

**Gateshead Council Budget Consultation Proposals 2016-18
 Response from Gateshead Access Panel (GAP)**

The following report content and documented responses reflect the considerations, opinions and concerns relative to the Council’s budget proposals for 2016-18 in regard to Social Care, health and wellbeing, and disability issues; based on the reviews and discussions in the meetings listed herein and /or on experience of GAP members, volunteers, and employees and their involvement and support to other disabled persons and carers in Gateshead.

**Section A
 Overview**

1. This overview should be considered in conjunction with responses to individual proposals along with feedback from focus groups as noted below under B & C. Our response is made up of various experiences of Disabled People and Carers from our work as a User Led Organisation of Disabled People and Carers. Our charity provides advocacy support on a case basis and through focus group and self help group activities from which feedback is used to determine responses to consultations. In particular for this consultation we held a staff meeting, which initiated some questions regarding the consultation (see under C.2. below) and a consultation meeting for Council ‘customers’ and their parent / carers on 10th December 2015 (see C. below).

2. Due to a lack of resources we have been unable to respond to the full consultation document but have focused on the issues that our members have highlighted as being most important to their independent living as disabled people and parent / carers, that is certain Social Care Budget proposals as detailed below.

3. Council’s Responsibility for Social Care:

3.1 Social Care Budgets relating to Disability and Carers can be seen as a Council’s response to disadvantage of certain groups of people and can sometimes be seen as reasonable adjustments to ensure equality for various groups with protected characteristics e.g. those with learning disabilities, older people, carers etc. Individual Assessment of Need provides an individualised response to need. Of course adjustments and assessments are enshrined in national legislation for example: The Care Act 2015, the Equality Act 2010, Public Sector The Housing Grants, Construction and Regeneration Act 1996 (especially with regard to Disabled Facilities Grants). It concerns us therefore that

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documents being used in the general consultation may not be appropriate for making decisions about services for groups of disabled people. (see “Questions for Clarification of Council Proposals” under C. below).

4. Impact on disabled individuals and groups:

4.1 It would be short sighted not to consider the needs of individuals and whether there needs may currently be met through involvement in facilities and services as a group, where specialist local provision can be more appropriately provided to meet individual needs and collective involvement. As with current facilities and services in Gateshead, groups of disabled people with similar impairments / needs can be facilitated for activities and social inclusion at specialised managed centres where their needs are understood as well as managed. Thus providing for social contact, relationship development, building confidence and trust with service providers and collectively in groups.

4.2 It is therefore very important that Equality Impact Assessments for changes to Social Care Services are evident and robust focusing on the impact of the disadvantage on groups with certain characteristics (for example will change in service affect relationships / social interaction and involvement for people with learning difficulties and how can this situation be alleviated) as well as the impact on individuals and parent / carers using a particular service. Unfortunately many of the Equality Impact Assessments have been delayed and were not available until late December 2015. We appreciate that the Equality Impact Assessments are of an on going nature. The Equality Impact Assessments we have seen do not appear to include data on the people using each service – they only provide information for all customers of Social Care, and without such relevant data we do not see how any review or EIA can be robust.

4.3 It is important to recognise the impact on separate groups of disabled people such as those with learning disabilities, whose age and gender differences etc can be a deciding factor on the type of services required. For example, considering ‘Budget Proposal 3. Recommission Learning Disability Care Packages’. The impact is on a group of 600 people with learning disabilities and without data on age or gender for those 600 how can the Council ensure the market will be able to respond adequately to each protected characteristic. The mitigation in each case appears to be based on care packages and “reassessment” of each person, yet these packages are an individual assessment of need, whereas re-commissioning of the care packages is about how the care packages are delivered and should not in itself require reassessment of individual needs. Such reassessment often creates unnecessary distress and potential negative health implications for the

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individuals. If the market has to be developed with more competition (more choice) then this should be about confirming the market potential and then supporting people towards change. It therefore appears that there is no mitigation required until there is a stimulated market when changes may occur or more options become available for customers.

4.4 The mitigation should include a commissioning process that will look at the figures for protected characteristics within each affected service and discover for example what gender split there may be needed for support workers based on the gender split for the service and similarly for age, for example, older people with disabilities may want different activities and support to that of younger people.

5. The Budget Proposal indicates the Council’s Plan for Adult Social Care is for over the next 5 years focusing on:

- “Increasing community, individual and council resilience”
- “Promoting early help and intervention”
- “Targeting our effort, with partners, to those in greatest need and in areas where greatest impact can be achieved”

Our concern is that the Budget Proposals appear out of step with this strategic plan as they only consider a 2-year period. We are very concerned that these Budget Proposals put the cart before the horse in that the intended support required within communities is not yet developed.

