

Kent Adult Social Care and Health

Consultation Report

Consultation on proposed changes to our charging policy to include the higher level of disability benefits in financial assessments.

Consultation dates: 6 February - 7 April 2024

<http://www.kent.gov.uk/adultsocialcarecharging>

Higher Level Disability Benefits - Consultation Report

April 2024

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Executive summary

Kent County Council (KCC) has undertaken a public consultation to gain feedback on proposed changes to the policy for chargeable care and support services provided or arranged at home and in the community.

328 responses were received. The below breakdown shows the extent to which they agree or disagree with the proposal.

How much do you agree or disagree with the proposal to include the higher rate benefits payment of AA, DLA and PIP in the financial assessment for existing and new people who receive care in their own home and in the community?	No. of responses	% of responses
Strongly agree	19	6%
Tend to agree	24	7%
Neither agree nor disagree	16	5%
Tend to disagree	23	7%
Strongly disagree	242	74%
Don't know	4	1%
Total number of responses	328	

Following analysis of the feedback the main themes from the open questions were the negative financial and wellbeing impact on the affected people, the perceived unfairness and discrimination of the proposal, and suggestions to find alternative sources of funding or savings.

10 themes were identified within the feedback. The below breakdown shows the number of responses for each theme. Some responses mentioned more than one theme so the number of responses to each theme is higher than the total number of questionnaires received.

If you have any comments on our proposal, please share these with us below:	No. of responses	% of responses
Theme		
Negative financial impact on people receiving the higher rate benefits payment of AA, DLA and PIP	283	42%
Negative impact on wellbeing for people	136	20%

receiving the higher rate benefits payment		
The proposal discriminates negatively against people receiving the higher rate benefits payment	109	16%
Strong negative emotions about the proposal such as being annoyed, stressed or worried	38	6%
Discrimination and negative financial, physical and mental impact on families and carers of people receiving the higher rate benefits payments	37	5%
Potential additional cost to KCC due to increased care needs	29	4%
Confusion about the proposal or felt there was a lack of information	19	3%
Difficult to complete the questionnaire online	11	2%
Comments on the legality of the proposal	10	1%
Concern that the decision has already been made	7	1%
Total number of responses	679	

Example quotes from consultee's responses have been included in section 3 of this document.

Comments were also received from respondents on the Equality Impact Assessment (EqIA) and can be found within section 3 of this document. These comments along with all of the feedback will be used to review and update the EqIA.

This report and the updated EqIA will be presented to KCC's Strategic Rest Programme Board and then included in a report to the Adult Social Care Cabinet Committee on 15 May 2024. Following these meetings, a decision will be taken by the Cabinet Member for Adult Social Care and Public Health.

This report and the decision will be made available on the consultation webpage www.kent.gov.uk/adultsocialcarecharging.

1. Introduction

From 6 February to 7 April 2024, Kent County Council (KCC) consulted on a proposal to include the higher level of disability benefits in financial assessments.

KCC provides adult social care services to approximately 16,394 residents aged over 18 years old. Approximately 15,806 of these people receive chargeable social care services, this includes providing services like residential care, and support and care in a person's own home or in the community.

When people living in Kent need adult social care, as well as assessing their care needs, we also assess their income to decide how much they pay towards their care. This is known as means testing. Some people don't pay anything, and the council picks up all of the cost, some people pay a contribution, and some people pay for all of their care.

KCC is proposing to stop disregarding the higher or enhanced rates of Attendance Allowance (AA), Personal Independent Payment (PIP) and Disability Living Allowance (DLA) when we calculate a person's contribution towards the cost of their care and support. This proposal does not impact on people who live in and receive care and support in a residential care home.

KCC sets out what and how people need to pay in the Adult Social Care Charging Policy. More information on the proposal, current policy, other options explored and why we are proposing to make these changes can be found in the Consultation Document, which is available from the consultation webpage www.kent.gov.uk/adultsocialcarecharging.

This document presents the analysis of the responses to the public consultation and the next steps.

2. Consultation process

Preparation for public consultation

The following activities and documentation were developed to deliver and support the consultation:

- Stakeholder analysis, including undertaking an Equality Impact Assessment (EqIA).
- Preparation of consultation and communication material, including Consultation Document, questionnaire, poster, letters, briefings and social media content.
- Presentation and discussion with KCC's People's Panel (members include people from the Older Peoples' Forums, Mental Health User Voice and the Kent Physical Disability Forum as well as Healthwatch Kent volunteers) to gather feedback on the proposal, options considered and review the consultation material.
- Formal meetings and updates at boards and committees to ensure input by the appropriate professionals.
- Briefing notes for all KCC members and Kent MPs.
- Written briefing for all care in the community providers with online briefing sessions.

Promoting the consultation

The consultation was promoted in the following ways:

- Letter to people who receive care and support.
- Direct emails to our stakeholder contact databases including contacts from health organisations, care sector, voluntary sector and community organisations, registered users of KCC's engagement website Let's talk Kent who have requested to be kept informed of Adult Social Care activity, and our Adult Social Care Your Voice network members.
- Organic and paid for social media Facebook, X and Nextdoor.
- Staff communications and provider communications via our bulletins, intranet, newsletters, briefing sessions and updates.
- Media release distributed to media outlets and uploaded to the Kent Media Hub website <https://news.kent.gov.uk/articles/call-for-views-on-future-care-charging>.
- Articles in KCC's residents' e-newsletter and Kent Association of Local Council (KALC) newsletter.
- Posters in KCC libraries and gateways.
- Digital adverts and content on websites including Kent.gov.uk homepage and Adult Social Care webpages and Connect to Support website.
- Briefing for all KCC Members and Kent MPs
- Briefing to Kent Community Wardens to enable them to raise awareness with the people and groups they engage with and provide support to participate as required.

- Targeted communication and engagement with community and disability groups and forums, including KCC’s Level Playing Field staff group and meeting with PAN disability forum.

Making the consultation accessible

The consultation was hosted on KCC’s engagement website Let’s talk Kent. To help make sure the consultation was accessible the following activity was undertaken:

- The webpage and all documentation met digital accessibility requirements.
- The Consultation Document provided examples to help illustrate how the proposed change could impact people and included a glossary explaining unfamiliar terms.
- All consultation material included details of how people could contact KCC to ask a question, request hard copies or alternative format.
- Providers and relevant KCC staff were briefed so that they could support people to participate in the consultation.
- A Word version of the questionnaire was provided on the consultation webpage for people who did not wish to complete the online version. Responses made by letter / email / telephone were also be accepted.
- Easy Read and Large print versions of the consultation material were available from the consultation webpage and on request.
- The webpage was translated into British Sign Language.
- The letters sent to people who received care contained a telephone number and email address to contact with any queries relating to the consultation.

