

CABINET

20 August 2013

ADULT SOCIAL CARE CONSULTATION FEEDBACK ON ELIGIBILITY AND CHARGING

Report of the Strategic Director for People

STRATEGIC AIM:	Meeting the health and wellbeing needs of our community		
KEY DECISION	YES	DATE ITEM FIRST APPEARED ON FORWARD PLAN	February 2013

1. PURPOSE OF THE REPORT

- 1.1 To provide feedback following the consultation on eligibility, contributions and charging agreed by Cabinet on 2nd April 2013 see appendix one for full consultation results.
- 1.2 This report outlines how the council can continue to meet the needs of the most vulnerable by rationalising and focusing expenditure and generating more income, in accordance with the Council's aims and objectives to meet the increased future needs for services and support.
- 1.3 To provide information and recommendations to Council following the consultation on adult social care eligibility levels/charging policies and prevention support, see appendix six for the public consultation document. Below are the six key areas that formed the basis of the consultation:
 - a. To amend the eligibility criteria from Moderate and above to Substantial and above
 - b. To increase net assessable income from 85% to 100%
 - c. To amend the maximum weekly charge from £170 to £364 per week
 - d. To charge for a second carer when one is provided
 - e. To include day care and social activity/access allowances charges in the financial assessment at a charge of £25 per day.
 - f. To amend the hourly charging rate from £11.50 per hour to £13 per hour.
- 1.4 Some of the key areas of the consultation have a high degree of complexity and are inter-related. Every effort has been made to provide comprehensive explanations of the key areas but it is clear from a number of responses to the consultation that there has been some level of misunderstanding.

2. RECOMMENDATIONS

- 2.1 **That Cabinet considers the Equality Act 2010 duty to ensure that there are no groups with protected characteristics adversely affected by any**

of the proposals. See Appendix 2 for the full Equality Impact Assessment (EIA).

- 2.2 That Cabinet recommends to Council that the eligibility criteria for Council services is raised from moderate to substantial or critical for all new referrals (for definitions see Appendix six) with effect from 1st October 2013.
- 2.3 That Cabinet recommends to Council that the eligibility criteria for all service users who are moderate are re-assessed to establish current eligibility. This to be implemented on a case by case basis following reviews of all service users currently assessed as Moderate. The reviews will begin week commencing 16th September 2013 and are predicted to be completed by the end of November 2013.
- 2.4 That Cabinet agrees to increase net assessable income from 85% to 100% with effect from 1st October 2013.
- 2.5 That Cabinet agrees that a maximum weekly charge of £364 (this is currently the lower rate charge for residential care) is applied to people who are assessed under the Department of Health Fairer Charging Policies for Home Care and other non-residential Social Services charging guidance as being able to pay this with effect from 1st October 2013.
- 2.6 That Cabinet agrees the proposal to charge for two carers with effect from 1st October 2013.
- 2.7 That Cabinet agrees that day care and access allowances are included in current and future financial assessments at a charge of £25 per day with effect from 1st October 2013.
- 2.8 That Cabinet agrees to an increase in the hourly charge rate from £11.50 to £13 per hour with effect from 1st October 2013, this has not been increased since 2008.
- 2.9 That Cabinet consider a further consultation on increasing the hourly charge to the actual cost at which the council commissions care, currently £15.75 with a proposed implementation date of 2014/15.
- 2.10 That Cabinet receives an update report in November 2013 and February 2014 that reviews progress of implementation including analysis of risk, outcomes for service users and financial efficiencies from a random sample of 25 cases.

3. REASONS FOR THE RECOMMENDATIONS

- 3.1 The Council agreed a Medium Term Financial Plan in February 2013, which included indicative savings for Adult Social Care of £65K for 13/14 and £200K for 14/15.
- 3.2 Adult social care has seen an increasing demand for services particularly from older people. A 70% rise is predicted in the over 65 group from 2013 to

2030 and a 40% rise in the over 75 group according to the 2011 census forecasts. Whilst recognising that these groups can make valuable contributions to the community through use of knowledge and volunteering the 75 + age group are most likely to require social care service and support.