6. Changes to services will have a greater impact on vulnerable people such as disabled and older people than other residents.

6.1 Considering Environmental Impacts:

6.1a For example: grass cutting where the cut grass is not collected or leaves falling from trees are not collected has a much bigger impact on physically disabled people and older people than non disabled people – the impact is of stopping disabled and older people moving around in their environments. So although we concentrate our review and response on Social Care we would point out our concern for:

6.1b Proposal number 42: Grounds and Maintenance. With regard to reduced maintenance in parks and open spaces: this will more greatly impact on disabled people and older people. Non disabled people will be able to access areas and be able to take risks on uneven ground, un-maintained buildings, less clean toilet areas etc but without good maintenance and cleaning disabled people and older people will be severely disadvantaged and excluded from being able to use parks

and open spaces affecting their independent living and potential exclusion from use of their local community.

6.1c Proposal number 58: Reduction in cleaning of Council buildings. We are concerned that reduction in cleaning of toilet areas especially disabled peoples toilet spaces will impact on their health and also their ability to be involved – so their well being. Cleanliness of toilet areas for disabled people and those with health concerns is imperative and unless adjustments to ensure disabled peoples toilets including Changing Places facilities are cleaned more regularly this may affect disabled people disproportionately by affecting independent living and potential exclusion from use of their local community and wider communities.

7. Changes to services specifically set up and suited to support disabled peoples needs will inevitably have a more devastating impact on their daily life and that of their parent / carers. We welcome therefore that Michael Laing confirmed during our meeting of 10th December 2015 that any changes that may be decided upon, would not be made until all users are confident and happy with the changes affecting their lives and that of their parent/carers. Michael also confirmed that the proposals are not a choice but are inevitable and that it is minimising the impact on customers that is paramount to discussions.

8. With above points in mind and with regard to all proposals and changes to services we request that Advocacy Support is offered to customers and their parent/carers where such reassessments are integral to the proposal. We have concerns that many of the proposals concern reassessment of need. Reassessment of need is often a major concern and stressful situation for service users and there appears to be assumptions enshrined in some of the proposals that peoples needs, will be less and packages can be reduced. The impact on individuals on change of staff, change of venues, change of home environments, loss of friends etc plus the impact on relatives will, in many cases be massive and there may be a need for additional support to overcome the disturbance created to alleviate any impact. Additional support may be required short term to overcome disturbance including to ensure parent / carers can continue their leisure / employment without concern or disturbance. The offer of Direct Payments as an alternative to some services will impact on many parent / carers who may find having personal assistants in their home difficult and finding alternative providers even more so if the market has not responded. Also, but not least, the reaction of those individuals with complex needs who may be disorientated and traumatically stressed by change should be recognised as a concern and adverse impact. There are of course Human Rights issues with regard to “right to family life and home” with regard to certain proposals and customers and parent / carers need to

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be provided with information (as per Care Act) and informed of their rights. This can be provided best through Independent Advocacy, which, should be offered in a meaningful way to all customers (including parent / carers) who are affected by changes made by the budget proposals. This is in addition to the Council's Statutory duty to provide Care Act Advocacy (which is dependent on customers capacity to understand).

9. The Care Act is clear in that Carers do not have to provide care if they do not feel able or are not willing to do so and they should be reassured of this. Changes in services will put pressure on parent / carers who may decide that they are unable to continue to support the disabled person, and this should be factored into any Risk Assessment for outcomes before deciding whether savings can be made on services through change. Some Carers who are in employment or education will be affected and the impact of their not being able to continue to work or learn should be considered in impact assessments as such impact is contrary to Council aims.

10. The proposals, which target 'prevention' as an outcome, also appear to assume that care packages will be reduced. We query whether the development of preventative services, (although perhaps saving in the long term) will substantiate savings in the short to medium term for those already receiving services? A robust "business plan" and cash flow forecast appears to be required.

Section B.

Responses to Individual Social Care Proposals – please read in conjunction with responses from Service User Meeting on 10th December 2015.

Budget Proposal 1. Re commissioning of Independent Supported Living

This proposal like others is undermined by wording that appears to link intended reduction of care packages to reassessment of need to make savings. This is wholly inappropriate. Review of care packages is an on going, yearly task for the Council for each individual and if care packages are working well then the Council need not reassess. Only where there has been a change in individual circumstances of need, need there be a reassessment and this may mean an increase in need and their individual care package.

