

Kent County Council Adult Social Services Directorate



Proposed Changes to Kent County Council's Charging Policy for Home Care and Other Non-Residential Services

Consultation Analysis Report

Date: 28 August 2007

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1.Executive Summary

1.1. Introduction

The consultation on proposed changes to Kent County Council's (KCC) charging policy for home care and other non-residential services (referred to as domiciliary care) was undertaken to seek the views of users and carers prior to deciding whether or not to make any changes.

This report sets out the outcome of the consultation which took place between 8 May 2007 and 31 July 2007. It is an analysis of the responses to the consultation proposals as set out in the consultation letter and questionnaire dated 8 May 2007¹.

The report will be submitted to KCC Members and the Adult Social Services Senior Management Team for their consideration during August and September 2007. The Kent Adult Social Services budget, like that of other local authority social services, has come under and will continue to face severe pressures. This is as a result of the rising demand for services with the number of older and disabled people who are successfully living longer and needing more support. The council must raise additional income if it is to continue providing the current level of care.

After careful consideration, Kent County Council Members decided it would not be in the interest of the people of Kent to raise the eligibility criteria for services, as this would disadvantage those people who need a moderate level of support. We strongly believe that it is best for everyone if we continue providing services to people who have moderate needs as well as to people with more substantial needs. Most other local authorities have stopped providing services for people with moderate needs, but KCC believes that

these services enable people to remain well and independent for longer, which is better for them and ultimately more cost effective. This left the council the option to increase income by changing the charging policy for domiciliary care. It is worth noting that the amount of a person's income taken into account under KCC's charging policy was relatively low when compared with neighbouring authorities. With this in mind the County Council's budget for 2007/08 was based on raising additional income through changes to the charging policy and these proposals were designed for that specific reason.

It was recognised that there will always be some people who will have insufficient money, based on the means test, to contribute to the cost of their care. Therefore it is important to state that people who currently do not pay towards the cost of their domiciliary care will continue to get that care provided without charge unless their financial circumstances change.

Under KCC's current charging policy and based on the available information, about 38% of people who receive domiciliary care are assessed as not having to pay a charge, 42% are assessed as able to make some contribution towards the cost of their care and the remaining 20% are assessed as being able to pay the full cost of their service.

1.2. The Process

The consultation consisted of four separate methods - written, telephone, online, and three public meetings. In total 9000 questionnaires were sent to services users, carers and user and carer groups. We received 2620 submissions consisting of 2294 returned questionnaires (of which 999 also had written comments), 53 letters from individuals and representatives of user

and carer organisations, and 263 telephone contacts. This is a total response rate of 29%. In addition, comments were recorded as part of the three public meetings, which attracted 53 people². Of the 9000 questionnaires, 2294 were returned (which is a response rate of 25%). We feel this is a very good response rate and shows how important this subject is to service users and their families.

1.3. Summary of Responses to Questionnaire

Proposal 1 - Changing the percentage of available income from 65 to 85 percent.

Of the 2294 returns, 1072 (47%) people disagreed with this proposal. Of the remaining 1222 returns (53%), 563(24%) agreed and a further 659(29%) either did not give a view, neither agreed nor disagreed or did not know.

Proposal 2 – Using actual cost of care rather than a standard cost.

Of the 2294 respondents, 812 (35%) people disagreed with this proposal. Of the remaining 1482 returns (65%), 708(31%) agreed and a further 774(34%) either did not give a view, neither agreed nor disagreed or did not know.

Proposal 3 – Keeping any increase in charges to £15.

Of the 2294 respondents, 380 (17%) people disagreed with this proposal.

Of the remaining 1914 returns (83%), 1399(61%) agreed and a further 515(22%) either did not give a view, neither agreed nor disagreed or did not know.

Proposal 4 – Keeping the £15 per week increase in place for up to 3 years.

Of the 2294 respondents, 218 (10%) people disagreed with this proposal. Of the remaining 2076 returns (90%), 1469(64%) agreed and a further 607(26%) either did not give a view, neither agreed nor disagreed or did not know.

Proposal 5 – Keeping Disability Related Expenditure Assessment (DREA) at £20 per week for everyone.

Of the 2294 respondents, 168 (7%) people disagreed with this proposal.

Of the remaining 2126 returns (93%), 1471(64%) agreed and a further 655(29%) either did not give a view, neither agreed nor disagreed or did not know.

“Unless you are prepared to cease providing a home care service, which I guess you would regard as unthinkable, a scheme involving the five proposals you outline would seem inevitable. Clearly this will mean some current users will no longer use all services as the cost will be beyond their means”

A service user

1.4. Feedback

The questionnaire provided a space for people to give us their comments and feedback with regards to the proposed changes and to give us their suggestions of how we could raise income. 999 people made comments within the questionnaire and 53 people and organisations wrote in with their views.

1. See Appendix 1

2. See Appendix 2 for notes on meetings

The 13 key topics covered in the individual and group comments received were analysed in broad themes as shown in the table below.

Key Topics	Number	Percentage
More money from central government/raising taxes and benefits	208	19.8
KCC should not waste money/Better value for money	203	19.3
Cannot afford it	137	13.0
Charge for care should be means tested/phase in the increase	131	12.5
Do not understand the questionnaire	112	10.6
I've paid taxes all my life/ KCC should not charge	75	7.1
Comments about asylum seekers, benefit claimants etc	54	5.1
It is fair to pay/contribute towards care/happy with care received	50	4.8
Better use of other resources (Direct Payment/ Independent Living Fund/Volunteers)	20	1.9
Simplify the system	20	1.9
Decision is already made	18	1.7
Comments about the Public Meetings/KCC documentation	13	1.2
Unrelated Comments	11	1.0
Total comments	1052	

“There is much publicity at present which argues for an increase in public funding for the elderly. It is, according to the experts, a fact that disposable incomes provided by government have decreased in real terms over the past 10 years and this trend is continuing”.