Engagement with the webpage

A summary of the engagement with the consultation webpage and material during the consultation period can be found in the table below.

Engagement type	Total
Total visits to the webpage	2,306
Unique visitors to the webpage	1,721
Document downloads	880
Questionnaire completions	330
Telephone calls received	217
Hard copies provided	122
Emails received	92

Organic posts via Facebook had a reach of 38,693 and there were 210,155 impressions on X (Twitter) and Nextdoor.

Reach refers to the number of people who saw a post at least once and impressions are the number of times the post is displayed on someone's screen.

The posts generated 928 clicks through to the consultation webpage. (Not all social media platforms report the same statistics).

Paid Facebook adverts had a reach 87,304 and there were 335,960 impressions, which generated 3,107 clicks through to the consultation webpage.

3. Consultation responses

330 consultees took part in this consultation, completing the questionnaire either online (266) or hard copy (64).

Points to note

Consultees were given the choice of which questions they wanted to answer or provide comments on. Also, some of the questions were only asked to certain consultees depending on their answers to previous questions. Therefore, the number of consultees responding to each question may differ. The number of consultees providing an answer is shown in each table featured in this report. The sum of percentages for each table in the report may not add up to 100% due to rounding.

Respondents

The first question asked consultees to select from a list the option that best described how they were responding to the consultation.

Q1. Are you responding as ...?	No. of responses	% of responses
A person supported by adult social care or on behalf of a person supported by adult social care services	133	41%
A carer for a friend or relative that uses adult social care services	79	24%
A friend or relative of someone that uses adult social care services	59	18%
A member of the public	37	11%
A health or social care professional	6	2%
On behalf of organisation	5	2%
Other	8	2%
Total number of responses	327	

Responses were received from all respondent types included on the questionnaire. With the largest categories being 'A person supported by adult social care or on behalf of a person supported by adult social care' (41%, 133), 'A carer for a friend or relative that uses adult social care services' (24%, 79), 'A friend or relative of someone that uses adult social care services' (18%, 59) or 'A member of the public' (11%, 37).

Respondents who selected that they were responding as 'A person supported by adult social care services or on behalf of a person supported by adult social care services', 'A carer for a friend or relative' or 'A friend or relative of someone that uses adult social care services' were asked some follow up questions.

Do you, or the person you know supported by adult social care services, currently receive care provided by KCC in ...?	No. of responses	% of responses
Your own home	176	65%
In the community	77	28%
In a care home (as a resident)	10	4%
Don't know	8	3%
Total number of responses	271	

93% of respondents shared that they or the person they represent receive care in their own home or in the community.

Do you or the person you know pay a contribution/charge adult social care services that you receive in your/their own home or in the community?	No. of responses	% of responses
Yes	171	67%
No	74	29%
Don't know	9	4%
Total number of responses	254	

67% of respondents or the people they represent pay towards their own care.

What contribution do you or the person you know currently make towards the cost of the adult social care services provided by KCC?	No. of responses	% of responses
Nothing	2	1%
Pay some of the cost	137	80%
Pay most of the cost	21	12%
Pay the full cost	8	5%
Don't know	3	2%
Total number of responses	171	

97% of respondents or the people they represent contribute towards the cost of their care services.

How much do you or the person you know pay towards this care per week?	No. of responses	% of responses
I do not pay towards my care	0	0%
Under £20	20	15%
£21 to £40	43	32%
£41 to £60	17	13%
£61 to £80	17	13%
£81 to £99	8	6%
Over £100	26	19%
Don't know	5	4%
Total number of responses	136	

98% of respondents or people they represent pay towards their care with the majority of respondents or people they represent paying between £21 and £40 (32%).

Do you or the person you know receive any disability benefits?	No. of responses	% of responses
Yes	249	97%
No	5	2%
Don't know	2	1%
Total number of responses	256	

97% of respondents or people they represent receive a disability benefit.

Please tell us which of the following disability benefits you receive:	No. of responses	% of responses
Attendance Allowance (AA)	24	8%
Disability Living Allowance (DLA) Care Component	42	15%
Personal Independent Payment (PIP) Daily Living Component	201	70%
A different benefit	16	6%
Don't know	5	2%
Total number of responses	288	

Of the 249 people who responded 'Yes' to the previous question, they were then asked two follow up questions. 70% of respondents or people they represent receive PIP.

Do you receive any of the benefits listed above at the higher or enhanced rate?	No. of responses	% of responses
Yes	210	85%
No	16	6%
Don't know	21	9%
Total number of responses	247	

As above, of those that answered 'Yes' to a previous question, 85% of respondents or people they represent received benefits at the higher or enhanced rate.

How did you find out about this consultation?	No. of responses	% of responses
An email from adultsocialcarecharging@kent.gov.uk	44	13%
An email from Let's talk Kent or KCC's Engagement and Consultation team	36	11%
From a friend or relative	12	4%
From a member of KCC adult social care staff	28	8%
From my Parish / Town / Borough / District Council	7	2%
Kent.gov.uk website	9	3%
Newspaper	1	0%
Saw a poster	3	1%
Social media (Facebook, Nextdoor or X (Twitter))	24	7%
Letter	166	49%
Other	8	2%
Total number of responses	338	

49% of respondents or people they represent found out about the consultation from the letter that was sent to them.

Towards the end of the questionnaire consultees were given the opportunity to answer some additional demographic questions. It was not necessary to answer these questions if they were responding on behalf of an organisation. 240 respondents agreed to answer these questions, and the responses have been included in Appendix 1.

Consultation responses to our proposal

The questionnaire provided a summary of the proposals and link to the Consultation Document for more information. Consultees were asked if they agreed or disagreed with the proposal.

How much do you agree or disagree with the proposal to include the higher rate benefits payment of AA, DLA and PIP in the financial assessment for existing and new people who receive care in their own home and in the community?	No. of responses	% of responses
Strongly agree	19	6%
Tend to agree	24	7%
Neither agree nor disagree	16	5%
Tend to disagree	23	7%
Strongly disagree	242	74%
Don't know	4	1%
Total number of responses	328	

13% (43) respondents indicated that they either strongly agree or tend to agree with proposal and 81% (265) tend to disagree or strongly disagree. The highest response was strongly disagree, with 74% (242).

