



DERBY CITY COUNCIL

**COUNCIL CABINET**  
**15 March 2011**

Report of the Strategic Director of Adults  
Health & Housing

# ITEM 11

## **Fair Access to Care Services (FACS) & Fairer Contributions**

### **SUMMARY**

- 1.1 Following full public consultation, this report details the proposals and findings of the consultation on raising the eligibility threshold for access to adult social care services from the Moderate band to Substantial and above. The consultation also gathered views on the proposal to amend the *Fairer Contributions* policy to remove the general subsidy to all adult social care service users amongst other changes.
- 1.2 The majority of people agreed with the consultation statements about greater numbers of older people and people living longer with social care needs, which puts pressure on social care budgets. However, 59% of responders disagreed with raising the eligibility threshold from moderate to substantial to allow a focus on those people with the highest level of need in the city.
- 1.3 The proposal to revise the eligibility threshold is intended to ensure adult social care services can deliver their statutory obligations to people with the highest needs within the resources available. People at moderate risk will be reassessed and if still at moderate risk then supported and given reasonable time to make alternative arrangements.
- 1.4 The fact that the Council has to make significant reductions to its spending to balance the budget is also well accepted.
- 1.5 Three quarters of the country's local authorities operate above the moderate band of eligibility criteria. Regionally the majority of Councils also operate above the moderate level.
- 1.6 The Directorate shall continue to invest in advice, information and carers services but also early intervention and prevention services to ensure that those people not eligible for services do have some alternatives such as health, voluntary and faith sector services. We shall seek to rebalance spending from high support services to early intervention and prevention services wherever and whenever possible. We shall change models and methods of service delivery to realise opportunities.
- 1.7 We are asking people who can afford it, to contribute more towards the cost of their care. This will not affect people on low incomes in receipt of care. 53% of people said that contributions should be based on ability to pay and 38% of people agreed that there should be no subsidy for people with more than £23,250 in savings with an equal proportion of people disagreeing.
- 1.8 Just over half of responders to the questionnaire (51%) agreed that those people with

less than £23,250 in savings should pay up to and no more than £125 per week.

## **RECOMMENDATIONS**

- 2.1 To change the Fair Access to Care Services eligibility threshold from Moderate and above to Substantial and above with effect from 4 April 2011 for all new service users. Existing service users at the moderate eligibility threshold to be reassessed between April and September of 2011.
- 2.2 To review the change in the eligibility threshold 12 months after implementation to assess the actual impact on people with moderate needs.
- 2.3 To change the Fairer Contributions policy to end the provision of a general subsidy to all adult social care service users. Thereby broadening the scope of the charging policy.
- 2.4 To approve the revised maximum charge of £125 per week for people with less than the national capital limit in savings.
- 2.5 To approve the policy of charging people with more than the national capital limit in savings the full cost of their care.
- 2.6 To approve a 3 month transitional protection period for people whose charges are affected by more than £20 per week and whose savings are less than the upper capital limit.
- 2.7 To note that the proposal to charge in full for people who need two carers to attend to their needs is not being adopted. This shall cause a shortfall in the 2011/12 budget of £175k. This shortfall will be found from an increase in targeted savings from raising eligibility threshold.
- 2.8 To approve 11 April 2011 as the effective date for changes to the Fairer Contributions policy. This date coincides with welfare benefit rate changes for 2011/12. Authority is delegated to the Cabinet Member for Adult Social Care & Health and the Strategic Director for Adults, Health & Housing for the timing of commencement of charges in service areas previously excluded from the Fairer Contributions policy.

## **REASONS FOR RECOMMENDATIONS**

- 3.1 The current moderate band of eligibility criteria for adult social care services is unsustainable in the current demographic and economic environment. Considerable savings are required to balance the budget due to funding reductions but also to underpin demand management. Support will be provided to people who remain at moderate risk to make alternative arrangements.
- 3.2 The Fairer Contributions policy changes shall generate additional revenue for the Council and make the policy fairer across service user groups and across similar services.

3.3 The proposal to charge in full people who need two carers would penalise those with the highest level of need. In addition, this proposal was not supported by a significant majority of people who responded to the consultation (70%).

