

Appendix 1 - Summary of comments received

Living costs and benefits taken into account when calculating how much someone can contribute towards the cost of their care and support

1. Many respondents about the proposal to review the level of the Minimum Income Guarantee used in individual financial assessments expressed concern about the impact of this proposal on people with disabilities with low incomes and their ability to manage any additional costs associated with their disability or long term condition, as well as sustain a good quality of life.
2. There were a significant number of comments expressing concern and surprise about the level set by the Department of Health (DoH); many people commented that this appeared to be very low especially in light of the current cost of living. However there were also a high number of comments stating their agreement to a universal rate across the country to promote consistency. Many people felt that Nottinghamshire should align more closely with the national recommended rates and that there was room for a reduction, but there was considerable concern expressed about the reduction in income that this proposal would effect. As a result there were a number of comments suggesting that the Council should continue to set its own Minimum Income Guarantee rates at a higher level than those recommended by the DoH, or that a gradual introduction of the recommended rates is implemented.
3. A small number of people commented that the saving to the Council from undertaking this proposal was minimal in relation to the effort required to implement it.
4. A wide range of comments were also received about the proposal to take higher rate disability benefits into account when calculating how much someone can contribute towards the cost of their care and support. There were a high number of comments stating that people were in receipt of the higher rate of the benefits in recognition of the additional costs incurred as a result of their disability or long term condition, and that the care and support package provided by the Council does not cover all the needs associated with a disability. It was stated that the element of the benefits currently disregarded by the Council was used to cover additional costs, such as travel, attendance at hospital appointments, maintenance of equipment, laundry and higher heating costs.
5. There were also a significant number of comments expressing concern about the potential financial impact on people who are already managing on low incomes, and the impact on the quality of life for some people. There were a number of comments recognising that the financial circumstances of people in receipt of these benefits would vary widely, so some people would be affected more than others. Some people suggested that the Council could take a more individual approach to what people should contribute to their care.
6. A number of comments were focused on the national policy approach to the welfare system and the funding of adult social care, with concerns expressed about support for people with disabilities more generally. There were a number of

comments suggesting that all benefits should be ignored in the financial assessment process. However, there were as many comments from respondents who stated that the benefits were paid to people to be used towards their care and support needs, and therefore it was appropriate for the Council to take them into account. Some people queried what other Councils do and why Nottinghamshire has operated in a different way until now.

7. Finally, there were a number of comments stating that although their preferred approach would be to continue with the current policy, there was acknowledgment of the financial challenges faced by the Council and the need to address these. Some respondents suggested a phased introduction of this proposal, or a proposal to ignore a smaller amount of benefit rather than taking the full benefit into account as part of the assessment.

The way the Council calculates how much someone who has a spouse or partner can pay towards the cost of their care and support

8. This proposal attracted fewer comments and the majority of these were in favour of the proposed change. Overwhelmingly respondents felt that people should be assessed as individuals, and that the proposed change would simplify the current system, be less intrusive and fairer, as well as more cost effective for the Council.
9. A small proportion of those who commented felt that the Council should assess the income and savings of a spouse or partner as it should all be considered as part of the household income, and there were a few comments about the Council losing money if people moved their assets to a spouse or partner, and these were not then taken into account.

Getting in touch with the Council about the way contributions have been calculated

10. In relation to the proposal outlined in paragraph 24, the comments received in the consultation were largely in favour of this. Many people felt it was an obvious response where complaints had been upheld, and that it would also act as an incentive for care providers to ensure good quality care is provided.
11. There were some comments expressing concern about whether this approach would introduce additional costs for the Council in seeking to recover the costs from the care providers, rather than offering an opportunity to make savings, and whether it would risk costs to service users being raised. It was also suggested that this proposal should be made clear in contracts with care providers.
12. With regard to the introduction of an appeals process, there was broad support for this in the qualitative data gathered through the consultation. There was a high level of support for the proposal to allow the people affected to attend and share their views in an appeal setting, where this was required. A number of respondents commented that in most cases a formal complaint was not required, and therefore an appeals process seemed more appropriate and user-friendly. There were comments suggesting that this process would support better

understanding between service users and Council staff of the decisions made and the impact on individuals. It was also generally perceived to be a simpler and more responsive approach to concerns expressed about care contributions.

13. There were also a number of comments suggesting that an appeals process should be completely independent of the Council and that it may create further costs to the Council to set this up. Most people who commented agreed that service users should still have recourse to the Council's complaints procedure if they are unhappy with the outcome of the appeals process.

Charging for some services in advance

14. The majority of comments on this proposal expressed concern about the concept of paying for services before they have been received and the possible impact of paying in advance if their benefits are paid in arrears. Some respondents thought it would not be easy for many service users to understand, and there was concern expressed about this generating more work to reimburse people where services have been paid for but not then received, as a result of unplanned doctor and hospital appointments for example.
15. Despite the difference in opinion indicated by the figures above, there was also a considerable amount of support expressed for exploring this proposal if a well-managed system and process for reimbursement was put in place. Some people commented that it might work well for certain services, would allow a clear way of showing people what the cost to them would be, and would encourage people to access services planned for them.

Dealing with service cancellations

16. Most of the comments received in relation to this proposal were broadly in favour of a short notice cancellation policy, on the understanding that it very clearly defined what is meant by 'short notice' and that the policy is fair in relation to exemptions where there are genuine reasons for cancellations. Many people felt that there should be some flexibility built into the implementation of this policy to take into account the individual circumstances that may have caused people to cancel their services. The policy would need to be shared with people before they start receiving services.
17. There were a number of suggestions made by people in terms of what should constitute a short notice cancellation – whereby people should be charged for their service, unless an exemption is to be made - ranging from 24 hours to over a week. A number of people felt that 48 hours was an appropriate timeframe.
18. There were also a number of comments citing the unpredictable and fluctuating nature of disabilities and long term conditions that meant situations can change very rapidly and therefore it is not appropriate to charge people who do not attend or cancel services for reasons that are often out of their control.