



Consultation on Changes to Non Residential Care Charges Tuesday 4th October 2011

Warrington Borough Council is consulting on proposed changes to non residential care charges. There are two proposals that the council are consulting on:

- Review the percentage of people's disposable income taken into account when calculating care charges
- Remove the subsidy from non-residential care services

As part of the consultation a questionnaire has been produced and sent to all people affected by the proposed changes, as well as two events organised by the council. The LINK held their consultation to gather the views of service users, carers and representatives of Third Sector organisations who work with service users and carers. 23 people attended the event.

Steve Reddy, Assistant Director of Adult Social Care gave the background to the consultation. The council need to save 25% of the total budget over the next 4 years, in 2010 the council consulted on a range of options to save money. For non residential care £20million a year is spent, with income from charges being £3million with the remaining £17million being subsidies by the council. The potential additional income could be £390,000 - £600, 000. Other savings are also being considered e.g. workforce savings, service redesign and administration support functions.

The people who attended debated the same questions as the consultation questionnaire. The attendees were split into two workshops, below is the write up of the discussions that took place. The two proposals that were discussed were:

Proposal 1 - reviewing the percentage of disposable income taken into account for charging and

Proposal 2 - removing the subsidy from non-residential care services

Attendees were asked how Proposal 1, reviewing the percentage of disposable income taken into account for charging, might impact them as service users, carers or how it might impact their clients.

If the charging policy would have been reviewed annually, the percentage of disposable income could have increased gradually over a longer timescale, having less of an impact.

How do councils justify the different percentages that are taken account of across the country? It is not equal; could this be challenged under the Equality Act? The charging policy and assessments are different across the country, needs consistency. Service users need to get a breakdown of the assessment. There are a number of different exemptions, people need to know.



Could 80% be taken into account up to a certain threshold, then 90%, then 100%, depending on the amount of disposable income? Could there be a possible staged increase not straight to 100%?

The age of the service user should also be taken into consideration, when looking the disposable income.

Why should long term carers be penalised if they have a disposable income?

Carers save the council a lot of money.

The majority of people agreed that if people can afford to do so, they should pay. However people felt the assessment process needs improving, it needs to be a fair, honest assessment, taking into account different factors i.e. cost of living, hidden costs, stealth costs, for example people may need to use the washing machine more, people have to pay for their own incontinent aids. There needs to be recognition of the whole package of care and decisions shouldn't be made in isolation.

Could there be banding or guidance on the assessments? People need to be made aware of the assessment process and outcomes. There needs to be a partnership between welfare and benefits. People should be able to pay additional costs from their benefits. Is it fair that people have to pay the same as people who are also receiving benefits?

Attendees agreed that the Council should ensure there is protection for those who cannot afford to contribute as much towards the cost of their care. If, after the assessment, people are still in need, they need to get welfare right advice. Service users and carers also need to get a breakdown of the disposable income and how it is worked out. Information is confusing and there is often no clarity and consistency. Be open and transparent with the information to service users.

There are sometimes issues with time, e.g. 15 minutes of care is difficult to manage due to travel time and caseloads sometimes the care is only 5 minutes. The care provider also needs to prioritise what care to give as 15 minutes is not long enough in some cases.

Financial assessments need to be done annually ensuring all new information is taken account of.

Attendees also agreed that an increase in charges is acceptable if it protects the quality and range of services the council can offer. People want a quality and a range of services. Providers need to be able to meet the increase in demand.

The quality of current providers depends of service user and carers experiences.

There needs to be an audit of care people receive and their feedback. Care Providers should annually ask their clients for feedback, and for new packages of care this should be done in 6 weeks. Need to ensure this is happening.

If people are paying full cost do they expect a better service? Will they complain more?



Attendees were asked how Proposal 2, removing the subsidy from non-residential care services, might impact them as service users, carers or how it might impact their clients.

It is about a fair payment, some people don't mind paying. Carers views need to be listened to. There is confusion around the way the charges are calculated. Is it fair that four 15 minutes of care is charged separately to an hour of care?

For some people the impact will be huge, these are the most vulnerable receiving 24 hour care, who don't have the capacity to understand the changes. If the subsidy is removed what will happen to people who can no longer afford to receive the same level of care? The most vulnerable need to be protected. An example was given by Supporting People of their clients, they were initially in residential care, it was then felt to be more beneficial for them to be in their own tenancy, supported by Supporting People. This proposal will now have a huge impact on them and their care.

With reference to proposal 2, do you agree that all social care charges should be calculated in the same way, regardless of how people receive services?

Difficult to answer. It depends on the service, everyone is different and their need is different. 24 hour care is very different to 15mins. Need to take into account affluent areas and long term conditions.

Why would you want a personalised budget if you get less money? (Equality impact) People have less choice and control.

There maybe problems with people all wanting one hour care for only £1 more.

Some people have possibly paid more National Insurance, why should they be penalised? People might just be over the threshold but struggling.

"Why should I have to pay for everybody out of my disposable income? I can't afford a holiday."

Your home is an asset not just your money in the bank.

The key issues from all the discussions were:

- People should be treated like individuals, the assessments should be based on individual need as opposed to cost.
- Information should be transparent and honest. People need to be offered choice and advice to help them through the process, with a breakdown of the assessments. The information should be jargon free and specific to the individual.
- Assessments need to take into consideration stealth costs.
- Possible staged increase not straight to 100%
- Don't penalise everyone with disposable incomes
- Make clear the payment system