Respondents were then given the opportunity to provide comments on the proposal in their own words. These comments have been grouped into themes, as shown in the table below. Individual comments may have included more than one theme so the number of responses will be more than 330.

If you have any comments on our proposal, please share these with us below:	No. of responses	% of responses
Theme		
Negative financial impact on people receiving the higher rate benefits payment of AA, DLA and PIP	283	42%
Negative impact on wellbeing for people receiving the higher rate benefits payment	136	20%
The proposal discriminates negatively against people receiving the higher rate benefits payment	109	16%
Strong negative emotions about the proposal such as being annoyed, stressed or worried	38	6%
Discrimination and negative financial, physical and mental impact on families and carers of people receiving the higher rate benefits payments	37	5%
Potential additional cost to KCC due to increased care needs	29	4%

Confusion about the proposal or felt there was a lack of information	19	3%
Difficult to complete the questionnaire online	11	2%
Comments on the legality of the proposal	10	1%
Concern that the decision has already been made	7	1%
Total number of responses	679	

Four of the themes highlighted the fact that this proposal would have a negative impact on people affected or those that care for them. The most common theme was the negative impact this proposal would have on people financially, which was raised 283 times.

There were no positive themes from these comments.

Several quotes from consultee's responses have been included below to illustrate the themes that have been raised. Please note that the quotes are in people's own words and have not been edited.

Example quotes

"As a person on benefit and DLA iam on high rate mobility/high rate care. You took my enhancement off me because my P.A lives in my home already. I'm already paying for the extra gas electric water etc on top for that person. If you do this I will not be able to survive and pay any bills at all. Already struggling on bear bones now. If you do this you will make me homeless or leave me with no carer. So you will have to put me in a care home. Then house my family. I am at the point of thinking about suicide, congratulations KCC" (A person supported by adult social care services, or on behalf of a person supported by adult social care services)

"We are in a cost of living crisis. Disabled people are currently struggling as it is. To take more money from them is shocking, How do you expect them to afford even the basics?

I have read social media posts where disabled people have considered suicide because of this. Is that something that Kent Council are comfortable with?

Look at the actual figure that disabled people would be left with should you decide to take more money from them. Then ask yourself how you would manage with such a small amount.

As a Council, you waste loads of money. Spend wisely and you won't need to leave disabled people living in poverty." (A member of the public)

"You are targeting the most vulnerable group of people - many have no voice and cannot understand your proposal and the impact it will have on them. They cannot oppose the proposal which means the outcome of your Consultation (i.e. based on the

responses you receive) will be questionable. Some individuals will have family to speak for them but many do not have family and are solely reliant on their care companies - it is doubtful that they will be opposing this on behalf of their clients.

Many of the affected group are the people that KCC makes no provision for in the day services and activities they offer. These are the people receiving the worst services and minimal stimulation. While KCC provides these services for some people, many of the affected group receive nothing. Your expectation is that the care providers provide stimulating daily opportunities but they do not.

You are proposing to take more money from people when the quality of the care they receive is often below standard. Care companies are unable to recruit, they are using agency workers and experiencing poor staffing levels. Are they even able to provide the number of hours of care that you are paying them for each individual? The group of people that you want to pay more are being cared for by total strangers - agency workers. These people who cannot express themselves are being cared for by staff who do not know their needs (usually complex) and as a result cannot provide a high standard of care. Yet you are expecting them to pay more. They have total strangers coming into their homes to care for them, they wake up in the night to find a total stranger in their homes. How would you feel if that were you?

Why is it just these groups that you are targeting? Why not everyone? Why is it fair that only they should pay more to plug the gap for everyone?

Referring to the charging principles of the Care Act as set out in your consultation:

Promote wellbeing, social inclusion and support the vision of personalisation, independence, choice and control:

For the individuals that KCC wants to charge more for their care, KCC is certainly not promoting wellbeing and social inclusion - you provide no activities or opportunities for social interaction/ inclusion for them (unlike others with lesser needs that you do provide for). And no doubt the additional revenue raised from your proposal will help to maintain these services even though those with high needs, who will be paying more, cannot access these services.

Be person-focused - individuals are expected to fit into a care providers model of care , there is no person-centred approach.

This proposal is not fair. One group of individuals are going to be charged more to pay for everyone's care. Fair would be for everyone to pay some more and share the burden. The proposal does not apply equally, it impacts those with the highest needs and the most severely disabled.

You are already discriminating against many of these individuals in that you only provide day opportunities for those with mild to moderate learning difficulties. There is nothing

for those with severe learning difficulties - so those that you want to pay more are the ones receiving the poorest services,

In fact, with the absence of day services and activities, any activity that they do access costs them more as they not only have to pay for themselves but also their carers. With the absence of day activities and the use of agency staff, often the only activity they get is a long drive in the car and they pay for the fuel which is costly. Therefore, charging them more and reducing their available income will further reduce access to any activities, reduce wellbeing, social inclusion and any stimulation. There will be no scope for any person-centred approach.

Individuals are awarded higher rates for a reason. They have specific and higher care needs that usually mean additional expenses.

Sadly, those specific and high care needs are not provided for adequately within the current care system. However, you want them to pay more for care that is not meeting their needs, which is a situation that KCC continues to ignore.” (A person supported by adult social care services, or on behalf of a person supported by adult social care services)

“As the person paying for this, my finances would be severely affected by any increase like this. This would put my whole life in jeopardy and make living impossible. This amount of money is far too much to take from those already struggling and I do not agree with this at all. It would mean I have to choose between having care or eating/heating my house. Many may have to lose care which then causes safety and living problems. This in turn will increase health issues for the disabled and elderly and add to NHS costs. I know that if I am stressed about bills and living costs, my health suffers and deteriorates. It makes me more ill. This increases the need for more treatments in a vicious circle.

Now it is becoming impossible to access NHS treatments and medications, these have to be paid for out of disability money. It is very expensive to be disabled.

Once again this is an attack on the vulnerable and disabled when there would be other areas that could be used such as high salaries and bonuses for workers at the council.