- 3.3** Adult social care initial referrals have risen by 63% in the last year. In 2011/12 there were 1114 referrals compared with 1812 in 2012/13 and this has been managed with no increases in staffing levels. There has also been a rise of 30% in investigations for adult safeguarding, in 2011/12 there were 75 and in 2012/13 there were 98. These investigations are the responsibility of Adults Services and place an additional pressure on resources.
- 3.4** The challenge for Adults Services is to respond to these pressures with reduced resource, whilst at the same time sustaining the quality and satisfaction with the service and support delivered. This challenge is made more difficult because adult social care can only find savings and efficiencies through a relatively small number of methods. Demands for services are difficult to predict as are accurate income generation figures that might be generated from service users towards their care. This is because it is difficult to establish how many people coming into services will meet the “self funding” limit and when their savings are likely to drop below this limit. The council can only estimate when someone’s funds may drop if the person agrees to a financial assessment.
- 3.5** It was proposed that the Council’s charging system be revised in line with the principles of Department of Health Fairer Charging Policies for Home Care and other non-residential Social Services charging guidance. Where someone has over £14,250 of savings, these are taken into account as part of the income calculation. Where they have over £23,250 they are deemed as “full cost” and pay the maximum amount – this is currently locally set at £170 per week.
- 3.6** Agreeing to implement proposal (c) to raise the upper limit to £364 per week will discourage those who can afford to pay from presenting for subsidised support. Rutland currently has 40% of the people it provides support to assessed as “self funding” i.e. with over £23,250 in savings at 2013/14 National Guidance rates. Should self funding residents need residential or nursing care, the Council would not be liable to pay anything towards their care unless their savings dropped below the £23,250 threshold. This figure will continue to be linked to the lower rate of residential care which is reviewed annually. See Appendix 3 for an illustration.
- 3.7** Cabinet should be aware that Rutland County Council Reablement service will continue to be delivered free of financial assessment for up to six weeks for those who are assessed as being able to benefit from it. This has shown benefits in increasing the independence of service users resulting in 51% of people needing less intensive or no support after this period. This is in line with Association of Directors of Adult Services (ADASS) recommendations for Councils to provide prevention and re-ablement support to maintain independence and reduce demand on services. Comments from the consultation about preventative services are being taken into account in commissioning for future services. Local Authority Circular (DH) (2010) 6, directs that services delivered as reablement cannot be charged for.

- 3.8** Carer services are not included in these proposals and will continue to be provided. Direct payments for carers and support to carers continue to be free of financial assessment to support them in this valuable role. Some of the proposals were considered by carers to potentially put extra burdens on them. The burden on carers is mitigated by not including charges for carer services within the consultation as these will remain free of financial assessment.
- 3.9** This consultation should be viewed as one element of the proposed efficiencies. The Adult Social Care Reform Programme Board is also focusing on changes to systems and processes to improve efficiency and effectiveness and improving integrated working with Health partners and the voluntary and independent sectors.
- 3.10** The consultation and proposals are based on the assumption that contributions should be fair and transparent. Those who could afford to pay (according to the current national charging guidance) should pay a fair price for their care. The proposals do not differ from most other local authorities' current policies and do not go as far as some other authorities who implemented similar changes some time ago (see appendix five).
- 3.11** If the change to the eligibility criteria is agreed it will mean that from Autumn 2013 the level of service users eligible to receive Council support is changed. Specifically, only people whose needs and risks are assessed as being 'Substantial' or 'Critical' within the national fairer access/eligibility criteria scheme would receive services. Service users currently classed as moderate (Older people 116, people with disabilities 9 and Learning Disability 3) will need to be reassessed. This work will be undertaken by the Adult Social Care Reform project team and not by existing social care staff. This will ensure a fair and robust approach to these reassessments.
- 3.12** Cabinet should be re-assured that re-assessment of all those currently in the moderate criteria will include sign-posting to alternative services and support. Individual one to one support will be given to people whose ongoing care package is withdrawn by supplying information, advocacy, and advice on purchasing private care. A benefits check will also take place, where the person agrees, to establish if they are entitled to allowances to assist them to purchase their own care. No one who is deemed to be at risk of entering residential care if services were removed will be deemed as low or moderate. Where people are deemed to need additional social care support, this will be provided subject to financial assessment.

Currently people in receipt of day care services and/or an access allowance are not financially assessed for these. These people will receive a financial assessment in Autumn 2013.

Increasing the hourly charge rate to £15.75 would maximise the income and resources of the council and discourage those who can afford to pay for services applying for and receiving a subsidy. If this is approved by members a further consultation would need to be completed with a suggested implementation date of 2014/15.

