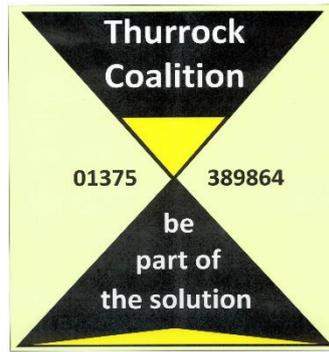


Thurrock Coalition



Submission in relation to the impact of proposed changes to the way Social Care is provided in Thurrock

Introduction

Thurrock Coalition offers advice and support for disabled and older residents of Thurrock and their carers. We are a wide network of individuals and groups aiming to inform people about their rights and entitlements and to improve the quality and choice of services that might assist them.

One of our main aims and key functions is to consult and engage with residents of Thurrock to help shape and influence Thurrock Council policies and strategies around Adult Social Care, with a particular focus upon personalisation, service improvement and the maximisation of choice and control for the people we support.

It is on this basis that Thurrock Coalition gathered the input and feedback as part of the consultation on proposed changes to the way Social Care is provided in Thurrock and drafted this report and recommendations, providing evidence to inform the Local Authority's Equality Impact Assessment.

Background to Thurrock Coalition

Thurrock Coalition is the formally recognised Disabled Peoples' User Led Organisation for Thurrock, comprising of:

Thurrock Lifestyle Solutions (TLS) is founded on the concept of Community Solutions, using disabled people as its experts by experience. TLS has developed several models of supporting people to live lifestyles of choice in the community. Currently TLS supports a Lifestyle in Transition house, training people to live independently, providing Personal Assistants, enabling people to find paid work and supporting young people in transition. A team of Lifestyle Enablers is developing opportunities for inclusive education, employment and social opportunities.

Thurrock Diversity Network (TDN) is a Society for the Benefit of the Community, working for the benefit of disabled adult residents of Thurrock through the promotion of citizenship and the development of inclusive communities. We support and encourage disabled people's active participation and full integration into society. Thurrock Diversity Network campaigns through User-Led consultation and co-production initiatives to shape and influence local and national policies and strategies affecting disabled people of all impairment types. We have a membership base of over 50 individuals and organisations across the borough, and extensive experience in community engagement, benefitting disabled people through the promotion of inclusive communities and active participation. TDN meets monthly to discuss and debate issues of import to disabled people, their families, carers and support organisations, which then informs, influences and shapes the agenda of the Disability Partnership Board held quarterly with Thurrock Council. TDN highlights and responds to issues, hosting and facilitating events and surveys of contemporary interest to improve the provision of services which facilitate independent living.

Thurrock Centre For Independent Living (TCIL) provides extensive advice, information, advocacy, support, guidance and peer support to disabled people, older people, their families and carers - Offering a "one stop shop" for information on disability-related issues, including rights, entitlements, social activities, well-being, signposting individuals where necessary. TCIL is situated in the heart of Thurrock and operates from fully accessible premises.

Thurrock Mind is a local independent organisation affiliated to National Mind that was founded over 30 years ago in order to provide a user-led basis upon which to develop local services to support those with mental health problems in the community. Thurrock Mind offers services that promote effective social inclusion; Community Bridge Builders, a Wellbeing Centre, Befriending and a Stepping Stones gardening project.

The 4 Organisations detailed above form Thurrock Coalition, and collectively we engage directly with approximately 1000 people and 100 plus community organisations.

The Consultation on proposed changes to the way Social Care is provided in Thurrock

The proposals relate to the following areas:

- **Review of Equipment Services in Thurrock**
- **Review of Charging for Adult Social Care Services**
- **Review of Day Care Services in Thurrock**
- **Review of Extra Care Services in Thurrock**

Each proposal is dealt with in turn

As Thurrock Coalition we are very concerned about the impact that any proposed changes to adult social care services will have on the individuals concerned, primarily older, vulnerable people, carers, and family members.

As part of the consultation process regarding the impact of any changes to Equipment Services in Thurrock, we have distributed the consultation documents to our members and partner organisations, community groups, events and networks to gather views and feedback and held a series of 5 dedicated consultation workshops through September to December 2015 to discuss the potential impacts of the proposed changes and to discuss solutions and suggest alternatives.

Consultation Programme Breakdown – throughout October and November 2015

<u>Venue</u>	<u>Details</u>	<u>Responses/Feedback Received</u>
Thurrock Stroke Project, Civic Hall, Blackshots, Grays. Carers Centre, Cromwell Road, Grays. The Beehive, West Street, Grays, Essex RM17 6XP. Thurrock Over Fifties Forum. Thurrock Older Peoples Parliament Thurrock Diversity Network Thurrock Mental Health Service User & Carer Forum, CARIADS, One Community, Tilbury. Trans-Vol Customers	Consultation & Outreach Events	63

The snapshot evidence from individuals, carers, family members and representatives from Thurrock Coalition, Thurrock Diversity Network, Thurrock Unsighted Peoples' Society (TUPS), Thurrock Over Fifties Forum (TOFF), Thurrock Centre for Independent Living, Thurrock Diversity Network, CARIADS. Thurrock Lifestyle Solutions, Thurrock Mind, Parent Advisory Team Thurrock, BATIAS and the Stroke Project can be found in the body of the report.