The strain of being disabled and suffering each day is bad enough, this proposal would add so much misery to people who are already leading compromised lives. I cannot believe how cruel the council is to attack the disabled like this. There is NOTHING right about doing this and it will lead to more health issues, both physical and mental. It will lead to people possibly losing their homes. And treating older people who have given to this country throughout life, is beyond despicable. This is the lowest form of discrimination I have come across. There may well be a gap in the finances, but as someone who worked for the council in Highways, I saw how much false economy there

was and so much waste. This is not the fault of the disabled so do not use them to plug a gap that has been caused by other factors.

The NHS is letting disabled people down and many treatments that make life tolerable are now unavailable unless paid for privately. Even if available the waiting lists mean deterioration in health whilst waiting, therefore many disabled people are forced to go privately. So now disabled people are struggling to pay for a lot of their own care and the council wants to take more money from them, this will push many into more poverty.

People do not choose to be disabled and this would make them suffer even more. Why is this government taking away the rights that disabled people have fought hard for. It is like we are going backwards. When the election comes around, I will not forget this.

The levels of anxiety and depression through just being disabled are a constant battle, to take money away from disabled people, who are already struggling, will increase these levels. In fact, even the mere thought of what you are doing has increase my anxiety and depression ten-fold. This is yet another battle to fight and is so demoralising and demeaning. It makes disabled people feel like they are worth nothing.” (A person supported by adult social care services, or on behalf of a person supported by adult social care services)

“You are financially targeting one of the most vulnerable cohorts (vulnerable, disabled and elderly) most of whom will be unable to respond to letters and your 'consultation' around wanting to charge a high contribution. A cohort, who find themselves made more vulnerable because of the catastrophic lack of social care, and in my experience, poor quality 'care'. Many individuals in this cohort are already contributing hundreds of pounds per month, toward the 'care' following a financial assessment by the Council, and determination that they can live on a minimum income. The reality is they cannot; they too suffering from eye watering inflation and essentials such as food and heating being out of reach.

This approach is immoral.

If charged more, it will no longer be possible to pay for social care in the home. NHS 'continuance of care' will be sought by many I hope.” (A health or social care professional)

“We are now deeply distressed regarding this. As we are on benefits and only get income support & carers for our sons. I myself suffer bad mental health as well as MS & PsA and feel now yet again disabled and the ones on the very lowest of financial income are being target YET again. I feel that we are just a burden on society now.

I pray that you consider this as we have NO savings.” (A person supported by adult social care services, or on behalf of a person supported by adult social care services)

"I am writing to register my shock and disapproval that you are contemplating targeting the sick and elderly to claw back money to pay off over spends and wastage.

I am severely disabled due to MS, I receive the highest component of PIP because of this. My bills are higher due to being primarily housebound, thus higher heating bills and higher energy bills to maintain the running of my mobility aids, hoist, bed, wheelchair, etc. My finances are already stretched to the limit.

I eagerly await the day that euthanasia is legalised in the UK, but, until then, I have to "exist".

Please, please, please reconsider singling out the most vulnerable and in need." (A member of the public)

"I have just read your new proposals for adult social care funding and to say I am disgusted is an understatement. You have over spent for years and are now praying on the vulnerable people in society to bail you out of the situation you have got yourselves in to. You are leaving people in hospitals unnecessarily because then the NHS has to fund their support and not you, so not only are you taking away beds from people that actually need them you are stopping people who don't need them from living a better life for themselves.

Your heartless approach to adult social care and the funding is reprehensible. How can you justify any part of the proposals you have made? The people needing the support aren't the reason you haven't been able to manage a budget for years and years. You are the problem and it is absolutely horrendous that you find this anywhere near acceptable.

Of course, it's all about cutting corners and saving money for you so you don't care what happens to the people it affects.

Diabolical behaviour." (A member of the public)

"You are planning to discriminate against disabled people with higher needs by making them pay more, the very people who cannot fight for themselves as the extent of their disabilities don't allow them to. These are the most vulnerable people in our society who we should be protecting not abusing in this way. Every time disability benefits increase, KCC simply take them away, leaving these vulnerable people in financial poverty. All you'll end up doing is forcing people into residential care and much higher cost to KCC. You should be increasing awareness about direct payments and making changes to how you run your direct payment schemes to actually encourage people to use this. It works out as a much cheaper option for KCC when people employ their own staff, but you continually put barriers in place that stop people using them. You don't allow people to pay enough to employ staff (even though it's far cheaper than agencies charge), you

don't put an automatic uplift in wages each year (do your staff go years without a pay increase? No they don't and there would be uproar if they did). You won't allow home owners to access DFG's to build a space for carers to stay making it difficult to gets staff and for families sharing their homes with disabled relatives and carers. You refuse to allow direct payments to be used flexibly, such as purchasing equipment for a disabled person, we were told the mobile hoist we needed wouldn't be funded by KCC and we couldn't use our son's direct payment, we'd have to use his own money. He has no money because you deliberately keep him poor and force people to become charity cases.

It's actually the people who have these enhanced payments who have the highest disability expenditure requirements and it's these people who you should be automatically setting to 0 contributions. I hate to think how much money you waste on financial assessments and the stress it causes families who are dealing with so much and then have to become accountants on top of everything else whilst trying to keep their loved ones where they want to be at home.

As you will be aware In SH v Norfolk County Council [2020] EWHC 3426, the High Court decided that Norfolk's charging policy unlawfully discriminated against severely disabled people in the enjoyment of their benefits income (a human right), which is exactly what KCC is intending to do.

Our son is in the ESA group where he will never get paid employment, so this directly puts him at a disadvantage since others can earn without affecting their charges (or benefits within given parameters), thus they are capable of doing something to alter their poverty but our son cannot. Higher PiP daily care should not be included." (A person supported by adult social care services, or on behalf of a person supported by adult social care services)

Consultees were given the opportunity to make suggestions for how we could reduce the impact of these proposals or provide alternative options for us to consider. These responses have been grouped into themes in the table below. Some consultees took the opportunity to reiterate the feedback they provided to the previous question.