The Equality Impact Assessment does not give definite ages and only indicates that customers are over 65. It should be considered here that age brings on compounding impairment issues so care packages may increase. Whilst we appreciate that commissioning out the service and good procurement may reduce

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costs, we do not think that his should be linked to ‘reassessment of need and reduction in care packages’ (point iii) Description of the proposal). GAP does not understand why the service cannot be commissioned and procured using current care plans unless as detailed above there is an expectation of systematic reduction in care plans without the consideration that care plans may need to be increased?

As mentioned in 8 above: there is no mention of Advocacy Support in Equality Impact Assessment as an action to address any disproportionate impact. The residents need to be supported and informed of their rights through Independent Advocacy, which, should be offered in a meaningful way to all customers (including parent / carers) who maybe affected by changes. This is in addition to the Council’s statutory duty to provide Care Act Advocacy which is dependent on customers capacity to understand.

Budget Proposal 2. Care Call to be extended / developed.

Overall GAP has no issues with this proposal as long as the service is the best value for Care Call customers. There are alternatives to the Gateshead Care Call Service, and we wonder if it has been considered whether commissioning out using good procurement methods to ensure quality would mean a cheaper service for customers? We assume a business plan is being developed and through this it will be considered whether savings, to the Council could be made, such as by commissioning out as per other budget proposals for other services. No Equality Impact Assessment was available for this proposal.

Budget Proposal 3. Re commission of Learning Disability Care Packages.

This proposal will create potential concern for the 600 customers plus their parent / carers who should be offered Advocacy Support as detailed above. We feel that reassessment (the process of which can itself cause distress to the individuals and their parent/carers) may lead to increased packages of care rather than reduction – as agreed by Michael during our meeting – especially if parent / carers decide they cannot continue to offer support. The stimulation of the Market to provide a choice of providers is positive however linking re commissioning to reassessment of need means that if packages need to be increased on an individual basis as discussed previously then this needs to be factored into costs against savings.

Budget Proposal 4. Review of Support for people to live independently

We do not feel that this proposal is clear; figures are not presented clearly to assist fair and proper consultation to external agencies. We learned somewhat from our meeting on the 10th December 2015 – see under C below – and now

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understand that this refers to a two-pronged action plan. One is asking Health for funds to pay for medicine prompts (£350,000) and the other concerns the Promoting Independent Living Centres. If medicine prompts are a Health rather than a social care concern then it is reasonable to share costs and Michael Laing confirmed that this service will not be stopped. From the amount of savings it could indicate that the intention is to close the Centres although this is not stated. It is not clear why the Centres have not been used so far to full capacity for rehabilitation and how the amount of £2,300,000 is made up if not from closing facilities.

Budget Proposal 5. Reduce Domiciliary Care using START team

GAP thought that the START team was already being employed to provide rehabilitation to keep people independent for as long as possible and this is an obvious proposal. We would like to see more of a business case for this proposal however – demonstrating current success from current statistics of customers who have been provided with support and therefore were able to delay further support. We do not have enough information on the “community based alternatives” being developed but assume these would be ready within the 2-year budget proposal and that these take isolation / none contact by a human being into account as being very important.

Budget Proposal 6. Reduce Residential Care Admissions

On the whole this proposal appears reasonable if it is not a ploy to burden carers further and we welcome the attempts to reduce Residential Care Admissions by supporting people in their own homes. However we are concerned that: “carers would be encouraged to meet customer needs”: The Care Act makes it clear that Carers do not have to provide care if they do not feel able or are not willing to do so. As discussed above Service Users / Parent / Carers should be offered Advocacy to ensure they understand their rights and can voice their opinions without feeling guilt if they feel unable to continue to support someone. Some parent / carers will be grateful of enhanced support to be able to care for a disabled person at home but on the other hand “maximising independence at home” may not benefit the parent / carer. Also the service user may not want their families to meet their care needs - indeed it may not be appropriate - and the service user may be made to feel a burden. The ‘gaps’ are not identified in the Equality Impact Assessment question 4 and we wonder if these include respite for Carers (day and night), initiatives to negate social isolation and Day Care Provision where appropriate.

Budget Proposal 7. Reduce Housing Adaptations Work

No Equality Impact Assessment available.