3.13 Were all of the proposals in this report to be implemented, it would lead to increased income and savings for the Council and increased costs for some service users as illustrated in appendix 4. This report and appendix 4 demonstrates that agreeing to these measures will meet the medium term financial plan targets.

4. LEGAL IMPLICATIONS

4.1 The initial Cabinet Report on 2nd April 2013 informed Cabinet of the Council's obligation to conduct a formal consultation and its duties relating to equality and diversity if the impact of any decision may have an adverse effect on persons against whom it is unlawful to discriminate. In such a case the Council's statutory obligations will be taken into account and attempts must be made to mitigate the impact. These are considered at appendix two in the EIA.

4.2 The national Fairer Access to Care Services (FACS) guidance advises that when drawing up eligibility criteria for social care, councils should have due regard to their equality duties, which are:

- a) a duty, when exercising their functions, to eliminate unlawful race discrimination and victimisation, to promote equality of opportunity and good relations between persons of different racial groups (section 71 of the Race Relations Act 1976);
- b) a general duty (section 49A of the Disability Discrimination Act 1995) to have due regard to:
- c) the need to eliminate unlawful discrimination and victimisation (in relation to disability);
- d) the need to eliminate harassment of disabled persons that is related to their disabilities;
- e) the need to promote equality of opportunity between disabled persons and other persons;
- f) the need to take steps to take account of disabled persons' disabilities even where that involves treating disabled people more favourably than other persons;
- g) the need to promote positive attitudes towards disabled persons; and
- h) the need to encourage participation by disabled persons in public life; and
- i) a general duty to have due regard to the need to eliminate unlawful discrimination, harassment and victimisation and the need to promote equality of opportunity between men and women (section 76A of the Sex Discrimination Act 1975).

4.3 The Equality Act 2010 has consolidated all existing equality laws (including disability discrimination legislation) and affords protection from discrimination on all of the following "protected characteristics" age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; paternity, sex and sexual orientation. It also provides rights for people not to be directly discriminated against or harassed because they have an association with someone who has a protected characteristic. This can therefore apply to a carer of a disabled or older person.

- 4.4** The Council has a duty to consult on its eligibility criteria and charging proposals under national guidance contained within the Department of Health document: 'Prioritising Need in the context of Putting People First: A whole system approach to eligibility for social care. 2012' and under the Community Care Assessment Directions 2004. The FACS guidance advises that although final decisions remain with councils, to promote greater clarity and transparency, they should consult service users, carers and appropriate local agencies and organisations about their eligibility criteria and how information about the criteria is presented and made available. They can also take into account local authority resources and population.
- 4.5** Councils have a duty under the Community Care Assessment Directions 2004 to consult the person being assessed (and their carers where appropriate); to take all reasonable steps to reach agreement with the person about the kind of support to be provided; and inform the person about the amount of the payment (if any) which they will be required to contribute. The Fairer Contributions Guidance provides councils with a model to help them decide how much (if anything) a person should contribute to their personal budget.
- 4.6** The Council has undertaken an extensive consultation exercise; the responses to the consultation and the Equality Impact Assessment have been documented in this report. The responses to the consultation must be carefully taken into account before any decision on the proposals contained in this report can be taken. Legally the council cannot go ahead with implementation of the proposals if they are shown to adversely affect any people with the protected characteristics as per the Equality legislation unless their effect can be mitigated or minimised. The EIA demonstrates that the recommendations do not impact unfairly on any of the groups.
- 4.7** Should the Council not be able to meet the needs prescribed by its eligibility criteria for social care it will be open to a potential legal challenge. If the council were to maintain service to those assessed as moderate more legal challenges could be made as current population trends and funding predictions mean that it is unlikely that all moderate needs can be provided for into the future. Legal challenges are costly and impact on budgets potentially reducing resources for those in need.
- 4.8** The Council needs to be aware that within the provisions of the Care and Support Bill, the Government is proposing to introduce a national eligibility criteria which will standardise eligibility to meet only substantial and critical care needs in future.