Further and additional consolidated, verbatim consultation responses from individual participants & attendees, carers, families and organisations received throughout the consultation period can be found in Appendix 1.

For further information, questions or queries, please contact Ian Evans (Director, Thurrock Coalition) on 01375 389 864 or email: ian@thurrockcoalition.co.uk

Review of Equipment Services in Thurrock

We have used the “Everyone Guide to Diversity Impact Assessments” Version 1.1 to present the evidence to inform an Equality Impact Assessment, focusing specifically upon Older people, (Age) Disability and Disabled people as Protected Characteristics under the Equality Act 2010.

We have included:

- A Summary of information about the diversity of the people potentially impacted by any changes to Equipment Services in Thurrock, including research on the issues affecting their inclusion.
- Further information relating to how those groups of people are most likely to be impacted any changes to Equipment Services in Thurrock.
- Details of actions that could be taken to reduce/minimise potential negative impacts and deliver positive impacts. Including consideration of possible alternative options that may be available.

Thurrock Profile

As of 2015, according to Official Labour Market Statistics¹, the population of Thurrock is 163,300 (comprised of 80,400 males and 82,800 females) with 104,900 people aged 16-64. A total of 84,200 of the Thurrock population are economically active (78.4%). 5,100 people as economically inactive due to long term sickness/impairment.

In terms of numbers of people in receipt working age benefits (November 2014), there were 5,170 people receiving Employment & Support Allowance (ESA) and 1,090 Disability-related benefit including Disability Living Allowance / Personal Independence Payment (PIP).

Below is a breakdown of the population of Thurrock aged 65 and over, projected to 2030:

¹ Full NOMIS Statistics Available at: <https://www.nomisweb.co.uk/reports/lmp/la/1946157204/report.aspx>

Thurrock - Population by age - Population aged 65 and over, projected to 2030²

	2011	2015	2020	2025	2030
People aged 65-69	6,600	8,000	7,200	7,900	9,500
People aged 70-74	5,100	5,700	7,300	6,600	7,300
People aged 75-79	3,800	4,400	5,000	6,400	5,900
People aged 80-84	3,000	3,000	3,600	4,100	5,400
People aged 85-89	2,000	1,900	2,100	2,600	3,000
People aged 90 and over	1,000	1,300	1,600	1,900	2,400
Total population 65 and over	21,500	24,300	26,800	29,500	33,500

However, it is important to recognise that the Disability related benefit system is in a period of transition and DLA is being replaced by Personal Independence Payment (PIP). As of January 2015, the number of PIP claims in payment in Thurrock is 560³ this figure should be read in conjunction with those individuals currently receiving DLA.

In addition, older citizens of Thurrock with care needs, and often age-related mobility needs are entitled to claim Attendance Allowance (AA) (If over 65 when they first claim). According to available statistics (from June 2011) we have **1,900** older people on high rate AA (requiring attendance both day and night) and **1,560** on low rate AA – **3,460** disabled older people in all.

Summary of information about the diversity of the people potentially impacted by ending the provision of equipment under £50 in Thurrock, including research on the issues effecting their inclusion.

The Protected Characteristics

The following provides an overview of the relevance of the Review of Equipment Services to the Protected Characteristics under the Equality Act 2010 and where identified, action to mitigate any impact.

²<http://poppi.org.uk/index.php?pageNo=372&PHPSESSID=ke428s0hb0plibnmjel88k4lj5&sc=1&loc=8321&np=1>

³ <https://sw.stat-xplore.dwp.gov.uk/webapi/jsf/tableView/tableView.xhtml> (January 2015)

Age: The proposals for change to Equipment services are aimed at Older and disabled people who require items of daily living equipment to help them remain independent and safe at home, the changes could adversely affect those less able to live independently without Equipment based support.

Disability: By the nature of the Equipment service, all recipients will have some form of impairment or long term condition, in particular disabled people with mobility or sensory impairments and older people who have some form of impairment(s) associated with ageing.

Gender reassignment: No specific issues have been identified in relation to gender reassignment. The service will be provided to people irrespective of, but with respect of their gender reassignment, as this will be taken into consideration in any needs assessment.

Marriage – No disproportionate effect intrinsic to the changes as such. However, a proportion of carers are partners. Charging for Carers Services may result in partners not accessing respite.

Pregnancy/ Maternity – The proposed changes have no disproportionate effect.

Race/Ethnicity – The impact of the proposed changes is not affected by race or ethnicity.

Religion/Belief – The impact of the proposed changes is not affected by religion/belief.