Carer of 94 year old service user

2. Consultation Purpose

In October 2002 and in April 2003 KCC's domiciliary charging policy was changed from a banding system to one which was broadly, but not fully, compliant with the *Local Authority Circular (2001) 32*. Generally the policy was implemented successfully but further changes were made to the policy in April 2006. The reason for these changes was to amend the policy so that it was fully consistent with the *Fairer Charging Guidance*. The policy is based on a careful assessment of a person's circumstances and his or her ability to pay. Charges for those assessed as having to pay towards the cost of their services are based on the comparison of a percentage of **available income** (currently set at 65%) with the cost of the care package and the lower figure is applied.

The purpose of the consultation was to obtain the views of service users, carers, service user representatives, and user and carer groups on the following proposals:

- increase the percentage of available income taken into account to work out a person's charge from 65% to 85%
- use the actual cost of providing home care services to work out what a person should pay, instead of a standard cost as it is now
- make sure that no-one who is receiving home care services, and has been assessed as having to pay towards the cost of his or her services, pays more than an extra £15 per week from October 2007 on top of his or her present charge (this is called a cap)
- keep the £15 per week cap in place for up to 3 years, if it applies

- keep the Disability Related Expenditure Assessment (DREA) at £20 per week for everyone

3. Methodology

The consultation was undertaken over a 12-week period between 8 May 2007 and 31 July 2007 and consisted of four separate methods.

Written consultation – a letter explaining why we were consulting and a questionnaire giving details on each of the proposals was sent to all service users, those acting on behalf of someone receiving services or those representing a user or carer group³.

Telephone Hotline – a dedicated Freephone number (0800 298 6002) was set up to answer questions and to assist people in completing the questionnaire over the telephone.

Online consultation – a dedicated online consultation page was set up on the KCC Website www.kent.gov.uk/chargingconsultation.

Public meeting consultation – attached to the letters and questionnaires, which went out in May 2007,⁴ was information regarding the public meetings. Three public meetings were held as part of the consultation process. The first took place on 22 May 2007 at The Age Concern Office, Whitstable between 7pm and 8pm and was attended by 23 members of the public. The second was held on 23 May 2007 at the Tonbridge and Malling Borough Council Office between 7pm and 8pm and was attended by 22 members of the public. The third meeting was held on 28 June 2007 at the Julie Rose Stadium, Ashford between 10.30am and 12 pm and was attended by 8 members of the public.

Janet Hughes, Director of Commissioning and Provision (East), and Margaret Howard, Director of Commissioning and Provision (West) chaired the meetings. Kevin Lynes, Cabinet Member, Adult Services was the Key Note Speaker at the meetings⁵.

Kevin Lynes also wrote to Kent County Councillors and Kent Members of Parliament to inform them of the consultation exercise and the proposed changes to the policy. The Adult Services Policy Overview Committee meeting on 24 April 2007 debated the proposals and commented and contributed to the final proposals put to the public.

“How can it be right that earnings are disregarded when assessing a charge for a service user? It seems that the more ill you are the more severely you are attacked and that people on low incomes will be pushed to the edge”.

A younger disabled service user who attended one of the public meetings

3 See Appendix 1

4 See Appendix 1

5 See Appendix 2 for the notes of these public meetings

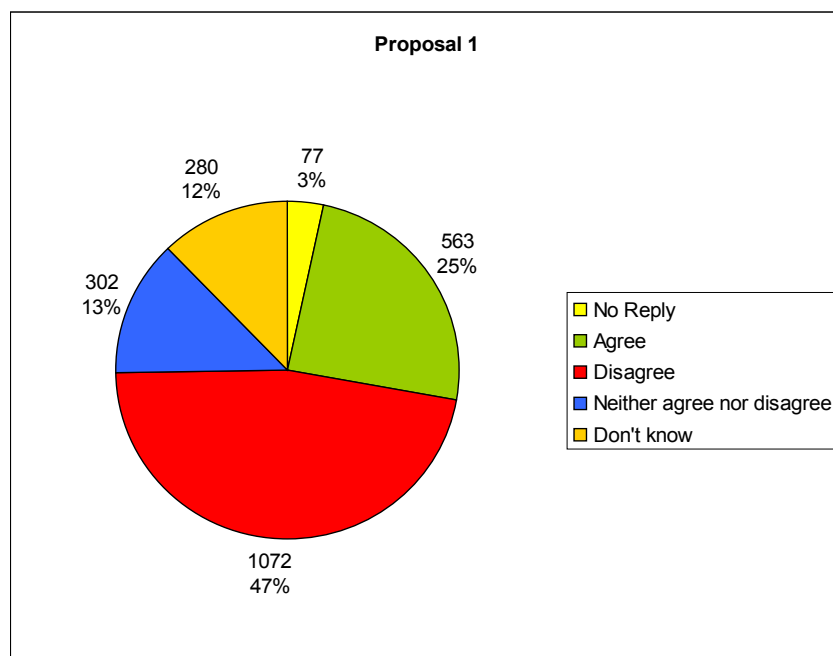
4. Responses to the Proposals

We received 2294 responses to the 9000 questionnaires. This represented a response rate of 25%.

The tables below provide a breakdown of the responses to each of the consultation proposals.

Proposal 1: Do you agree that KCC should increase from 65 to 85 the percentage of available income to work out a person's charge?

