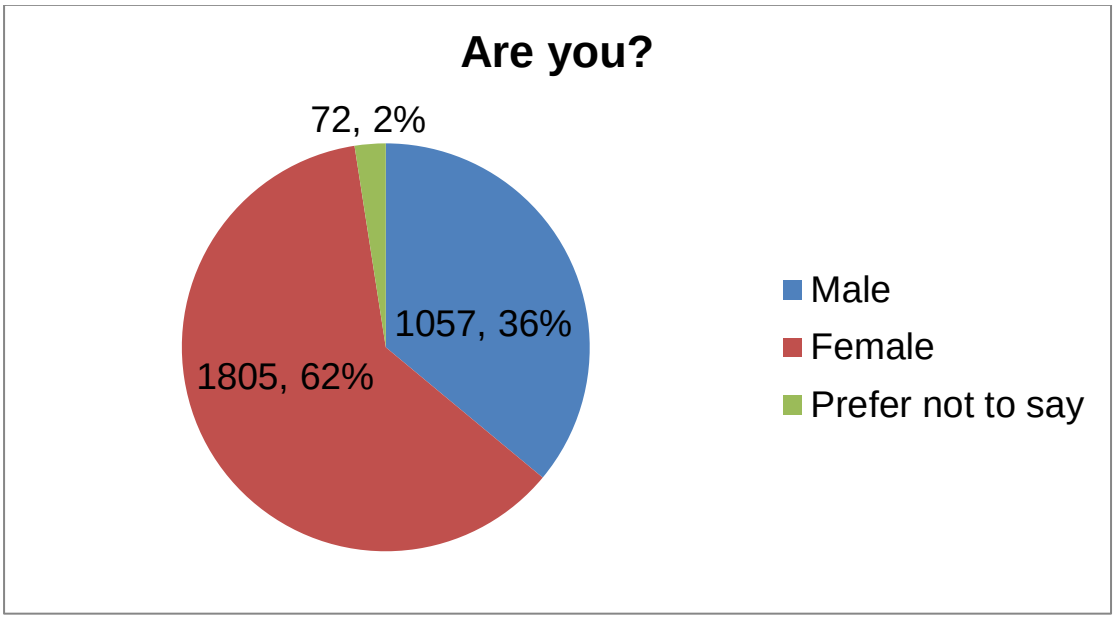
Analysis

All of the consultation responses received were collated and analysed by the Adult Services Research Manager, a trained researcher who works to promote the rights, safety, dignity and wellbeing of service users and carers.[1] People's comments were analysed using 'content analysis'. This involved identifying manifest themes (overt messages) using the inductive method (i.e. themes were drawn by looking at what people said).[2] Where numbers of people who made a particular comment are given, they should be treated with caution – quantifying people's views necessitates a degree of interpretation. Furthermore a few respondents made more than one consultation response (e.g. completed an anonymous questionnaire and wrote a letter), in which case their point might be recorded as the view of more than one respondent. Nonetheless the numbers have been included where they may perhaps usefully give some indication of commonality of feeling amongst respondents. This is important because answers to the 'tick box' questions do not always give the full picture regarding people's views. Where it was clear that a single response (such as one questionnaire) was from a group of people (for example, in responses provided by advocacy groups) the numbers of individuals in the group making a comment have been counted.

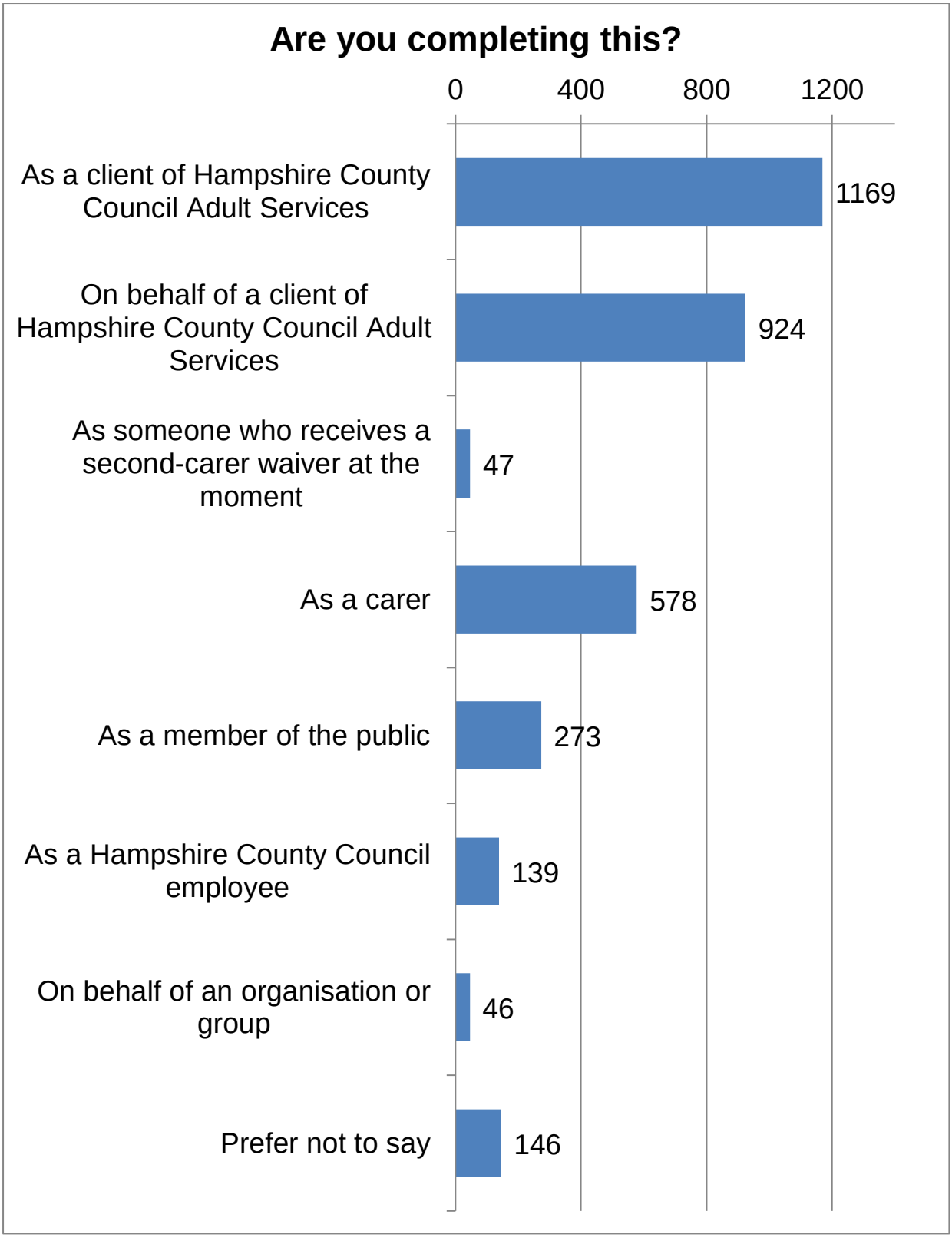
[1] Rachel Dittrich, member of the national Social Care Research Ethics Committee http://www.screc.org.uk/index.asp.
[2] For a brief description of the inductive method, see http://www.socialresearchmethods.net/kb/dedind.php.

Who responded?

3,107 people responded to the consultation by completing a questionnaire. Respondents were given the option to answer as many or as few questions as they wished. Some chose not to answer all of the questions. 784 people provided comments as well as answering the six closed questions. Respondents who used the online version of the questionnaire were invited to email additional comments if they found the 2000 character limit of the comment box too small, and two individuals and one organisation chose to do so. Feedback on the consultation that was given at the meeting with the Personalisation Expert Panel was also submitted to be included as a consultation response.



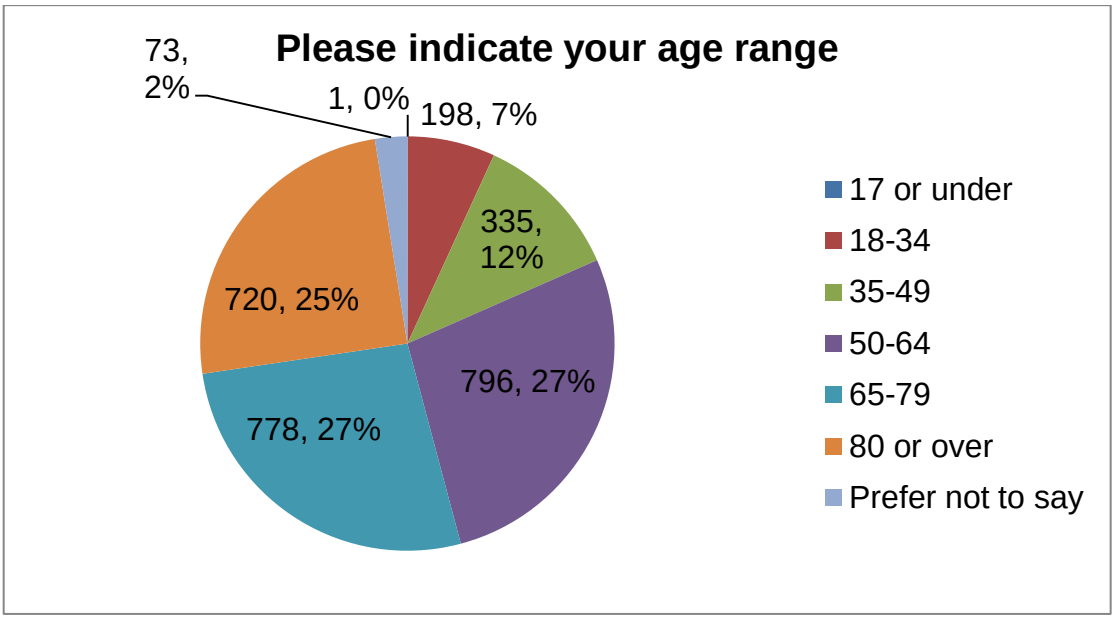
- 2,934 people answered a question about their gender. 1,057 (36%) respondents indicated they were male and 1,805 (62%) indicated they were female.