## **Fair Access to Care Services (FACS) & Fairer Contributions**

### **SUPPORTING INFORMATION**

#### **Fair Access to Care Services**

- 4.1 Department of Health guidance on eligibility criteria for adult social care services (Fair Access to Care Services - FACS) states that councils with adult social services responsibilities should ensure that they can provide or commission services to meet eligible needs, subject to their resources. Councils are required to set an eligibility band as described below.
- 4.2 The latest Government guidance on FACS was issued in February of 2010. This guidance sought to provide greater context to eligibility criteria under the national Putting People First transformation programme for adult social care services. The guidance retained the previous eligibility bands and banding descriptors based on the potential risk to loss of independence and well-being for an individual if services are not provided:

FACS Band	High Level Descriptor
Critical	Life is or will be threatened and/or vital health, personal, family, social, domestic and other roles will not be sustained.
Substantial	Abuse or neglect has/may occur and/or there is an inability to carry out the majority of personal, family, social, domestic and other roles
Moderate	There is an inability to carry out several personal, family, social, domestic and other roles.
Low	There is an inability to carry out one or two personal, family, social, domestic and other roles.

- 4.3 Derby City Council has currently set its eligibility threshold at the Moderate band of FACS. That means that anyone living in Derby, who has a moderate risk of loss of independence or well-being, is eligible for adult social care services provided or commissioned by the Council.

#### **Derby City Demographics**

- 4.4 Over the next five years, the forecasts suggest the over 65's population in Derby will increase by 7%. In addition, those aged over 85, whom require the most intensive support services from social care, will increase by 12.5% over the next five years. This is a very significant rise given that 56% of the adult social care

gross budget is spent on older people's services.

- 4.5 In addition to the rise in numbers of older people in the city, the advances in medical procedures and health care mean that younger adults with disabilities are living longer. This is clearly beneficial for individuals and their families. However, this has a knock on effect onto the long term care and support needs of individuals. Derby City adult social care younger adults budgets are coming under increasing pressure due to demographics and other economic factors.

### **Austerity Measures**

- 4.6 The Government has announced plans to significantly reduce local authority grants over the next four year period. The Council has an estimated savings target of £58m over the period and is required to save £27m during 2011/12. This will mean significant challenges for all service areas including adult social care.
- 4.7 In order to contribute to the savings, the adult social care service must transform in line with the requirements of the Putting People First transformation programme. However, budgetary pressures from demographic changes and austerity measures mean the direct service offer to individuals cannot be as broad as it currently stands.
- 4.8 Should the Council decide to move to the substantial eligibility band in the future a rough estimate of the potential savings in a full financial year amount to £1.6m.

### **Current Service Profile.**

- 4.9 The vast majority of service users who require regular care and support are in receipt of residential care, personal care at home, or day services. These services may be directly provided, commissioned or purchased by individuals through direct payments or personal budgets. People requiring residential and nursing services will by their nature fall into the highest bands of the eligibility criteria as described above. Hence they have been omitted from the profile below.
- 4.10 The table below represents the volume of community based care service users falling into the moderate, substantial and critical bands of the FACS eligibility criteria:

	<b>Moderate</b>	<b>Substantial</b>	<b>Critical</b>	<b>TOTAL</b>
<b>Older People</b>	811	722	137	1670
<b>Learning Disability</b>	120	126	152	398
<b>Physical Disability</b>	201	58	40	299
<b>Mental Health</b>	30	210	60	300
<b>TOTAL</b>	<b>1162</b>	<b>1116</b>	<b>389</b>	<b>2667</b>

- 4.11 If the council were to decide to reset the FACS eligibility threshold at substantial risk and above, the previous table identifies that 1162 people could *potentially* lose their services. However, in reality the Council would be required to undertake a reassessment of all these individuals and their needs to determine who was still

eligible for direct service provision under the new criteria.

- 4.12 As eligibility for services is determined at point of initial assessment and recorded at that point in time, it is likely that over time some people's needs may also have become more severe. That would place people in a higher eligibility band at point of reassessment. It is a reasonable assumption that this may apply to approximately 20- 25% of service users in the moderate band, thereby reducing the number actually affected by the threshold change to approximately 870 people. However, it is very difficult to be precise until reassessments are undertaken.

