

# Fair Access to Care Services (FACS) and Fairer Charging Consultation Feedback

50+ Forum Consultation Event – 6<sup>th</sup> January 2011

## Question 1 - Do you agree with the proposals given the savings that have to be made? If you don't agree please tell us why not and how you would continue to provide services at the current level?

- § It was felt that appropriate representation was not at this event. Only 25% of people around the table were in receipt of social care services and it was felt that in general there was a lack of knowledge and it would be particularly hard to answer the second part of the question.
- § A reduction in other facilities (e.g. adult learning classes and free swimming) this will also affect people's health and wellbeing.
- § Some individuals did not agree with the proposals, others felt it was a fairer way of allocating services and dealing with charges. Some people felt that in the current financial climate, the changes to charging and eligibility would have to be accepted.
- § Some people felt that those with money should have to pay. Others felt that people were being penalised for saving! People who have worked all their lives and paid tax and NI, don't expect to have to pay in their old age. What happens when money/savings drop below threshold. Concern about thresholds - £23k - and needing to make repairs to home to stay independent.
- § Concern that if people with moderate risks lose their services, then more people will deteriorate into high levels of need.
- § It was felt that the impact on carers has not been fully taken into consideration and even more pressure will be put on carers, especially informal carers. Direct payments may not be enough to support these people. If relative takes over care would they be eligible for benefits.
- § Website directories are not good enough to provide the information required. Communication and information systems will need to be improved. Examples given were via contact centres, Pharmacists and GPs with numbers for help lines on back of prescriptions.
- § Many BME groups deal with isolation by using family
- § A social aspect required, as human beings we need relationships and social contact.
- § More help is required to keep well – we need more services, not less.
- § The First Contact service links may agencies together. A service like this that contacts people to meet the needs of those people who get cut services in the moderate group.
- § It was felt the 'Big Society' would not be able to meet the needs of communities.
- § People and tax payers get penalised.
- § Consultation is pointless - the Council will do what it wants. Do we have much choice?
- § Why are we spending all this money on the Council House when we are cutting back services - nothing wrong with it as it is - why not use the police station/court?
- § What will the impact be for the Health Authority if people's health needs increase? Health issues to be clearly identified to support social care requirements. Criteria ought to be much more specific around health/social at assessment process. Identified needs health/social separated. Eg. Dementia patient without strong personal support will not receive everything they are entitled to.
- § Look at whole person.

- § People who live alone and don't have a support network will be hit harder. Concern that these people would no longer being watched over if services are taken away.
- § What will be the monitoring process?
- § If I'm paying about £200 per week - who will make sure that I definitely the service I'm paying for? My carer comes in for 10 minutes instead of 30!
- § What happens when people go into residential care?
- § Benefits checks and assessments need to be completed and reviewed regularly as level/care increases, etc. However, a lot of people do get help that don't need it. Re-assessment may stop this.
- § Individuals will have more choice and control with purchasing own care, but could be open to abuse.
- § How will the Voluntary Sector pick up the shortfall and how will they be supported to develop the services needed by people with mod needs? Possibility of care services put out to independent or voluntary sector could be more cost effective.
- § If you are assessed as having moderate needs, is there an appeal process.
- § How proactive will ASC be in reassessments, even low risk that may progress to moderate?
- § Provide services through other savings – e.g. fewer staff at the Council.
- § We need to find ways to support the people who need it most.

### **Question 2 - What help do you think the Council should provide to people who need to make alternative care arrangements?**

- § One stop shop for information - so not going around the houses. Improved information and advice - not just website, need face to face and skilled knowledgeable advisors. Information about other solutions/agencies. Need a list of providers, trusty traders, and general information
- § The Council should not stop existing users services.
- § Voluntary sector not sufficiently assured. There are concerns about voluntary projects finishing. Who will fill the gaps? More help will be needed from the Voluntary Sector.
- § People on their own are vulnerable and could be taken advantage of!
- § An independent Advocacy service will be needed.
- § Regular Benefits reviews will be needed.
- § Council still needs to provide one to one, face to face consultation. Not by phone/letter.
- § Inequity - people who have been saving and planned for their care, not lived extravagantly, been responsible are being penalised.
- § Take financial contributions throughout people's working life so there is a fund there for them when it's needed - eg Social Care Insurance.
- § Local information and support in communities for those who can't catch bus to access information and services.
- § On line help - telephone number - a person not an automated system.
- § Council could keep current care homes open and fill the places.
- § Use the buildings the Council are going to close to provide day care for people.
- § We need people who are qualified.

### **Question 3 - What types of preventative services should the Council plan to develop to help more people to be able to live independently?**

- § More preventative schemes aimed at helping people stay well. Some people wait until

they have an emergency before realising they need support.

- § Accessible Information and advice
- § Educating young people so that they are prepared and understand the services available
- § Falls prevention/advice.
- § Home adaptations.
- § Better information about technology that can be used to help people live independently. Promote care link products.
- § Priority is personal care and meals, people coming in to help people retain their independence.
- § Promoting contacts and community contacts to advise us of problems for people who cannot manage at home.
- § How we support people from European communities - need to think about this.
- § Keeping active in community.
- § Local services.
- § Bring back the warden system with warden being accountable to the people that live there.
- § Better support to help access health care support eg prescription collection.
- § Regular breaks for carers and more support for carers.
- § Financial incentives and payments to carers.
- § Better transport - don't take away No 17 Bus - servicing Darley Abbey! Also concern about No 35 Bus serving the hospital and Kedleston Road - free door-to-door bus service to the shops.
- § Library services also need to be retained because this is preventative - especially a mobile library to reach people - concern about Bateman Bridge proposals adding to traffic congestion in City Centre and lessening ability of older people to get out and about.
- § Needs to be more emphasis on providing company for older people - opportunities to get together.
- § Handy person scheme.
- § Gardening.
- § Minor adaptations.