Do you have any comments on the alternative options we considered or any other options that you would like us to consider? Please tell us below:	No. of responses	% of responses
Theme		
Raise tax/council tax/funding somewhere else / tax higher earners	31	16%
Reduce staff/wage bill/money wastage / stop using agency staff / streamline services and internal processes	31	16%
Do nothing - no to the proposal	24	13%
Gradual/phased increase would be better	17	9%
Proposal is unrealistic / no common sense / unreasonable / unfair	10	5%
The budget deficit should be met by government funding	15	8%
Proposal is realistic / common sense / reasonable / fair	9	5%
A graded system dependant on the type of care and number of hours received	8	4%
Savings / income generations should be spread equally among all who receive care from ASCH and not just disabled people	8	4%
Re-assessment of Disability Related Expenses (DRE) / increase DRE	10	5%
Only apply the proposed change to new people receiving care and support from KCC's adult social care service from the date the new policy is implemented	8	4%
Stop illegal immigrants / migrants accessing public services until they have paid into them	4	2%
Look at councillor's pay and expenses	3	2%
Increase the Minimum Income Guarantee (MIG)	5	3%
Utilise direct payments more as a way of saving money	1	1%
Take into consideration the higher component of the mobility element, when not used for a Motability vehicle	1	1%
Take a percentage of the care component from people on lower rates	1	1%
Take away or charge services that don't endanger health or life	1	1%
Do not understand options	1	1%

Two clear themes rising from the suggestions were that KCC should find the funding elsewhere e.g. increase council tax and that KCC should look to reduce spend on staff, management or wastage, with both themes having 31 responses.

The next most common theme was “Do nothing – no to the proposal”, with 24 responses.

Several quotes from consultee’s responses have been included below to illustrate the themes that have been raised. Please note that the quotes are in people’s own words and have not been edited.

Example quotes
<p>“I understand savings need to be made but I feel a gradual increase would be better.” (A carer for a friend or relative that uses adult social care services)</p>
<p>“Yes raise tax somewhere else perhaps do a rich tax for people who earn over 100k and have more then one home , don’t take money from disabled people . It’s like going back to the 1800s perhaps bring back work houses?” (A person supported by adult social care services, or on behalf of a person supported by adult social care services)</p>
<p>“Your alternative options all focus on taking money away from disabled people. The budget deficit should be met by government funding. How about asking MP’s to start paying for their own lunches, for example.” (A carer for a friend or relative that uses adult social care services)</p>
<p>“Look at councillors pay and expenses. I am sure you can find savings there.” (A member of the public)</p>
<p>“Do nothing, and plug the funding elsewhere. Whilst I appreciate that there is a clear gap in the funding for KCC’s budget, targeting the most vulnerable people in our society is absolutely not the way to approach this. Do not use disabled people’s benefits, which are there to support them in their already difficult lives, to plug your gap in funding - this is not morally right or just.” (A member of the public)</p>
<p>“A combination of alternate proposals 1 and 2 - apply to new service users a step increase for existing service users Again - as above, protecting AA etc of those who are on a low income.” (A health or social care professional)</p>
<p>“I would propose looking into profit care providers are charging Care providers own supported living homes , and subsequently charge up to £2,500 per</p>

monthly rent on accommodation.

Often double of cost of identical rent on property .

Direct payment could save local authority's huge amount of money .

Care providers get fixed care package for each individual but often sharing support.” (A member of the public)

“The only fair option is to raise council tax. The burden is spread evenly, not just on the poorest and most disabled.” (A friend or relative of someone that uses adult social care services)

“Increased DRE only for people on enhanced disability benefits

Reduce the frequency of social worker review meetings” (A person supported by adult social care services, or on behalf of a person supported by adult social care services)

“A phased introduction will lessen the impact and allow individuals time to adjust personal budgets” (A person supported by adult social care services, or on behalf of a person supported by adult social care services)

Equality analysis

To help ensure that we are meeting our obligations under the Equality Act 2010, we produced an initial Equality Impact Assessment (EqIA) for the proposal put forward in this consultation. A summary of the impacts identified in the EqIA was included in the Consultation Document and the full EqIA was available to read from the consultation webpage. Consultees were asked to provide their views on the equality analysis. 150 respondents provided a response to this question.

These have been grouped into themes in the table below.

We welcome your views on our equality analysis and if you think there is anything we should consider relating to equality and diversity, please add any comments below.	No. of responses	% of responses
Theme		
Treat people equally and without discrimination	35	34%
Negative financial impact on people receiving the higher rate benefits payment	15	15%
Disagreed with the proposal or had alternative suggestions to savings / income generation	17	17%
Disagreed with EqIA's and the need for classifying	8	8%

We welcome your views on our equality analysis and if you think there is anything we should consider relating to equality and diversity, please add any comments below.	No. of responses	% of responses
people		
Negative wellbeing impact on people receiving the higher rate benefits payment	7	7%
Discrimination and negative financial, physical and mental impact on families and carers of people receiving the higher rate benefits payments	3	3%
Concerns that some consultees will struggle to participate in the consultation	11	11%
Potential additional cost to KCC due to increased care needs	3	3%
Concern that the decision has already been made	1	1%
Concern over the legality of the proposal	1	1%

Many of the themes recorded mirror those of the previous questions, including there being a large impact on people receiving the higher rate benefits payments of AA, DLA and PIP who could potentially be affected by the proposal.

The largest proportion of responses focused on the proposal not being equal for all or treating everyone equally.

Several quotes from consultee's responses have been included below to illustrate the responses to the EqIA. Please note that the quotes are in people's own words and have not been edited.

Example quotes
“It is not equitable to tax those most in need of support services more, purely on the basis their disability benefits are higher due to this need. I know my benefit is fully utilized in my own care needs for heating, additional costs related to my needs and care are more than the meagre benefit allows for.” (A member of the public)
“You are discriminating against disabled people by driving them into poverty and making them pay for a financial crisis caused by wealthy people.” (A carer for a friend or relative that uses adult social care services)
“This certainly sounds like another tax on the more vulnerable in society.” (A member of the public)

“Not much about making things equal with your proposals.” (A member of the public)

“I really feel that the disabled people that live in the community are left at a disadvantage already. Taking more off them will leave them more disadvantaged” (A friend or relative of someone that uses adult social care services)

“The proposed measure will obviously have a very serious negative impact on people with severe disabilities, especially those with congenital learning disabilities who are likely to have no savings or other income.” (A person supported by adult social care services, or on behalf of a person supported by adult social care services)

“Particularly concerned on effects of young people. Inequalities relating to being able to express views are also concerning. This is a complicated consultation document, some families may not have access to the internet to express views . Carers are exhausted and don't have time to complete such things. Risk of carer breakdown” (A friend or relative of someone that uses adult social care services)