### Other Local Authorities

- 4.13 The picture around the country in terms of eligibility criteria is that 75% of local authorities in England and Wales have set their eligibility criteria level at substantial risk or above. Derby is in the minority of authorities that offers a direct social care service to people at moderate risk. Whilst this is commendable, this situation is not sustainable in the current climate. Regionally the eligibility picture is as follows:

Authority	Social Care Eligibility Threshold
Derbyshire	High Moderate & above from 2011/12
Nottingham	High Moderate & above
Nottinghamshire	Moderate & above
Lincolnshire	Consulting on Substantial & above
Northamptonshire	Substantial & above
Leicester	Substantial & above
Leicestershire	Substantial & above
Rutland	Moderate & above
Stoke	Substantial & above
Staffordshire	Substantial & above

- 4.14 As can be seen from the above table the regional picture already points to the majority of Councils setting their eligibility criteria above the moderate band of eligibility.

### Fairer Contributions

- 4.15 Councils have a discretionary power to charge for non-residential services. "*Fairer Charging*" is the title given by the Government to the guidance it issued in 2003 to assist local authorities in exercising these discretionary powers. These must conform to Department of Health guidance and be fair and reasonable. "*Fairer Contributions*" is further guidance issued in 2009 in relation to personal budgets.
- 4.16 The fairer charging guidelines for local authorities have the following main attributes:
- The financial assessment of a service user's ability to pay charges has regard to the effect of the charge on the service user's disposable income
  - Charges should not reduce service users' income below basic levels of Income Support, plus a margin of 25%
  - A specific assessment of each service user's disability related expenditure is made if it is proposed that disability benefits are taken into account as income

- Councils should provide benefits advice at the time of an assessment of ability to pay charges
- Earnings should be disregarded in assessing ability to pay a charge, as a means of removing a barrier to work for disabled people
- Where a person is receiving a number of services to which '*Fairer Charging*' is being applied, charges for all these services must be brought together for the purpose of a financial assessment.
- With the exception of ordinary daily living costs (e.g. meals), charging for services on a flat rate basis is not allowed.

4.17 The *Fairer Charging* system provides local authorities a framework, whilst not being totally prescriptive, that offers reasonable consistency of treatment for non residential service users across the country. More importantly, the system creates a range of allowances that protects a person's income level so that that it is sufficient to support their essential everyday living needs, after charges are levied.

### **A New System - Personal Budgets**

4.18 As described above Councils have typically set a service user's charge for community based services on the number of units of different types of community care services they have received e.g. home care hours. In the future, people will have the option to take a personal budget in a variety of forms. With those personal budgets that are taken as direct payments as opposed to commissioned services, the individual may purchase different types of community care services, and these services may not correspond with the typical service classifications used by the Council.

4.19 What this necessitates is a move away from a charging system based upon units of service. Recent guidance published by the DH on this subject advises Councils to move to a charging system based upon a proportion of the personal budget allocated to the individual. This would mean that the Council could set a proportion of the personal budget to charge against depending on whether the Council wished to subsidise community based social care services or not. This system would then be underpinned by the *Fairer Charging* guidance on assessing someone's ability to pay the contribution, in the way it operates currently.

### **Subsidising the Cost of Services.**

4.20 The Council's current policy is to subsidise community based services for all who are eligible for such social care services. This applies to all people whether or not they have considerable savings or high weekly income because the charges levied are well below the cost of the service provision.

4.21 The existing charging system provides differing levels of subsidy for day care and home care service users relative to the cost of those services. As an example, the subsidy in the homecare service for an older person is approximately 30% whereas for a day service user it is approximately 70%. In addition, the subsidy levels across different service user groups for the same service are different. E.g. older people day care and learning disabled day care where subsidy levels are approximately 70% and 90% respectively. This situation is inequitable and untenable in the future.

- 4.22 There are other mechanisms in the charging policy such as the maximum charge and the application of the *Fairer Charging* guidance that effectively “subsidises” services for people and protects those on low incomes and those with high support needs.
- 4.23 It is proposed that in any new charging policy for community based services, the subsidy element is removed to make charging equitable for all service users. The charge shall then be entirely based on ability to pay. No subsidy would be offered.
- 4.24 The regional subsidy picture is still emerging and the information available to date is detailed below:

<b>Local Authority</b>	<b>Subsidy Element</b>
Derbyshire	50% of Care Related Benefit from 04/11
Nottingham City	£11.50 per hour of home care
Nottinghamshire County	0%
Leicester City	0%
Leicestershire County	17%
Rutland	10%
Northamptonshire	Banded system of varying subsidy
Lincolnshire	10%
Stoke	20%
Staffordshire	0% Proposed in Consultation