No reply	Agree	Disagree	Neither agree nor disagree	Don't know	Total Responses
77	563	1072	302	280	2294



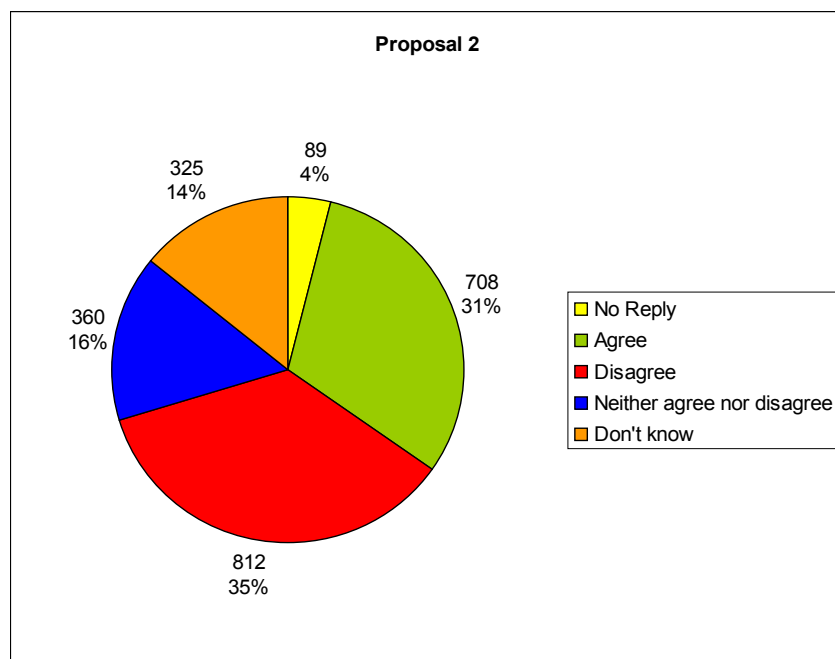
It is evident that the largest single response was from people who disagreed with this proposal, namely 1072, 47% of total responses. This compares with 25% of the total responses that positively told us that they agreed. However, it is interesting to note that 53% of the total responses were from people who did not tell us they disagreed with this proposal.

*“The Power to charge is **discretionary not mandatory**, but charges if any, must be fair and reasonable, not punitive”.*

A service user group

Proposal 2: Do you agree that KCC should use the actual cost of providing home care services to work out what a person should pay, instead of a standard cost as it is now?

No reply	Agree	Disagree	Neither agree nor disagree	Don't know	Total Responses
89	708	812	360	325	2294



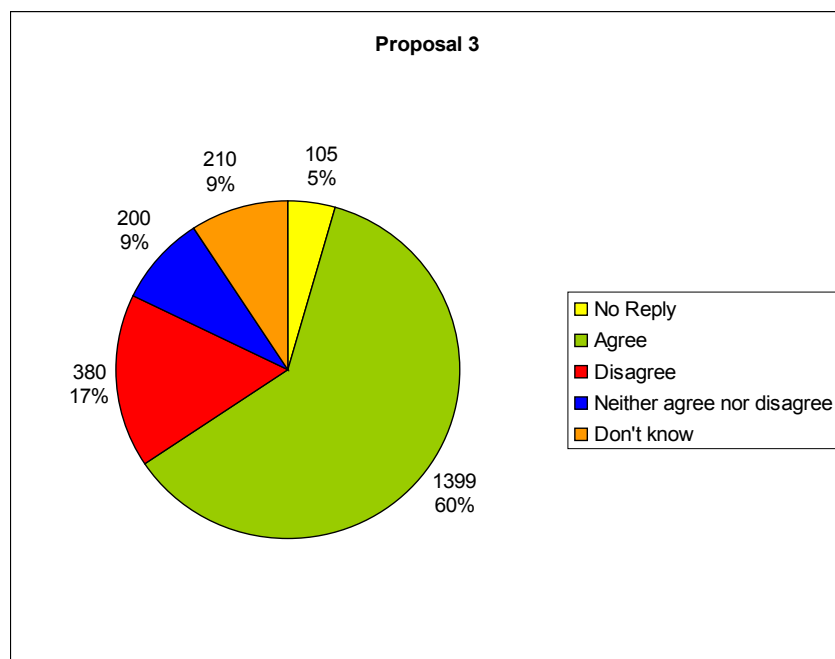
As with proposal 1, it is evident that the largest single response was from people who disagreed with this proposal, namely 35% of the total response. However, the number of people who told us they positively agreed with this proposal is only slightly less at 31%. Again, it is interesting to note that 65% of the total responses were from people who did not tell us they disagreed with this proposal. What we do not know is the proportion of people in this position who responded in each category. This proposal will, in the main, affect people who either pay the full cost of their care (because they have capital above the upper capital limit) or whose charge is based on the cost of their care (because their available income is greater than the cost of their care). This may explain why 1482 (65%) people either agreed or did not express a view either way, whilst 812 (35%) disagreed with this proposal.

“Having served for over 20 years on the board of a multi national company, I am sure that you must use the actual cost of providing this service in your calculations”.

A service user

Proposal 3: Do you agree that KCC should make sure that no-one who is receiving home care services, will pay more than an extra £15 per week from October this year on top of his or her present charge?

No reply	Agree	Disagree	Neither agree nor disagree	Don't know	Total Responses
105	1399	380	200	210	2294