5. CONSULTATION

- 5.1** The Cabinet agreed to a wide-ranging consultation. This included a variety of marketing methods and an information leaflet and a questionnaire which could be completed online via the Council website or in hard copy. A dedicated helpline number and email address were available for anyone who had particular questions or concerns. A number of meetings with adult social care staff and providers within the voluntary and private sector were held to explain the consultation details and encourage involvement. The consultation information was sent widely to stakeholders such as health

partners including the Health and Wellbeing subgroups and Parish Councils. Council members received information and were offered a briefing session. The Leader of the Council participated in local radio and press interviews encouraging involvement. Every adult social care service user (just over 500 people) was sent a copy of the information leaflet and the questionnaire along with information about how to get involved. A decision was made not to send this to people within residential and nursing care as the proposals did not affect them directly. The care home providers were briefed on how to involve residents who wished to participate. Briefings were provided for the Rutland Health and Wellbeing and Learning Disability Partnership Boards.

- 5.2** Consultation took place over a 12 week period (which is recommended good practice in government guidance). This commenced on 8th April 2013 and ended on 22 June 2013.
- 5.3** Meetings were held across the county and in addition there were specific events for carers and for people with learning disabilities. Initial attendance was low so to address this further meetings were arranged and publicised in the local radio and press. Some people who attended said that they believed that the Council had already made up their minds about the options. It was explained that for the council to continue to meet the needs of the most vulnerable savings needed to be made, but that the final decision would be made by the Council taking into account the results of the consultation.
- 5.4** The consultation was proper and lawful and inclusive of all adult social care users. It was undertaken at a time when proposals were still at a formative stage, within the acknowledged constraint that adult social care can only find savings and efficiencies by a relatively small number of methods. The indicative savings target was set but the way to meet this was not determined. In relation to the consultation, an essential factor in introducing change and reducing risk of legal challenge is the successful management of a proper and lawful consultation exercise with all those people who will be affected by the proposals.
- 5.5** Officers tailored the consultation process allowing extra dates and dedicated specialist sessions to make it as inclusive as possible. An officer attended three events for Carers arranged by Rutland County Council staff which took place during the consultation period. This was to inform carers but also allay fears about carer support being affected; it was made clear that these proposals did not apply to carer services which remained free from financial assessment.
- 5.6** Easy Read versions of the materials were available on the Council's web page and dedicated sessions were held for people with learning disabilities. Advocacy support was also made available to help people complete the forms and express their views, including home visits.
- 5.7** Whilst nearly all service users were contacted by post, it was difficult to contact carers as they are not all known to the Council. A specific evening event was held for parents of people with learning disabilities at Brightways

as this group of service users may have been affected by the proposal to charge for day care in particular.

- 5.8 The public meetings had poor attendance rates overall. The most well attended meeting was the one for the provider and voluntary sector. Some meetings had no attendees despite being arranged at differing times, including evening and weekends, and in different locations. The telephone helpline and email address set up specifically were also not well used.

6. ANALYSIS OF CONSULTATION RESPONSES

- 6.1 At the end of the consultation period 167 surveys had been returned as follows:

Are you / do you? (please tick as many as apply)		
Answer Options	Response Percent	Response Count*
Receive Social Care services including direct care payments from the Council	47.9%	80
Part of an organisation working with people in Rutland	12.0%	20
A carer of someone who receives Social Care from the Council	15.6%	26
None of the above/member of the public	25.7%	43
A member of staff within RCC	10.2%	17
An elected member of RCC Council	0.6%	1

* Respondents were able to select more than one category

- 6.2 A number of the responses to the questionnaire demonstrated that some people did not understand some of the proposals, for example where the hourly charging rate was proposed to be raised, there were comments that this related to the charge that was paid to the homecare worker or to them. There were also a high number of “don’t know” answers to some questions as can be seen in the results by question. This may not mean that they did not understand but did not know which way to vote on this question. Totals for each response are listed in the following tables.

- 6.3

Do you agree that the system that the Council operates should be fair to everyone?		
Answer Options	Response Percent	Response Count
Strongly Agree	52.1%	87
Agree	40.7%	68
Disagree	0.6%	1
Strongly Disagree	1.2%	2
I Don't Know	5.4%	9

Common themes

Some responses reflected that:

- a) People who can afford to pay should pay.

- b) People should not be penalised for being prudent and saving for their old age.
- c) People are living longer so more support will be needed.
- d) The Council needs to recognise that people have increasing household costs on decreasing incomes.

Areas for Consideration

As illustrated in the data the majority of people agreed that the system should be fair (92%) but some questioned whether it was fair to charge those who had savings about the £23,250 threshold.