- 4.25 The ending of a general subsidy to all and the move to a personalised system shall mean that new groups of service users shall fall within the scope of the revised *Fairer Contributions* policy. Some of these service users shall be charged for services for the first time.
- 4.26 The Council has also excluded from charging, services provided directly to support carers in their caring role, in recognition of their vital and unpaid contribution. Officers are not recommending to make any change to this policy.
- 4.27 It is also proposed to retain the re-ablement (intensive support & assessment) service as a free of charge service for all eligible service users up to a maximum of 6 weeks. This shall give individuals an opportunity to minimise their ongoing support needs with intensive short term support from the Council. This aspect of the policy shall promote our approach to providing tertiary level prevention services.

### **Maximum Charge Level**

- 4.28 In the current system there is an upper limit on the charge for community based services for people whose savings are below the prescribed capital threshold. This charge was set by the Council at £80 per week. The reason for this is that the Council will not then disproportionately financially burden those individuals receiving the highest levels of service because they have complex needs. i.e. a tax on disability. The maximum charge was originally set at 10 hours of care per week at the subsidised hourly rate charged.



- 4.29 A range of maximum charges are detailed below from neighbouring authorities. Clearly these charges are for 2010/11 and are subject to review by many in the face of austerity measures that face all councils generally.

<b>Local Authority</b>	<b>Max Charge £ p/w 2010/11</b>
Derbyshire	50% of Care Related Benefit
Nottingham City	No Maximum from 1 Jan 2011
Nottinghamshire County	£125
Leicester City	£203
Leicestershire County	£184
Rutland	£170
Northamptonshire	Operate a banding system for people on benefits with no upper limit for people not on benefits...
Lincolnshire	£250
Stoke	£132
Staffordshire	£144

- 4.30 It is proposed that the maximum charge is raised to £125 on the basis that would still be a regionally average figure for a maximum charge amount and still approximately equate to ten hours of care at a non subsidised rate.

### **Transitional Protection**

- 4.31 The change in policy will mean that some people will have to pay more than they currently pay for their existing service due to the removal of the subsidy element. The national guidance requests Councils consider how to protect those people from hardship where they would experience an increase in their contributions. There is no guidance as to how this might be done, or the parameters for applying a transitional arrangement.
- 4.32 It is proposed that where charges for individuals currently in the system increase by more than £20 per week they are offered transitional protection for a period of 3 months except those with savings in excess of £23,250. The estimated cost of the protection for such individuals for 3 months is £250k.

### **Summary of Consultation Responses**

#### **Questionnaire**

- 4.33 A detailed methodology for the consultation and timetable of events held with a range of stakeholders about the FACS and *Fairer Charging* consultation can be found at Appendix 2.
- 4.34 The profile of responders to the questionnaire can be found within Appendix 3. This report sets out a detailed analysis of the findings from the structured questionnaire responses. From approximately 3000 questionnaires that were distributed 943 were returned. This is 31%. A level of return that would be considered statistically valid in terms of drawing conclusions about public views on the matters consulted upon.
- 4.35 The vast majority of people who responded (88%) agreed that the Council should

plan ahead to ensure that it can provide care to people with the highest level of need. In addition, 82% of people recognised that older people and adults with complex conditions are living longer. A smaller percentage of people, 68% agreed that people living longer with social care needs puts extra pressure on social care budgets.