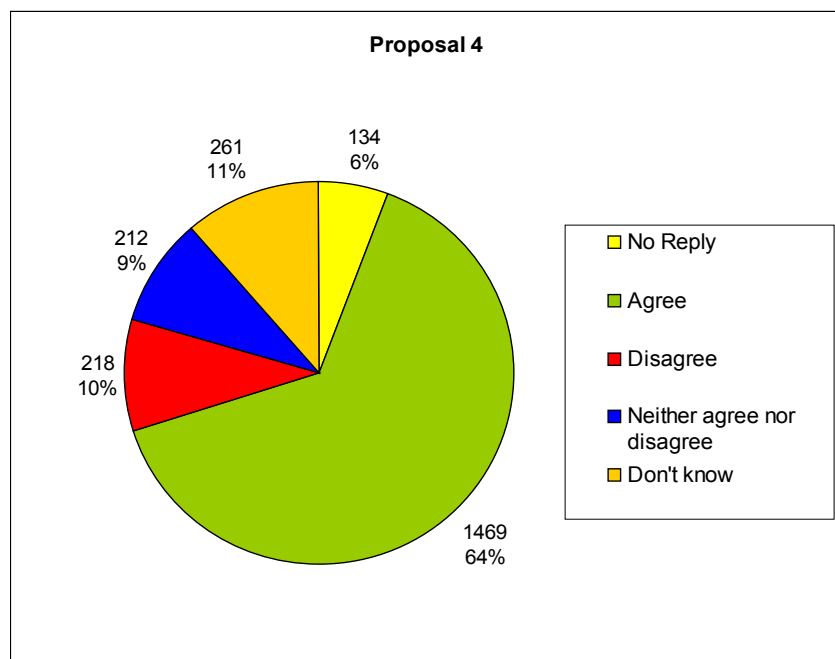


There is a strong agreement to this proposal. This response is consistent with the experience and the views expressed by service users and their carers when we made changes to the policy in April 2006.

“I expect to pay something, but it seems to me, that I am being penalised for saving”
An elderly service user

Proposal 4: Do you agree that KCC should keep the £15 per week maximum (cap) in place for up to three years, if it applies?

No reply	Agree	Disagree	Neither agree nor disagree	Don't know	Total Responses
134	1469	218	212	261	2294



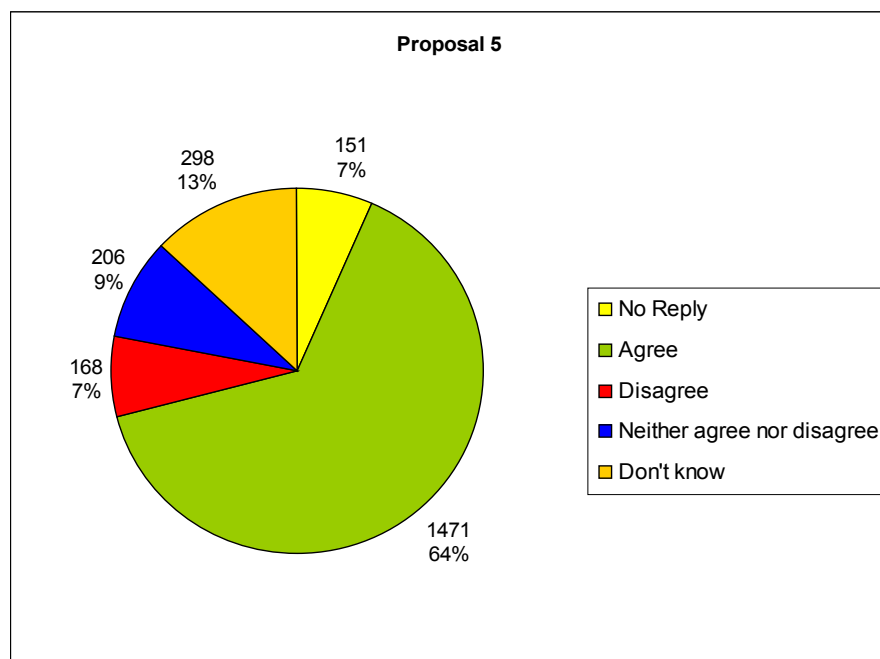
There was overwhelming support for this proposal which is entirely consistent with responses to Proposal 3 and therefore to be expected.

“People who require a considerable level of support should not be penalised by having to pay more than those who require a lower level of support”.

A carer

Proposal 5: Do you agree that KCC should keep the Disability Related Expenditure Assessment (DREA) at £20 per week for everyone?

No reply	Agree	Disagree	Neither agree nor disagree	Don't know	Total Responses
151	1471	168	206	298	2294



Disability Related Expenditure Assessment is the term used for extra costs that people have in their everyday lives because of their disability. A significant majority of people agreed with this proposal. This may reflect recognition that Disability Related Expenditure is difficult to assess and that giving everyone a £20 per week standard allowance offers a simple and more transparent solution. It should be noted that the relatively small number of people who did not agree will be able to exercise their right to an individual assessment, as is current practice.

*“The power to charge is **discretionary** not **mandatory**, but charges if any, must be fair and reasonable, not punitive”*

A Service User Group

5. Analysis of Key Topics

Key Topics	Number	Percentage
More money from central government/raising taxes and benefits	208	19.8
KCC shouldn't waste money/Better value for money	203	19.3
Can not afford it	137	13.0
Charge for care should be means tested/phase in the increase	131	12.5
Do not understand the questionnaire	112	10.6
I've paid taxes all my life/ KCC shouldn't charge	75	7.1
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Simplify the system	20	1.9
Decision is already made	18	1.7
Comments about the Public Meetings/KCC documentation	13	1.2
Unrelated Comments	11	1.0
Total comments	1052	

Source: The above comments were taken from the 53 letters we received and from comments made on 999 questionnaires returned. This gives a total of 1052 comments.

We asked people to give their suggestions as to how we could raise additional income. Overall, what people told us demonstrates an understanding of the wider issues and the complexities of paying for care which affect us all as a society.

As can be seen from the above table, the top suggestion made was to raise more money from central government and/or to raise Council Tax.

Many people commented on how KCC chooses to spend the money it has with an expectation that people get value for money and that public money should be spent well.

There was, for example, some criticism of spending on Kent TV and other high profile projects. Many of the comments recognised that there is a need to raise the money from somewhere which shows that people are not always against making a contribution but they expect this money to be used wisely.

We have particularly noted the concerns expressed by some people that they would not be able to afford their care. It is important to ensure that any change in policy does not leave vulnerable people without the essential services they need. One way to do this is to make certain that people receive all the benefits to which they are entitled.