Sexual Orientation – The impact of the proposed changes is not affected by sexual orientation. No specific issues have been identified in relation to sexual orientation. The service will be provided to people irrespective of, but with respect of their sexual orientation, as this will be taken into consideration in any needs assessment.

Gender – The consequences of the proposed changes fall equally on both genders.

Specific Considerations relevant to the proposals

Carers/ families: The review of Equipment Services should seek to identify changes which promote independence and choice and facilitate support for carers.

Cohesion: Integrating people into communities wherever possible will enable them to access universal services and make links with their own communities, but should not be done at the expense of forgoing much needed support in more personalised and appropriate settings for each individual concerned (see below).

Social Exclusion: The Review of Equipment services will need to ensure that socially excluded people are not disproportionately disadvantaged as a result of these changes.

Consideration of evidence in relation to Disability and Age (including evidence relating to access) - those groups of people most likely to be negatively impacted by changing Equipment Services in Thurrock

General

Simple Aids to daily Living are an effective way to help residents maintain independence in the home and outdoors.

There are a variety of low cost items, averaging £20 or less on the market to help with activities, however, Disabled people are half as likely to be employed and half as likely to have no educational qualification.

According to the Employers Forum on Disability, one in five disabled people in the UK are unemployed but want to work; this compares to one in 15 of non-disabled people. 44.3% of working age disabled people are economically inactive. This figure is nearly 4 times higher than non-disabled people (11.5%). Disabled people are 4 times more likely to be out of work than non-disabled people. (Joseph Rowntree Foundation 2014).

The issue will be for those people who are unable or unwilling to self-purchase such items which results in compromising their safety and well-being, which in turn impacts upon statutory duties around promotion of “Well-Being.”

The changes would also disproportionately impact Disabled people in terms of their economic situation, given that disabled people are less likely to be employed and thus economically active compared to non-disabled people:

According to the Labour Force Survey, disabled people are now more likely to be employed than they were in 2002, but disabled people remain significantly less likely to be in employment than non-disabled people. In 2012, 46.3% of working-age disabled people are in employment compared to 76.4% of working-age non-disabled people. There is therefore a 30.1 percentage point gap between disabled and non-disabled people, representing over 2 million people. The gap has reduced by 10 percentage points over the last 14 years and has remained stable over the last two years despite the economic climate.⁴

Furthermore, tightening eligibility criteria for equipment could have an adverse effect upon the ability of disabled people to live independently if their access to necessary and vital equipment is curtailed through an additional costs barrier. This is particularly important given that “Over a quarter of disabled people say that they do not frequently have choice and control over their daily lives.”⁵

⁴ DWP Office for Disability Issues – Disability Facts & Figures. Available at: <https://www.gov.uk/government/publications/disability-facts-and-figures/disability-facts-and-figures#employment>

⁵ Source: ONS Opinions Survey 2011

Disabled people already face significant extra costs of living with impairments, and charging, even for small items of equipment will be detrimental:

Disabled people and their families face many extra costs. From expensive equipment to services, many pay over the odds for essentials. Life costs you £550 more on average a month if you're disabled, but the support to cover these costs - Disability Living Allowance - is only £360 a month.⁶

In addition, it must be noted that the same types of costs affect a diverse cross-section of disabled people. Almost all disabled people report high extra transport costs, most report difficulties affording equipment, insurance and many pay more for housing, fuel and energy.

The Equality & Human Rights Commission (EHRC) latest Report "Is Britain Fairer?" also highlights an increased level of socio-economic hardship for disabled people in comparison to non-disabled people:

There was a significant increase in the mean deprivation score for working age disabled people in Great Britain, from 1.4 in 2007/08 to 1.7 in 2012/13. The gap between them and non-disabled people widened.⁷

Disabled people are also disadvantaged in terms of the "disability pay gap":

In 2013, disabled people in England were paid 90 pence per hour less, and in Scotland up to £1.20 per hour less, than non-disabled people.⁸

This further restricts the ability to pay for essential assistive support items that enable Disabled people to live independently.

The impact of extra costs is profound. The financial penalty an individual faces impacts on their standard of living and can limit their family life, opportunities to learn, work and participate in society. Disabled people are less likely to be able to cope with financial shocks and more likely to have to turn to payday loans to help with everyday living.⁹ Therefore, the knock-on effect of charging for essential equipment will be widespread and adverse.