6.4

Do you agree that the Council should start to prepare for an increase in the population over 65? (Predicted to rise by 70% in Rutland by 2030)		
Answer Options	Response Percent	Response Count
Strongly Agree	42.5%	71
Agree	43.1%	72
Disagree	4.2%	7
Strongly Disagree	0.6%	1
I Don't Know	9.6%	16

Common themes

Some responses reflected that:

- a) An acceptance that the increasing elderly population was going to need resources into the future.

Areas for Consideration

85% agreed with this statement but some respondents were concerned that older people would not be able to afford services. This concern could be due to the fact that people did not fully understand the charging proposals which would only impact on those who are able to pay.

6.5

(a) Do you agree with the proposal to amend the eligibility criteria to 'substantial and above' in line with the majority of the other Local Authorities?		
Answer Options	Response Percent	Response Count
Strongly Agree	10.2%	17
Agree	38.3%	64
Disagree	16.2%	27
Strongly Disagree	10.2%	17
I Don't Know	25.1%	42

Common themes

Some responses reflected that:

- a) People seemed to be unclear what this proposal would mean for them.
- b) Concern that this change would mean people would present to services much earlier with need if prevention services not in place.

- c) People were concerned about social isolation not being recognised.

Areas for Consideration

The Council will need to ensure that preventative options such as reablement and support to carers continue to be a core part of services and support offered. Throughout the consultation people stressed the importance of the need for easy access to advice and information. This need for up to date and easily accessible information and advice has also been highlighted through the current re-procurement process being undertaken within the Council for a number of contracted services for older people and this will be an element of the specifications for service delivery in these areas.

6.6

(b) Do you agree with the proposal to increase net assessable income from 85% to 100% in order to cover more of the cost of the service to the council?		
Answer Options	Response Percent	Response Count
Strongly Agree	8.4%	14
Agree	31.7%	53
Disagree	18.6%	31
Strongly Disagree	15.6%	26
I Don't Know	25.7%	43

Common themes

Some responses reflected that:

- a) People who can afford to pay should pay.
- b) People wanted to know how the LA will use any savings.
- c) Concern may push more people into poverty.

Areas for Consideration

The impact does not adversely affect any group with protected characteristics and still retains the potential for people to have some expenses related to their disabilities taken into account. The EIA demonstrates that no groups would be adversely affected.

6.7

(c) Do you think that the council should change the maximum amount it can charge a service user from £170 to £364 per week for those who can afford it? (People are likely to pay up to the full cost of the service they receive if they have over £23,250 in savings).		
Answer Options	Response Percent	Response Count
Strongly Agree	13.8%	23
Agree	23.4%	39
Disagree	23.4%	39
Strongly Disagree	19.2%	32
I Don't Know	20.4%	34
Please tell us your views or how this proposal might impact on you.		63

Common themes

Some responses reflected that:

- a) Some Councils do not have any cap/limit – the Council should not subsidise those who can afford to pay.
- b) The 364 per week would equal £18,928 per year and therefore the £23,250 savings threshold would soon be reached and trigger eligibility for financial support.
- c) Increase from £170-£364 too bigger increase at once.

Areas for Consideration

This is a large increase in contributions although it is in line with other authority charges and will be aligned to the lower residential care rate. As mentioned an incremental approach to this proposal could be an option.

6.8

(d) Do you agree with the proposal to charge for both carers where 2 carers are needed to ensure safety of service users and carers?		
Answer Options	Response Percent	Response Count
Strongly Agree	7.8%	13
Agree	28.7%	48
Disagree	21.0%	35
Strongly Disagree	21.6%	36
I Don't Know	21.0%	35
Please tell us your views or how this proposal might impact on you.		63

Common themes

Some responses reflected that:

- a) Charging for 2 carers could result in service users reducing the care they received which might leave them and their carers at risk.
- b) This could discriminate against people with disabilities and people do not choose to become disabled.

Areas for Consideration

This was by far the most contentious issue in terms of comments and a belief from respondents that this impacted more unfairly on people with disabilities. It would affect people with disabilities, as would the other proposals, but due to their financial position and not their disability. As the proposal is linked to a fair contribution on what someone is able to pay and linked with a risk assessment of that person's needs. The EIA at appendix 2 indicates that this proposal would not unfairly penalise those with disabilities.

6.9

(e) Do you agree with the proposal to include day care and social activity/access allowances charges in the financial assessment at a charge of £25 per day?		
Answer Options	Response Percent	Response Count
Strongly Agree	10.8%	18
Agree	32.9%	55
Disagree	13.8%	23

Strongly Disagree	15.0%	25
I Don't Know	27.5%	46

Common themes

Some responses reflected that:

- a) £25 was expensive for day care.
- b) Carers thought day care provided valuable respite.