We recognise that the Charging Policy with its link to the benefits system is complex and sometimes difficult to understand. We also recognise that consultation about how we charge for services may cause some people anxiety. Every effort has been taken to minimise this by explaining things as clearly as possible and making it simple for people to tell us what they think. The care and attention given to this consultation has successfully led to a good level and quality of responses. Unfortunately, despite this, it is clear that we did not get this right for some people. We will continue to try and improve communication with service users.

“We know prices have to go up from time to time to cover the increase in costs. The thing is if it wasn't for your services and others like you I would not be able to keep my dear husband at home with me, as I could not cope without help”.

Wife of a 76 year old service user

6. Conclusion

This consultation has generated a good number of responses from service users, their families and other interested organisations and individuals. We are very grateful to those who took the time to tell us what they think.

We recognise that this can be an emotive issue for some people. We hope that this work will contribute to the national debate and enable KCC to use the views expressed in lobbying central government for sufficient resources to adequately fund social care both now and in the future.

This report will be presented to the Cabinet Member for Adult Social Services and the Senior Management team within Adult Social Services for their consideration in August/September 2007.

Michael Thomas-Sam
Head of Service Policy and Service Development - Adults
Kent Adult Social Services

Mary Silverton
Policy Manager - Adults
Kent Adult Social Services

7. Appendix 1

BH-3 SP&S-A
Brenchley House
County Hall
125/135 Week Street
Maidstone
Kent ME14 1RF
Tel: (01622) 694895
Fax: (01622) 694911
Ask for Mary Silverton
Our ref: HQ/P&SD
Date: 8 May 2007

Dear Sir/Madam

Re: Changes we propose to make to Kent County Council's (KCC) Home Care Services Charging Policy

I am writing to you because you currently receive Home Care Services, act on behalf of someone who receives services or represent a user or carer group.

In April we usually increase charges in line with increases in benefits. KCC will continue to help people to claim all the benefits they are entitled to.

For this year only, the charge you currently pay for Home Care Services has not changed in April. This is because we want to use the time from May to July 2007 to get your views on changes that we propose to make to our Charging Policy from September 2007.

The reason we need to make some changes to our policy is that it is costing KCC more to provide Home Care Services as the number of older and disabled people increases. We think it is really important to continue providing Home Care Services to the people who need them so that they can stay independent in their own homes for as long as they choose. This is why KCC has decided to continue providing services to people with moderate needs as well as to those with substantial and critical needs. However, to be able to do this we have to increase our charges.

What we are proposing is to:

- i) Increase from sixty five to eighty five the percentage of available income taken into account to work out a person's charge
- ii) Use the actual cost of providing Home Care Services to work out what a person should pay, instead of a standard cost as it is now
- iii) Make sure that no-one who is receiving Home Care Services, and has been assessed as having to pay towards the cost of his or her services, pays more than an extra £15 per week from September this year on top of his or her present charge (this is called a cap)
- iv) Keep the £15 per week cap in place for up to three years, if it applies
- v) Keep the Disability Related Expenditure Assessment (DREA) at £20 per week for everyone.

If you do not pay anything at the moment you will continue to not pay anything unless your income increases.

People who pay towards the cost of their services will be affected if the new charges are approved. For those people whose new weekly charge will go up by more than £15 in September 2007, we propose to put in place a cap of £15 per week, as we did last year. We will keep this maximum cap of £15 per week in place for next year if, following the usual re-assessment in April 2008, any further increase is more than £15 per week on top of the charge from September 2007. We will also keep this cap in place for one more year if, following the usual re-assessment in April 2009, any further increase is more than £15 per week on top of the charge from April 2008. We have included examples in the questionnaire to show how the cap may work. The enclosed questionnaire gives you more details on each of our proposals. Please fill in the questionnaire and tell us whether you agree or disagree. You may be able to suggest some other ways of meeting this increased cost that we have not thought of. Please return the questionnaire in the pre-paid envelope by **31 July 2007**. Or, if you prefer, you can ring the Contact Centre helpline on Freephone 0800 298 6002 or E-mail social.services@kent.gov.uk to let us know your views.

You are welcome to attend one of the Public Meetings we are holding as part of the consultation exercise. Details of the meetings are enclosed with this letter. If you have any query or if there is anything in this letter or questionnaire that you do not understand, please ring the KCC Contact Centre helpline. The helpline can also provide this letter and questionnaire in other languages and formats if this will be more helpful to you.

Thank you for letting us know what you think about the changes we are proposing to make to our Home Care Services Charging Policy.

Yours sincerely



Oliver Mills
Managing Director, Kent Adult Social Services

KENT ADULT SOCIAL SERVICES

PUBLIC MEETING ABOUT THE PROPOSED CHANGES TO KCC's HOME CARE SERVICES CHARGING POLICY

Date: 22 May 2007
Time: 7 pm till 8pm
Venue: Age Concern Whitstable
The Day Centre Vulcan Close
Borstal Hill
Whitstable
Kent CT5 4LZ

Nearest parking: available in adjacent car park free of charge.

If you wish to attend this meeting and have any special requirements (such as transport), please contact Barbara Seaman on Freephone 0800 298 6002.

KENT ADULT SOCIAL SERVICES

PUBLIC MEETING ABOUT THE PROPOSED CHANGES TO KCC's HOME CARE SERVICES CHARGING POLICY

Date: 23 May 2007
Time: 7 pm till 8pm
Venue: Tonbridge & Malling Borough Council
Council Offices
The Castle
Tonbridge
Kent TN9 1BG

Nearest parking: available in adjacent car park free of charge.

If you wish to attend this meeting and have any special requirements (such as transport), please contact Barbara Seaman on Freephone 0800 298 6002.

Domiciliary Charging Questionnaire

Proposed Changes to Kent County Council's (KCC) Policy for Charging for Home Care Services

Introduction

This questionnaire has been sent to you because you currently receive Home Care Services, act on behalf of someone who receives services or represent a user or carer group.