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The purpose of an adaptation is to modify the home environment in order to restore or enable independent living, privacy, confidence and dignity for individuals and their families. So the focus is an individualised approach and we cannot see therefore how this proposal will work. The Local Government Ombudsman concluded in May 2000 the Council’s budget allocation is irrelevant to its mandatory duty to fund works. We are therefore unable to see from the limited information in the proposal how the Council could follow this through. The DFG “regime” is broad and includes for example, access to gardens as mandatory provision. The term garden meaning a garden belonging to, or usually enjoyed with, a dwelling, caravan or flat and includes: A balcony, a yard, outhouse or other appurtenance with the boundaries of the land. To respond correctly to this proposal we would need to have more facts and figures – what does the council spend outside of their mandatory duty to provide adaptations? If works are restricted will this not lead to accidents and a need for more domiciliary care? The guidance for DFG by the Housing Consortium points out that best value does not always mean cheapest and that local authorities will need to use their discretionary spending powers to top up their budgets allocated to meet mandatory duties.

If this proposal means that Council will not pay for Council tenants homes to be adapted then this may be seen as less favourable treatment compared to others and leaving council tenants vulnerable and disadvantaged.

In our experience the Council have wasted funds on adaptations to both Council and private homes where it has been necessary to rework, replace and provide extra works due to ill informed procurement, inadequate specification and lack of adequate risk assessment. If these issues were addressed then perhaps savings could be made.

As reported in Section C.g below, during the focus group discussion with Michael Laing in relation to Proposal 7, Steve Hudson explained that he is concerned that changes to Housing Strategy makes it unclear how many new homes to Lifetime or Wheelchair housing standards will be developed in Gateshead. This needs careful consideration due to the way pockets of housing developments are likely to be developed. Christine explained that Steve has done some excellent and extensive work on the changes to Housing Strategy responding to various consultations to influence development of more suitable housing for disabled people, so negating much of the need for adaptations in the future. However he has recently sent a list of questions to Planning to try to confirm Gateshead’s current policy implementation for new housing to the new national standards effective from 1 October 2015. The Officer who responded has said that these are complex questions but he is to respond asap. We would urge the Council to

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support GAP's efforts to encourage willingness by Planners towards enhanced provision such as through neighbourhood plans for lifetime and wheelchair accessible homes as a way to alleviate the need for higher cost adaptations. See copy of letter attached at end of this response document.

Budget Proposal 8. Re provide Extra Care Schemes

It appears inevitable that if the Council cannot bring their service into a competitive cost, that this service be tendered out. However, see under C.8 below our views on whether the independent sector are able to provide comparable support with regard to dignity, gender and flexibility issues in their efforts to keep costs down. Procurement processes and monitoring need to be excellent so that standards are not lost through tendering, and individual reassessments where necessary should be supported by appropriate advocacy. Whereas the most recently provided EIA states that commissioned services will be required to meet contractual and procurement requirements relating to gender and culture, our experience suggests that some local authorities procure such schemes through partnership arrangements with a service provider and where no such contractual arrangements exist this can inevitably impact adversely on accountability and any potential to obtain redress from the service provider. We would therefore be additionally concerned if services were commissioned without appropriate monitoring being in place along with appropriate routes for accountability and redress.

Budget Proposal 9. Recommission of Day Services - Winlaton, Wrekenton, Marquis Way.

It is not clear from the proposals whether or not the three centres in question are to be closed and activities sort elsewhere in the independent sector. The impact on parent / carers by these changes will likely be enormous due to the very nature of the customers disabilities. See below under C9. Moving people to different services and with further travel affects the customer and their parent / carers. Parent / Carers would obviously want the services to stay as they are as their first choice, because they feel that the Council provide a really good service. If the Council cannot compete competitively parent / carers would prefer for the service to be commissioned out in the same buildings as present. So although they are not against change in provider, there is concern for implications for services users if there is a resulting change of staff with whom they have developed relationships and trust. Advocacy support should be made available as discussed above if reassessment is an integral part of these proposals. We are concerned that the proposal appears to rely on what we believe to be an otherwise unnecessary re-assessment of individuals' needs that is likely to adversely impact on the health and well-being of service users and their families/carers, due to the additional

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stress of the reassessment process and any potential enforced changes in service provision that are required to achieve the budget requirements. Although Michael Laing has stated to us that the existing services would not change until customers were happy with their situation, it is extremely difficult for us to comprehend how the projected saving of £1M (approx. 65% of this service budget) can be achieved without considerable impact on the service users as well as their families and carers.

Impact in regard to age is not adequately identified due to lack of information in the proposal and its EIA regarding the age of persons currently accessing this service.

Budget Proposal 10. Revise Demand Management Model for Adult Social Care

Our understanding is that this proposal is to restructure services for Adult Social Care due to a focus on prevention, less residential care provision and increasing collective responsibility. We are unable to comment on this ambitious proposal without further detail but would say that preventative measures may be too late for current customers and we assume this to be a longer term aim.