- 4.36 On the fundamental question of whether the Council should stop providing care services to people at moderate risk of loss of independence, 59% of people disagreed with the proposal to move the eligibility threshold to substantial and above. Only 18% of people agreed with the proposal and 19% neither agreed nor disagreed. The remainder, 4% did not know.
- 4.37 A significant majority of people 77% agreed that all people who are categorised as moderate should be reassessed to ensure their eligibility level has not changed. Most people (79%) were in agreement that the Council should provide more preventative services to help people stay independent for longer. The vast majority of people said better Information and advice should be made available and this is discussed further at paragraph 4.45 below.
- 4.38 On the proposed changes to the *Fairer Contributions* policy, 53% of people agreed that the charge should be entirely based on a person's ability to pay, whilst 30% disagreed, with the remaining proportion neither agreeing nor disagreeing or did not know. Additionally, 48% of people who responded said that there should be no subsidy for people who can afford to pay under the *Fairer Charging* rules. 27% of people disagreed with this proposal to remove the subsidy with the remaining proportion of people not expressing a response either way.
- 4.39 On the question of people with more than £23,250 in savings paying the full cost of their care 38% of people agreed with this proposal and 38% (sic) of people did not so public opinion is evenly divided on this issue. On the related question about people with less than £23,250 in savings paying no more than £125 per week, about half of all responders agreed with this proposal (51%). Only 21% of people did not agree with the proposal, with the remainder not expressing a definite view either way.
- 4.40 Consultees were asked whether those people who need two carers to attend to their needs should be charged for the attendance of a second carer. The majority of people disagreed with this proposal (70%). Only 11% of people agreed with this proposal with the remaining 19% undecided. If Cabinet decides not to adopt this proposal then this shall cause a £175k shortfall in the 2011/12 budget. Please see Financial Implications at Appendix 1.
- 4.41 The proportion of people agreeing that some transitional protection should be given to people for whom charges increase by more than £20 per week is 45%. A limited proportion of people, 18% disagreed with this proposal.
- 4.42 The proposal for the re-ablement service up to 6 weeks and carers services remaining free of charge is supported by 63% and 65% of responders respectively.

#### Public Events

- 4.43 Concern was expressed by people about the burden of care for those individuals who no longer qualify for services falling on unpaid carers. This was particularly the

case at the older people event and those organised for learning disabled people's groups.

- 4.44 A significant amount of work has been undertaken with carers and carers groups over the past two years to support carers more effectively in their caring role. The Council recognises the vital role carers play and will continue to support carers effectively to balance their caring role and their personal quality of life. Regular and substantive carers are entitled to an assessment in their own right and the option of respite care for such carers is available. The carers demonstrator site project has created a number of initiatives for carers that shall be mainstreamed and funded into 2011/12.
- 4.45 There was also a lot of emphasis on providing good quality information and advice for people who may no longer be eligible for care services. There are number of access points, not necessarily Council operated, in the city where people can access information and advice in different forms that best suit their needs. Many partner agencies such as Age UK and Disability Direct also offer such services. The Council hosts the "First Contact" scheme which offers information and advice but also refers people to appropriate public services following contact with any one of a number of public and voluntary agencies in the city. There is an information and advice strategy in place and the Council is looking to implement further actions from the strategy during 2011/12.
- 4.46 Another theme emerging from the public events was one of deterioration of people at moderate risk to substantial risk if services are not provided earlier. Whilst it is true that those at moderate level of risk may not be eligible for directly funded adult social care services, they would still be assessed and offered support through information and advice, the provision of equipment and sign posted to services funded through the voluntary and faith sector. The grant aid strategy currently in consultation phase shall seek to align support opportunities for people who may no longer be eligible for direct adult social care provision. The Directorate is seeking to rebalance spend between high support services and early intervention and preventative areas in conjunction with NHS commissioning in the city.
- 4.47 As there are no certainties about the impact of the change to the eligibility threshold the report recommends to Cabinet that a review is undertaken in 12 months time to assess the impact of the eligibility change.
- 4.48 The consistency of application of FACS criteria by Council staff was also raised at a number of the events. In order to support consistent application of the revised criteria, refresher training shall be provided for all assessing staff.
- 4.49 On the *Fairer Contributions* changes, people often commented that £23,250 in savings is too low and we should consider a higher threshold. However, this is the national limit set by central government for support with residential care charges. Any deviation from this figure for community based services would not be fair on people who are required to fund their own residential care in full.
- 4.50 The maximum contribution of £125 per week for people with savings below £23,250 was considered to be too high. It is the officer view that the charging system is not well understood and this view is based on the assumption by many that people with less than the capital limit in savings would all be charged £125 per week, even those on low incomes. This is clearly not the case and people would

contribute up to £125 per week based on their ability to pay. In actual fact approximately half of the people who receive support from social services do not pay anything towards the cost of their care. This proposed change to the *Fairer Contributions* policy will not affect those people. In addition, at £125 the maximum charge being proposed is one of the lowest regionally.