The letter that comes with this questionnaire tells you why KCC needs to change its policy for charging for Home Care Services and that what we propose means that charges will increase for some people.

Please fill in this questionnaire and tell us whether you agree or disagree with the following 5 proposals. If you prefer, you can do this by ringing the Contact Centre helpline on Freephone 0800 298 6002, or by e-mailing us at social.services@kent.gov.uk or attending one of the two Public Meetings, as set out in the letter. We need you to tell us what you think by **31 July 2007**.

What we are proposing

PROPOSAL 1

Increase from 65 to 85 the percentage of available income taken into account to work out a person's charge

Government policy is that the income of people who receive Home Care Services should not fall below a certain weekly amount (known as the Protected Income Level) as a result of charging. This is to ensure that everyone has sufficient income to meet basic needs. The rest of a person's income is called 'available income'. Local authorities, like KCC, decide how much of a person's available income, if there is any, is taken into account to work out their charge. At present, KCC takes 65% of available income into account when working out a person's charge. Some other local authorities take into account up to 100% of available income.

KCC's present policy is that any charge is based on either the weekly cost of the care package or a percentage of the available income, whichever is the lower.

Example: - Mrs. Amber is an 85-year-old lady with a care package costing £86.40 per week. Her total income is £202.45 per week. Her available income after deducting housing and other expenses is £39.89 per week. The chart below shows how Mrs. Amber's charge would be affected this year by taking 85% of her available income into account rather than 65% as at present.

Year	Assessed charge per week	Actual amount per week paid by user
April 2006/ March2007	£25.92 (65%)	£25.92
April 2007/ August 2007	£25.92 (65%)	£25.92
September 2007/March 2008	£33.90 (85%)	£33.90

Do you agree that KCC should increase the percentage of available income taken into account from 65% to 85%?

Agree

Disagree

Neither agree nor disagree

Don't know

Can you suggest some other ways of meeting the increased cost to KCC of continuing to provide Home Care Services to people with moderate, substantial and critical needs?

PROPOSAL 2

Use the actual cost of providing Home Care Services to work out what a person should pay, instead of a standard cost as it is now

For many years we have used a standard hourly rate to work out what a person should pay. Over the years the difference between the standard and the actual cost of Home Care Services has greatly increased. As this is no longer affordable to KCC we propose to use the actual cost of Home Care Services to work out what a person should pay. This would only affect you if your charge were based on the cost of your services rather than your available income.

Example: - Using the standard cost of the service, a 10 hour per week care package costs £125.60 but the actual cost in this case is £145.00. This means that this care package is subsidised by KCC.

Do you agree that KCC should use the actual cost of a home care service rather than a standard cost to work out what a person should pay?

Agree

Disagree

Neither agree nor disagree

Don't know

Can you suggest some other ways to meet the difference in cost between what KCC actually pays for home care services and the standard cost that is used at present to work out what a person should pay?

PROPOSAL 3

Make sure that no one who is assessed as having to pay towards the cost of his or her Home Care Services will pay more than an extra £15 per week from September this year on top of his or her present charge

Increasing the percentage of available income to be taken into account and using the actual rather than a standard cost will affect people who have been assessed as having to pay towards the cost of their service. This is why we propose to limit any increase to no more than £15 per week on top of the present charge (this is called a cap).

Do you agree that KCC should make sure that no one who receives a Home Care Service at present and has been assessed as having to pay towards the cost of his or her service should pay more than an extra £15 per week from September this year on top of his or her present charge?

- Agree
- Disagree
- Neither agree nor disagree
- Don't know

PROPOSAL 4

Keep the £15 per week maximum (cap) in place for up to 3 years if it applies

To help people plan for any increased charge, we propose to keep this £15 per week cap in place for up to 3 years. This means that no one who is receiving services and has been assessed as having to pay towards the cost of their services would pay more than an extra £15 per week from September 2007 on top of his or her present charge.

We will keep this maximum cap of £15 per week in place for next year if, following the usual re-assessment in April 2008, any further increase is more than £15 per week on top of the charge from September 2007. We will also keep this cap in place for one more year if, following the usual re-assessment in April 2009, any further increase is more than £15 per week on top of the charge from April 2008. From April 2010, this cap would stop and everyone who has been assessed as having to pay towards the cost of their Home Care Services would pay their full-assessed charge.

Example: - Mr. Brown is a 70-year-old gentleman with a care package costing £135.00 per week. His total income is £340.18 per week. His available income after deducting housing and other expenses is £145.37 per week. The chart below shows how the new policy would affect Mr. Brown.

This shows a cap being in place for up to 1 year

Year	Assessed charge per week	Actual amount per week paid by user
April 2007/August 2007	£94.49 (65%)	£94.49
September 2007/March 2008	£123.56 (85%)	£109.49 (£94.49+£15 cap)
April 2008/March 2009	£123.56 (85%)*	£123.56**

* Would change in line with benefit changes.

** The cap stops in year two and the full-assessed charge is applied as the increase is £14.07, which is less than the £15 cap.

Example: - Mr. Charles is an 82-year-old gentleman with a care package costing £220.00 per week. His total income is £345.26 per week. His available income after deducting housing and other expenses is £150.27 per week. The chart below shows how the new policy would affect Mr. Charles.

This shows a cap being in place for up to 2 years

Year	Assessed charge per week	Actual amount per week paid by user
April 2007/August 2007	£97.67 (65%)	£97.67
September 2007/March 2008	£127.73 (85%)	£112.67 (£97.67+£15 cap)
April 2008/March 2009	£127.73 (85%)*	£127.67(112.67+£15 cap)
April 2009/March 2010	£127.73*	£127.73**

* Would change in line with benefit changes

** The cap stops in year three, as the increase is £0.06, which is less than £15.

Example: - Mrs. Duncan is an 80-year-old lady with a care package costing £129.60 per week. Her total income is £300.00 per week. Her available income after deducting housing and other expenses is £95.00 per week. The chart below shows how the new policy would affect Mrs. Duncan. Her charge was capped at £35.50 in April 2006, as the increase in her charge from £20.50 to £61.75 was more than £15.