Budget Proposal 15. Re provide Respite Care for disabled children

From our discussions and work with service users, we are very concerned that the loss of this facility will have considerable longer term impact on families/carers with disabled children in Gateshead, especially in light of the current limitations of alternative provision either within Gateshead or adjacent authorities; as well as the impact on families and parent/carers of any resulting need to travel further to access services for their child.

Parents / carers are very clear that they do not want to loose this service which they rate very highly. The loss of the service including friendships and trust in staff will affect the young people and family situations. Obviously they would like to see the Council be more competitive so that they are able to continue to provide this service. Failing that re-provision within Grove House would have the least disruption impact on young people and their families. If respite becomes too difficult for parents to arrange there is a feeling that some parents may give up and ask for residential care or independent living away from home. It appears however that the only options available are for young people to have to travel further to independent providers or receive personal budgets.

Our experience with young people reaching 18 is that finding respite services with the same standard and the availability for forming and maintaining trust and

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friendships is very hard to find. Similarly we feel that the Council will have to work with current or new providers to try to replicate the type of service currently provided and this will take time to do.

Advocacy support should be offered to users and parent/carers if re-assessment is integral to this proposal.

Budget Proposal 16. Reshape and revise our approach to Home to School
 Independent travel will require better accessible highways including bus stops and transport. Council must appreciate that the more parents are expected to help organise care, such as through direct payments for taxi travel, the more difficult their lives compared to parents of non-disabled children. This will impact on their well-being and ability to care for their child, to work and learn, and in turn impacting on the disabled child.

Section C.

Meeting at Bewick B Space, Civic Centre, 10 December 2015

Present: Anna Mace, Lesley (Carer); Ian Atkinson (GAP employee and Service User); Alan Clarkson, Eileen (Carer); Kevin White (service user and parent/carer); Kath and Alan Nicholson (parent / carers); John and Jacqui Morrow (parent / carers); Paige Morrow (carer) Joanne Watson (parent / carer); Sharon Bourne (parent / carer), Gordon Wallace (Disabled Persons Forum)

In Attendance: Steve Hudson, Christine Pickersgill

Council Representation from 2pm: Jane Bench (Chief Executives) and Michael Laing (Social Services)

1. Background: Christine gave some background to the Consultation explaining that this is perhaps the most difficult Budget we have had to respond to especially because it highlights Social Care Issues and quite substantial issues. To make sense of the Consultation we have to look at the long explanations and we feel that it is difficult to provide informed feedback on the short consultation questions the Council has provided. Many of the proposals do not have Equality Impact Assessments with them, which often provide more detail. GAP staff have had one pre-meeting to inform this meeting and developed some Questions, in which we have asked for clarification on the consultation basis and its proposals. These questions were sent to Jane on 7 December prior to this meeting, as below.

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2. Pre-meeting Questions to Jane Bench for Clarification of Council Proposals:

1. What costs have increased for Gateshead Council since the last budget review 2014?
2. Which proposals deferred from the 2014 Budget review are being implemented for 2016-18?
3. Proposals have reportedly been developed in consideration of the “Gateshead Strategic Needs Assessment”. How has this document informed the proposals that impact on disabled residents and their carers in Gateshead?
4. Residents Survey – how many disabled people are included in the Survey.

Even if 10% are disabled people it means disabled peoples views on what they need will never ‘win out’ over non-disabled people. If this has been used to inform the current proposals the proposals may be skewed towards non-disabled people. Note: Some people do not receive the Council News. Ian Atkinson explained during last round of Budget Proposals he did not receive Council News. After Jane Bench arranged for Ian and others from DESUIF to receive copies Ian received it for some 3 months then it stopped being delivered again.

5. What Age Range responded to the Survey? If two thirds responded on line does this indicate younger more actively involved people are responding and older people are not having their say?
6. Adult Social Care:
 - a. Equality Impact Assessments (EIAs) have not yet been provided for any of the ten proposals. Why were these not provided at the start of the consultation, and might be reasonable expected?
 - b. When will these EIAs be made available to inform the consultation?
7. Is there a desire to reduce care packages to counteract the expected impact of increased care costs resulting from the “living wage” increase in April 2016?

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8. If the market will not respond to proposed changes in commissioning of services currently provided by the Council, to meet changing or new customer and contract requirements, how will these risks to services and customers be managed?

9. Why is there no explanation provided for the budget calculations and the headings used, i.e. Gross, Net, Money identified to support closing the gap, so that the public can understand the relative costs and proposed savings?