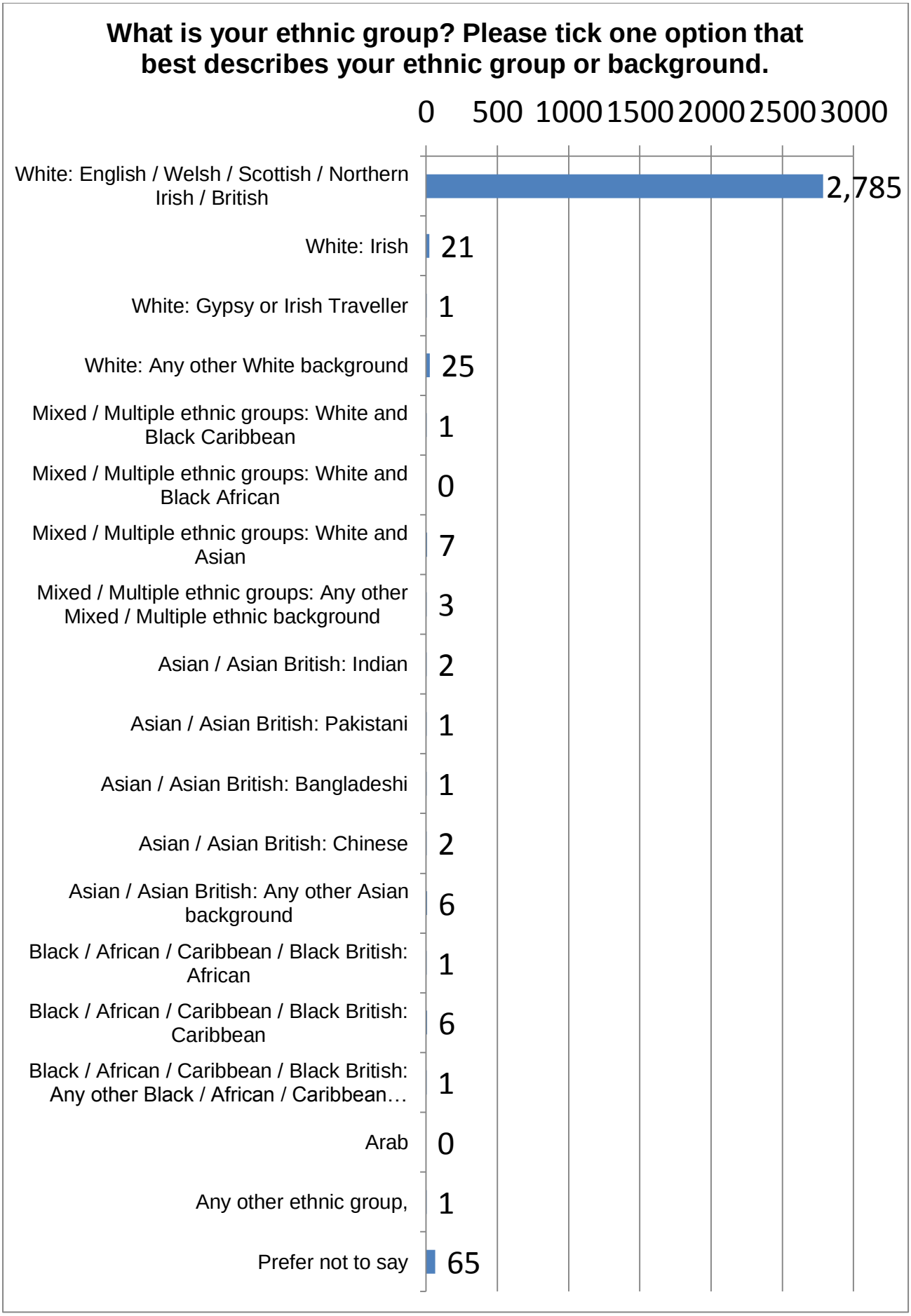
2,913 people answered a question on the capacity in which they were responding. People were able to tick multiple boxes for this question, hence the percentages below do not add up to 100%.

- 1,169 people (40%) described themselves as clients of Hampshire County Council Adult Services.

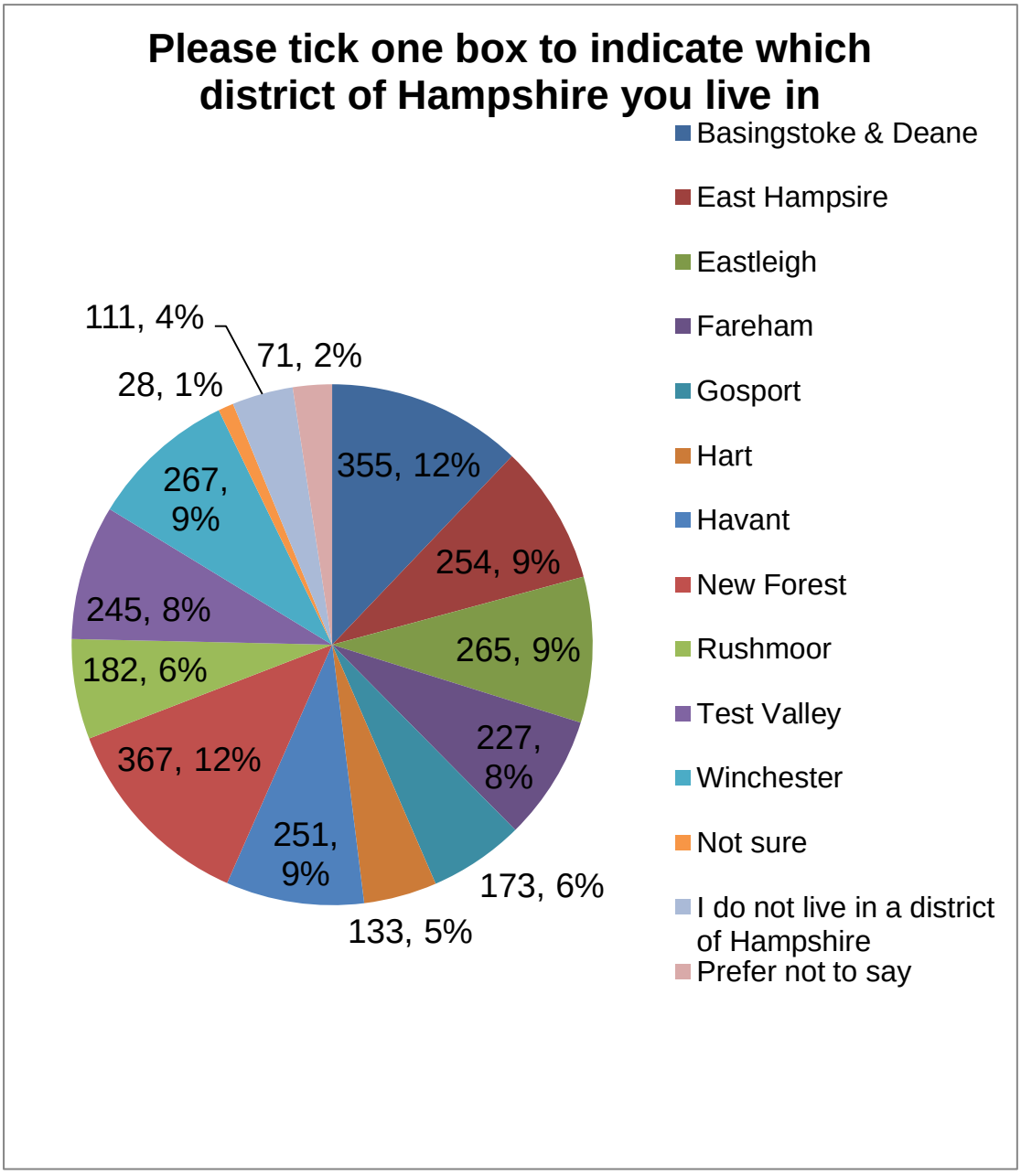
- 924 (32%) indicated that they were responding on behalf of a client of Hampshire County Council Adult Services.
- 47 (2%) were responding as someone who currently receives a second-carer waiver.
- 578 (20%) described themselves as carers.
- 373 (9%) described themselves as members of the public.
- 139 (5%) described themselves as Hampshire County Council employees.
- 46 (2%) indicated that they were responding on behalf of an organisation or group.



2,901 people answered a question about their age. The majority of respondents were over 50 years old, with the biggest number of respondents coming from the 50-64 age group (796 people, 27%).


What is your ethnic group? Please tick one option that best describes your ethnic group or background.
0
500
1000
1500
2000
2500
3000
White: English / Welsh / Scottish / Northern Irish / British
2,785
White: Irish
21
White: Gypsy or Irish Traveller
1
White: Any other White background
25
Mixed / Multiple ethnic groups: White and Black Caribbean
1
Mixed / Multiple ethnic groups: White and Black African
0
Mixed / Multiple ethnic groups: White and Asian
7
Mixed / Multiple ethnic groups: Any other Mixed / Multiple ethnic background
3
Asian / Asian British: Indian
2
Asian / Asian British: Pakistani
1
Asian / Asian British: Bangladeshi
1
Asian / Asian British: Chinese
2
Asian / Asian British: Any other Asian background
6
Black / African / Caribbean / Black British: African
1
Black / African / Caribbean / Black British: Caribbean
6
Black / African / Caribbean / Black British: Any other Black / African / Caribbean…
1
Arab
0
Any other ethnic group,
1
Prefer not to say
65

2,929 people answered a question about their ethnic group. The majority of respondents (95%) described their ethnic group as White English/Welsh/ Scottish/ Northern Irish/ British. 3% (798 respondents) were from a very broad range of other ethnic groups. Four people described themselves as Nepalese.



2929 people answered a question about where they live. People responded from all districts in Hampshire, with the biggest proportion (13%) coming from the New Forest and the smallest (5%) from Hart.

General comments on the proposals overall

The majority of comments on the proposals overall were on the theme of fairness: many people felt that the proposed charges were unfair and that the social care system of charging on the whole is unfair.

"If you are able to contribute towards your care, then you should. But not all of your money or savings. Most people work very hard through their life to own their own home and want to have something to leave their children."

"Many years of working in the financial services sector made me very aware that a large proportion of people have the mentality of 'spend it now and let the government take care of us - after all we pay enough in taxes'. This attitude needs to be addressed to make it a much fairer society."

Many said they thought it was unfair that sensible people who have saved and worked hard to gain assets and property have most of the assets taken for care (77 respondents). There was a strong view that such people should not be stripped of all of their assets, but should get free care. 23 of the 77 expressed the view that the system is unfair to people who have worked hard to acquire property. Some thought it was unfair that people were unable to leave a legacy or property to their children because of the need to pay for care (20). Some felt it was unfair that people who have not paid into the system, for example they cited people on benefits, people with no assets, immigrants and people who spend all their money without making provision for their care get free care (21 respondents). More specific views expressed by a small number of people around loss of assets to pay for care were:

- The threshold of savings to qualify for financial assistance in paying for care is set too low (three people).
- There should be a maximum amount that people will be liable for their care (three people). Two queried the County Council's position on this.
- People should only be charged for the care they use and people who need less should pay less (three people).
- It is unfair that people who do not own a house do not pay as much for care (two people).
- It is unfair that the Government and County Council assumes that those over the threshold for free care get £1 per week for every £500/£250 they have in savings when a financial assessment is made, when in reality people only get about 10p in interest (two people).
- A person's savings should be exempt from the financial assessment (one person).
- Care home fees should be reduced (one).
- Care home fees should be the same for all residents (one).
- It can be difficult to find money for care homes fees when the person has dementia and there are complications around selling the home, and when the property market is slow (one).

- Care homes' accounts should be published publicly and audited every year (one).
- Property should be exempt from the financial assessment (one person).
- It is unfair that people just over the financial limit for state-funded help get no free social care (one person).
- Houses should only have to be sold to pay for care if they are worth over £500,000 (one person).
- The system is unsustainable and there will be a huge increase in demand when the 'rental generation' need care (one).
- Charging policies should be nationwide - there should be no postcode lottery (one person).
- Two people said that it was unfair to have to sell your home to pay for domiciliary care. It should be noted that it is not the case that the value of the home is taken into account when people pay for care at home.

There was a view that people who have paid tax and National Insurance all their lives have paid for care from the state and the state has a duty to provide it for free – it was suggested that they should not have to fight the system for help (46 respondents). It was suggested that most needs are related to illness thus care for them should be provided on the NHS. There was a view that if Continuing Healthcare guidelines were properly applied by the NHS, Hampshire County Council would be left with more money. It was also suggested that the proposals would be a form of taxing people when they had already paid taxes towards the cost of help. A few felt that the more people pay or have paid, the more they should get out of the system (e.g. better treatment, discount on care, or a superior room in a care home).

There was strong concern that the proposals would have a negative impact on clients' and carers' quality of life (46 respondents). People were worried that changing existing clients' circumstances could result in financial hardship (four people) or stress and decline (four people). Two clients said they were upset by the proposals. Twelve people said they or clients in general would not be able to pay any more if their charges increased and some said they may have to decline the service, which could mean they end up in hospital and cost the system more in the long run. Two people said that the proposals would put more burdens on carers. Two people said they were concerned about the potential impact on people already on a low income. There were concerns that some people would be impacted disproportionately by blanket rules and/or arbitrary financial assessment (such as people who lack capacity to work, live independently or make decisions), and it was suggested that having flexibility to take into account individual circumstances rather than fixed figures and percentages was important (seven people). One said change would be difficult for elderly clients and another said changes for existing service users need to be brought in gradually. In addition, 12 said that previous cuts to care had already had a negative impact and not all needs were being met. People also made comments about the impact on clients and carers in relation to Proposals 1 and 2 (see relevant sections below). Two

people who supported the proposals expressed concern about possible impact on people in poverty and one suggested that there should be an appeals procedure in case the policy put people into financial difficulty.