Areas for Consideration

There were concerns that this would mean people would not go to day care in the future, from the people who commented, this is balanced against applying a fair system charging fairly for all services provided. There is also the assumption of a fair contribution for care and the upper limit to any support package which would be applied across the board whether someone had a disability or not so that the charge was based around the ability to pay not around whether the attendance was due to a disability or not. There would be a clear expectation that if the attendance was for respite for the carer the charge would not be applied.

6.10

(f) Do you agree with the proposal to change the hourly charging rate from £11.50 per hour to £13 per hour?		
Answer Options	Response Percent	Response Count
Strongly Agree	15.6%	26
Agree	35.9%	60
Disagree	15.6%	26
Strongly Disagree	10.2%	17
I Don't Know	22.8%	38

Common themes

Some responses reflected that:

- a) The Council needed to charge for services that they provided.
- b) The charge should reflect more accurately the true cost of care.

Areas for Consideration

The rate has not changed since 2008 and even at £13 does not reflect the actual cost that the council currently pays for homecare. Direct payments/personalisation will continue to give people differing options for support.

6.11

Other comments:	
Answer Options	Response Count
Answered question	40
Skipped question	127

The other comments are available at appendix one and reflect some of the areas for consideration detailed above. There were also some suggestions

for other money saving options for the Council and any appropriate suggestions will be considered as part of the Adult Social Care Reform work.

7. PREVENTION SERVICES

- 7.1** Assistance with domestic duties like shopping, housework and gardening were considered helpful as was help with maintaining friendships. Carer support ranked highly and for the purposes of this consultation it would appear to be helpful to keep this support free from financial assessment. Advice about what was available and information about how to get support and access to social activity was ranked as useful to people who did not already have this. The results from this question are being considered as part of an overall commissioning review.

8. FINANCIAL IMPLICATIONS

- 8.1** As previously stated in this report the Council follows Department of Health Fairer Charging Policies for Home Care and other non-residential Social Services charging guidance and the rules surrounding this can be very complex to understand and apply.
- 8.2** Appendix 4 contains the financial impact of the proposals including potential savings and increased income, taking into account a number of assumptions. The additional income generated ranges from £241,798 to £306,730 depending on the option of proposals agreed.
- 8.3** If the Cabinet agree to implement all proposals which have currently been consulted on (Appendix 4) this would generate additional income/savings in a full year of £283,830 which represents 13.8% of the £2,052,700 commissioning budget for adults, excluding the impact of charges for Day Care and Access Allowances.
- 8.4** It is estimated that up to ten service users will be affected by more than one of these proposals.
- 8.5** Currently the council is reviewing a number of significant contracts for adult services through a comprehensive consultation process. This will ensure that in the future the funding supports the prevention agenda.
- 8.6** Other financial considerations will include the impact of fair price for care negotiations which are currently in progress and the implementation of national changes through the Care and Support Bill due to be implemented from 2015.
- 8.7** A comparison of neighbouring Local Authority Charges is at Appendix 5. These generally indicate that the Rutland's current application of Charging Policy is more generous than that of comparator authorities sampled.

9. RISK MANAGEMENT

RISK	IMPACT	COMMENTS
Time	High	If the proposals are not implemented the council will have difficulty in funding support for the future – there will be a need to look for other recommendations within a short timescale. If the council wishes to move towards another consultation about increasing the maximum hourly rate charge to £15.75 based on the recommendations of some of the respondents, this will mean another three month consultation period and dependent on the impact of this, the new charge rate could be proposed to be implemented from April 2014.
Viability	High	The proposals could be implemented following re-assessments of service users and there is the capacity to do this.
Finance	High	The proposals will mean that new financial assessments will have to be completed for all service users who currently pay for their care and for all service users who have not been assessed for day services and access allowances. The proposals will ensure that efficiencies are made and coupled with other reforms within adult social care will achieve more cost effective services.
Profile	High	The consultation was balanced between those who thought that those who could afford to pay should pay a fair rate and those who thought that people should not be penalised for saving.
Equality and Diversity	High	An initial equality assessment was completed and this indicated the need for a full assessment to be completed on the proposals following the consultation. The full assessment is attached at Appendix Two.

Background Papers

None

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A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.