10. Proposal 7 - Reduce Housing Adaptations work:

a. Does this mean that the Council does not intend to meet their statutory duty in regard to provision of home adaptations?

b. What are the additional housing adaptations made outside of the statutory DFG levels that are inferred by the suggested “reduction” in provision?

11. Have there been any discussions with current staff and management of Day Centres, to consider options for their continued operation, such as part of a commissioned service?

12. Have there been any discussions with current staff and management of Grove House, to consider options for their continued operation, such as a commissioned service?

3. Group Discussion

It was agreed by the group that their real concerns about the Council Budget cuts for 2016 concerns Social Care and that that is what we should concentrate on in today’s meeting.

a. Most concerning are:

Day Services – Winlaton particularly mentioned.

Respite – Highlands and Grove House

Kath raised the issue that Jamie has been charged twice for Social Care because he should not be charged whilst he uses respite facilities. Christine confirmed she knew of other parent carers have reported this. We need to ensure that others know that the Council have been overcharging so that they can request refunds.

b. **Care Call** was discussed and there is concern that the charges may be increased. No one present knows the current charge for Care Call? Christine

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said she had been trying to find this out but it is difficult – the charges should be more transparent.

c. Personal Budgets: A discussion was had around the increasing of Personal Budgets to pay for certain services such as Day Services, Transport. Kath said she may / Jamie may accept this as an option but she is concerned that there are not enough services available.

d. Documents Used to Inform Budget Cut Proposals: Christine and Steve explained Questions 3 and 4 above in that the documents used to inform the Budget Cuts such as Gateshead Strategic Needs Assessment and the Residents Survey appear not to be significant for Disabled People’s needs and representation. We wonder whether disabled people and carers are being proportionately considered as a result. Ian confirmed that he has repeated reported these concerns via the Gateshead Strategic Partnership. If the majority of people responded had been disabled people and carers their priorities would have been different and would likely to have prioritised Social Care and Transport.

e. Discussions were had around the Living Wage of £7.60, which will be brought in from April 2016. This means that Commissioning out of Services may not be successful in saving costs as previously it has. This has implications for continuing services albeit with the private sector.

f. Those present who care for a disabled child / young adults have used Grove House for respite care and they are very concerned that this facility is to be closed. Christine said that it may not be that the service has to close the proposal could be for the service to be commissioned out at Grove House, for individuals to use other respite facilities or for individuals to receive direct payments so that they can choose their own respite. However, as discussed above it is not clear how much savings commissioning out would make and GAP know from parent / carers experiences that it is very difficult to find a trusted respite facility like Grove House. There are 48 service users of Grove House and this is a lot of places to find for alternative respite. The proposal will also affect equality for parent / carers because change of service will affect the children’s well being and of course this impacts on parent / carers and in turn their employment and leisure is affected. Participants were concerned because respite is essential to enable parent / carers to be able to continue their caring role and for some the only option, without good quality trusted respite, may be residential care.

Jane Bench (Chief Executives) and Michael Laing (Social Services) joined the meeting at 2pm to respond to these and other issues.

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g. Proposals were discussed as follows:

Proposal 1 Re commissioning of Independent Supported Living

Without the impact assessment this is very difficult to discuss and more information is needed to provide a more informed response. Kevin explained that there is a need to be a continuation in transition and this may affect the success of ‘The One Plan’. The One Plan replaces the SEN Assessment for school children. Kevin also said that one of the schools he is governor / trustee for has developed an independent living facility where children can learn skills, but without the follow on to independent supported living this continuum will be obstructed. It appears the Council will ‘encourage’ families to continue to care for their adult children in their own homes if re-commissioning is unsuccessful, but this may lead to more going into residential care if Independent Supported Living is not provided as a quality service.

Michael Laing confirmed that under iii) “Reassessment of need and reductions in care packages” that reassessment may mean increased packages leading to increased costs of care but the wording appears to indicate that Council will be reducing packages systematically. Is this a Freudian slip? - GAP has seen this happen before during a time when all reviews appeared to reduce individuals’ hours by 4 hours. Michael reassured people that this proposal was wrongly worded.

Michael also reassured that the time scale for changes would be dependent on how long it takes to get the services right for each individual and the existing service will be available until they get it right.

Proposal 2 Care Call to be extended / developed. People present receive services but are not sure who Care Call is or who they pay for the Service. On the whole however people present were not adverse to development of this as business.