Taking into account the "catalogue" of small items of equipment currently available from Thurrock Adult Social Care¹⁰, it is evident that generic versions of all items can

⁶Scope Priced out: ending the financial penalty of disability by 2020. Facts, Figures and Full Report Available at: <http://www.scope.org.uk/campaigns/extra-costs>

⁷ EHRC "Is Britain Fairer? The state of equality and human rights 2015" October 2015, p.56. Available at: http://www.equalityhumanrights.com/sites/default/files/uploads/IBF/Final-reports/EHRC_IBF_MainReport_acc.pdf

⁸ Ibid. p.52

⁹ Scope – Extra Costs Commission, Final Report, June 2015. Available at: <http://www.scope.org.uk/Get-Involved/Campaigns/Extra-costs/Extra-costs-commission/Full-Report>

¹⁰ <https://www.thurrock.gov.uk/equipment-and-home-adaptations/types-of-equipment-and-adaptation>

be obtained online¹¹, well below the proposed £50 threshold, meaning that individuals will have to pay for these themselves:

Type of Equipment	Online Price of Equipment
Aidapt 4 inch senator raised toilet seat	£7.49
Aidapt toilet frame with adjustable height and width	£16.83
Aidapt raised toilet seat and frame	£23.60
Adjustable commode chair	£25.45
Perching stool with arms	£19.99
Adjustable bath seat	£18.34
Bath board	£14.85
Shower chair	£24.99
Shower stool	£20.97
Bed stick	£19.20
Crosshead tap turner	£2.34
Kettle tipper	£8.59
Outdoor grab rail	£6.14
Grab rail / handle	£6.26
Right handed curved rail	£4.95

It must be noted that such specialised equipment, even if small, is essential to support disabled people to live independent lives. The price tag often associated with purchases (especially if bought on the High Street from specialist retailers) of this kind can take up a high proportion of the income of disabled people, their families and carers. The critical importance of disability equipment to the lives of disabled people makes it an important area to consider further.

For example, taking an electric tin opener – if bought at a specialist retailer can cost up to £15.00, but online can be purchased for £4.14 - £10.95¹². A bath board purchased on the High Street can cost £35-45, but online costs around £15 (see above).

However, the Disability Digital Divide presents a barrier to disabled people accessing the Internet, and in turn limiting the ability of purchasing cheaper equipment themselves.

The potential for the Internet and mainstream technology to have a positive impact upon Disabled people (of whom there are 11 million nationwide) is yet to be realised. A recent report from Scope and the Helen Hamlyn Centre for Design highlights the following issues that need to be addressed.

- Disabled people still face a huge digital divide – and that many still have to choose between expensive specialist equipment, or inaccessible mainstream gadgets.

¹¹ Prices accurate as of 9/7/15 from <http://www.amazon.co.uk>

¹² <http://www.completecareshop.co.uk/kitchen-aids/can-and-tin-openers/>

- Technology built for disabled people is expensive, low functionality, and often requires specialist knowledge to adapt
- Mainstream technology, like iPads and Windows Tablets, is cheaper and can do much more, but is rarely customised to meet disabled people's needs.

It is suggested that emphasis needs to be placed upon improving the information available to disabled people about enabling technology. Disabled people are amongst the groups least likely to use the internet, and are 20% less likely to be online than their peers. This is despite the huge potential of services like online shopping and banking to transform the lives of disabled people.¹³

Therefore, the local authority, if considering removing items from the equipment catalogue, should look at ways of supporting Disabled people to access the Internet and accessible technology as a preventative way of reducing and delaying the need for care.

Exploring ways to bring the cost of equipment down for those people who do not or are unable to use computers is vital. For example, the local authority could support and encourage community groups to shop around or look into even collective purchasing and bulk buy schemes.

The local authority should review at least some of the proposed cuts in the provision of care services in light of the budget announcement on the increase in minimum wage. The cost of paying for carers on minimum wage is going to increase by at least 10% from next April (2016) and then 6% a year for the following 4 years. There is going to be a significant increase in the cost of care which is going to have to be met.

In terms of safeguarding, installation, review, appropriateness and correct usage of small items of equipment, feedback indicates some concerns if the Local Authority stops providing equipment costing under £50, respondents to the consultation would like clarification as to how any equipment purchased will be safely, properly and correctly set up, installed and fitted to ensure safe usage by the Disabled person. Saving money on the equipment provision and the installation thereof risks the health and well-being of vulnerable people who may, slip, trip or fall as a result of incorrectly installed equipment breaking or coming away from the wall(s).

The preventative nature of small items of equipment becomes redundant if an incorrect installation or set up (by untrained friends, family or community members) results in an even short term hospital admission and subsequent healthcare intervention and/or treatment.

¹³ Scope "Enabling Technology" – January 2015. Available at: <http://www.hhc.rca.ac.uk/CMS/files/1.Enabling%20technology%20report%202013%20digital%20technology%20disabled%20people%20Scope%20Helen%20Hamlyn.pdf>

Feedback recommends that the Local Authority should provide/make available support in sourcing and installing necessary equipment by appropriately trained individuals with all relevant accreditation and professional management/supervision.