- 4.51 Many people said that social care services should be free at point of delivery as many people have paid their taxes and NI contributions throughout their lives. The current funding system in England, whilst making charging for community based services discretionary for local authorities financially disadvantages those that do not charge. Within the Revenue Support grant allocation to local authorities there is an assumption that local income through charging powers will be maximised. Therefore financially penalising any authority that does not charge. This is why in 2001/12 there will no longer be any Councils in England who do not charge for social care community based services.
- 4.52 There is a national review taking place about how adult social care is funded in England. However, until such a time as a new framework for funding adult social care is developed, agreed and implemented the Council must operate within the current guidelines.
- 4.53 Many people said that the required savings should be found from other areas and the Council should not be making reductions in care services to the vulnerable. The fact of the matter is that many other areas are also facing reductions due to the scale of the savings required and there are no credible alternatives that are available for finding these savings.
- 4.54 The topic about spending money on the Council House refurbishment was raised by several people. It is apparent the public and service users do not understand that the finances being used to fund the Council House project cannot be used to fund on going services. The false perception by the public that the aforementioned is possible has contributed to some of the strength of feeling and input into this consultation exercise, despite the explanations provided on the subject in the media and throughout the consultation on a number of occasions.

## OTHER OPTIONS CONSIDERED

- 5.1 The option of moving to the critical only eligibility threshold has been considered and dismissed as the service user impact would be too great. Consideration has also been given to stay at the moderate eligibility band and move to the higher moderate band. This is unsustainable in the current demographic and economic climate and would not achieve the level of savings required.

**This report has been approved by the following officers:**

Legal Officer	Robin Constable
Financial Officer	Roger Kershaw, Roger Taylor
Human Resources Officer	Rod wood
Service Director(s)	Perveez Sadiq
Other(s)	Ann Webster, Simon Fogell

For more information contact:	Perveez Sadiq, Service Director PPF (Adults, Health & Housing) tel: 716824, Perveez.Sadiq@derby.gov.uk
Background papers	None
List of Appendices	Appendix 1 Implications Appendix 2 Consultation Methodology Appendix 3 Questionnaire Report Appendix 4 Comments from Events Appendix 5 Equalities Impact Assessment FACS Appendix 6 Equalities Impact Assessment Fairer Contributions Appendix 7 Specific Consultation Responses Appendix 8 Responses on FACS & FC through Budget Consultation

<b>IMPLICATIONS</b>
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**Financial**

- 1.1 The assumed financial savings associated with these proposals amount to £2.6m during 2011/12 and 2012/13. These savings are critical to balancing the budget for the Adults, Health & Housing Directorate and the Council overall. The recommendation not to adopt full charging of people who require two carers will lead to a £175k shortfall in identified savings. This shortfall will be found from an increase in targeted savings from raising eligibility thresholds

**Legal**

- 2.1 Under section 47 of the NHS and Community Care Act 1990, Local authorities have a duty to assess individuals with presenting adult social care needs. There is then a duty to provide services for eligible needs. The Council's duty to provide services is set out in the National Assistance Act 1948 and other subsequent legislation.
- 2.2 The requirement to consult the local population on eligibility criteria arises from Fair Access to Care Services – guidance on eligibility criteria for adult social care (2003) and LAC 2002 (13). The council can set an eligibility band based upon the resources available.
- 2.3 According to legal cases, the consultation must
- Be at a time when the proposals are still at a formative stage
  - Give sufficient reasons to enable intelligent consideration and response
  - Provide adequate time for consideration and response
  - Have its outcome “conscientiously taken into account” when the proposals are finalised
- 2.4 Local authorities have the discretionary legislative power to charge for community services under the Health and Social Services and Social Security Adjudications Act 1983. There is guidance on how they should do so, and how they should go about consulting on proposals, in “Fairer Charging Policies for Home Care and other non residential Social Services”, issued by the Department of Health in 2003. In addition, Fairer Contributions guidance in relation to personal budgets was published by the Department of Health in 2009.
- 2.5 The *Fairer Charging* and *Fairer Contributions* guidance provides advice about how to apply charges fairly.

**Personnel**

- 3.1 A number of staff will be required to engage with the reassessment of individuals. In addition, the reduction in service users should lead to a reduced requirement for directly employed service provision staff, contributing to the “one Derby one council” programme.