This shows a new cap being in place for up to 3 years

Year	Assessed charge per week	Actual amount per week paid by user
April 2006/March 2007	£61.75 (65%)	£35.50 (£20.50+£15 cap)
April 2007/August 2007	£61.75 (65%)	£35.50 (20.50 + £15 cap)
September 2007/March 2008	£80.75 (85%)	£50.50 (£35.50+£15 cap)
April 2008/March 2009	£80.75 (85%)*	£65.50 (£50.50+£15 cap)
April 2009/March 2010	£80.75 (85%)*	£80.50 (£65.50 +£15)**

* Would change in line with benefit changes.

** The cap applies for the maximum of three years, as the increase in each year is more than £15.

Do you agree that a £15 cap should be kept in place for up to 3 years, if it applies?

Agree

Disagree

Neither agree nor disagree

Don't know

PROPOSAL 5

Keep the Disability Related Expenditure Assessment (DREA) at £20 per week for everyone

Disability-Related Expenditure (DREA) is the term for extra costs that people have in their everyday lives because of their disability. Government policy is that these additional expenses are considered when working out whether or not a person is able to pay something towards any service they receive.

At present KCC allows everyone £20 DREA per week. This is because people receiving a service do not have to keep and provide KCC with receipts or bills to show us what they have spent. It also means that KCC staff do not need to work out what each person should be allowed. We think it is simpler for both you and us to allow everyone the same amount.

However, anyone who receives a Disability-Related benefit may ask for an individual Disability-Related Assessment.

Do you agree that everyone should continue to get £20 DREA?

Agree

Disagree

Neither agree nor disagree

Don't know

Can you suggest some other ways that KCC could consider a person's Disability Related Expenditure?

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS QUESTIONNAIRE.

PLEASE MAKE SURE THAT IT IS RETURNED TO US, IN THE ENCLOSED PRE-PAID ENVELOPE, BY MONDAY **31 JULY 2007**.

What happens next?

We will write a report to let KCC Members know what you think of these proposals.

It will help them to come to a decision about changes to KCC's Home Care Services Charging Policy. We will put the report on our website at www.kent.gov.uk/SocialCare/about-social-care/surveys-and-consultations/

If you would like a hard copy of the report please ring us on Freephone 0800 298 6002 or e-mail social.services@kent.gov.uk

About You

<input type="checkbox"/>	I am (please tick the boxes that apply to you):
<input type="checkbox"/>	Service user
<input type="checkbox"/>	Carer
<input type="checkbox"/>	Other

(Please specify)

8. Appendix 2

KENT ADULT SOCIAL SERVICES PUBLIC MEETING RE PROPOSED CHANGES TO KCC's HOME CARE SERVICES CHARGING POLICY TUESDAY 22ND MAY, WHITSTABLE

KCC was represented by :

Kevin Lynes	KCC Member for Adult Services
Janet Hughes	(Chair) Director of Operations – East Kent
Anna Tidmarsh	Head of Adult Social Services – East Kent
Michael Thomas –Sam	Head of Policy and Service Development
Mary Silverton	Policy Manager

Number of Members of the Public Attended: 23

Points Raised

- Is it a £15 (cap) per week?
- It would (is it) sensible to remove Disability Related Expenditure Assessment (DREA)?
- DREA – if someone is paying the full amount, can they claim the full £20 – is it applicable because income exceeds benefit? People should have individual DREA.
- Some 200 people are going to be hit harder than others are – why?
- Centre for Independent Living feel that charging should be abolished – KCC do not have to charge – it is not mandatory
- There was no prior consultation with disabled people to discuss the content of the consultation – KCC breached Equalities scheme
- Why shouldn't everyone use Direct Payment – this would save on wages, pensions etc.
- Would it be an idea to get together with other authorities to see how they work?
- Disabled people are really penalised for needing services.
- Some carers (daughter of a service user) were concerned that the increase was too much and worried that she will need to cancel care – they said its putting the lady in a very difficult position
- When people were living in London they had 4 carers every day – down here its impossible to get care

- People will stop having carers in – they cannot keep funding the money – prisoners are treated better than older people
- A lot of holes in the statistics in the paper (letter and questionnaire mailed to service users)
- It is not right to consult for only 1 month
- There will be a lot more bed blocking because of the charges going up at a horrendous rate
- How can you possibly make a decision within a month of consulting – what happens on 1st September if the cost does go up –I feel it's a foregone conclusion
- £15 cap – what happens after 2-3 years? How come the standard charge was allowed to drift? Bad management. Care managers disappeared. Where is the care going to come from in the case of an emergency.
- DREA entitlement – don't get it if they are paying the full charge?
- What is the point in KCC comparing themselves to other councils when different amounts of money are involved.
- Direct Payment is a big saving on the authority
- People complained about the lateness of receiving the invitation to attend the public meeting

Service Quality Points

- Services are very disjointed throughout Kent – Care Managers are not working together. Some people do not know what Direct Payment is.
- What processes are we going to see if people start canceling care – who is going to be monitoring it?
- Complaints about the amount of time carers were staying with service users – i.e. if the carers should stay for, say, half an hour, they usually only stayed for 15 minutes. This needs to be investigated
- No Care Manager for over 18 months – no contact at all in that time
- I have a problem with carers not turning up when they are supposed to and then couldn't claim the money back
- The providers are the problem. They need to factor in travelling time when going from one service user to another

- What do you do when the provider calls to say the Carer cannot come at the allocated time – very annoying, especially if I have a hospital appointment