“A further breakdown according to severity of disability needs to be considered, as the requirement for care and support exponentially increase the more severe the disability. Therefore these people will have a greater impact from taking the higher rate into account, and will result in a reduction in care and support given, reduction to ability to pay for basic daily living expenditure and an increase in the potential for more peoples to have to be referred to inappropriate and more costly residential living, thus increasing the Council budget rather than reducing and failing to meet the requirement under the Care Act to provide individuals with choice, let alone break the councils own policy of more viable people being able to live in own homes and as independent as possible.” (A carer for a friend or relative that uses adult social care services)

“Your not treating everyone the same. In actual fact you are targeting the most vulnerable.” (A carer for a friend or relative that uses adult social care services)

“Many people in the category that you're targeting are severely disabled, will often lack capacity, cannot read or write, cannot speak or are terminally ill. Their carers are exhausted, stressed and have no time to fill in even more paperwork on top of everything else they do. Therefore unable to respond to this consultation.” (A person supported by adult social care services, or on behalf of a person supported by adult social care services)

The above feedback will be used to update and further inform the EqIA.

4. Next steps

This report and the updated EqIA will be presented to KCC's Strategic Rest Programme Board and then included in a report to the Adult Social Care Cabinet Committee on 15 May 2024. Following these meetings, a decision will be taken by the Cabinet Member for Adult Social Care and Public Health.

This report and the decision will be made available on the consultation webpage www.kent.gov.uk/adultsocialcarecharging and an email will be sent to all of those who responded and asked to be kept informed via Let's talk Kent.

5. Appendix 1 – Demographic data from ‘About You’ equality monitoring questions

The below tables show the demographics of the consultee respondents. 240 respondents agreed to answer these questions. These questions were not mandatory so volumes may differ. Only the response options selected by consultees have been included in the tables. The full list of response options for each question can be found in the Word version of the questionnaire, which is available in Appendix 2.

Please tell us the first 5 characters of your postcode:	No. of responses	% of responses
CT	78	40%
TN	53	27%
ME	43	22%
DA	15	8%
BR	4	2%
HD	1	1%
TA	1	1%
DR	1	1%
Total number of responses	196	

Are you...?	No. of responses	% of responses
Female	131	56%
Male	92	39%
I prefer not to say	11	5%
Total number of responses	234	

Is your gender the same as your birth?	No. of responses	% of responses
Yes	224	96%
No	1	0%
I prefer not to say	9	4%
Total number of responses	234	

Which of these age groups applies to you?	No. of responses	% of responses
16-24	12	5%
25-34	30	13%
35-49	40	17%
50-59	50	21%
60-64	26	11%
65-74	38	16%
75-84	25	11%
85+ over	8	3%
I prefer not to say	6	3%
Total number of responses	235	

Do you regard yourself as belonging to a particular religion or holding a belief?	No. of responses	% of responses
Yes	104	44%
No	104	44%
I prefer not to say	27	11%
Total number of responses	235	

Which of the following applies to you	No. of responses	% of responses
Christian	89	85%
Buddhist	2	2%
Hindu	1	1%
Jewish	1	1%
Muslim	1	1%
Sikh	1	1%
Other	1	1%
I prefer not to say	9	9%
Total number of responses	105	

Do you consider yourself to be disabled as set out in the Equality Act 2010?	No. of responses	% of responses
Yes	170	72%
No	57	24%
I prefer not to say	8	3%
Total number of responses	235	

Please tell us the type of impairment that applies to you?	No. of responses	% of responses
Physical impairment	112	30%
Sensory impairment (hearing, sight or both)	41	11%
Longstanding illness or health condition, such as cancer, HIV/AIDS, heart disease, diabetes or epilepsy	75	20%
Mental health condition	55	15%
Learning disability	58	16%
I prefer not to say	4	1%
Other	23	6%
Total number of responses	368	

Are you a Carer	No. of responses	% of responses
Yes	81	35%
No	146	63%
I prefer not to say	5	2%
Total number of responses	232	

Are you ...?	No. of responses	% of responses
Heterosexual/Straight	166	72%
Bi/Bisexual	5	2%
Gay man	3	1%
Gay woman/Lesbian	5	2%
I prefer not to say	43	19%
Other	8	3%
Total number of responses	230	

To which of these ethnic groups do you feel you belong?	No. of responses	% of responses
White English	202	86%
White Scottish	4	2%
White Welsh	2	1%
Asian or Asian British Indian	3	1%
Mixed White & Black Caribbean	1	0
Mixed White & Asian	2	1%
Black or Black British African	1	0%
I prefer not to say	12	5%

Others	7	3%
Total number of responses	234	

6. Appendix 2 – Word version of consultation questionnaire

Included below is a full copy of the questionnaire.

Consultation Questionnaire

Kent County Council (KCC) is seeking your views on the proposed change to the Charging Policy for Adult Social Care provided in a person's own home or in the community. The proposal is to take into account the higher or enhanced rate of the following disability benefits when KCC calculates a person's income:

- Attendance Allowance (AA) for those receiving night care provided by KCC.
- Care component of the Disability Living Allowance (DLA) for those receiving night care provided by KCC.
- Daily living component of the Personal Independence Payment (PIP).

The consultation runs from 6 February to midnight on 7 April 2024

We recommend that you read the Consultation Document before filling in this questionnaire. All consultation material is available on our website at www.kent.gov.uk/adultsocialcarecharging.

A paper copy of the questionnaire along with a freepost envelope can be provided on request and sent by post to:

Consultation Team
 Adult Social Care & Health
 Kent County Council
 Invicta House
 Sandling Road
 Maidstone ME14 1XX

If you have any queries, please contact 03000 422 557 (Monday to Friday, 9am to 5pm) or email adultsocialcarecharging@kent.gov.uk.

Privacy: Kent County Council (KCC) collects and processes personal information in order to provide a range of public services. KCC respects the privacy of individuals and endeavours to ensure personal information is collected fairly, lawfully, and in compliance with the United Kingdom General Data Protection Regulation and Data Protection Act 2018. The full Privacy Notice is available at the end of this document.

Please ensure your response reaches us by midnight on Sunday 7 April 2024.

Section 1 – About You

If you are helping someone to respond because they cannot fill in the questionnaire themselves, please make sure your answers are about them and their details. If you also want to give your views, please fill in a separate questionnaire and include your details in that questionnaire.

Q1. Are you responding as...?

Please select the option from the list below that best represents how you are responding to this consultation.

Please select **one** option.