"I realise money is short in Councils but why do the most vulnerable have to pay so much?"

"It's always the same for disabled people on benefits. They take all we have and the rich get richer… I've worked all my life paid taxes etc. and cannot help what I have, it will never go and get worse with time. I would work if I could but I can't. I hate claiming benefits."

Another common viewpoint was that the proposals were discriminating against vulnerable and disabled people (44 respondents). They suggested that disabled and vulnerable people were bearing the brunt of budget cuts and in many cases people are those unable to argue their case against the proposals and unable to get an income to help themselves. Some (12) commented that family carers and disabled people already pay out huge amounts themselves to meet the extra costs of having a disability and keep people out of care homes whilst saving the County Council and Government money, and said it was hence unfair to take more from the service user. Some said that disabled or ill people (seven) or people on very low incomes (seven) should not have to pay for care and/or should not be financially assessed as the Government has already assessed them as receiving insufficient money to live on – to do another assessment is a waste of resources. Four of this group said disabled people should not have to pay for care as they are not ill by choice. Two of this group said that people should not have to pay if they genuinely can't work. Two said people with a medical disability, such as dementia, should be paid for by the NHS.

Nineteen said the proposals were discriminating against older people or that older people are an easy target who instead deserve to get financial help from the state. In contrast four were concerned that the proposals would put burden disproportionately on people with a life long disability and suggested that any adverse financial impact should be aimed instead at higher income older people who have had the opportunity in life to amass income and resources.

"I think it is totally unfair that almost half of the County Council's shortfall is to be met from the Adult Services budget as this affects a huge number of our most vulnerable population."

Several (26) argued that the County Council should not be cutting the adult social care budget, and that it should refuse to be complicit in the Government's cuts. There were questions from three respondents as to why so much of the budget shortfall had been allocated to adult services and why only 2% of the money gained from the council tax rise had been allocated to social care. 10 said that the Government should be putting more money into the local government budget for social care. Another 10 expressed the view that raising contributions to care would work out more expensive to the system in the long run as more people would be unable to afford care in their own homes, would be put off asking for help, or would run out of money more quickly. They suggested this would result in more pressure on GPs, more

rapid carer breakdown, more frequent assessments and more people ending up in hospital and in care homes.

"Adult services need to retain the precious resources and services we have for those most at need, protection of the most vulnerable in society should be our aim whether financial or not. If someone is able to pay for services then this needs to be implemented. We need to protect and sustain our ever diminishing resources to be able to continue to provide a safe and protective service for future generations."

42 people said they felt the proposals are fair in the circumstances. Some had the view that the County Council was taking an approach that would successfully focus limited resources on the most vulnerable and some said the County Council had no choice because of cuts in funds from the Government. Two expressed the view that it was better to make these changes than cut care. Some commented that people who could afford to pay more, should pay more and some said they were happy to pay more if they could afford it. There was a view that it was fair to charge any person who had money in the bank and that this was the cost of living in a caring society.

17 people expressed concern about the fairness of financial assessments in relation to the proposals. There were concerns that assessments are sometimes inconsistent, benefitting some and not others, with sometimes no advice provided on how people can offset their contributions. It was suggested that assessments can be too arbitrary and not person-centred. There were concerns about the accuracy of assessments in relation to people's real expenditure and costs, and queries as to whether people would be left with adequate funds for the cost of living. There were questions around the fairness of certain inclusions and exclusions in financial assessments. Individuals variously thought the costs of household bills and council tax should be taken into account and benefits and attendance allowance should not be included. One person asked why benefits are included as income but earnings from work are not for disabled people. Another queried why his wife's benefits were taken into account in assessment for his care. One said the assessment for care at home is unfair when the main earner in a couple is in a care home and the person still living at home (who may have been dependent on the other person financially) needs care. Many more gave comments about the fairness of assessments specifically in relation to the question on disposable income. These are detailed below in 'Comments on Proposal 2'.

"Often there are staff shortages, which means that carers working are given more calls than usual. This means that often corners are cut and their care is not as standards require. Staff shortages also mean that a number of people (vulnerable) are left completely. This means they are not fed – medicines forgotten – personal care not given, left to sleep in chairs etc. This is a great cause for concern especially if you want to charge more."

"Shame you don't do random checks, when my brother lived at home he had half an hour tea visit as carer was supposed to stay with him whilst he ate as he is at high risk of choking. Many carers put his tea on the table and left. They were there for about 10 minutes but wrote in ledger they were there for the half hour. They also wrote that they had washed and wiped up which they

obviously hadn't, I used to do it. I complained to the agency, nothing was done about it… I told the agency many times about the inaccuracies but it had no effect."

Another point commonly raised was the issue of increasing charges in the context of poor performance by care providers. It was suggested that the County Council should not be trying to make savings from care when the care received is not currently adequate (nine people). Many respondents wrote about problems with domiciliary care agencies, citing poor management and poor care provision (33). Particular issues people mentioned were:

- Carers cutting visits to clients short and working fewer hours than the County Council and clients are paying their agencies for (13).
- Carers turning up late (eight).
- Carers not turning up (seven). One of the seven said they had experienced only one carer turning up when there are supposed to be two, or the second carer coming too late.
- Carers who are poorly trained or do not understand the client's needs (six).
- Lack of regular carers who can get to know the person (six). Two additional people suggested there needs to be a weekly rota with the expected carers' names on it.
- Carers chatting or on their mobile phones when they could be working (e.g. doing some domestic tasks such as tidying) (two).

In addition small numbers of people criticised other services:

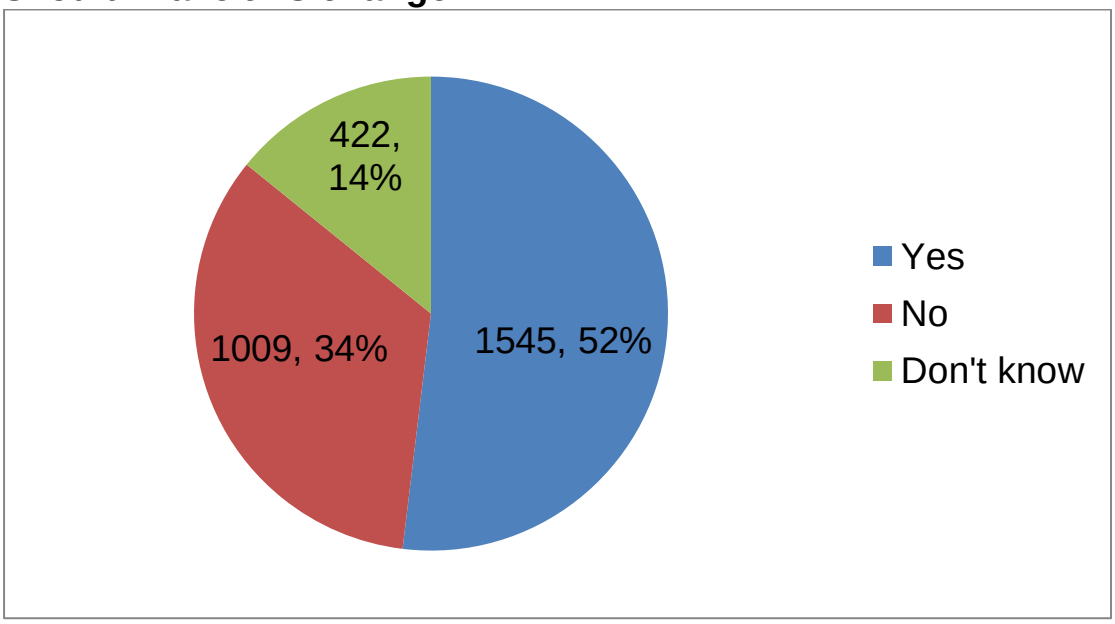
- Slow responses from Adult Services, such as Sensory Services, Continuing Health Care team, Hospital Discharge Team or Community Response Teams when help was sought, assessments needed or there was a change in the client's circumstances (four people).
- Slow provision of adaptations resulting in the client needing to spend large amounts to get work done themselves (three people).
- Poor quality of service in care homes due to understaffing or spending too much time ticking boxes and not enough one-to-one time with residents (three people).
- Hantsdirect telephone service was perceived as a waste of time (two people).
- The Direct Payment rate for obtaining care from an agency is too low to obtain consistent quality care, especially in rural areas (one person).
- Take a Break service care workers are poor and not well trained compared to Day Service staff (one person).
- Very poor food (one person).

There was a view that the County Council should investigate and monitor the reality of care provision (including the mental health service) to a greater level and get more feedback about quality of services (14 people). It was argued

that better quality home care would prevent people from needing to go into care homes (one person). One suggestion was to have a website where clients could rate care agencies. Further comments about the quality of care were provided specifically in relation to Proposals 1 and 2 and are detailed in the relevant sections below.

Proposal 1: The cost of a second carer

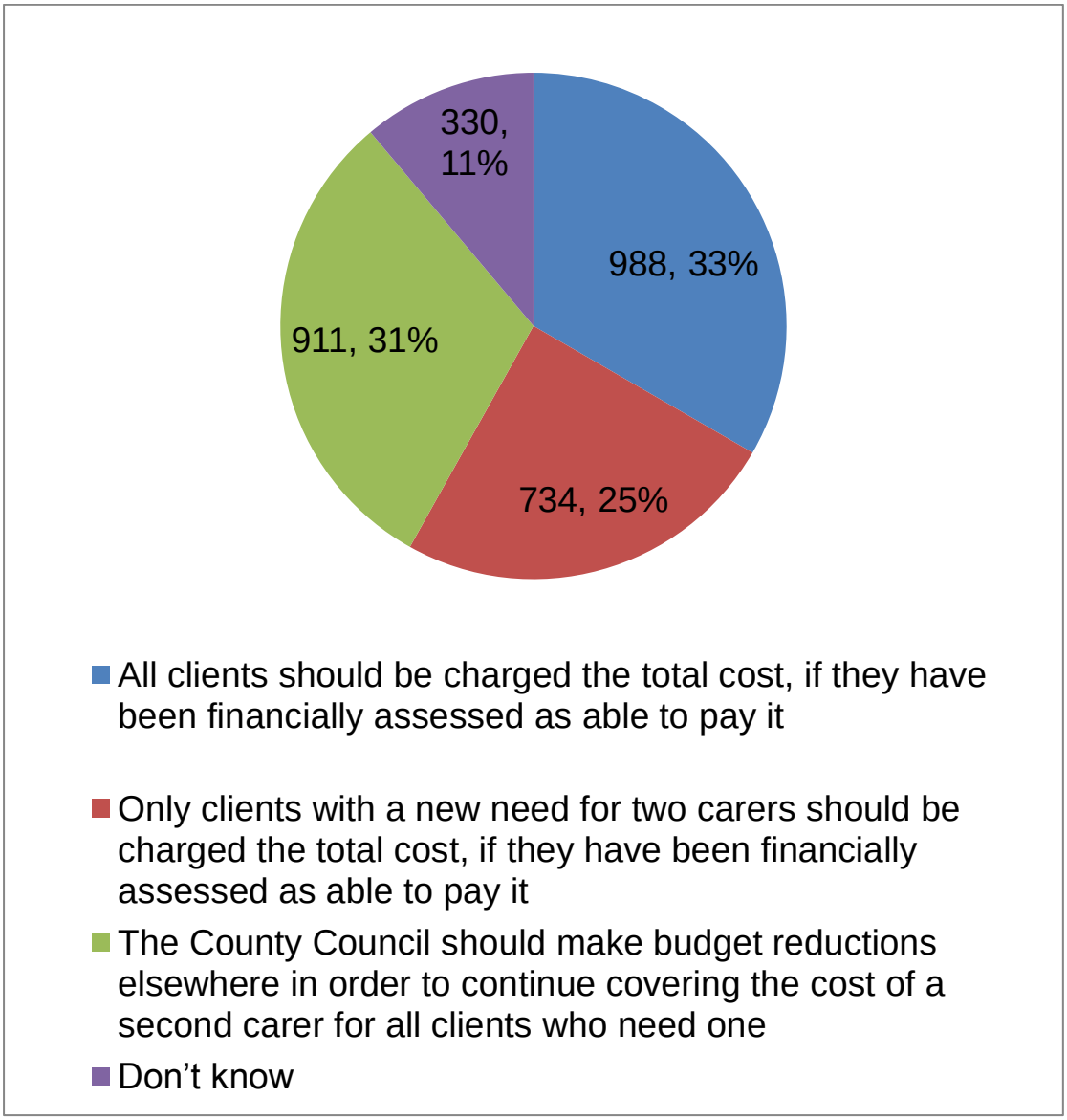
Question 1: The County Council's proposal is that in new situations where people need two carers, it would charge the total cost of the care provided, including the cost of a second carer, in cases where a financial assessment has shown the person can afford the cost. Do you think the County Council should make this change?