### Additional Questions / Comments

- § Who makes the decision - is it the whole Council or just a few people? Is it an open debate?
- § Will people be able to appeal against a decision to not give service?
- § Why have you stopped encouraging people to stay fit - eg free swimming?
- § What are you going to do for those people who don't fall into those categories - eg just £1 over?
- § Where will they get advice and services from?
- § What is being done in Derby and in other Councils to minimise impact on Adult Social Care?

Learning Disability Consultation Event – 25<sup>th</sup> January 2011

### Question 1a - Do you think the ideas are good or bad?

- § Leaving people at risk so when they are at real risk more services have to be provided.

- § Young people left without services will later come forward with children of their own and require higher services.
- § Will cost money in long run as people will require higher level of service.
- § Diane lives in group home, very worried that she may be affected. Very angry, worried and upset.
- § Carers find it very difficult. Carers don't feel they should be asked who should or shouldn't get service. Carers already putting in a lot of support and only receive support from day services. What would they do if this wasn't still provided? What alternatives have been considered. Could other things be considered? Carers are under considerable pressure.
- § What has been impact in other authorities where eligibility has changed?
- § What are the alternatives for people with moderate needs?
- § I am concerned about the impact this will have on services.
- § Who does the assessment and how often will assessments be carried out and what are the criteria for assessment?
- § Health and social care should be protected and be prioritised. What is the timescale for this change and who will do the assessment, what is the criteria.
- § We strive to make people become more independent. This may have an impact on them.
- § Eligibility levels - this could fluctuate.
- § There will be approximately 800 people to reassess. What would be the timescale?
- § Why are we closing down the day centre and moving people around to different places?
- § Families have their own individual concerns. This is about money. Some things should be protected!
- § Why do we need to take this amount of money from social care?
- § Why do we have to spend £30 million on the Council house refurbishment? Have we looked at other projects where there is wastage – eg. roads and the bus station and this is wasting more money.
- § Why are you spending money on the Council House? People don't need posh offices, but some vulnerable people need support and services.
- § Changes affect people. Some medical conditions will not change. Feeling that carers get penalised.
- § People who are 'moderate needs' where will they get their funding if the Council no longer provides this. If they do not get a service their needs could increase to a higher level. Council will then have to fund!
- § Bad idea!
- § Biggest budget is transport - 9/10 people use it though all may not need it - but they still use it!
- § No re-assessment of need. Training (transport) could be improved.
- § Not good from a carer's or service users point of view.
- § A little bit of help earlier enables people to remain at home.
- § All have to pay in one way or another - it will create social unrest.
- § Less connection between citizens and Council.
- § One Major issue:- Disabled people experience more care in Derby - we need to maintain this.
- § FACT - DCC will find it difficult to protect this.
- § Council hitting most vulnerable people. There should be less Council workers, less offices, smaller Council House.
- § Personal Budgets - 'moderate' people will miss out as there won't be a service in the

future.

- § Voluntary Sector is shrinking - not growing.
- § Challenge LD - to spend a week at Wetherby to assess and work with the people and see how vulnerable they really are.
- § Terrible!
- § Moving the criteria is a bad thing!
- § Money should be based on a person's disability.
- § RE: £23,250 threshold - should have something even if you have £23,250. For one family, it costs £250,000 for their daughter to be in a care home – they could never afford that. (Could not pay 100%.)
- § Bad idea because people won't be able to cope as they are used to having a service, it causes isolation - people will wander around, there should be something for them, people may get taken advantage of, people may become isolated at home
- § Without the staff and the services we get, we can't do the things that we enjoy.
- § Worrying because the community isn't welcoming to those who will drop off
- § I will have to stay at home with my sister in law who I don't like
- § I feel angry! What am I going to do? I will be bored.
- § It is bad because people's services will be cut.
- § I feel the decisions have been made, so there is little difference to be made from consultation.
- § This is more of an information session than a consultation.
- § We think the ideas are terrible, it is always the people with the most need that suffer.
- § You have not mentioned how much money this will save.
- § Why don't Derby set a good example and not do what other Councils are doing?
- § What about all the people already sitting at home with nothing to do?
- § You need to support more people to develop skills.
- § Some people have very high support needs, up and down all night. Carers will breakdown and people will end up in care.
- § People talk about people dying because carers can't cope - it may save money in the short term, but not longer term.
- § Thoughts from the Alternative's service feel they need more time to develop different format for the questionnaire.
- § Format today has not been suitable for service users to understand. Not service user friendly.
- § Carers do not actually receive any 'free' services for themselves, especially if their time is taken up with their son/daughter with LD.
- § The timescale for completion of the forms is insufficient bearing in mind the communication needs of the group.
- § Assessment process needs to be 'service user' friendly i.e. 'person centred' and carried out by appropriately qualified and experienced people.
- § Scared that I will lose my learning partner.
- § It is bad if we cannot go to the Day Centre.
- § May lose job opportunities.
- § People might be isolated.
- § There is nothing else to go to.
- § Services help people to meet people and make new friends.
- § Not fair if I am at home all the time.
- § Scared about centre closing - makes me feel sad - I would have to stay at home all day.
- § Scared other support groups will close.