- | | |
|--------------------------|---|
| <input type="checkbox"/> | A. A person supported by adult social care services, or on behalf of a person supported by adult social care services |
| <input type="checkbox"/> | B. A carer for a friend or relative that uses adult social care services |
| <input type="checkbox"/> | C. A friend or relative of someone that uses adult social care services |
| <input type="checkbox"/> | D. A member of the public |
| <input type="checkbox"/> | E. A health or social care professional |
| <input type="checkbox"/> | F. On behalf of an organisation |
| <input type="checkbox"/> | G. Other |

If you are responding on behalf of an organisation, please give the name:

If you selected 'Other', please tell us how you are responding:

If you have answered Question 1 with options A, B or C, please go to the next question.

If you answered with options D, E, F or G please go to Question 9.

Q2. Do you, or the person you know supported by adult social care services, currently receive care provided by KCC in ...?

*Please select **one** option.*

- | | |
|--------------------------|-----------------------------------|
| <input type="checkbox"/> | A. Your own home |
| <input type="checkbox"/> | B. In the community |
| <input type="checkbox"/> | C. In a care home (as a resident) |
| <input type="checkbox"/> | D. Don't know |

If you answered Question 2 with options A or B, please go to the next question.

If you answered with options C or D, please go to Question 9.

Q3. Do you or the person you know pay a contribution/charge adult social care services that you receive in your/their own home or in the community?

*Please select **one** option.*

- | | |
|--------------------------|---------------|
| <input type="checkbox"/> | A. Yes |
| <input type="checkbox"/> | B. No |
| <input type="checkbox"/> | C. Don't know |

If you answered Question 3 with options A, please go to the next question.

If you answered with options B or C, please go to Question 6.

Q4. What contribution do you or the person you know currently make towards the cost of the adult social care services provided by KCC?

Please select **one** option.

- | | |
|--------------------------|-------------------------|
| <input type="checkbox"/> | A. Nothing |
| <input type="checkbox"/> | B. Pay some of the cost |
| <input type="checkbox"/> | C. Pay most of the cost |
| <input type="checkbox"/> | D. Pay the full cost |
| <input type="checkbox"/> | E. Don't know |

If you answered Question 4 with option A or E, please go to Question 6.

If you answered with options B, C, or D, please go to the next question.

Q5. How much do you or the person you know pay towards this care per week?

Please select **one** option.

- | | |
|--------------------------|---------------------------------|
| <input type="checkbox"/> | A. I do not pay towards my care |
| <input type="checkbox"/> | B. Under £20 |
| <input type="checkbox"/> | C. £21 to £40 |
| <input type="checkbox"/> | D. £41 to £60 |
| <input type="checkbox"/> | E. £61 to £80 |
| <input type="checkbox"/> | F. £81 to £99 |
| <input type="checkbox"/> | G. Over £100 |
| <input type="checkbox"/> | H. Don't know |

Q6. Do you or the person you know receive any disability benefits?

Please select **one** option.

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

A. Yes

B. No

C. Don't know

If you answered Question 6 with option A, please go to the next question.

If you answered with options B or C, please go to question 9.

Q7. Please tell us which of the following disability benefits you receive:

Please select **all that apply** option.

<input type="checkbox"/>

A. Attendance Allowance (AA)

B. Disability Living Allowance (DLA) Care Component

C. Personal Independent Payment (PIP) Daily Living Component

D. A different benefit

E. Don't know

If you selected 'A different benefit', please tell us which benefit you receive:

Q8. Do you receive any of the benefits listed above at the higher or enhanced rate?

Please select **one** option.

- | | |
|--------------------------|------------|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |
| <input type="checkbox"/> | Don't know |

Q9. How did you find out about this consultation?

Please select **all** that apply

- | | |
|--------------------------|---|
| <input type="checkbox"/> | An email from adultsocialcarecharging@kent.gov.uk |
| <input type="checkbox"/> | An email from Let's talk Kent or KCC's Engagement and Consultation team |
| <input type="checkbox"/> | From a friend or relative |
| <input type="checkbox"/> | From a member of KCC adult social care staff |
| <input type="checkbox"/> | From my Parish / Town / Borough / District Council |
| <input type="checkbox"/> | Kent.gov.uk website |
| <input type="checkbox"/> | Newspaper |
| <input type="checkbox"/> | Saw a poster |
| <input type="checkbox"/> | Social media (Facebook, Nextdoor or X (Twitter)) |
| <input type="checkbox"/> | Other, please tell us how you found out about this consultation: |

Section 2 – Our Proposal

As a council, we are facing a large increase in the cost of providing services and ever-increasing demand for services and need to find ways to make our services sustainable.

Spending growth in 2024-25 is £184.5m as stated in the updated draft 2024-25 budget. The net change to the budget is £100m (matched by funding increases through government grants, council tax, etc), leaving £84.5m gap in funding. Therefore, we are looking very closely across the whole council to close this gap through income, savings and use of reserves. One possibility is to make changes to the Adult Social Care Charging Policy.

We are proposing to start taking into account the higher or enhanced rates of the following benefits when we calculate what contribution individuals may need to make towards the cost of their care:

- Attendance Allowance (AA) for those receiving night care provided by KCC.
- Care component of the Disability Living Allowance (DLA) for those receiving night care provided by KCC.
- Daily living component of the Personal Independence Payment (PIP).

This would mean that for these people there could be an increase of up to £33.65 per week in the amount they have to pay towards their care.

This change would be applicable for all existing and new people receiving care from KCC's adult social care services in a person's own home or in the community, who have to financially contribute towards their care. The proposal is explained in full, from page 8 of the Consultation Document.

There are many other councils who already include the higher or enhanced rates of these benefits within the financial assessment. Appendix 4 of the Consultation Document provides more information.

Q10. How much do you agree or disagree with the proposal to include the higher rate benefits payment of AA, DLA and PIP in the financial assessment for existing and new people who receive care in their own home and in the community?

*Please select **one** option.*

<input type="checkbox"/>	Strongly agree
<input type="checkbox"/>	Tend to agree
<input type="checkbox"/>	Neither agree nor disagree
<input type="checkbox"/>	Tend to disagree
<input type="checkbox"/>	Strongly disagree
<input type="checkbox"/>	Don't know

Q10a. If you have any comments on our proposal, please share these with us below:

Please do not include any information that would identify you or anyone else in your answer.