Specific feedback, views and comments on how the reductions to Equipment Provision could impact on Disabled/older people/carers (including evidence relating to access and inclusive design)

- The proposal risks creating a hierarchy of impairments for equipment – people with sensory impairments will be more affected than people with learning difficulties
- Relatives/carers will have to foot the bill which could place a strain on inter-personal relationships.
- People who have no relatives get no support with daily living, care and/or equipment.
- What about people who have life limiting conditions? – Will any alternative support provision with installing, repair equipment be good enough?
- How will people get advice and information on how/where/when to get equipment fitted correctly and safely
- People with mobility difficulties will not be able to fit/measure/install equipment safely themselves – they won't have the right support
- People in receipt of benefits have less disposable income to spend on equipment
- Who will fit a £50 grab rail if it falls off?
- How does the proposal intend to deal with replacements and repairs?
- The costs could increase through “mission creep” over time
- Disabled people already face an added costs penalty of living with an impairment
- Having less support means peoples' conditions become more likely to deteriorate and require more costly support in the longer term
- Carers may have to increase the remit of their caring role and care for longer
- Carers will become ill
- The Council will not be fulfilling their Statutory duty to reduce, remove or delay the need for care (under the Care Act 2014)
- A staff Team will mean a longer wait for Equipment assessments, therefore people may deteriorate whilst waiting
- People will become more isolated which could lead to mental health conditions, and a potential increase in suicides.
- Moving people and changing routines will result in undue stress

Details of actions that could be taken to reduce/minimise potential negative impacts and deliver positive impacts. Including consideration of possible alternative options that may be available

Actions:

- The items are that could be removed from the catalogue through the tightening of eligibility criteria should only be those readily available from local retailers and are relatively inexpensive.
- The issue will be for those people who are unable or unwilling to self-purchase such items which results in compromising their safety and well-being
- Provide good quality advice, information and signposting from trained staff and follow up with any individuals who are anxious about the idea of buying their own equipment.
- Approach, negotiate and train local trusted retailers so that they are able to respond more effectively to people buying their own.
- Take on board and implement the recommendations of the Scope Extra Costs Commission
- Introduce a mechanism whereby anyone left at significant risk by not being willing or able to buy their own could be considered via an 'Exceptions ' route.
- Ensure people who are signposted are followed up to check they have managed to get what they need
- Carry out review of decision after 6 months by examining monitoring data and getting feedback from staff and residents
- Provide qualified people to give advice and support to install
- Use a time banking initiative
- Make an exemption for people who lack capacity or have no family or support network
- Train community volunteers in basic Occupational Therapy assessments for small items of equipment. Provide an accredited course.
- Offer basic types/items of equipment that meet needs and outcomes, then provide a voucher scheme, similar to that offered by NHS Wheelchair Services¹⁴, allowing people to "upgrade" their items by "topping up" the monetary value of the voucher. A Partnership Voucher would mean that ownership and maintenance responsibility remains with the Local Authority. An independent Voucher would mean that ownership and maintenance responsibility lies with the individual.

¹⁴ See for example: <https://www.stgeorges.nhs.uk/wp-content/uploads/2013/09/wheelchairservicevoucher.pdf>

Review of Charging for Adult Social Care Services

We have used the “Everyone Guide to Diversity Impact Assessments” Version 1.1 to present the evidence to inform an Equality Impact Assessment, focusing specifically upon Older people, (Age) Disability and Disabled people as Protected Characteristics under the Equality Act 2010.

We have included:

- A Summary of information about the diversity of the people potentially impacted by any changes to Charging for Adult Social Care Services in Thurrock, including research on the issues affecting their inclusion.
- Further information relating to how those groups of people are most likely to be impacted any changes to Charging for Adult Social Care Services in Thurrock.
- Details of actions that could be taken to reduce/minimise potential negative impacts and deliver positive impacts. Including consideration of possible alternative options that may be available.

For further information, questions or queries, please contact Ian Evans (Director, Thurrock Coalition) on 01375 389 864 or email: ian@thurrockcoalition.co.uk

Thurrock Profile

According to a recent Freedom of Information (FOI) Request¹⁵ 1300 people pay charges for Social Care , including those who pay for home care, day care, community alarms and other non-residential community care services in 2014, 43 of whom were granted a waiver either partially or in full.

On September 2nd 2015, the following invoices were outstanding:

- At first reminder with a balance outstanding: 114
- At second reminder with a balance outstanding: 55
- Other e.g. on payment plans, in query, being amended, secured charge, in legal action. Due a personal visit, Social Services dealing, Court appointee dealing, awaiting probate, solicitors dealing: 1212.

It can be said that any changes to the charging policy for adult social care is likely to result in an increase in workload in relation to the categories above and furthermore

¹⁵ FOI Reference Number 5002 dated 4/9/15

the Local Authority could face an increase in demand for financial assessments and a fall in demand for services as a result of the changes to cost.

Summary of information about the diversity of the people potentially impacted by the review of Charging for Adult Social Care Services in Thurrock, including research on the issues effecting their inclusion.