- § Bad.
- § Unable to fully answer until reassessment.
- § People on benefits do pay.
- § 9/9 say it is a bad thing.
- § Generally a bad idea if a person is going to lose service.
- § Carers will need to take on a greater level of responsibility. Currently the Day Service gives the carers a level of respite – Carers need a LIFE OF THEIR OWN
- § Withdraw service from those who are currently receiving a moderate service could have a detrimental impact on health (emotional, physical, mental) for both the customer and carer.
- § Will impact on other 'health' services, mental health service (depression) psychology, physiotherapists, Occupational Therapists, if customer is less active.
- § It is good because it will guarantee a service for the most needy
- § It's creating a sink or swim situation for those considered to have moderate needs. Those who sink will need extra support to stop them drowning. How can they justify putting the vulnerable through this?
- § No more supported work.
- § People will end up walking the streets, mental health deteriorating and end up back in the service.
- § Bad if services are cut - lack of things to do for service users.
- § Lack of information of the right sort, given in the right way.
- § How will people keep their independence?
- § Support - what will people do if they have no support with areas they need support with.
- § If people are re-classified as moderate who will check how they are doing if they aren't getting a service?
- § Is it going to save money if you have to pay someone to collect payments?
- § People are not fully aware of what will happen to service users if the criteria goes up.
- § Lack of security and stability.
- § Won't save money - passing costs onto someone else, won't save money overall and mess up people's lives on the way.
- § Giving with one hand - taking away with the other.

### Question 1b – If the ideas are bad, tell us why.

- § People in supported living don't currently pay charge costs of higher utilities bills, the need to access community services, creates higher costs all of which need to be made from benefits
- § Carers services - what plans are there for services in the future?
- § What will happen to the questions raised today?
- § Want to have feedback / and to know the outcome
- § Will there be an appeal process?
- § My fear is that people can't afford to pay or choose not to pay and will 'fall out' of the system
- § Debts are not taken into account when people are re-assessed and this could put people at further risk.
- § Everyone should be able to go to a service, even if it's two or three days per week.
- § Some people have been going to day centres for years.
- § People need a fair assessment, how will this be done.
- § People need different levels of support at different times but also at the same times on

different days

- § It is difficult to assess people - who else will be involved?
- § It will put pressure on families/carers if people have to stay at home after their reassessment.
- § It will be difficult for parents to put the amount of effort in 5 days a week
- § I will be at home, alone, doing nothing.
- § People with LD still don't understand the change - It will be a massive surprise.
- § People will become very isolated at home - don't like being at home.
- § People have no choice - stop pretending they have a choice.
- § Staff will need to be re-trained to assess properly. How will it be a fair assessment if some staff are better than others?
- § Carers will suffer.
- § People may die.
- § People will end up in care.
- § It will cost more than supporting people at home.
- § If people have £23,250 in bank but only get monthly income of £2,000 then what happens then?
- § Why spend £47m on the Council House and take services away from moderate needs?
- § What support will moderate service users get once services taken away from them?
- § They are still vulnerable to financial, emotional abuse, etc out there and what will be put in place then when realise there is a need then?
- § When are these assessments being carried out?
- § How good will the RAS assessments be? How accurate? It depends who is going to do it!
- § Benchmarks needed.
- § Social Networks have gone.
- § Circles of support may go.
- § Opportunities for on-going learning is limited.
- § Keep the day centres open and leave things as they are.
- § Very worried that day centres will close - been talking about it.
- § Worries affect your health.
- § How can someone take part in consultation if they cannot read/understand the form?
- § The forms need to be reviewed and one-to-one support to go through the forms or use a tape recorder.
- § Independent person/advocate will be required to support people through RAS assessments.
- § Other measures should be considered first.
- § If support removed the service user and their family will go into decline.
- § It's a step too far.
- § Fear services will not be provided
- § Fear of Ashlea closing.
- § Fear changes in current supported living accommodations.
- § Independence can be reduced as people have to be needy to get services.
- § Carers concern over who will support them and who will look after them.
- § Carers need to know what will happen.
- § Older carers concerned over their own health and flexibility to have a life and support the people they care for.
- § Direct payment, uncertainty - manage money - who does all this?
- § Already saving the government a large bill by living at home! This is just to save the

state money.

- § Charges could be increased to cover full cost.
- § Money being spent on the Council House refurbishment should be shelved in favour of maintaining essential services.
- § Any 'rainy day' funds the Authority may have should be used now - we have a monsoon.
- § Ensure more accountability for work contracted out as there are regular examples of work done being put right by other contractors, eg school repairs.

### **Question 1c - What do you think the Council could do so we do not have to make these changes?**

- § Humbleton View has gone. Wetherby has not been updated - we have no more for you to take!
- § Stop renovating the Council House - close it (use other facilities).
- § Transparent accountancy.
- § Free vote (referendum) - majority of people in Derby do not want the Council House
- § Funding from Government should be 'ring fenced'. Disabled people's money should not fund other projects. "Stop sharing our budget."
- § Build a new 'Wetherby' - not a Council House.
- § We seem to be taking 'other' Council ideas on board and they are not necessarily the best for Derby.
- § If in 4 years the budget 'evens out' will you reduce the eligibility criteria? (ie back to moderate).
- § Could make charges more realistic!
- § Make them on par with the benefits they have. e.g. people don't use their mobility benefit to pay for their transport costs or use their mobility vehicles - use their gold cards!
- § Should run current services in a more business manner - look at costs - ask service users what they want.
- § We could have fewer upper management because the staff on frontline stuff do most of the work. (Paul Daniels effect - managers are appearing from nowhere - don't do anything and cost more money to have these people here!)
- § Less managers in service will save money.
- § Cut costs elsewhere in the Council.
- § People with learning disabilities don't have a choice over their issues – they are born with it! Whereas other services where people create their problems continue to be funded more than ours - put money in right services.
- § Get rid of the big screen.
- § Money spent on Christmas decorations.
- § Grass over Derby in Bloom.
- § Community service could be target at supporting Council Services.
- § Bus lanes were a waste of money - not wanted.
- § Speed cameras are a waste of money.
- § It will cost to make people redundant.
- § People who are unemployed could do some council jobs.
- § No Council House - will save £30m.
- § Consult on raising Council tax.
- § Stop digging up the pavements.
- § Money is wasted on agencies who don't turn up.