2,976 respondents answered this question. Over half (52%) of respondents were in favour of charging the total cost of the care provided in new situations where two carers were needed. Just over a third of respondents (34%) were against it. Amongst those respondents who answered the question and said they were in receipt of a second-carer waiver (45 people), 24 (53%) were against the proposal and 17 (38%) were in favour.

Looking at responses from service users and their representatives only (1,968 people), over half (54%) were in favour and 32% were against the proposal. Looking at responses just from carers (565 people), 51% were in favour of the proposal and 38% were against.

Question 2: There are a number of alternative options around charging for the costs of a second carer. Which of the options below do you think is best?



2,945 people answered this question. The most popular option (33% of respondents) was to charge all clients the total cost. The second most popular (31% of respondents) was that the County Council should make budget reductions elsewhere. Only 25% chose just charging clients with a new need for two carers the total cost.

Looking at answers just from service users and their representatives (1,946 people), 34% were in favour of charging all clients the total cost, 30% thought the County Council should make budget reductions elsewhere and 25% thought only clients with a new need should be charged. Looking at answers from carers alone, 34% thought all clients should be charged the total cost, 33% thought the County Council should make savings elsewhere and 25% thought only clients with a new need should be charged the total cost.

Comments on Proposal 1

"I think that second carer should generally be funded by HCC because it is normally as a result of a risk assessment that a second carer is required. However when carers are not available my husband manages all needs on his own despite not being trained on using hoist equipment."

The majority of comments on this proposal expressed the view that it was not fair to charge people who become in need of a second carer (49 people), with many saying it is not the fault of clients if they need one. 28 of these said that it is usually not the service user that needs two carers, but Adult Services or care agency policy to insist on two carers to use equipment for health and safety reasons: where it is not the individual who needs or wants two carers, but the organisation, the organisation should pay. There was a view that care workers and organisations were too eager to insist on the need for two carers. Four people suggested that agencies sometimes insist on two carers unnecessarily. One gave an example where they were charged for two carers because the additional carer was needed for the previous client the carer visited.

16 people suggested that the County Council should supply equipment/technology that enables only one carer to be needed rather than two. Individuals suggested that better training should be given so that only one carer would be needed, or that staff who are willing to use lifting aids alone should be employed.

14 people said that the proposal was discriminating against the more disabled people or people towards the end of life, hitting them at a time they were most vulnerable. There was concern that the proposals would prevent them from participating in their communities and would be pushing them towards subsistence living when they had no means of improving their income. It was suggested that the proposals were immoral and could be illegal under the Equalities Act in relation to this group.

Seven people raised concerns about what would happen if people were unable to pay or refused to pay for a second carer, and it was suggested that it would be cheaper for the County Council to pay for a second carer rather than risk carer breakdown, hospitalisation or people having to go into care homes. Four said it was unfair to ask people to pay the full cost of a second carer as second carers largely did nothing during a visit and were only needed for brief moments of lifting. Four suggested that if people needed two carers, the NHS should fund the cost as they must be very ill and if they were in a nursing home the free nursing element would cover it. Additional comments from individuals were:

- The care quality is poor and carers do not come for the amount of time they are paid for, so it would be wrong to charge 100% of the cost of two.
- If people need two carers they should get more attendance allowance.

- If people need two carers they could probably be cared for better in a care home.
- If people get charged for two carers, the cost would be similar to being in a care home, so it would defeat the object of keeping people in their own homes.
- For someone who is just above the financial threshold for state-funded help and whose spouse/partner is in a care home, charging for two carers could mean they have less money to live on than people who have state-funded care as it would be on top of the cost of running a home, financially supporting the person in the care home, the cost of visiting them, etc.
- If people are charged for two carers, their own money will run down quicker and the sooner the County Council will have to financially support them.

23 people said they thought both people with a new need and people with an existing need for a second carer should be charged the cost. 12 of the 23 argued that it would be unfair and discriminatory to have a two-tier system favouring those who already have a waiver. It was suggested that the proposal to retain the waiver for that group and charge those with a new need would mean people who can afford the charge don't pay and people who are in hardship do pay. It was argued that the time at which the need for two carers arose should be irrelevant and the extra money gained by charging service users with an existing need would go a long way towards achieving savings needed. Two pointed out that it is a fact that some needs generate more costs than others, and as the need for a second carer is no different to any other need, it should be charged for. Two stated that Hampshire is the only county that has a waiver, and with it currently costing £1.5 million for under 200 service users this was difficult to justify. Four of the 23 suggested that for those who currently get a waiver, the charge could be increased over a couple of years.

Two suggested that neither people with a new nor an existing need should be charged the full cost, but both should be charged a staggered fee or percentage based on the income of individuals. One person said it was ok to charge all who need it, as long as people would be left with enough money to cover the cost of living adequately.

11 people commented that people with a new need should be charged if they could afford it. This meant different things to different people. Two of the nine said the really well off should pay and three said they should only pay if they have enough money left for adequate living costs. One of the nine suggested it might be too distressing for existing clients if they had to pay. One said they already paid for two carers anyway and had never been told about the waiver.

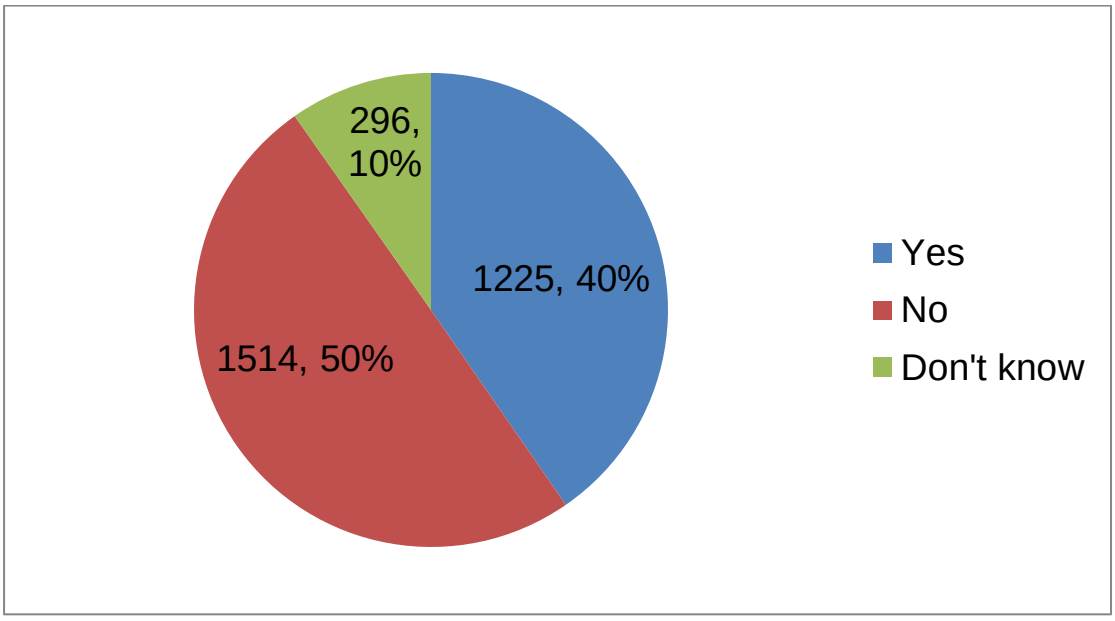
Six people suggested that new clients should be charged only a percentage of the cost, with four of the six suggesting half the cost should be charged.

Other comments made by individuals were:

- If current clients who get a waiver were charged, the change could cost more to implement than it would save.
- New clients should be charged if they have a short term need for two carers, but not if they have a long term need.
- Charge people for a second carer only if they have a higher threshold of assets.
- The County Council could apply for Government funding so they could keep the waiver.
- How would people pay for a second carer if 100% of their disposable income had gone to pay for the first carer?

Proposal 2: Financial assessment based on a person's disposable income

Question 3: Do you think that the County Council should take into account 100 per cent of an individual's disposable income when calculating how much they should pay towards their non-residential care?



3,035 people answered this question. Half (50%) of respondents thought the County Council should not take into account 100% of an individual's disposable income. 40% thought the County Council should take into account 100% and 10% said they did not know what the County Council should do. Looking at answers from just service users and their representatives, 50% thought the County Council should not take into account 100% of an individual's disposable income and 41% thought they should. Looking at

answers just from carers, 51% thought the County Council should not take into account 100% and 42% thought the County Council should.

Comments on Proposal 2

The majority of comments in response to the consultation concerned Proposal 2. 140 people commented that they thought the County Council should not take into account 100% of a person's disposable income, but continue to allow people the flexibility, privacy or discretion, choice and financial leeway afforded by taking 95%.

"Charging using 100% of a person's disposable income rather than 95% has the potential to remove any possibility of doing anything other than existing. Prisoners get better treatment."

"By taking 100% of a person's disposable income you are in fact saying that this person cannot have any social life, cannot buy any birthday presents, cannot visit relatives or do things that others may take for granted. This is grossly unfair and it makes it look like you believe disabled people are second class citizens who can stay at home and not get in the way of the rest of Hampshire."

"As a young disabled person I feel that if 100% of disposable income were taken into account quality of life is removed."

"I work with people who have learning disabilities, they are already paying client contributions and we have found that there is an expectation now that we provide all activities at nil cost as carers assume they are paying for this already. Service users are not having the income to attend outside activities therefore restricting their day time occupation to in-house activities. Which goes against Hampshire County Council philosophy."

"I won't be able to go out as much with my friends. I don't think they should look at all of my money, not all of it, it's private, it's not fair. I might not be able to go to all of my clubs to see friends meaning I will be at home more and not mixing as much. That wouldn't do people a lot of good. We won't be left with anything."

"Some of my friends will find it hard as they won't be able to afford drinks or dial a ride to evening outings."

"Are luxuries such as alcohol or cigars for example to be out of reach of the elderly needing care? If all extravagancies are prohibited, the elderly needing care should just as well be in prison."

"If I do not have some money I cannot pay for taxi to take me to my clubs – buses do not run in evening."

101 of the 140 said that the way disposable income is worked out is unfair, with too many things not taken into account and/or the amount allowed for general living expenses set too low. People said that if 100% was taken, disabled people would not be able to pay for any enjoyable things that non-disabled people take for granted - they would only have enough money to exist. Some of the things people said they needed that they could not pay for if 100% of disposable income was taken into account included:

- To have a social life or avoid social isolation by pursuing hobbies, go to clubs, or go to the pub once a month (35 people).
- Travel to combat social isolation, especially in rural areas, for example to go to learning disability day services or socialise (34).
- To pay for activities with support workers outside of the home or learning disability day services, including support to volunteer (28).
- To keep in contact with family/have family visit/go to family occasions (five).
- Haircuts (17).
- To buy something to watch or listen to (e.g. DVDs, CDs, cinema tickets) (14).
- To buy presents, cards and stamps – it was stated by some that disabled people only get £10 towards Christmas presents (16).
- Savings (12).
- Small luxuries such as sweets, newspapers, art or alcohol (10).
- Basics such as healthy food and household supplies (seven).
- To buy reading material, such as newspapers (six).
- To go somewhere new or on holiday (four).
- Toiletries (four).
- Chiropody/podiatrist (four).
- Clothes and shoes (four).
- Cigarettes (three).
- Green garden bags/garden waste collection (three).
- To pay someone to get shopping (two).
- To pay household bills (two).
- Optician (two).
- Dentist (one).
- Food for pets (one).
- Physiotherapy (one).
- Funeral plans (one).
- Life insurance (one).
- Gardening (one).
- Cleaning (one).
- Rent (one).
- Mobile phone (one).
- Mobility scooter and stair lift maintenance and insurance (one).