Michael confirmed that there are other providers such as RAC and ISOS. Ian pointed out that his Housing Association had stopped providing this service because he had been the only person in the area who paid them for the facility. He is now with Care Call. Christine asked why this was not being considered for commissioning out to ensure costs are kept down for

Proposal 3 Recommission of Learning Disability Care Packages. This is a way to bring prices down. Without more details this is difficult to comment on but obviously any change in service will have massive impact on service users and for parent / carers. Once again this could lead to carers being overwhelmed and choosing not to provide ‘caring’ duties. Change in packages will lead to disruption for people with learning disabilities for

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example, through change of workers. This in turn leads to pressure on parent / carers (and other family members some of whom may also be carers) and this in turn can affect their leisure, social and potentially employment. The Care Act makes it clear that Carers should not be expected to take on caring duties if they cannot or do not want to.

Michael confirmed that a review or reassessment of Care Packages may lead to increased costs rather than savings.

Proposal 4 Review of Support for people to live independently – people present gave examples of older people and the difficulty for them going from hospital into the PICS and how this affects their mental health especially if they have some dementia. This appears to be a way of reducing care packages i.e. “review the support people receive in their own homes to ensure that it complies with their eligible needs as required by the Care Act 2014. This will consider, for example, which organisation funds medication prompts for individuals.” We are once again concerned that review is being used to reduce care packages when in fact it may mean increases – if a social worker reviews with the intention of reduction then that is what will happen. We are surprised that the PICS are not already being used to their full extent? Members said that some agencies do not administer meds because not enough care workers are trained in the procedure, which we understand attracts enhanced wages.

Michael confirmed that about £350k is spent on medical prompts but that the Council would not just stop this support; rather they are in discussion with Health about how they can support funding this service.

Proposal 5 Reduce Domiciliary Care using START team to rehabilitate? People present thought that this was already happening and if not why not? What is the business case for this proposal: Are there any statistics demonstrating current success in using START as a preventative measure and projections based on these? What are the various options available to customers for referral? Seems reasonable to secure funding via the Better Care Fund though.

Proposal 6 Reduce Residential Care Admissions – concern that the “delay admission until end of life or palliative care in many cases” will impact on Health Services who will need to be aware of the need for more local, palliative/end of life care provision in the home. Very concerned that “carers would be encouraged to meet customer needs”: the Care Act makes it clear that Carers do not have to provide care if they do not feel able or are not willing to do so. The wording in this proposal indicates possible ‘coercion’ or emotional blackmail.

Service Users / Parent / carers should have advocates to ensure they understand their rights.

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GAP have concerns about extra care housing not meeting needs because of commissioning processes keeping costs down. Those who have knowledge of services feel that private providers often put their staff under pressure and the residents in jeopardy.

Michael said that the wording was not intended to encourage parent / carers to take on caring duties that would put them under stress. Steve Hudson said the wording should be 'provide support to carers / parents who want to meet customers needs'.

Proposal 7 Reduce Housing Adaptations Work (Disabled Facilities Grant)

– this is a very strange proposal as assessments should be around individual need including family members and the DFG 'regime' as quoted is a wide brief. People present have received adaptations to their homes – housing association, private and council. Some having complained to ombudsman about their assessments and have been successful.

Adaptations are essential for independent living and risk assessment to ensure safety is also essential.

A discussion was had around accessible homes and Steve Hudson explained that he is concerned that changes to Housing Strategy makes it unclear how many new homes to Lifetime or Wheelchair housing standards will be developed in Gateshead. This needs careful consideration due to the way pockets of housing developments are likely to be developed. Christine explained that Steve has done some excellent and extensive work on the Changes to Housing Strategy responding to various consultations to influence development of more suitable housing for disabled people so negating much of the need for adaptations in the future. However he has recently sent a list of questions to Planning to try to identify Gateshead's plans. The Officer who responded has said that these are complex questions but he is to respond asap. Michael agreed that this is an important issue. Christine suggested Steve send a copy of the questions to Michael as we may require some support to encourage willingness by Planners towards enhanced building of lifetime and wheelchair accessible homes.

Proposal 8 Re provide Extra Care Schemes

Michael explained some costs are £19.30. Group want commissioning to ensure quality of care is the same as currently. There is doubt within GAP that private care agencies can provide a quality service where residents receive their assessed needs catered for appropriately and timely with less funds. Commissioning would need to monitor this closely. Steve Hudson said that from experience with other Councils the private sector operate with less staff which can result in a less dignified service with difficulty responding to gender requirements or to an individual's needs on a timely

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basis. Although individuals have Care Plans these are too often not adhered to when people do not receive a responsive service due to staff rotas not providing the flexibility initially promised and needed.