- § System stays as it is for people in the system, up to a cut-off date, then every new person comes should be assessed as having moderate needs differently.
- § A proper method of consultation.
- § If I lose the activities I do and enjoy, I would get depressed, this could mean I will stay in my room and do nothing. I would miss my friends and learning partner - what would I do then?
- § Bring back half price pensioners travel. Don't build these scrap schemes (ie bus lane).
- § Why spend £40m on Council House?
- § Increase charges for other public services (ie Darley Park Concert).
- § Do not make changes to the Council House - save on this.
- § Remove large screen in Derby Assembly Rooms.
- § Riverlights - do we need it?
- § Control office to reduce managers and directors - place people in one building - share services with County.
- § What is happening to the money David Cameron has given - is it being ???
- § Raise Council tax to pay the amount.
- § What help could Council give to people with moderate needs who will not get care services from Council?
- § Changes to gold card travelling distance - raise the age to 65.
- § Staff having less holidays and less sickness and save.
- § People on long term benefits should be asked to work voluntarily so they are earning their benefits.
- § Outsourcing some services - more competition - better service.
- § 2 Councillors in each Ward - not 3.
- § Getting more people with LD/moderate needs into work.
- § Put Council House refurbishment back a year.
- § Council House is only project that is about long term savings.
- § Scrap fireworks at Markeaton Park and concert at Darley Park or make people pay.
- § Go half way to charging the criteria - Derbyshire did so - it isn't essential that it happens.

### **Question 2 - What help do you think the Council should give to people with moderate needs who will not get care services from the Council?**

- § Need to improve support services for them to access mainstream services.  
Moderate LD - more at risk - who will monitor these risks?  
You will need professionals in community - specialist staff who are trained, CRB checked and reliable/trustworthy
- § Some 'moderate' people with LD understand some risks, but not all.
- § Day services are trying to help people do things in the community. If people don't get a service anymore, how can they get help to access community activities.
- § Some people don't have a lot of family or friends to support them to access the community. What help is there for people who could become isolated? Other services information - would the Council support these services?
- § Help people to be more confident to do things without support. Help people develop more skills to be independent.
- § Day services should do more to help people be independent.
- § Support staff for these people - to initiate social engagement (public isn't always ready for these people).

- § Need a 'safety net' for these people - to check if ok.
- § Services should still be provided otherwise further problems and more support will be provided.
- § Prevention is better than cure.
- § Why are you cutting funding to community and charity groups. You need to increase funding and support to charities and community groups.
- § Voluntary Sector capacity is reducing as people have to make ends meet.
- § If not eligible to help with services then what help is there we can get?
- § We still want people with moderate needs to receive services from the Council – ie Advice - Housing - Support.
- § Clear pathway.
- § Information given directly to carers on disability client database, etc.
- § Better communication on what is available.
- § Will affect other groups - we need a full breakdown of what is available and what services may be stopped.
- § Some carers would be willing to pay more for the lower level groups et youth services, that support ??? services other than lose everything if a person becomes moderate needs.
- § Council should ensure there are people who can monitor those service users who lose service to ensure people are safe, well, protected.
- § Who will be responsible for helping customers who exit the service to be put in touch with activity providers and help these people to understand how things work?
- § Support to get work and be in work.
- § Keep people in employment.
- § Stand in staff for staff off sick - relief staff.
- § Why stop people going to day centres, let people go if can pay.

### **Question 3 - What support should the Council plan to help people to live independently?**

- § Charge for libraries and museums.
- § Gold card for transport - charge subsidy!
- § More choice of housing, more houses.
- § More help in the community.
- § 24 hour support if needed - crisis support if needed.
- § Raising eligibility
- § Totally disagree with the proposals in terms of people with LD.
- § People should pay for or contribute to services - if results from consultation...
- § What will happen if we all say no? Have the Council got the courage of their convictions to go it alone and not do it (give us what we want).
- § What will happen if the people say NO.
- § Will the Councillors have the courage to stand up and be counted and give the clients what they need and deserve.
- § People may have 'moderate needs' but need help to develop independent skills. Eg life skills, money skills, confidence building.
- § Can the Council support existing organisations/activities which help people develop life skills or help new ones to set up. eg college courses, voluntary groups.

- § Keep support.
- § People will not live independently without the support.
- § People will be isolated.
- § Council needs to be aware of what is / isn't here.
- § People to talk to - places to go to.
- § Open and transparent market for providers.
- § Advice and information - people need knowledge.
- § What if people can't live independently? How much would that cost?
- § Continue to fund services for supported living.
- § That sufficient and appropriate housing stock is available.
- § Housing/Information - one centre for information for all.
- § Sondnell model given a carer - Community nurse sited as care coordinator - needs and named person to act as the co-ordinator of care. Same Department to get information from.
- § Get staff retention assess by workers who move on - older carers miss having a named social worker.
- § Fast track for assessment for people so services can be responsive to need. Emergency plans required.
- § Need information on ??? care providers - carer's group - holidays.
- § Tidying - finances.
- § Security being cut.
- § Place to live.
- § Support they already receive.
- § Health appointments.
- § Day to day living.
- § Shopping
- § Social Life.
- § Access to the community.
- § Managing tenancies.
- § Advocacy.
- § Legal issues.