- Children's school uniform (one).
- Some costs relating to being a Direct Payments employer (one).
- To pay someone to do small jobs that carers will not do or if you have no family or neighbours who will help, for example tidying, washing and ironing, packing shopping away, checking fridge contents (one).
- To pay debts related to an Individual Voluntary Arrangement (IVA) – such debts are currently not taken into account in financial assessment meaning people with IVAs struggle to pay for basics such as food (one).

"The financial assessment takes into account Disability Related Expenditure (DRE) however in my experience each DRE category has a maximum limit which is sometimes less than the actual cost of a DRE. Consequently the financial assessment will calculate that a person has, for example, £50 to contribute to care costs when in reality they may have £20. Therefore the individual will be charged more than they can afford and the person risks being overdrawn/in debt. If the amount of disposable income used in the assessment is raised to 100% then this leaves the individual with even less money to meet their DRE."

"Bills go up not down and our money stays the same, so the more they go up the less we have to live on."

20 of the 101 said that the assessment of disposable income includes set allowances for things needed that did not reflect the reality of current costs. An example provided was that the County Council allowed the cost of incontinence pads per week at £1.83, but the real cost to the client was £12.50. It was pointed out that the Government assessment of what people can live off was created in 2012 and the cost of living has increased since then. Three people said that Disability Related Expenditure was often higher than the maximum amounts allowed for in financial assessment. In addition, one person also said that the financial assessment seemed to be based on gross earnings rather than net earnings, also setting people towards a financial disadvantage.

"Life is not all about ensuring that people have a roof over their heads, food on the table and someone to care for them if they need it. Going out, leisure time and community access should be considered priorities too, and people with learning disabilities should have the same rights to having this as people who are able to choose what job they want, therefore determining their income, and as a result would be able to participate in whatever leisure activities they would want to. There will be other ways to save money but taking it away from those who have no ability to earn their own money is not the right way to go about this."

"If you take 100% of the disposable income of learning disabled people, this will lead to people being isolated and unable to access clubs and social events. It has been proven that in the wider population loneliness and isolation leads to poorer physical and mental health. Apart from the fact that people's lives will become totally devoid of any element of fun, due to the fact

that without any money they will not be able to see friends, visit family or attend any social activities, it will ultimately cost Hampshire County Council (HCC) more as their care needs together with both their physical and mental health needs will increase. I am not sure that leaving people without any disposable income is legal and even it is, it is at best extremely mean spirited and at worst uncaring and cruel – and this is from the very department that is supposed to be looking after the most vulnerable people in our society. People with learning disabilities in Hampshire have been hit particularly hard over the last couple of years with day activities and care hours being severely cut but I cannot believe that HCC is now advocating people are left with no money."

74 of the 140 expressed concern that service users and carers could experience financial hardship and increased stress if 100% of disposable income was taken into account. 39 of the 74 suggested that the proposal would cause social isolation and impact on people's wellbeing as it would mean they could not afford to take part in social activities. There was marked concern that people with learning disabilities would be particularly affected and would end up sitting at home all day, with a lack of social life. There was also concern that their routine would be disrupted, which can have a negative impact on people with learning disabilities. 10 of the 74 were concerned that taking 100% of disposable income would impact on people's independence. There was a view that it would undermine people's attempts to meet their own support needs as they would no longer be able to do things such as paying a neighbour petrol money to take them shopping. There was concern that where people lack capacity to make their own decisions, family carers may decide they can no longer afford to go out, and they will become more dependent on health and social care services.

"If paying for care for a family member significantly detracts from the life style of the other family members because of financial restrictions then that needs to be taken into account. A family should not be 'penalised' financially for having a disabled member."

Four said that the potential savings made by the proposal were too small to justify the discomfort and stress that the proposal would bring clients. It was suggested that £420,000 is a small price to pay for giving people a slightly better life than they might get in another county. 14 said the proposal would impact carers as they would struggle to subsidise the client so their basic needs could be met. Ten felt that a closer look needed to be taken at the potential impact of the proposals on people receiving end of life care and Black and Minority Ethnic groups. Two service users said they could not pay any more than they already did. Two said that though 5% of disposable income seemed small, it was a huge difference to people on benefits. Three said it was morally wrong to take everything people have. Three expressed the view that it was greedy for the County Council to take everything, when unpaid carers save the County Council money. One said it was a tax on tax that had already been paid. Another said that the proposal may be contrary to statutory guidance that says people have a right to retain a proportion of their income.

"Regarding the % of disposable income taken into account for domiciliary care charges, my main concern is the ability of a service user who owns their own house to pay for maintenance and repairs. This could mean very difficult choices for freeholders about whether they carry out repairs or not. My father lives in a leasehold flat and this year has been asked to make payment of over £2,200, over and above his usual maintenance fees, to meet additional building repair costs. He has also spent a considerable amount to make his home more comfortable and safer as his care needs have increased. This has had an impact on his savings and ultimately will mean that he needs to ask for help from Adult Services earlier than he might otherwise (he is using privately funded domiciliary care at the moment). Once his savings are depleted to the level where he can ask for help from Adult Services, he may find his maintenance and repair costs ever more difficult to sustain."

17 of the 140 said that the County Council should not take 100% of a person's disposable income because people need a margin for sudden emergencies and unplanned events, for example house repairs, boiler breakdown, broken white goods, and having to travel to hospital. Another five said people need a margin because costs of living fluctuate. A further eight said that people need a margin for home and vehicle maintenance.

"The money taken from [name] I believe for his costs are unfair and too much. He does not have enough funds left for clothes, toiletries, footwear, haircuts, dentist and optical treatment and he has to pay a monthly funeral bond and other incidentals! His costs have gone up this April and above his two pensions rise."

22 people said that the current policy of taking into account 95% of disposable income was taking too much from people already and that people cannot currently afford things they need such as haircuts, underwear, toiletries, something to read, fixing the washing machine and replacing worn out furniture. Some mentioned that family members already have to give them money so they can afford essentials such as toiletries and clothes. Six of the 22 said that the cost of living was going up but income such as pensions are not keeping up, so disposable income has to go further than it used to. One person explained that people were already disadvantaged financially if they wanted to live independently, with the cost of private rental in the New Forest exceeding housing benefit and the wait for a Council flat currently eight years.

17 people commented that the proposal would affect different groups in different ways. It was suggested that a different approach should be taken to those not in work and younger disabled people who are working: earnings from work are not included in the financial assessment – thus they have more money to spend than people who don't work. However one person said it was important that people who have life long care needs who are working should not lose all the money they earn to care costs – just because they can pay more doesn't mean they should pay more. 13 of the 17 argued that working age people with disabilities who do not have a job would experience a disproportionate impact, with access to a social life taken away. It was also suggested that people who are only just eligible to pay would be badly

affected, and people with different disabilities would be affected in different ways, as although Personal Independence Payment is supposed to be adjusted according to how much disability affects a person's life, one respondent said, it is not very accurate. In addition, 14 people expressed concern that people with learning disabilities in particular would have their opportunities for getting out into the community or socialising curtailed if they had to pay 100% of their disposable income.

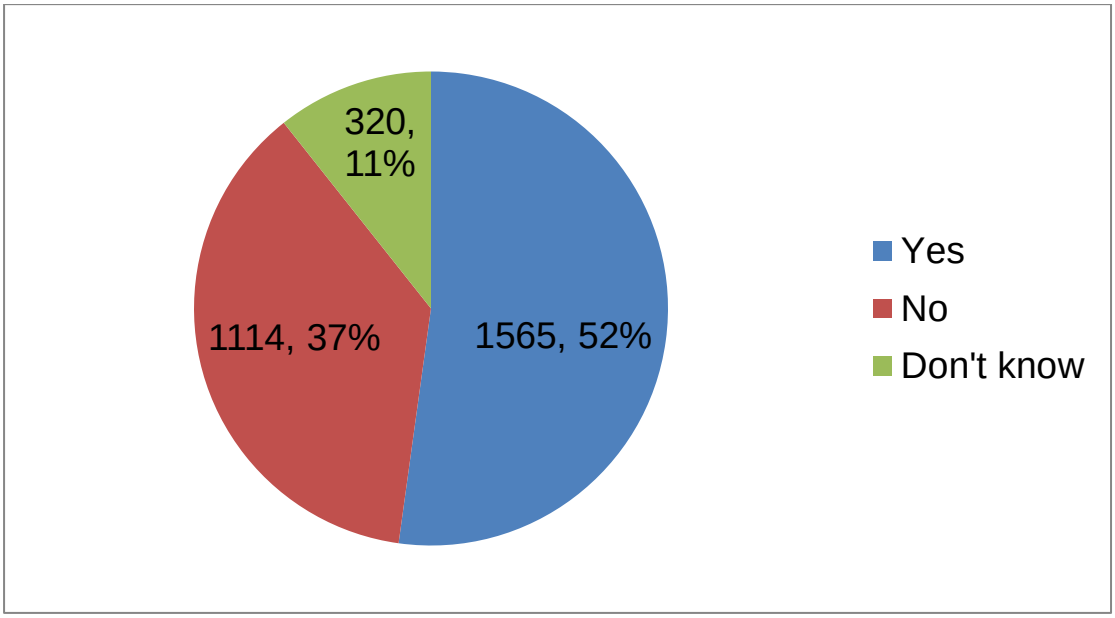
Nine people said it was fair to take into account 100% of an individual's disposable income in the scheme of things. Five of the nine said they or the person they care for would be affected by the proposal but they could pay it if they had to. One of the nine said it was fair but only if all of people's outgoings are allowed for. An additional person said they were for the proposal as long as people received help to get any benefits they are entitled to.

Other comments made by individuals were:

- 97.5% should be taken into account
- 96-96.5% should be taken into account
- 90% or less should be taken into account
- 50% should be taken into account, after essentials have been paid for.
- If 100% is taken, the County Council should apply for external grants to compensate for the 5%.
- Only people who do not own their home should be charged 100%.
- The County Council should only take 100% if people are above a certain income band so that they still have some financial leeway.
- The increase should not exceed the Consumer Price Index.
- There should be a fixed/flat rate of income disregarded rather than a percentage, which would mean that wealthier people are not subsidised.
- The Council should not disregard money intended for holidays except for respite.
- If people need care, they should get more money in benefits.

Proposal 3: Charging clients in Hampshire County Council residential and nursing homes if they are away from the home

Question 4: Do you think that a person living in a Hampshire County Council residential or nursing home should continue to pay their client contribution when they are not at the care home, e.g. in hospital or having a break elsewhere?



2,999 people answered this question. The majority (52%) of respondents thought that people should continue to pay their client contribution when they are away from their care home. 37% thought they should not. Answers from service users and their representatives are no different to the overall picture. Looking at answers just from carers, 53% thought people should continue to pay their client contribution when away from the home and 38% thought they should not.