Other KCC related points

- Why did KCC sell off most of their Residential Homes? They made a lot of money from that – what happened to it? Why wasn't it used for Community Care
- Why did KCC waste £5m on the Turner Project when they (KCC) are seeking to get more money from disabled people

**KENT ADULT SOCIAL SERVICES
PUBLIC MEETING RE PROPOSED CHANGES TO KCC's HOME
CARE SERVICES CHARGING POLICY
WEDNESDAY 23rd MAY - TONBRIDGE**

KCC was represented by :

Kevin Lynes	KCC Member for Adult Services
Michael Thomas –Sam	Head of Policy and Service Developm
Margaret Howard (Chair)	Director of Operations - West Kent
Chris Belton	Head of Adult Services – WestKent
Mary Silverton	Policy Manager

Number of Members of the Public Attended: 23

Questions/Points Raised

- How does the proposal impact on service users who are in receipt of direct payments? Will I as a user of direct payments in West Kent subsidise those in East Kent who are in receipt of direct payments.
- Why is this proposal being considered at a time when the direct payment route is being promoted to service users? It is felt that this makes things particularly confusing for service users.
- KCC has breached the Disability Discrimination Act, as it did not involve disabled people at the inception of the consultation process. Why did it happen this way?
- A service user said that he felt KCC was paying lip service to the rights of disabled people. He felt that the questions on the questionnaires were steered towards certain answers and he was disappointed that no service users were involved in the design of the questionnaire. He also felt that the consultation was being rushed through. He referred to the groups “Shaping the year forward 2001” and the fact that he thought that nothing had changed.
- The increase in charge from 65% to 85% applies to someone whose available income is £200 per week or whose available income is £500 per week and it was felt that people on lower incomes would be affected disproportionately if the proposed changes are implemented. Some service users are also in a situation where they do not receive income support and therefore are not entitled to the related benefits. How are people on low incomes expected to manage? Do we have to come begging “cap in hand” to get charges waived or reduced?
- It would appear that the proposed changes to the charging policy are only connected to the recovery of cost by KCC. What proportion of the providers that contract with KCC are “not for profit”?

- Whilst you say that KCC will continue to provide services to those with an eligibility criteria assessed as moderate, does the proposed change in charging policy mean that these service users will be denied services due to their lack of ability to pay?
- My mother-in-law is unable to access direct payments as a Power of Attorney is in place for her. This is particularly worrying due to the poor standard of care that is provided for her through the agency that is commissioned by KCC. It would appear the care provided by agencies is not monitored by KCC.
- Why were consultation meetings arranged only in Whitstable and Tonbridge? I feel that other meetings should have been arranged to avoid long journeys for service users. At least a meeting should have been held in Maidstone, this being the County Town.
- How can it be right that earnings are disregarded when assessing a charge for a service user? It seems that the more ill you are the more severely you are attacked and that people on low incomes will be “pushed to the edge”.
- A service user told the meeting that he had written to all the Kent MPs with regard to the proposed change in charging policy to ask for support to ensure that this matter is brought more into the fore and issues about inequalities are addressed.
- How can Direct Payment Support Workers be advocates for service users if they are employed directly by KCC.
- Does the proposed change of policy produce inequalities for service users who are required to pay actual cost? The actual charge being dependent upon where they live and the contract(s) KCC has in place in their area.
- Should KCC encourage service users who receive direct payments to employ PA ‘s rather than go to agencies?
- Is a refund given to the service user if a carer fails to turn up for a call?
- My mother-in-law receives a care package from Social Services. How does she go about accessing direct payments?
- Why do service users who access direct payments not receive an automatic inflationary increase as Care Agencies who are contracted with KCC do?
- If the proposed change to the charging policy is implemented, how long will this extra income satisfy the financial expenditure?
- Will we have to go through the worry of having our charges increased on an annual basis?
- How much of Council Tax paid is spent on social care?

**KENT ADULT SOCIAL SERVICES
PUBLIC MEETING RE PROPOSED CHANGES TO
KCC'S HOME CARE SERVICES CHARGING POLICY.
28TH JUNE - JULIE ROSE STADIUM**

KCC was represented by:

Janet Hughes	Director of Commissioning & Provision, East)
Kevin Lynes	(Cabinet Member, Kent Adult Social Services)
Michael Thomas-Sam	(Head of Policy & Service Development)
Mary Silverton	(Policy Manager KCC)

Number of Members of the Public Attended: 8

Question summary:

- Has anybody suggested going to the government to ask for more money?
- Has changing the eligibility criteria for social care been discussed?
- Has council tax and rent etc been taken into consideration whilst working out the calculations?
- Relating to the two questions discussed. 1. Should the £15 cap stay in place and 2. Should the percentage go from 65% to 85%. Is this either/or? Can we agree to both?
- Do you think it is reasonable to leave somebody with such a small income?
- How do you expect this to implement Active Lives For Adults with such a small amount of money left after their charge has been deducted from their income?
- When will the final decision about whether this will go ahead be made and will it be a public meeting?
- Compared to other Organisations and Local Authorities does this change seem reasonable?
- Do other Organisations and Authorities charge less or more than you are proposing to charge.
- Are any of the people involved in this decision disabled?
- Do you think the changes will be fairer?
- How are we expected to pay our pensions, mortgages etc when we are left with so little, has this been taken into consideration?

- Do you think everybody should own their own home?
- Do you think everybody should live independently?
- How much would it cost each Council Tax payer in Kent if you were to spread the cost amongst these?
- Why should we pay more than we already are when certain care agencies are not even meeting our care needs?
- Cost of care is continually increasing so why don't we have KCC care units instead of always using outside agencies?
- Will the cost of care ever decrease?
- If a large amount of people do not agree with this and decide not to support the changes, will you go ahead and make the changes anyway? If so what is the point of these consultations?

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