### Additional Questions / Comments

- § How much money will be saved by doing this and what % of this?
- § We would like to know what the Council propose to offer the people, should people with moderate needs no longer get a service.
- § How much money do you think will be saved by doing this and what % is this of the overall saving you have to make?
- § What support for SU during re-assessment.
- § What other measures have been considered.
- § If service withdrawn what is in the community to replace it?
- § At the moment carers subsidise service users costs. If care withdrawn won't that cost the Council more in the long run?
- § Cuts to other services - youth services - Mandela - Merlin Centre - shutting the building.
- § Have they considered the full impact of redundancies to staff and services - possible changes to children's services.
- § What will happen to someone if they are now getting services - what will happen to that person if they go to moderate - as it would be a drastic step to those people and carers.
- § Other measures considered - £20m savings to structure - further £1m in management

- costs put forward.
- § If cuts how will they monitor my independence.
- § Assessment process/review LD social work - care manager - can appeal or challenge the outcome.
- § 6 month process.
- § Question - but found an assessment / if moderate CIA and other services being ???
- § Did not want services to close.
- § Personal budget - would moderate be eligible?
- § Councillor Webb - comment on Council House and reducing staff numbers - staff under one roof.
- § See Council system - looked at reserves to keep things running.
- § How much money do you think may be saved? 600,000 2012 1 mil 2012 - 4.8 million savings estimates only
- § People found FACs difficult to understand.
- § Council zero as income - so given 2 million by Central Government not to raise - whilst consultation as being taken so that tax payer can decide.
- § How do they plan to remove services from moderate SU's? Gradual/quick?
- § Where will people get support to manage their finances?
- § Support with letters.
- § Vulnerable to abuse.

### Consultation Event for Physical Disability, Sensory Impairment and Older People - 1<sup>st</sup> February 2011

#### Question 1a - Do you think the ideas are good or bad?

- § Bad - I don't think it is fair for people to have assessments regularly. How it is going to effect mental health?
- § Not possible to decide today.
- § More information needed - ie total grants, total costs, where it's spent.
- § Bad - 5 service users.
- § Bad - however the cuts - maybe unavoidable.
- § Today's proposals will only save £1million - so what is the point?
- § Is the Council going to close additional community services? Re: Day Care, Children's Centre?

#### Question 1b - If the ideas are bad tell us why?

- § A lot of people fall between substantial and moderate.
- § Timescale is fast. How long will the assessment take?
- § Will people have a realistic assessment as they have good or bad days?
- § Certain disabilities will put you into different categories.
- § People need to be sensitive.
- § Want us to look at the people who are in moderate and by taking away services how many would then fall into substantial?

- § Unfairly hits people who have saved throughout their lives.
- § Not comparable with neighbouring authorities.
- § We've already paid through taxes - why should we pay again?
- § People with only moderate savings will be asked to pay considerable sums of money.
- § Unfair to charge people for services when sometimes the carer doesn't turn up.
- § Mental Health people will suffer because of these changes. Also drugs and alcohol - pressures on users and these need changes - substance abuse.
- § Pressure - from personal budgets and spending, with choice - difficulties on service users.
- § Shouldn't take on carers as extra needs.
- § People need to know needs - how it's been assessed and statement of hours.
- § More information should be offered.
- § Questionnaire - do not like at all.
- § Concentrating on a small percentage of the population - 25% of people affected - disproportionate service cutting.
- § If you do not intervene early - it can escalate into higher levels for individuals.
- § Impact on carers - changing to sub and critical - high impact on their needs - and the knock on effect.
- § Moderate care will impact on health issues of this group and have an impact.
- § What is the fallback position of the Council if this doesn't happen?

### **Question 1c - What do you think the Council could do so we do not have to make these changes?**

- § Make appropriate and effective representation to the Government.
- § Central buying of all services and products.
- § To limit the spending on the Council House and put some money back into the service.
- § Sourcing locals to do the council work.
- § Review management spending.
- § Cutting salaries of senior managers.
- § Be more aggressive with providers to 'make their eyes water' rather than making 'service user's eyes water' - make sure the Council is buying as affectively as possible.
- § Review people classified as substantial as well - some may now be moderate.
- § Moderate needs individually assessed.
- § More joint working with health.
- § More co-operation with all services - such as ambulance service 'green bag' to list medication.
- § Advice and guidance better - including voluntary sector services, especially new assessments for cancer etc.
- § Carers ambassador to champion and feedback - dignity campaigns.
- § Empty the bins less?
- § This will affect everyone. It has been suggested today that these cost cuts affect only a percentage of individuals
- § Is the Council lobbying Government? There is no evidence of this!
- § Not to use outside consultation by the Council and save money.
- § Council House options - to repair not refurbish? Cost savings - is it an investment? Can it wait?

**Question 2 - What help do you think the Council should give to people with moderate needs who will not get care services from the Council?**

- § All the telephone numbers, names and addresses of all the Councillors who make the decisions.
- § Should have excellent training in the assessing of customers.
- § Sign posting facility
- § Making sure assessments are up to date.
- § Should do realistic assessments and people need to be treated sensitively.
- § Build more community support.
- § Provide support and information for people to select services with confidence - for self-funders as well as those who may not want to pay the Council charges.
- § Provide list of voluntary services and contact details and quality information.
- § Accreditation of volunteers.
- § Difficult to see how Council could generate enough non-funded support meet the needs of 800 people with moderate needs.
- § Provide training for volunteers.
- § Provide travel passes.
- § Provide information on services - level of qualifications, training provided, etc.
- § Support - monitoring to make sure needs change - otherwise death.
- § Different for everyone.
- § Don't agree that moderate should not receive services.
- § Carers get extra pressure - this will not help.
- § Problem with level of carers/time.
- § Loss of carers in community.
- § Assessment time not suitable to do tasks - left not being done.
- § Problems will cause stress and health problems with carers as well as service users.
- § Signposted to other services - ensure the services signposted to one 'approved' and ensure safety.
- § What is the fallback position for this group? (by the Council).
- § Advice and signpost - provide assistance.
- § How much support will this group received - will it be just a number or direction - not any support to locate support?