The Protected Characteristics

Age – Any proposed increase in charges (for day care, equipment, respite, pendants etc.) will impact on older people as they are a significant user group of Adult Social Care, All of the proposed changes impact this group. It must be noted that individuals, however, would not pay more than they could afford to pay following financial assessment.

Older people will feel a sense of disappointment that their expectation of support in old age after paying taxes would not be met.

People will become anxious about additional financial stress (despite the fact that many will not be affected because their financial assessment establishes that they cannot afford to pay).

Disability – The proposed changes impact disabled people as by the nature of the service, they are key users. Consequences of the proposed changes will also fall on the families and carers providing support.

Carers benefit from the ‘free-time’ provided when the person they care for is occupied with an activity.

Families and carers will need to make additional provision of support if service uptake falls as a result of higher charges,

Charging for services that are aimed at supporting independence will in fact be perceived as reducing economic and social opportunity.

Gender – The consequences of the proposed changes fall equally on both genders.

Marriage – No disproportionate effect intrinsic to the changes as such. However it has been observed that a high proportion of carers are partners. Charging for Carer’s Services may result in partners not accessing respite.

Pregnancy/ Maternity – The proposed changes have no disproportionate effect.

Race/Ethnicity – The impact of the proposed changes is not affected by race or ethnicity.

Religion – The impact of the proposed changes is not affected by religion.

Sexual Orientation – The impact of the proposed changes is not affected by sexual orientation.

Affected Groups:

Carers – This group will be affected by the proposed changes. Charging for Carer's Services in particular has resulted in a high proportion of feedback that this is deemed an unfair proposal. Many felt that carers save the local authority a large amount of money through their caring role. The change could lead to lower levels of voluntary caring and consequently a greater cost in the longer term. Implementing charging may impact on the recently developed Carers Strategy which has a strong prevention element.

Summary of information about the diversity of the people potentially impacted by the in- year savings proposal that Thurrock Council are recommending around Charging for Adult Social Care Services. Including: Respite Services, Assistive Tech, pendants, Blue Badges, Residential Rates and considering evidence in relation to Disability:

General

- Parents, carers and families
- Older people
- Disabled people
- People with more complex needs
- People who are already more socially excluded when not attending Day Care
- People made vulnerable through long-term illness

The cost to the Carer may mean they cannot afford valuable time away. Carers may ignore their own health if these charges are implemented having a detrimental effect on the health of carer and cared for, leading to increased costs to services. Carers may become socially isolated. Carer may lose employment and valuable income to take up full time caring role

Family relationships may get strained without respite breaks which could be detrimental to both the carer and the cared for. Carers may stop the caring role they provide. There could be a potentially large increase in service and numbers of assessments, under Section 10 of the Care Act 2014 – requiring only an “appearance of need” which would put more pressure on finances

Concern about costs to implement proposal as well as the cost for assessment with many carers being nil charge payers may not match forecasts for recovery

Specific feedback on how the Charging for Adult Social Care Services could impact on Disabled/older people/carers

Cromwell Road & Sitting Service

- People will be socially isolated as will not access services
- Carers will not get a break, which in turn will lead to more stress and pressure
- Financial pressure on families to try and meet payment

Assistive Technology and Pendant Alarms

- High risk if refuse because of cost. i.e. more falls, hospital admissions etc.
- Carers will feel like they are unable to go out and leave the person alone
- Psychological stress on both carers and people who use services – risk of security
- People will become unable to live independently at home with assistive aids

Residential Respite

- If charges are too high (no indication of potential scale or options is given) people won't access service, this will place pressure upon carers that won't get the break they need

Day Centres

- Transport issues – people may not be able to get to the Centres if the days/times/frequency changes and would thus rely upon family, which would defeat the object of respite for the carer
- If only half day/sessional, there may not be time to do anything
- Loss of peer support and sharing knowledge

Extra Care

- If people can't afford charges, they won't get the care that they have been assessed as needing, leading to a risk of more hospital admissions or even residential care
- People can currently stay in their own homes as carers onsite 24/7. If care is commissioned out to so many calls per day, people may not cope and conditions would deteriorate.

Details of actions could be taken to reduce/minimise potential negative impacts and deliver positive impacts. Considering possible alternative options that may be available

Actions:

- More Assistive Technology into Extra Care Homes
- Those with Carers could be given option/choice to receive longer Day Care to give the Carer a break
- Keep full days (or provide individual option/choice) – This would also help to reduce numbers of return journeys required each day
- Implement a financial assessment across all eligible services
- Introduce a minimum charge to avoid cost of collection
- Start financially assessing people for transport. A Personal Budget for around £16 per week on travel would generate more work. There is a perceived need that more transport contracts should be better negotiated to provide a fairer price
- Partnership work between Transport and Social Care to investigate solutions
- Personal Budgets could be used by groups to pay for transport - short journeys would be cheaper by taxi (especially if shared). The Council would be left to fund only long journeys

Changes to Day Care Services in Thurrock

We have used the “Everyone Guide to Diversity Impact Assessments” Version 1.1 to present the evidence to inform an Equality Impact Assessment, focusing specifically upon Older people, (Age) Disability and Disabled people as Protected Characteristics under the Equality Act 2010.