Comments on Proposal 3

56 people expressed the view that people should be charged a reduced rate when they are not at the care home because they are not using resources such as food, laundry services, supplies, and staff time. It was argued that a 'room only' rate or 'holding fee' would be more appropriate. It was suggested that, if people gave notice of a holiday, staff rotas could be adjusted accordingly. Another suggestion was that the County Council should look at the cost model for Shared Lives, where the charge for service is split between food, rent and other items. 23 of the 56 said people should be charged the usual rate minus the cost of food and preparing it; three said the cost of supplies, such as incontinence pads, should be subtracted from the rate charged; 17 said the cost of care should be subtracted; one said the cost of

rates should be subtracted; eight said the charge should be 50%; five said there should be a 'room only' rate. Four said a reduced rate should apply only if in hospital, one suggesting charging 25% and another half price for the first two weeks. 11 people stated that being in hospital affects income – attendance allowance and pension credit may be stopped or reduced by the Government when a person has a long stay in hospital and the state pension is taken away after eight weeks. Thus if the proposal was to be implemented, people could be significantly financially disadvantaged unless the charge was a reduced one. Two of the 11 said that, due to the complexity of the effect of hospital stays on income, the policy may cost more in administration than it saves. Another person suggested giving all residents two weeks free per year to account for time on holiday, in hospital or otherwise absent. One said people should only be charged 'what they can afford'.

"I would like to answer yes for when you go away on holiday but no when going into hospital. Aren't benefits taken away when you are going into hospital? If so, to pay for a room when you have less money is a double whammy."

"Anyone in a care home that has to go to hospital shouldn't have to continue paying if they are in hospital especially elderly people as they have contributed NI contributions all their life."

42 people commented that they felt time in hospital should be treated differently to time on holiday, saying that going on holiday is a choice but going into hospital is not. 28 of the 42 said they thought that people should not be charged when in hospital because they are likely to have paid National Insurance for a long time and/or it would be like penalising people for being ill. One said they thought people should only be charged care home fees when in hospital if they are in hospital as the result of self harm. As has been mentioned above, 11 people commented upon how long stays in hospital affect people's income. Three people added that it is important to bear in mind that people may have additional expenses when in hospital, with some people, such as people with dementia and people with complex needs who live in residential care, needing to pay extra for support from care workers when in hospital to ensure they are fed properly, bring them clothes, etc. Three pointed out time in hospital is often protracted due to delayed discharge, as a result of Adult Services and the NHS failing to agree who will pay for care costs relating to increased need. One said that Adult Services need to liaise early on about the likelihood of people returning so that their room can be retained or given up if appropriate and ensure that money is not wasted.

"I do feel that clients should pay for their bed in a care home even when they are away in hospital as the room is unable to be allocated to others and the care home has costs that the person should be paying for even when they are not there."

Six people said they were in favour of the proposal to charge because they felt that the County Council should not treat clients differently to those in private homes. Two said it was important to charge both new clients and

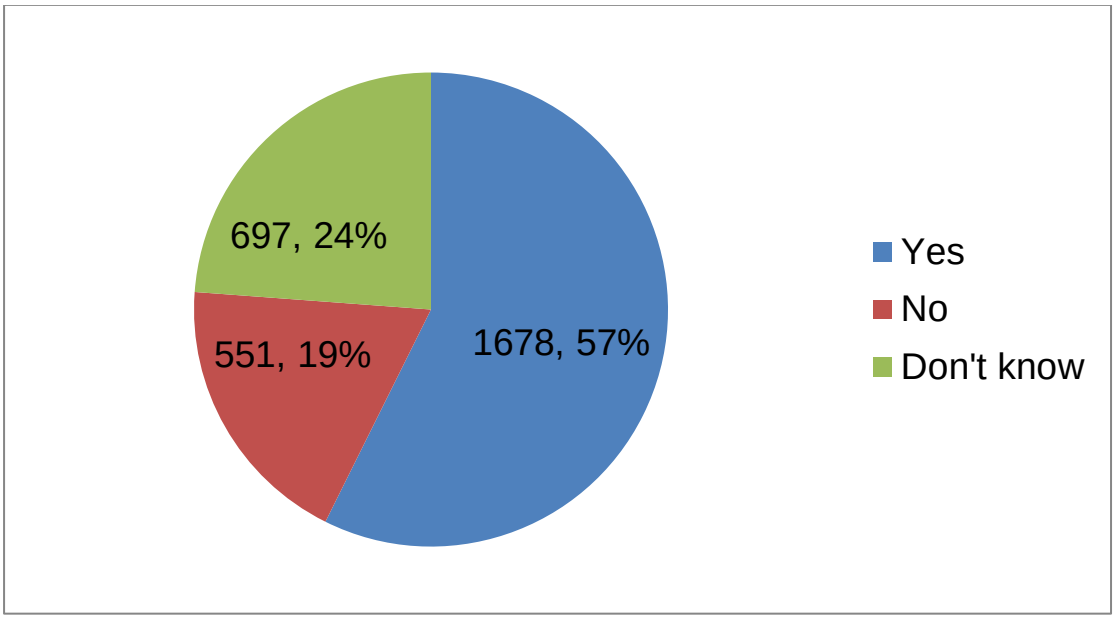
existing clients to make things fair. Nine said they were in favour of the proposal because people would still need their room when they came back and as the room is reserved for them, no one else could use it. People pointed out that there are still costs to the home and people who are not resident in care homes still have to pay their rent when they are on holiday or in hospital. 13 said they were in favour of charging when people are on holiday for the same reason, and 11 people said they were in favour of charging when people are in hospital because there are still costs and their room could not be allocated to someone else (for example, because it contains their belongings). Three people said they were for the proposal as they thought that people should pay if they can afford to.

Four people said that clients should not pay regardless of the reason for their absence from the care home. There was a view that it would be unreasonable to charge, for example, because it would cause clients to worry or because people do not get charged hotel fees when they are not at a hotel. Three people said the County Council should not charge, but should use the bed for people who need it, such as for respite. Two people said the County Council should not charge when people are on holiday as they felt everyone should be entitled to a holiday. One said that charging people when they are on holiday may mean that people cannot afford to go on holiday, which would be counter-productive in terms of cost as the home would need to keep a room empty for people to go into when their own room needs deep cleaning or maintenance. One said that the County Council should pay less to the care home if the client is not there, and then there would be no need for a client contribution. One said the policy on payment should differ depending on whether someone is paying for the care home with money out of the value of their own home or not.

Three people said that charging already occurs when people are in hospital - one of the three cited people being charged in other counties and one said that the County Council continued to charge them when they were in hospital.

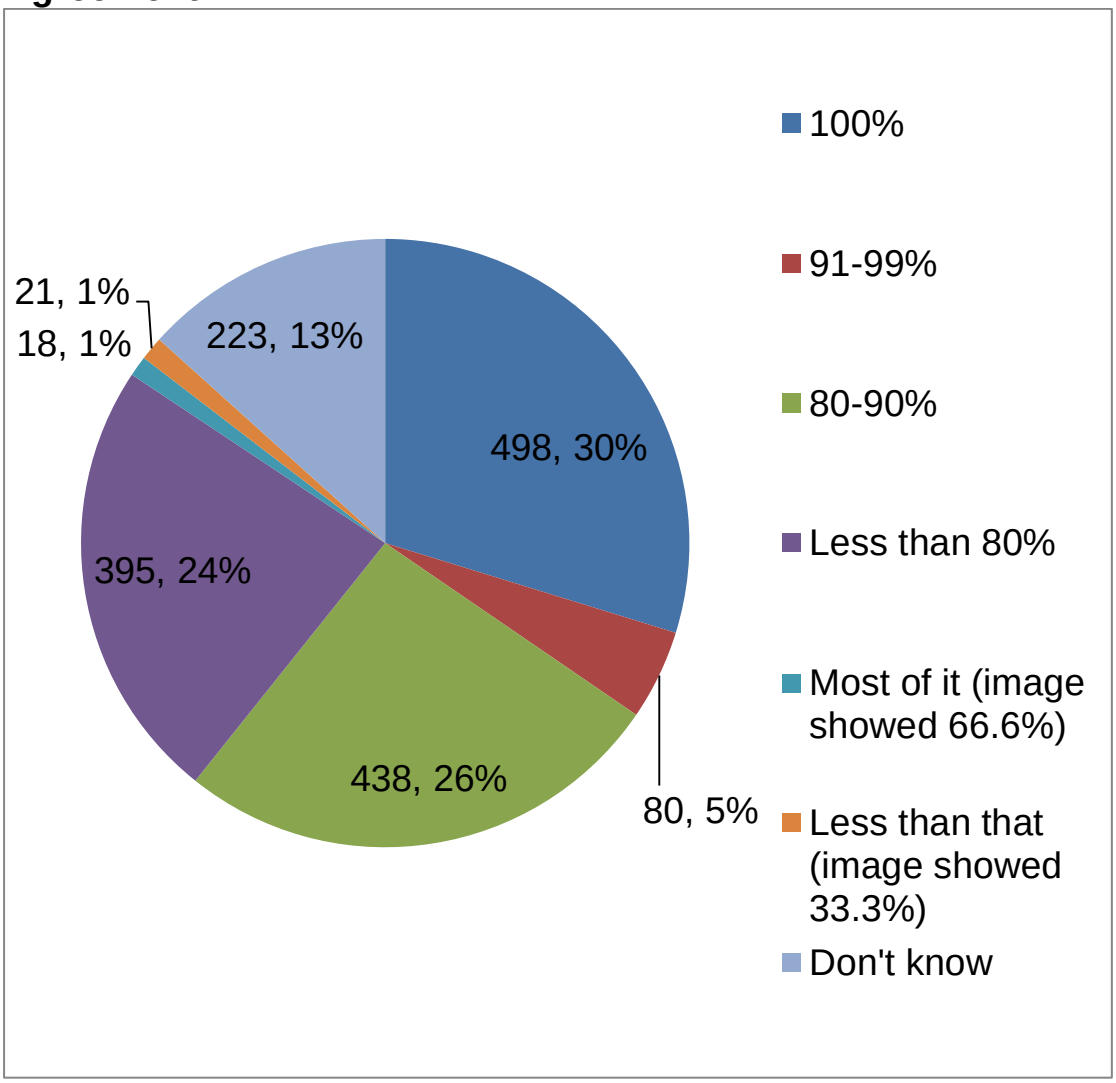
Proposal 4: Taking rental income into account for Deferred Payment financial assessments

Question 5: Do you think that when an individual enters into a Deferred Payment Agreement to pay for care home costs, the County Council should take into account income obtained if they choose to let out their property (this would mean that a client would pay more in their weekly client contribution towards their care, and there would be less debt and interest to repay when their property was sold)?



2,926 people answered this question. The majority of respondents (57%) thought that income from letting out property should be taken into account when a person enters into a Deferred Payment Agreement to pay for care home costs. 19% thought it should not be taken into account. 24% said they did not know. Looking at answers just from service users and their representatives (1,946 people), 57% thought income from letting should be taken into account, 18% thought it should not and 25% said they did not know. Looking at answers from carers alone (561 people), 60% thought income from letting should be taken into account and 19% thought it should not, with 21% saying they did not know.

Question 6: If you answered yes to Question 5, what percentage of any rental income should the County Council take into account for a client with a Deferred Payment Agreement?



Those who thought income from letting should be taken account were asked what percentage should be taken into account. 1,671 people answered this question. On the Easy Read version of the questionnaire, the answer categories to this question were simplified and did not match with the answer categories used on the standard version, hence they are shown separately in the chart above. In the questionnaire, the images for the Easy Read categories “Most of it’ and ‘Less than that’ showed 66.6% and 33.3% respectively. For all of the other questions, the answer categories of the standard and Easy Read versions matched.

Views on this topic were fairly evenly split three ways. The most popular answer, chosen by 30% of respondents, was that 100% of the rental income should be taken in to account. The next most popular (26%) was that 80-90% should be taken into account, and third most popular (24%) was that less than 80% should be taken into account. It is notable that, if we consider the Easy

Read answers 'Most of it' and/or 'Less than that' as meaning less than 90%, just over half of respondents thought that less than 90% should be taken. Amongst the 1,100 service users and their representatives who answered this question, results were very similar to the overall picture except a slightly bigger proportion (25%) thought that less than 80% should be take into account. Looking at answers just from carers (335), 28% thought that 100% should be taken and 54% thought that less than 90% should be taken, with 28% wanting less than 80% to be taken.