Proposal 9 Recommission of Day Services – Winlaton, Wrekenton, Marquis Way. Sharon said that the alternative for her son as far as she was concerned would be Residential Care because it is very difficult to find somewhere where he can be accommodated and where the staff, understand his needs. Winlaton is excellent and Sharon is terribly concerned about it's closure. Change will massively affect his well being and that of his family. Christine explained that the proposal is to re commission the service to the private sector or for service users to find other placements. Christine said that it depends on how commissioning is carried out and service users / parent carers should be involved in the process. Sharon said that if the service is commissioned in the same building especially; this may work if staff, are maintained. Kath had said that she may consider Direct Payments for her son but does not feel that there is enough provision in the market available and may mean going out of Borough which adds to stress and travel costs. Other members have found finding Day Care Provision very difficult.

Michael confirmed that service would not be changed for individuals until service users were happy with their situations.

Proposal 10 Revise Demand Management Model for Adult Social Care
 This seems ambitious and we would need more information and understanding of the objectives to successfully respond to consultation. It is difficult for us to envisage savings noted unless packages of care are reduced?

Proposal 15 Re provide Respite Care for disabled children.
 Obviously the group's first choice would like to see Grove House and the Day Services to stay as they currently are. Grove House and it's staff are very well respected and allow parent / carers to carry out their caring roles, enjoy leisure time and carry out their employment knowing their children are safe and happy. Their second option would be to re commission the service in the same building so that the friendships and relationships built up by the children can be maintained. Parent / Carers would want to be involved and ensure services will be as good as the Council Services. If not, Sharon reiterated that her only other option would be Residential Care for her son and the affect of change of services for all parent / carers may mean that they find caring for their children too stressful and difficult for them. This may lead to them saying they cannot cope with looking after their children and more being taken into care – the reverse of what the Council's goals are. One to one support has to be paramount and fulfilled if assessed for.

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Several said that despite one to one being assessed for this does not often transpire in reality.

Michael reassured those present that the Council understand the impact on both services users and parent / carers and no service will be closed unless re provision is successful for those involved.

Proposal 16 Reshape and revise our approach to Home to School

Independent travel will require better accessible highways including bus stops and transport. Council must appreciate that the more parents are expected to help organise care as through direct payments for taxi travel the more difficult their lives compared to parents of non-disabled children. This will impact on their well being in turn impacting on the disabled child.

h. Closing remarks:

Christine reiterated on everyone’s behalf that the most concern for those present today has been around re commissioning of children’s respite, day care provision and transport to school. The parent / carers find the respite and day care provision excellent for the most profoundly disabled children and adults who need constant care and attention and would like to see the council continue to run these with the current staff who are highly regarded by all. If re commissioning takes place then parent / carers want to be involved in this. Reviews or reassessments should include providing advocates to support service users and parent / carers so they are provided with independent information on their rights.

Steve asked that the Council respond formerly to the pre meeting questions already raised so these can be used as part of the notes of the meeting and consequently people will be better informed.

Post-meeting responses so far from Jane to questions pre-meeting or asked in meeting:

Care Call costs start from £4.30 per week for the lifeline etc (excludes VAT when it’s a referral via social care). Its £5.16 if it’s a private or independent request (includes VAT).

People aged 75 and over can get 6 months free – government have just changed this in last couple of weeks, as it used to be 80 and over. As a result of this enquiry I’ve asked for the web page to be updated.

Residents Survey – how many disabled people are included in the Survey. The residents survey 2015 was available to all households via the Council News, the council’s online consultation portal, and also available in libraries and in the Civic Centre. The response rate was 935, with 609 choosing to

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complete the survey online. The responses were weighted based on age, gender and ethnic group which enables the results to be representative of Gateshead's population.

In the survey we asked a question "Are your everyday activities limited because of a long term health problem or disability"

10.4% of respondents indicated they had a disability, limited a lot (comparative data for Gateshead population based on Census 2011 is 11.4%)

15.4% of respondents indicated they had a disability, limited a little (comparative data for Gateshead population based on Census 2011 is 10.7%)

74.2% of respondents indicated they did not have a disability (comparative data for Gateshead population based on Census 2011 is 77.9%)

Age profile of respondents

18 – 24 year olds = 3.29%

25-34 year olds = 12.4%

35-44 year olds = 16.79%

45-54 year olds = 21.3%

55-64 year olds = 20.53%

65-74 year olds = 18%

75+ year olds = 7.68%

Responses from Michael not received at time of writing up notes and preparation of GAP responses to this consultation.

Christine Pickersgill, Manager
 Ian Atkinson, Involvement Worker
 Steve Hudson, Design, Access and Disability Equality Consultant

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