We have included:

- A Summary of information about the diversity of the people potentially impacted by any changes to Equipment Services in Thurrock, including research on the issues affecting their inclusion.
- Further information relating to how those groups of people are most likely to be impacted any changes to Equipment Services in Thurrock.
- Details of actions that could be taken to reduce/minimise potential negative impacts and deliver positive impacts. Including consideration of possible alternative options that may be available.

For further information, questions or queries, please contact Ian Evans (Director, Thurrock Coalition) on 01375 389 864 or email: ian@thurrockcoalition.co.uk

Thurrock Profile

Below is a breakdown of the population of Thurrock aged 65 and over, projected to 2030:

Thurrock - Population by age - Population aged 65 and over, projected to 2030¹⁶

	2011	2015	2020	2025	2030
People aged 65-69	6,600	8,000	7,200	7,900	9,500
People aged 70-74	5,100	5,700	7,300	6,600	7,300
People aged 75-79	3,800	4,400	5,000	6,400	5,900
People aged 80-84	3,000	3,000	3,600	4,100	5,400
People aged 85-89	2,000	1,900	2,100	2,600	3,000
People aged 90 and over	1,000	1,300	1,600	1,900	2,400
Total population 65 and over	21,500	24,300	26,800	29,500	33,500

Analysis

¹⁶<http://poppi.org.uk/index.php?pageNo=372&PHPSESSID=ke428s0hb0pljbnmje188k4lj5&sc=1&loc=8321&np=1>

Taking the figures from 2015 there are 24,300 people aged 65 and over. Around 4.8 people of working age for each one of those apparently dependent due to their age. Of course, not all who could be dependent will be dependent and not all who could be working will be working as the following figures show, but there is not much margin for additional capacity to manage the potential imbalances and demands of demographic change as shown below.

The above table shows government estimates for the population of Thurrock up to 2030. These projections show increased levels of growth in the population from that experienced in the past. The main reasons for this are a forecast natural growth in the older population as people tend to live longer, as well as a net migration of people into the Borough. We are already beginning to see these changes.

An increase in an ageing population as well as an increase of people with age-related impairments will mean an even greater need for support in the borough as well as access to services and civic amenities. Changing, removing or reducing Day Care and Carers services will disproportionately impact older people and disabled people.

Disability-related welfare benefits

Numbers of individuals in receipt of Disability Living Allowance provides a good indication of the percentage of the population in Thurrock living with a long term health condition or impairment, and thus those likely to currently use, or use Day Care and associated Council Services in the future and therefore be impacted by changing Day Care Services in Thurrock.

It is important to note that all existing claimants of DLA were aged between 16 and 64 in April 2013 when PIP came into existence (around two million people) will be invited to claim PIP and will be assessed for the new benefit if they choose to claim it between now and 2018.¹⁷ This will apply to those on both fixed and indefinite DLA awards. People aged 65 or over on that date will not be reassessed for PIP but will remain on DLA as long as they still satisfy the entitlement conditions. Also, if someone is in receipt of DLA or PIP before turning 65, they will remain on that benefit and are not entitled to claim Attendance Allowance.

Attendance Allowance (AA)

Older citizens of Thurrock with care needs, and often age-related mobility needs are entitled to claim Attendance Allowance (AA) (If over 65 when they first claim). According to available statistics (from June 2011) we have **1,900** older people on

¹⁷ See Disability Rights UK: Timetable on forthcoming welfare benefit changes. Available at: <http://www.disabilityrightsuk.org/how-we-can-help/benefits-information/timetable-forthcoming-welfare-benefits-changes>

high rate AA (requiring attendance both day and night) and **1,560** on low rate AA – **3,460** disabled older people in all.

Summary of information about the diversity of the people potentially impacted by changing, reducing or removing bus services in Thurrock, including research on the issues effecting their inclusion.

The Protected Characteristics

The following provides an overview of the relevance of the Review of Day Care Services to the Protected Characteristics under the Equality Act 2010 and where identified, action to mitigate any impact.

Age: The proposals for change to Day Care services are aimed at older people of the 65+ age group. It can be said that the overall aim of the Review is to reform and modernise services for older people, but could adversely affect those less able to live independently without Day Care support

Disability: By the nature of the day centre service, all residents are older people and have some form of impairment(s) associated with ageing.

Gender – The consequences of the proposed changes fall equally on both genders.

Race: The services will be provided to people irrespective of, but with respect for race and ethnicity, as this will be taken into consideration in any needs assessment

Religion or belief: The services will be provided to people irrespective of, but with respect for religion and belief, as this will be taken into consideration in any needs Assessment

Marriage – No disproportionate effect intrinsic to the changes as such. However, a proportion of carers are partners. Charging for Carers Services may result in partners not accessing respite.