Comments on Proposal 4

The most frequent comments on this proposal were that the income taken into account should be net of the costs of renting rather than gross (57 people). People pointed out that renting a property out incurs many costs including maintenance, repairs, income tax, management fees, etc.

There were concerns that considering the income from rent would potentially increase costs in terms of administration for families and the County Council (11 people). 10 of the 11 pointed out that letting brings insecure income – often there will be periods when the building is empty or a tenant is in rent arrears and it could be difficult for the County Council to adjust payments quickly, bringing potential problems with arrears for the client. There was a suggestion that because of this insecurity, a minimal amount of rent should be considered.

Five people commented that the County Council should not automatically take into account the income from rental but allow the client to decide if they want to keep the rent, or use a proportion of it to reduce the debt as and when they choose. It was argued that if the client had not worked hard to gain a property, the County Council would get no money at all, so the client should have the choice. It was also argued that, as being a landlord involves work, the choice should stay with the client. Four people said that if people cannot keep any of the money they have no incentive to let out their property, which would be undesirable when there is a shortage of housing and could mean the property goes neglected and the value of the property goes down. It was suggested by one of the four that it should be the norm to ask people to rent their property out if they go into care. Another person said that as people worked hard to get a property, they should be allowed to keep some of the money to spend and enjoy.

People expressed support for various percentages to be taken into account to give people an incentive to rent their property out, pay for lettings management, provide money for maintenance, allow the client to feel some benefit of having a property and leave a cushion for times when the property is empty or in case the client needs extra money (such as if they need to move care home suddenly due to closure). Eight argued 50% would be fair, two said 50-60%, nine said 70-80% or less than 80%, and four said 80-90%. One said taking 'some' would be ok. One suggested that the income that is not used towards the Deferred Payment should be put in a stand-alone account – the idea being that this is available when maintenance, repairs etc.

are needed and could be isolated so it does not affect people's savings disregard. Four suggested that the percentage of income taken into account should be dependent on how much the rent is – it was suggested that there should be a sliding scale as rent might be more than the cost of residential care per week. One person said that they thought a proportion of rental income should only be taken if the income is above a certain threshold, such as £400 a month. One said the percentage of rental income taken should depend on whether the person has relatives living in the home or not. One said they were for taking 100% if it were means-tested. Another said 100% of rental income should only be taken into account if people do not have living dependents.

13 people argued for the proposal on the basis that income is income and there is no reason to treat income from property any different to any other types of income. Two of the 13 queried the parity of taking into account less than 100% of rental income, when Proposal 2 was in favour of taking 100% of a person's disposable income. There was a view that people in residential and non residential care should be affected by changes in policy equally.

Three supported the proposal on the basis that if rental income is not taken into account Hampshire County Council could be paying for care for a long time before they get any money back towards it, and suggested it was wrong for the County Council to be in debt when someone could afford to pay.

There was some concern about people's ability to rent out property if they were in a care home (five). Two respondents said some older people would need help to rent out their property if they were in a care home. Another two suggested that the County Council could act as landlord and take the rental money to pay for a care home without the need for a deferred payment, reducing the debt burden of the person in care and possible meaning the house can be retained. One person suggested that if the County Council let a client's property out as social housing then it would be fair to let the client who owns the property keep the rental money.

Three people said that the proposal should apply to all people with a Deferred Payment Agreement, not just people who make a new application. They felt it was wrong to have a disparity between 'then and now'.

Other comments on the proposal made by individuals were:

- If the property has been bequeathed to someone they should get to live in the property for life before it goes to the County Council for selling or renting. The person who is intended as the recipient could pay a nominal rent or higher council tax.
- People's rental income should not be taken because it would be charging them twice.
- The proposal would mean people would have to sell their home sooner.

In addition, one person who was against the proposal was disagreeing with the principle of using property values to pay for residential care, rather than objecting to the specific proposal of taking into account rent.

Two people said that the County Council should have given an estimate of the savings that would be made by the proposal. They said it was difficult to see where savings would come from. The proposal prompted a range of questions, with some people explaining that they found it difficult to give a view without further information. Two queried what would happen if there was a mortgage on the property, pointing out that if 100% of the income were taken, the property would have to be sold due to failure to keep up the mortgage payments. One person said it was not made clear if a Deferred Payment Agreement was possible if there is a spouse/partner living in the house. One queried if the rental income mentioned would be net or gross. At least one person mistakenly thought that the proposal was to take into account the value of potential rent, even if the property was not rented out. One queried what would happen if adult children on benefits live at the address and do not pay rent, i.e. would they have to leave the home so it can be sold while the parent was alive?

Suggestions for alternative ways of making savings in adult social care

"I think the social workers I have met are hardworking, but the paperwork and workload makes work - it needs reducing."

Many suggestions focused on ways of working in the County Council. A common response was that admin, bureaucracy and red tape should be cut, with processes such as assessments streamlined (27 people). Some specific suggestions around this included:

- Combining financial assessments.
- Allowing other departments to do financial assessments when they have time.
- More self assessment.
- Have the County Council pay for care direct instead of making Direct Payments.
- Having simpler rules for Direct Payments.
- Don't reassess clients if their needs are unlikely to change.
- Allocate district nurses to local practices.
- Better preparation by social workers before they make a visit.
- County Council departments should work together more (e.g. don't duplicate visits).
- Clients should be able to contact one person/keyworker for everything.

In addition, four people said that it was important for the County Council to ensure that client records are correct in the first place, checked with the client and/or family and up to date. One of the four suggested that all data on the client should be stored under one ID number (this is already the case). There was a view that different teams in Adult Services did not update details nor share information with one another. Two people suggested having more admin staff or staff at the lower levels to reduce workloads.

"My husband was admitted to a nursing home after a spell in a mental unit. He was released under section 117 – full funded. You still send me a bill monthly. This is inefficiency and if it is happening across the board, expensive. I still receive a direct payment under a contract of 18 months ago despite the fact my husband was admitted 6 months ago (numerous calls and letter written have made no difference). It would be good to know your own house is in order before you started cutting budgets."

12 people suggested that there was plenty of scope for efficiency in Hampshire County Council's approach to billing and payments. People were critical of the County Council's billing system and people gave examples where they had been paid Direct Payments for months even though their circumstances had changed, the County Council had paid agencies for calls that were cancelled by the service user weeks in advance, invoices were sent late and much time was wasted on correcting errors. It was suggested that the County Council should only pay domiciliary agencies for work done, e.g. do not pay when they do not turn up, do not pay for 30 minutes if they only do 15 (four people). It was also suggested that the County Council should chase client contribution debts quicker and cancel services quicker when a client dies (e.g. remove Telecare faster). Another comment was that invoices should be made easier to understand and debts should be included as well as credits on them.

"Before you penny pinch, how about you look inwards. Paying staff more than the Prime Minister seems rather obscene, look here for starters."

Several people suggested reducing staffing costs including:

- Cut wages (12). 11 of the 12 specifically said the County Council should cut wages of high earners e.g. grade G and above, or the wages of the Chief Executive and Chief Officers. A further two said the wages of high earners should be frozen. One said the wages of people who go for smoking breaks should be cut.
- Cut staffing (11 people). One said senior posts should be cut. Three said managers should be cut or managements costs should be reduced and qualified people should not be doing tasks that cheaper staff could do. One said cut middle management, one cut commissioners and one cut admin staff.
- Cut councillors' expenses allowances or the cost of councillors (three).
- Cut staff expenses claims (two).

- Cut pensions/cut pensions of high earners (three).

Two people said that too much money has been spent on enhanced voluntary redundancy payments.

"The HCC sub-contract care to private profit-making care companies. The amount the HCC pay per hour is higher than the minimum wage but carers employed by your supplier only get the minimum with no travel time. If you are looking to save money, keep care in house. The savings will come by not paying profitmaking companies.

Another common suggestion was that the County Council should stop subcontracting care to private profit-making care companies (16 people). There were suggestions that domiciliary care and Community Reablement care should be provided in-house and that would reduce care packages, improve quality and result in fewer complaints and safeguarding issues. It was felt that too much money was going into profit for private companies. One person suggested that the County Council should provide more Council-run care homes. Another said that it would be better if care was given by non-profit organisations rather than private profit-making companies. One person said the County Council should provide more group homes for people who need domiciliary care to save on costs of providing care in people's individual homes and stop so much money going to private companies. One said that the County Council should not use agency carers in County Council-run homes at weekends but employ carers instead. Another person said that having better pay and conditions in the County Council would mean there would be no need to use expensive agency carers.

A suggestion around domiciliary care was that carers or agencies should cover small local areas, so that carers look after service users in their own locality instead of travelling across the county. It was suggested that this could save money, improve staff retention and ensure carers are on time (five). One person suggested that the County Council should use self-employed domiciliary carers to cut out the middle man.

21 people said that the County Council should cut care for certain groups or apply more stringent assessment criteria. There was a view that the County Council was trying to do too much for too many people, and some had the view that there are people who don't need the level of care they receive. The suggestions included:

- Cut care for people who haven't paid into the system (nine). There was a view that immigrants and people who have not paid tax and National Insurance for at least 10 years should not get state-funded care.
- Don't give care/money to people who don't need it (six people).
- Some people could manage with less care than they currently get (two people).
- Target cuts at people disabled due to obesity or substance abuse rather than people who are disabled through no fault of their own (one).
- Cut services to affluent older people (one).

- Do not provide state-funded care to people who have property (one).
- Only pay for personal care and cooking/feeding. The County Council should not pay for services such as shopping trips, sitting services and cleaning services (one).

Three people said the County Council should do more frequent reviews or more regular financial assessments to ensure that people are being charged correctly.

Six suggested that people should pay a rate for care that is proportionate to their wealth (for example, having a scaled rating accounting for the age at which someone becomes disabled and how long they have had the opportunity to amass wealth; or meaning a person who has £50,000 in savings should pay more for non-residential care than someone with £25,000). One said people with substantial wealth should not get help from either the NHS or the County Council.

Some of the suggestions were around involving families more in people's care (10 people), such as educating people to take responsibility rather than expecting the state to pay for care, even if they are 'entitled' to state funding, encouraging people to live with family carers, asking families to make a financial contribution if they do not provide any care, and not paying for taxis if parents can take clients to day services themselves. One of the 10 said they thought people should not be able to claim benefits for a member of their family who needs care. Another said if someone has a spouse or partner and is willing and able to contribute to the cost of care for that person, they should be included in the assessment, not just the client (it should be noted that the County Council is only allowed to take into account the resources of the person who needs care and their share of joint resources and no more).

Eight suggested giving more support to family carers to reduce the need for paid care, such as providing three hours of Take a Break per week, providing more training for carers, and providing recognition for carers by giving an extra allowance or reduced rate to service users in recognition of money saved.

"I feel you have cut adult social care as far as it can be cut. You are a conservative council and therefore should be calling for greater funding and refusing to put your most vulnerable residents in further danger, both at home and in care homes."

Other suggestions made by more than one person included:

- Crack down on abuses of the system and fraud (13 people). People said the County Council should crack down on non-payment of council tax and undeclared business rates and recoup money where people in care homes have given resources away to family to get care for free. One of the 13 said the County Council should be aware that family members are selling homes of people with dementia and spending the money instead of the money going on care fees. Some also suggested things out of the remit of the County Council, such as cracking down on sickness benefits and benefits fraud. Another six people said that money for social care should

come out of people's benefits or from cutting the benefits of people who 'cannot be bothered' to work.