**Question 3 - What support should the Council plan to help people to live independently?**

- § Individual assessments.
- § Be able to live with that person for 21 months so they can see reality and be able to see the exact needs (assessment over a longer period).
- § Provide a mechanism to support people who are dissatisfied with providers, enabling them to resolve issues.
- § Where are people going to go instead of care homes?
- § Support to carers to meet needs including respite care.
- § Good social workers that are dedicated.
- § Reasonable caseload.
- § Social worker needs to have enough time and to do tasks that are needed.
- § Need to have the skills to do tasks (example ironing/ cooking) - adequate care.
- § Assess the capability of carers/private companies.

- § Care Staff need to be on time.
- § Time tasks - has to be 'put' to bed last service/carers.
- § Forums/consultations are not always the right way to gather views - carers ambassador.
- § Referral links to Carelink / First Contact.
- § Facilitate contacts with charities/organisations not just signpost.
- § Provide a comprehensive advice and information service - at what level will this be at?

### Additional Questions / Comments

- § Disabled and older people? Is this where Council needs to save money?
- § Appropriate training to assessors - for various service needs eg visual impairment, physical, hearing - sensitive to resilience.
- § Objectivity - person has good and bad days.
- § Timescale - front loading.
- § Sensitivity about financial assessment.
- § Cutting sizes of workforce by changing the criteria.
- § Why are they spending on new Council House?
- § Not a consultation – I should have stayed at home!
- § 75% of Councils have already reduced their eligibility criteria - we should be proud we do provide moderate!!
- § Council publishing on line - not accessible (font 12) – If people require large print, how do they know to ask for it?
- § Equality impact!!
- § Assessment over an extended period.
- § Resilience - looking at how people can cope for moderate and substantial.
- § Impact and statistics of taking services away ie. taking shower away - might impact every day.
- § Carers services are free? Which ones? Does this include respite care?
- § How has the consultation been done? How does it reach service users? Not consistent - has everyone in care system been consulted?
- § Don't agree with flat-lining - not comparing like for like in relation to costs.

### Rethink Day Service Consultation Event – 16<sup>th</sup> February 2011

- § People with mental health problems have needs that can change very quickly. They may have low level needs one week and substantial needs the next.
- § Councillors need to visit and view Mental Health services to get a real view of people's needs.
- § Concerns raised about charges for care for people on benefits. PS explained the minimum thresholds, means testing and the assessment process.
- § An individual had been to the Housing Options Centre to request to be put on the housing list. He was told he couldn't because none was available. When this individual asked staff how he could have a better chance of getting council accommodation, he was told the 'become an immigrant'.
- § Question - What percentage of the total Council budget is being cut in year one?  
Answer – approximately 14%.
- § Question – If you have moderate needs, and if the proposals are accepted, which will mean you'll have to pay for care, how much will this cost? Answer – costs vary but are

generally between £10 and £15 per hour. The group said that this would be unaffordable for many people.

- § Female attendee and her partner have a child and both have mental health needs. She has been assessed as substantial and her partner as moderate. The services they currently receive enable them to effectively look after their child. Concerned that removal of her partners services would mean they would be unable to look after their child in the future.
- § Concerns were raised about how Low, Moderate, Substantial and Critical are defined. What one person perceives to be moderate, another could perceive to be critical.
- § Councillors should put the £10,000 they get paid, into the care budget.
- § Why are the Council putting so much money into so many new roads when they are cutting important budgets?
- § Why do the most vulnerable people have to suffer?
- § If the proposals are rejected by Councillors, what next? The Council have got to make cuts so if the cuts don't come from care budgets, where will they come from?
- § If people have to be reassessed, this will cost money in staff time.
- § Will assessments be discussed with CPNs? CPN and Psychotherapists need to have input as they understand the needs.
- § Funding for mental health services should be protected.
- § The Mental Health Action Group have produced a leaflet saying that funding for Rethink Focusline, Derbyshire VOICE, Padley Day Centre, Padley Development Centre, amongst others, is going to be cut. PS explained the proposals around grant funding and clarified the position for VOICE and Focusline, that this funding will be ring fenced for MH services.
- § People on benefits are being hit the hardest.
- § Bus passes and cold weather payments should be means tested. People who have lots of money get these and it's a misuse of resources.
- § Increase taxation on online shopping to increase income to reduce the need for cuts.
- § There is an empty Youth Service building on Rosehill Street – why aren't the Council selling this?
- § Increase the use of public transport to reduce the number of cars on the roads.
- § Why are the Council spending so much money on redecorating the Council House?
- § Why is office accommodation for staff more important than care for vulnerable people?
- § If you remove low / moderate level care services, people's needs will increase.
- § People with mental health needs find it difficult to speak out and voice their opinions.
- § CPNs and Psychotherapists should be consulted with about these proposals.
- § Councillors should attend all consultations and not just send their officers. PS did point out that Cllr Webb had attended all other consultation sessions, but couldn't attend this session as it was arranged at short notice.
- § Increased stress leads to increased needs and increased numbers of expensive hospital admissions.

### Learning Disability Consultation Event at Revive – 2<sup>nd</sup> February 2011

**Question One – Attendees were given a scenario detailing the current services provided to two service users (Jo and Sally) and were asked what would happen if these two service users no longer received these services.**

- § If there is no day centre, Jo will need some money to help him to do and learn new



things.