On pages 10 and 11 of the Consultation Document we have provided information on alternative options we considered for how we could implement this change before reaching our preferred proposal.

Q11. Do you have any comments on the alternative options we considered or any other options that you would like us to consider? Please tell us below:

Please do not include any information that would identify you or anyone else in your answer.

To help ensure that we are meeting our obligations under the Equality Act 2010 we have prepared an initial Equality Impact Assessment (EqIA) for the proposal put forward in this consultation.

An EqIA is a tool to assess the impact any proposals would have on the protected characteristics: age, disability, sex, gender identity, sexual orientation, race, religion or belief, and carer's responsibilities.

On page 12 of the Consultation Document, we summarise the impacts that have been identified in the EqIA. The full EqIA is available from the consultation webpage www.kent.gov.uk/adultsocialcarecharging or on request.

Q12. We welcome your views on our equality analysis, including suggestions for anything we should consider relating to equality and diversity. Please add any comments below:

Please do not include any information that would identify you or anyone else in your answer



Section 3 – More About You

We want to make sure that everyone is treated fairly and equally, and that no one gets left out. That is why we are asking you these questions. We will only use this information to help us make decisions and improve our services.

If you would rather not answer any of these questions, you don't have to.

It is not necessary to answer these questions if you are responding on behalf of an organisation.

If you are responding **on behalf of someone else**, please answer using their details.

Q13. Please tell us the first 5 characters of your postcode

Please do not reveal your whole postcode. We use this to help us to analyse our data. It will not be used to identify who you are.

Q14. Are you...?

*Please select **one** option.*

Male

Female

I prefer not to say

Q15. Is your gender the same as your birth?

*Please select **one** option.*

Yes

No

I prefer not to say

Q16. Which of these age groups applies to you?

*Please select **one** option.*

<input type="checkbox"/>	0-15
<input type="checkbox"/>	16-24
<input type="checkbox"/>	25-34
<input type="checkbox"/>	35-49
<input type="checkbox"/>	50-59
<input type="checkbox"/>	60-64
<input type="checkbox"/>	65-74
<input type="checkbox"/>	75-84
<input type="checkbox"/>	85+ over
<input type="checkbox"/>	I prefer not to say

Q17. Do you regard yourself as belonging to a particular religion or holding a belief?

*Please select **one** option.*

- | | |
|--------------------------|---------------------|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |
| <input type="checkbox"/> | I prefer not to say |

Q17a. If you answered 'Yes' to Q17, which of the following applies to you?

*Please select **one** option.*

- | | |
|--------------------------|---------------------|
| <input type="checkbox"/> | Christian |
| <input type="checkbox"/> | Buddhist |
| <input type="checkbox"/> | Hindu |
| <input type="checkbox"/> | Jewish |
| <input type="checkbox"/> | Muslim |
| <input type="checkbox"/> | Sikh |
| <input type="checkbox"/> | Other |
| <input type="checkbox"/> | I prefer not to say |

If you selected Other, please specify:

The Equality Act 2010 describes a person as disabled if they have a long standing physical or mental condition that has lasted, or is likely to last, at least 12 months; and this condition has a substantial adverse effect on their ability to carry out normal day-to-day activities. People with some conditions (cancer, multiple sclerosis and HIV/AIDS, for example) are considered to be disabled from the point that they are diagnosed.

Q18. Do you consider yourself to be disabled as set out in the Equality Act 2010?

Please select **one** option.

- | | |
|--------------------------|---------------------|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |
| <input type="checkbox"/> | I prefer not to say |

Q18a. If you answered 'Yes' to Q18, please tell us the type of impairment that applies to you.

You may have more than one type of impairment, so please select all that apply. If none of these applies to you, please select 'Other' and give brief details of the impairment you have.

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Physical impairment |
| <input type="checkbox"/> | Sensory impairment (hearing, sight or both) |
| <input type="checkbox"/> | Longstanding illness or health condition, such as cancer, HIV/AIDS, heart disease, diabetes or epilepsy |
| <input type="checkbox"/> | Mental health condition |
| <input type="checkbox"/> | Learning disability |
| <input type="checkbox"/> | I prefer not to say |
| <input type="checkbox"/> | Other |

Other, please specify:

A Carer is anyone who provides unpaid care, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support. Both children and adults can be carers.

Q19. Are you a Carer?

*Please select **one** option.*

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
<input type="checkbox"/>	I prefer not to say

Q20. Are you ...?

*Please select **one** option.*

<input type="checkbox"/>	Heterosexual/Straight
<input type="checkbox"/>	Bi/Bisexual
<input type="checkbox"/>	Gay man
<input type="checkbox"/>	Gay woman/Lesbian
<input type="checkbox"/>	Other
<input type="checkbox"/>	I prefer not to say

Q21. To which of these ethnic groups do you feel you belong?

Please select **one** option. (Source 2011 Census)

<input type="checkbox"/>	White English	<input type="checkbox"/>	Mixed White & Black Caribbean
<input type="checkbox"/>	White Scottish	<input type="checkbox"/>	Mixed White & Black African
<input type="checkbox"/>	White Welsh	<input type="checkbox"/>	Mixed White & Asian
<input type="checkbox"/>	White Northern Irish	<input type="checkbox"/>	Mixed Other*
<input type="checkbox"/>	White Irish	<input type="checkbox"/>	Black or Black British Caribbean
<input type="checkbox"/>	White Gypsy/Roma	<input type="checkbox"/>	Black or Black British African
<input type="checkbox"/>	White Irish Traveller	<input type="checkbox"/>	Black or Black British Other*
<input type="checkbox"/>	White Other*	<input type="checkbox"/>	Arab
<input type="checkbox"/>	Asian or Asian British Indian	<input type="checkbox"/>	Chinese
<input type="checkbox"/>	Asian or Asian British Pakistani	<input type="checkbox"/>	I prefer not to say
<input type="checkbox"/>	Asian or Asian British Bangladeshi	<input type="checkbox"/>	
<input type="checkbox"/>	Asian or Asian British Other*	<input type="checkbox"/>	

*Other - If your ethnic group is not specified on the list, please describe it here:

Thank you for taking the time to complete this questionnaire; your feedback is important to us. All feedback received will be reviewed and considered before any decisions are taken.

We will report back on the feedback we receive, but details of individual responses will remain anonymous, and we will keep your personal details confidential.

Please ensure your response reaches us by midnight on Sunday 7 April 2024.