- Raise council tax specifically to pay for care (12). One of the 12 said to council tax discounts for older people should be stopped. One said raise council tax just for high earners. Another said it should be raised for people with properties worth £350,000 and over.
- Protest to or lobby the Government about cuts to the budget or refuse to be complicit in the cuts (11).
- Charge for the loan of disability aids and the installation of equipment and adaptations (four people).
- Ask the Government for the money that would have gone to the EU (three).
- Use some of Hampshire County Council's reserves (two).
- Take money from Children's Services instead of Adult Services because having children is a choice (two people). For example, raise a levy depending on how many children people have.
- Rent out or sell-off some of Hampshire County Council's empty buildings (two).
- Stop wasting millions on pointless highway improvements (two).
- Cut down on printing/photocopying (two).
- Have GPs refer people to social care so the people don't delay asking for help and then enter the system with high needs. Help GPs reach self-funders who might become capital depleters (people who go to a high cost care home until their money runs out and they need state help) (two people).
- The Government should not pay people in care homes the Winter Fuel allowance (three people). One also thought that the Government should not pay Winter Fuel allowance to people living abroad.
- The Government should stop spending on foreign aid and spend it on care instead (two people).
- The Government should increase taxes to support care (four people, one of whom specifically said increase taxes on the rich).
- There should be a national insurance-type scheme to pay into to insure against the cost of care (two people).

Motability, the car and scooter scheme, is not connected to the County Council but some respondents may have thought they were connected. Two people suggested that disabled people should not receive new Motability cars if they do not go out to work. Another two said Motability vehicle use should be reviewed more regularly and cars returned if the service user does not directly benefit from them, with money provided for alternative transport, such as Dial-a-Ride, instead.

Additional suggestions made by individuals were as follows:

Income generation

- Wealthy people who receive private care should pay a levy to offset the County Council's shortfall.
- The County Council should charge £100 for the administrative costs of carrying out a financial assessment, if the assessment shows the applicant can afford it. It should be noted that statutory guidance prevents the County Council from doing this.
- The County Council should charge for short-term care when someone leaves hospital. It should be noted that the County Council is not allowed to charge for short term reablement services.
- Sell off assets such as artwork that is not on display.
- Charge County Council staff for parking in County Council car parks.
- Fundraise for Hampshire County Council services. For example, have donation boxes in Hampshire County Council offices and hospitals; fundraise for willed donations.

Efficiency in Adult Services

- Only have management who have worked in social care, not career managers and administration managers.
- The County Council could save money by delivering occupational therapy equipment and aids in one delivery rather than piecemeal.
- Allow unpaid carers to cancel some domiciliary care visits and save up those hours for a day off here and there, thus negating the need for a block of respite in a care home.
- The County Council should assess cases on an individual basis and apply common sense.
- The County Council should review the cost of rental for properties that clients are staying in as some seem to be above the going rate in the area and they increase every year above the annual interest rate.
- Only fund travel if people do not get enough money from their benefits and disability related expenses to combat social isolation or to get to a specific support service.
- Services should be more joined up. For example, three different men came to check the battery in a smoke alarm on three different days.
- There should be a centralised brokerage system to save social workers and care managers calling up agencies and providers to arrange care.
- Turn the lights off in care homes in rooms that are not in use.
- Review contractual arrangements with private care companies.
- Charge private care companies an admin fee to go on a County Council register with ratings from clients.

- Use volunteers more, for example for meal preparation, feeding and helping clients with their paperwork.
- Residents of Hampshire County Council-run care homes could help more with the chores, for example gardening and cooking – they should be asked how money can be saved.
- Cut down on food waste in Hampshire County Council-run care homes.
- Stop wasting nursing supplies, for example do not throw away dressings and medicines that are in sterile unopened packs.
- When clients die, ask the family if the home contents could be donated to a central store run by volunteers so new clients can buy the goods.
- Clarify joint commissioning arrangements with regards to high cost health-related expenses.

Efficiency in the County Council

- The County Council should get cheaper supplies such as pens and have no biscuits at meetings.
- Streamline IT, for example link with other local authorities to save on costs and reduce the time spent updating Hantsnet pages.
- Outsource payroll and HR, for example link up with another local authority.
- Use cheaper empty office buildings instead of current Hampshire County Council buildings.
- Refurbish County Council offices more cheaply.
- Do not keep moving offices around.
- Staff should cut down on meetings and emails.
- Share buildings.
- Cut foreign language services.
- Review blue badges more regularly.
- Issue bus passes for shorter periods for disabled people and people who are unemployed as they are currently issued for three years and people's circumstances often change within that time period.
- Withdraw or suspend bus passes when someone is in a care home.
- Do not use consultants to make Hampshire County Council a unitary authority.
- Fill pot holes better so they do not have to keep being re-filled.
- Stop cutting grass verges in residential and rural areas.
- Do not spend money on statues.

Prevention

- The County Council should do more on healthy eating and exercise, so fewer people will need two carers.
- Fund domestic support or ensure clients have access to it.
- Do outreach to point people towards low level help to keep them in their own homes for longer, for example where to get a gardener, where to buy adaptations.
- Introduce 'rapid response' practitioners who visit people who are assessed as needing low level services and Telecare and signpost them or steer them away from Adult Services.
- Give grants for repairs and maintenance to keep people safe and healthy in their homes for longer.
- Train staff to apply assessment criteria more consistently across client groups so that older people who are socially isolated get the same level of support as people with learning disabilities currently get.
- Financial assessments should do more to point people to other help they might be entitled to, such as benefits.

Other

- Social services and the NHS should be combined in one and made free of charge, with an increase in tax created to enable this.
- People who are self funding could get some recognition, such as a discount off another County Council service.
- Allow Rushmoor Council staff to work from home to save on buildings and services.
- Introduce a charge for permits for future building developments and parking.
- Get rid of mayors and their associated costs.
- Cut two layers out of the four layers of government (parish councils, borough councils, county councils, and parliament).
- Do not have a new leisure centre in Hart.
- Cut tree preservation order control.
- Charge people for IVF.
- Charge people for sex changes.

General comments on the consultation process

36 people commented that they thought the consultation document, or parts of it, was too difficult to understand. There was concern that service users would find it too complicated and too difficult or stressful to answer. There was concern that people with learning disabilities would be unable to comment on

the proposals. As has been discussed under Proposal 4 above, some people found Proposal 4 particularly confusing and 17 of the 36 commented that they did not understand this part of the consultation document. 10 people thought that the use of the word 'carers' in the document was inappropriate and 'paid care workers' should be used, as they felt 'carers' was a term for people who provide unpaid care. Two people who responded to the consultation thought that the word 'carers' in the proposals meant 'unpaid carers' and this led them to being confused about the proposals (for example one thought that they would be charged for having unpaid carers). One person who responded confused Deferred Payments with Direct Payments. Two queried what would happen with the money saved by the proposals. It was not clear to them that the money saved would be going towards a deficit.

Two people said that not enough information was provided about the budget and potential savings to enable them to reply and a further seven said they did not know enough about the issues to answer meaningfully. Two said they thought the consultation document was poor quality, making statements with inadequate evidence to support them and misleading generalisations. Specific opinions given from individuals around difficulties in understanding the document were:

- It has too much jargon.
- It is too long.
- The Easy Read version is inappropriate and above what most people with learning disabilities could understand. The question about care homes is ambiguous. The answer choices use smiley and angry faces and most people with a learning disability would pick smiley faces as they are more pleasing to the eye.
- No proactive assistance was offered to help people with a learning disability respond. It should be noted that two meetings were held with independent advocates where people were assisted to complete the consultation questionnaire and support from advocates to respond to the consultation was also available on request.
- Has it been made deliberately difficult so people won't respond?
- The appendix letter is too difficult to understand and does not clearly explain the proposed changes.

One person did not receive a letter with their own costs in and wondered if this had happened to others. Another person said they were not sure if they would have to pay more.

Three said the proposals were well thought out and presented.

One person criticised the fact that the document did not invite comments on options that the County Council had dismissed. Another criticism was that people completing the document online were not automatically offered a prompt to print out what they had just written. Two people said they wanted to fill the questionnaire in online but couldn't (it should be noted that the questionnaire was available online at all times during the consultation period). The link on the paper copy of the questionnaire sent people to a webpage

rather than the survey itself and this caused one of the two to be confused. The other person said that the “boxes wouldn’t let me put a tick or mark in them” This is likely to suggest an error with their computer as no issues were found with the online questionnaire. Both individuals successfully submitted paper copies of the questionnaire.

One person said the consultation period was too short and criticised that it was being held in ‘the holiday period’. The same person suggested that there were no face-to-face consultations with all interested parties. It should be noted that there were 10 meetings with service-user and carer organisations. The same individual also said they did not trust responses to be treated as confidential and expressed lack of confidence in the decision process and the councillor making the decision. One person said a better survey should have been done at an earlier stage.

12 wrote that they thought the consultation was a waste of money that could have been put towards care or savings. Two of the 12 said that councillors or chief executives could have made the decision without consultation and asking the public would not be useful as they would not understand it. One of the 12 said the consultation document should only have been sent to those who have not been assessed as having a contribution towards care costs. 22 people commented that the proposals do not impact them or the person they care for, or mostly did not apply to them. Six people were unhappy that they or someone they care for received a consultation document, with five saying it should not have been sent because the client has dementia. One person said the consultation was not fair or appropriate because it was an open consultation rather than a consultation with just those who would be affected. Two people said the consultation should have been publicised more and sent directly to more interested parties. One person said staff should be surveyed (it should be noted that staff were encouraged to respond to the consultation).

Three said they were glad to have the opportunity to have a say. Five said that they appreciated that the County Council had a very difficult decision to make and they did not envy it.

Six suggested that the consultation was a tokenistic exercise and were concerned if the proposed changes could be a foregone conclusion. Seven respondents pointed out that the proposals save only a small fraction of the amount that Adult Services needs to save and wondered where the rest of the savings were coming from upon which there would be no consultation.

Other comments received

A number of comments were received that did not directly relate to the consultation questions but touched upon broader issues in care and paying for care. 24 people commented that they were grateful for or happy with the care they received, with three specifically mentioning their gratitude for the Take a Break service and some praising the standard of care from certain domiciliary and residential care services. Four people who did not need to pay for care said if they had to pay for care, they would not be able to afford it. Two said they had cut the amount of care they receive from the County Council to help save Hampshire County Council money, with one saying they

got more help from family instead. Two people said charges for social care came as a shock and the County Council should make it clearer that people are often expected to make a financial contribution, for example by explaining the financial implications of care when people contact them about care, rather than giving people leaflets. Two people said that the County Council should not take 100% of disposable income from people in care homes as people need money for toiletries, clothes, etc., with one suggesting 75% would be ok. This topic was not part of the consultation, but it should be noted that the County Council does already take 100% of disposable income into account for people in care homes.

Four people were concerned that they would have cuts to their care, in particular services from one provider that included residential care services (two people), day services (one), domiciliary care personal assistants (two), work placement support (two) and transport (one). Three people queried their recent finances or care arrangements. Two people said in relation to having two carers, that male carers should not accompany female carers when caring for female patients. Two people said that the County Council's recent fine for a data protection breach indicated that there was too much bad management in the County Council.

Other comments from individuals were:

- It is unfair that, since a client gave her money away to family without realising that the County Council would expect to take it for care home fees, she is treated like she still has the money when she does not.
- The weekly allowances for people in care homes are too small – they do not allow enough money for clothing, hairdressing, chiropody, etc.
- Day services staff are good and do an important job, so should not have had their wages cut.
- People should not have their benefits cut when in hospital as they still have expenses, for example some people will need to pay someone to bring them in food and clothes or look after their assistance dog.
- Many older people in pain would like to choose to die but it is not allowed in the UK.
- Care providers need to know if the County Council will still fund places at day services.

Conclusion

Responses to the four proposals were mixed. Whilst over half of respondents expressed support for Proposal 1, alternative options were favoured, with charging both clients with an existing and new need for two carers being the more popular. The majority of respondents were against Proposal 2, with this proposal attracting the most comments. People expressed concern that this proposal would have a negative impact on vulnerable people and the view that the way disposable income is calculated is unfair. Over half of respondents were in favour of Proposals 3 and 4, though many had caveats and some respondents found Proposal 4 hard to understand.