- § Jo will need help to get a paid job and go on holiday with friends.
- § More information, advice and guidance as to where help can be found.
- § The council must provide a 'place' for them to go with supported services.
- § Someone who will provide support to do gardening and other voluntary work.
- § A 'drop-in' centre – not one day a week but 6/7 days a week (GO-LD needs to run more often) could have an outreach worker who would be based there.
- § Council should provide cheap and accessible transport as taxis are too expensive.
- § Council should reduce the length of the short break at Ashlea for people and provide it to more people instead.
- § Voluntary sector needs more funding putting into it.
- § Put more money into the learning disability voluntary groups (Winchester club, Wilson Street, GO-LD, Derwent) – **very important**
- § Open up adult placement services.
- § Jo would need someone to talk to. His Key worker would need to support him.
- § Jo would need to meet his friends.
- § Jo would miss his short break and get depressed- there would need to be an alternative.
- § Mum and Dad would miss having a break (they need a break) this could put pressure on families and on Jo.
- § Could the council keep 'the structure' in place and still allow people to join in.
- § Cinema days - subsidised.
- § Council should provide information and links to other organisations who could provide short breaks. General information needs to be in persons hands.
- § Access to Advocacy and Disability direct.
- § People will still need a Key worker.
- § More responsibility is being put onto parents – is this being considered? Jo's parents would be old.
- § How much is the service saving by Jo being at home? If you take away his short break and day service then the situation will break down at home.
- § By supporting Jo, you are supporting the elderly carers. If this is taken away then they will end up in full-time social care support.
- § People don't want to stay at home all day.
- § Who will help with the shopping?
- § Mobility allowance isn't enough and carers don't have enough money. Taxis are expensive (yellow cabs that allow wheelchairs are too expensive).
- § Council should help fund groups such as the Winchester club if they are going to cut day services – reinvest in social clubs
- § Does Sally still need help with taking medication? Or can she learn to do it herself?
- § Help to develop her circle of support. 'Meet her friends'.
- § Quick reassessment of needs if there is a crisis.
- § Services like GO-LD etc. will need to provide money advice, medical advice (checks) etc.
- § Employ outreach workers who can check up on those who will 'drop out' of services. Otherwise people will deteriorate.
- § People need to have their skills developed to enable them to become independent.
- § Council needs to provide some form of support until people are skilled to be independent – will take years.
- § More money needs to get invested into the voluntary sector learning disability groups otherwise people's situations will go from moderate to critical quickly (back to square one)

- § Advice and information – what else can people get?
- § Clear assessment to show people's needs and abilities- not just cutting services but based on needs.
- § Make a plan with choices to help people know what else they could do.
- § Signposting to other services / activities. Bowling, leisure centres, swimming, art clubs, adult education.
- § Help managing money, help to read letters / correspondence.
- § Tourist information / cinema / theatre access.
- § Befriending scheme
- § Use their own money to buy some support – befriender to go to the cinema?
- § Go out with friends.
- § Council needs to provide a fast assessment if people's needs change
- § Volunteer Services / Clubs are needed
- § Directory of resources in an accessible format.
- § Have a good referral system / place for other services - ie GP
- § One stop shop at the council.
- § Help to get work / or on the right courses in education with support (if needed).
- § Help to know what transport to use.
- § People are independent because of the support that is around them. Take this away and their needs will go from moderate to critical quickly.
- § People will become very lonely.
- § Who will support with medication?
- § Who's responsibility is it if people overdose, or don't take their medication.
- § Who will support with finances, shopping – carers are struggling as many are old and have health issues. This will create a ticking time bomb and there will be a surge of people coming back into service but critical.
- § Who is going to tell the person that they aren't eligible?
- § This will create isolation and increased vulnerability.
- § Risk of being ignored. People could become ill.
- § What if people need help with their bills but don't like looking at them.
- § How do people live safely in their homes? Do they know what to do in an emergency?
- § Are people aware of the 'aids' available to live independently?
- § Communication! Do people know how to move house?
- § Hate crime.
- § Who would support someone to move house?
- § Signposting.
- § Help with medical care, keeping the house clean, shopping, bills.

### **Question Two - What support should the council plan to help people live independently?**

- § The council needs to know what to do before people are told they will not get services. They cannot just drop people.
- § We think the council needs to find a way to keep an eye on vulnerable people.
- § The council should look at reducing some services rather than taking it all away together.
- § Provide a list of places that people can go to for free.
- § Maintain or keep giving the money to voluntary groups.
- § People really need to understand that they won't get services.
- § Organise supported holidays where people can pay for themselves rather than Ashlea.

- § Give people Telecare for help with medication.
- § Make sure there is somewhere for people to go when they need help.
- § Ask for volunteers to provide a buddy service for people.
- § Courses that help people live independently and learn the skills they need to do this.
- § Promote online shopping.
- § Make sure there are places in the community where you can go to meet your friends and get advice and information.
- § Work with job and voluntary agencies to help people to get work and voluntary work.
- § Set up safe places scheme.
- § Plan with the voluntary sector, communities and families before you make changes.
- § Set up emergency phone lines to get help e.g. heating breaks down etc.
- § Set up volunteer driver service.
- § How much will it cost in the long run to get people to become skilled enough to become independent?
- § At the moment carers provide same sex personal care needs, if they lose their service, this will put more strain on the carer. Many of which are of ill health, this may worsen their health issues.
- § People who have already dropped out of services are being financially abused. This will happen more and people will be more vulnerable to hate crime.
- § People need to be taught the skills. They still need the staff to support people to do this.
- § Funding needs to be focussed for voluntary Learning Disability groups who provide help, support and social groups.
- § Current services are being stretched as it is (like GO-LD)- staff are becoming 'burnt out'.
- § Set up a 'step-down' approach, otherwise problems will escalate.
- § Support is phased out – focus on areas that need support (e.g. finances, emotions, medication, resources).
- § Re: medication. Need to be clear what the roles of other services are e.g. pharmacies, GPs. Not all places do blister packs! (not many do)
- § Too many assumptions are being made about everything e.g. assuming there are services out there to support people to become independent (3<sup>rd</sup> sector funding being cut, cuts to CAB etc.)
- § Assumptions about what a GP/health will do for you that current places like day services provide.
- § Assumptions that 'the big society' will help these people – this isn't reality.
- § Has to keep services going.
- § What responsibility does the council have if someone is reassessed and then gets abused due to increased vulnerability? This will happen to people. Who will take responsibility?
- § Could there be someone who knows where all the 'other' people are to help signpost?
- § Whole list of point of contacts for people
- § Bi-annual review of this.
- § 'LD Times' is a good way of getting information.
- § Many carers have their own health issues. The services provide some relief. This will lead to more crisis situations.
- § Carers will not be able to maintain ordinary lives; jobs, relationships etc.
- § We believe that people should mix with their peer group and not be stuck with the older generation.
- § Carers could not do their day-to-day necessary activities.
- § The people we care for will be more vulnerable and more at risk.
- § Hate crime is rife!