## **Equalities impact**

- 4.1 A full equalities impact assessment is attached at Appendix 5 and 6. Whilst these policy changes will impact on service users who by their nature are vulnerable the policy changes do not particularly target or disadvantage any single group of people. This was the finding of both equality impact assessments on the changes to the FACS criteria and the *Fairer Contributions* policy.

## **Health & Safety**

- 5.1 No implications arising directly from this report.

## **Carbon Commitment**

- 6.1 No implications arising directly from this report.

## **Value for Money**

- 7.1 The current charging policy subsidises all clients. This is no longer affordable and the proposed increase in charges will raise additional income, leading to a reduction in the net cost of providing services.

## **Corporate objectives and priorities for change**

- 8.1 The report supports the Healthy City objectives.

### Consultation Methodology

- 1.1 The joint consultation on the changes to the FACS and *Fairer Contributions* policy changes was undertaken by the Adults, Health and Housing Directorate (AHH) supported by the Research & Policy Unit in the Chief Executives Directorate. The consultation was authorised by Cabinet on the 23 November 2010.
- 1.2 It is recognized the FACS and *Fairer Contributions* criteria and guidance which is laid down by the Department of Health is complex and requires a certain degree of knowledge to interpret and understand. Supporting information and officer facilitation of events has been provided to assist people to understand what the changes may mean. It is recognized that individuals may not have a clear and consistent understanding of these complex rules, despite the effort expended by the Council in trying to achieve this.
- 1.3 The consultation was a full twelve week consultation. The consultation commenced on the 1st of December 2010 and closed on the 22 February 2011. A structured questionnaire with supporting information was developed and distributed to over three thousand service users (that is all people currently in receipt of a non-residential service from the Council) and carers across the city. There was also an easy read version of the questionnaire and supporting documents for people with learning disabilities and other groups who preferred this. All documents were available in different languages by request. The questionnaire was also made available on the Council's website with supporting information and could be completed on-line.
- 1.4 In order to supplement the findings of the questionnaire the AHH Directorate held a number of public briefing events during the consultation period;

Date	Description	Venue	Attendance	Response Included in Report
16 Dec 2010	Partners Briefing e.g. PCT, Foundation Trusts, Advocacy Organisations.	Council House Council Chamber	5 Separate Orgs sent representatives,	Consultation Information giving and awareness session only.
6 Jan 2011	50+ Forum	Assembly Rooms Darwin Suite	102	Specific comments
24 Jan 2011	Adults, Health & Housing Overview & Scrutiny Meeting as Part of Budget Consultation	Saxon House Ground Floor Meeting Room	6 Members of Scrutiny Commission	No specific recommendations



Date	Description	Venue	Attendance	Response Included in Report
25 Jan 2011	Service users and Carers of People with Learning Dis.	Assembly Rooms Darwin Suite	150	Specific Comments
1 Feb 2011 am	Service Users & Carers of people with Mental Health Needs.	Assembly Rooms Darwin Suite	6	Specific comments
1 Feb 2011 pm	General public and all service users and Carers	Assembly Rooms Darwin Suite	40	Specific Comments
2 Feb 2011	Valuing People Partnership Board with Learning Disabled People & Carers	Revive Centre	50	Specific Comments
8 February	Carers Partnership Board	Middleton House Conference Room	15	Specific Comments
16 February	Mental Health Day Service Users	Rethink building Charnwood Street Derby	43	Specific Comments
18 February	Alternatives Day Service for people with a Learning Disability	Alternatives Day Centre Upper Dale Road Derby	25	Specific Comments

1.5 The consultation methodology was robust and the Council afforded lots of opportunity and time for people to make their views known. At all the events communications experts and support was available to people who needed assistance to get their views on the proposals across to officers. These were all captured on the day in the events. The events were publicized through the AHH networks of providers and forums and staff contacts. In addition there was also an advertisement placed in the Derby Evening Telegraph to draw people's attention to the event held on the 1 February 2011.

1.6 There are always opportunities to improve on consultation with people. This is particularly true with vulnerable groups. Officers have learned some valuable lessons through this exercise. The consultation on the whole though has been thorough and fair, providing people the opportunity to have their say. Furthermore,

people have been reassured by officers that a fair view of their opinions would be reported to Cabinet Members who would make any change decisions. The Cabinet Member for Adult Social Care & Health being present for most of the events detailed above.

- 1.7 Comments received in the general Council budget consultation about FACS and *Fairer Contributions* savings proposals have also been considered.