- § Worrying about it is affecting my health.

### **Learning Disability Consultation Event at Alternatives Activity Centre 18th February 2011**

#### **Questions asked by members of Alternatives Activity Club were as follows:**

- § What will happen if this place closes?
- § What will I do?
- § Why are they thinking of changing the service?
- § Does eligibility affect us?
- § Questionnaire isn't accessible?
- § How will I pay to come here if I don't get a Personal Budget
- § If Alternatives closes due to a cut in Voluntary grant, where will I go? How will I meet my friends?
- § How will I pay for transport?
- § What if my needs get worse because I can't come here?
- § Carers can't cope as it is. How will they cope if I am at home all day?
- § Confusion between eligibility consultation and voluntary grant consultation
- § Questionnaire not accessible
- § Confusion about what 'moderate' is. Who is moderate?

#### **What I like about Alternatives Activity Centre:**

- § Can do activities, cooking.
- § I meet my friends and staff support me
- § Benefit from the support of staff and volunteers
- § I can volunteer here
- § Working behind the counter
- § Social skills developed

#### **Other points raised at the event:**

- § Councillor Webb explained that they are not shutting down Alternatives and said he didn't become a Councillor to close things down. All services funded through the voluntary sector are being asked to bid for money and that services that are funded in the future will need to be something that contributes to the 'Derby Plan'. People with 'moderate' needs will still be able to access all voluntary sector grant funded services.
- § A parent commented that it is very wrong that we put people into 'categories'- high support, moderate, low. How can we label people when we're supposed to be person centred. There will be a knock on effect if my son loses his service. An effect on me as a parent, our family. We are now discriminating against people labelled as 'moderate' and people are being victimised because they are 'moderate'.
- § Pervaz commented that FACS has been around since 2000 and that the whole country uses this framework, and Derby's is currently set at moderate. We can't opt out of this framework.
- § Question - A parent asked how their son, who has high support, can have a service and X's son not get a service? Answer - Councillor Webb commented that FACS affects all people across all areas of care from older, people, mental health, physical disability etc. We haven't got the money to deliver the range of services for all the people, and the

numbers are set to increase – for example, by 7% for Learning Disability and 12% for Older people living beyond 85.

- § Question - Parent asked do you know how crippling it is as a parent to provide support for my son and the effect it has on me?
- § Question - Can we use some of the Council 'reserves'?
- § A customer said 'I need help and my boyfriend needs help. My boyfriend has his family to look after him'.
- § A staff member said that the questionnaire needs to be easier to fill in. Perveez commented that it is not the only method. And it's a form for all people who receive a service, older people, people with physical disabilities, people with mental health problems etc to fill in. People have spoken very well and articulated and made their views known.
- § Question - What has the feedback been so far? Answer - There has been very strong feedback, but we can't pre-empt the outcome.
- § Question - How will I get here if I don't get a personal budget? Perveez asked how people get here at the moment. If you get DLA (Disability Living Allowance) then the mobility component of this can pay.
- § Question - What will happen if this place shuts, Wetherby and Rykneld? Answer - Councillor Webb said that the cabinet will meet on the 15<sup>th</sup> March 2011 at Saxon House on the ground floor. The cabinet will look at the report and what people have said. They will make a decision based on the evidence put before them.
- § A customer asked 'Why are my staff going to lose their jobs?'
- § Question - Can you explain what a moderate need is and a moderate LD? Answer - Perveez said that low, moderate, substantial and critical are all about risk, not about needs. It is about the risk to losing independence.
- § I live with people who support me and keep me safe at home. My mum used to support me and wants me to be independent, go to shops, buy personal things.

### Mental Health Consultation Event – 1<sup>st</sup> February 2011

- Concerns over the objectivity of staff undertaking reassessments  
GJ stated that Social work professionals within the mental health services work strictly to their professions ethical guidelines at all times. These then inform the assessment.
- There were concerns that pressure would be put on staff to keep within budget. They believed seeing as there was one pot of money that this would equate to only a certain number of people receiving services.  
Cllr Webb stated this was definitely not the case.  
Perveez Sadiq commented that we could not do that. He said if a person qualifies, has eligible needs, then we have to provide services.
- Comments that a review of existing moderate cases would most likely go ahead regardless of what the consultation feedback says. That this might then cost us more in the long run in terms of people who lose their services for their 'moderate needs' may well go on to become worse with no support and the net result might well be that expenditure in real terms increases substantially because people will soon have substantial /critical needs as their condition deteriorates.
- Comments that people new to social care would be more likely to be assessed as substantial /critical by assessing staff if we scrap the moderate banding. So savings would not be realised.
- Comments that we could have done the consultation for MH better. That people with

MH are unlikely to come to an event at a place they don't know. That we should have used the existing support and advocacy groups who could have called meetings specially – they feel they would have a good turnout because they are trusted – and delivered the consultation at these.

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