Pregnancy/ Maternity – The proposed changes have no disproportionate effect.

Carers/ families: The review of Day Care Services should seek to identify changes which promote independence and choice and facilitate support for carers.

Cohesion: Integrating people into communities wherever possible will enable them to access universal services and make links with their own communities, but should not be done at the expense of forgoing much needed support in more personalised and appropriate settings for each individual concerned (see below).

Social Exclusion: The Review of Day Care services will need to ensure that socially excluded people are not disproportionately disadvantaged as a result of these changes.

Sexual orientation: No specific issues have been identified in relation to sexual orientation. The service will be provided to people irrespective of, but with respect of their sexual orientation, as this will be taken into consideration in any needs assessment.

Gender reassignment: No specific issues have been identified in relation to gender reassignment. The service will be provided to people irrespective of, but with respect of their gender reassignment, as this will be taken into consideration in any needs assessment.

The National Picture

Age UK “Care in Crisis” Report from 2014¹⁸ highlights several key points in relation to demand for Adult Social Care, reductions in funding, a decrease in the number of people using community services and an increase in residents in residential and nursing homes and unmet need – all when taken in the round, provide a myriad of factors contributing to the challenges facing Older People in Local Authorities across the U.K.

Key points

- Increasing demand - The number of people aged 85 and over (the group most likely to need care) has increased by 30 per cent between 2005 and 2014
- Reductions in funding - Between 2005/6 and 2010/11 public funding for older people’s social care stagnated. From 2010/11 to 2013/14 public funding for older people’s social care (including transfers from the NHS to councils) decreased by 10 per cent in real terms.

Councils have cut back on their funding for social care: From 2010/11 to 2013/14 government funding to councils reduced by 19.6 per cent. Despite increasing the proportion of budget spent on average by councils on adult social care to over 40 per cent in 2013/14, the actual amount spent decreased on average by 20 per cent (£2.8 billion) between 2011/12 and 2013/14.

In today’s prices using a GDP deflator, for the financial year 2013/14 - Only

¹⁸ http://www.ageuk.org.uk/Documents/EN-GB/Campaigns/CIC/Care_in_Crisis_report_2014.pdf?epslanguage=en-GB?dtrk%3Dtrue

13 per cent of councils considered people with 'moderate' needs eligible for funding in 2013/14, compared with nearly half of councils in 2005/6

- Fewer service users supported by public funding - The proportion of older people in receipt of local authority supported social care services has declined since 2005/6, with a particularly sharp decrease from 2008/9. In 2005/6 15.3 per cent of people aged 65 and over received services. This proportion fell to 9.9 per cent in 2012/13. 896,000 people aged 65 and over received these services in 2012/13, compared with 1,231,000 in 2005/6. 35 per cent of councils have reduced the number of older people using their services by more than 40 per cent between 2005/6 and 2012/13

- Taking account of socio-demographic change, the actual drop in the number of older service users in this period is 36 per cent compared with the scenario had service coverage been maintained at 2005/6 levels.

- Decrease in users of community services - Data on all the people who used local authority supported care services in each year between 2005/6 and 2012/13 showed a decrease in users of community services: Specifically:

The number of older people using day care centres fell by 49 per cent from 136,000 to 69,100.

The number of older people receiving home care fell by 21 per cent from 489,000 to 384,600.

These figures demonstrate that fewer people are benefitting from preventative services that support them to remain in their own homes.

- Increase in residents in residential and nursing homes - Data on all the people who used local authority supported residential and nursing homes in each year between 2005/6 and 2012/13 showed an increase in numbers:

The number of older people using residential care homes rose by 21 per cent from 135,000 to 164,000.

The number of older people using nursing care rose by 22 per cent from 65,000 to 79,000

- Rising contributions from those eligible for public funding - Average fees and charges per service user rose by a relatively small amount between 2005/6 and 2008/9 and then started to rise much more sharply from 2009/10 to 2012/13. On average service users were paying £588 per year more in real terms in 2012/13 than they were paying in 2009/10.
- Unmet need - In 2011, it was estimated that of 2 million older people with care related needs, nearly 800,000 received no support from public or private sector agencies.

Had all councils used 'moderate' as the threshold for their criteria for eligibility to council support, the Personal Social Services Research Unit (PSSRU) estimate that there would have

These and subsequent figures about service users include older people who are receiving direct payments/personal budgets

Also includes partial and fully self-funders who pay for their own care which is provided by the local authority and partial self-funders whose care is independently provided been 26 per cent more service users in 2010 than there actually were, with an increase in net expenditure of £1.2 billion.

By 2014 PSSRU estimate that if all councils used 'moderate' as the threshold for their criteria for eligibility for council support, 25 per cent (193,000) more people would be eligible for support, costing £1.5 billion more that year.

The Thurrock Picture

Thurrock Council actually has five centres but two are open on different days to each other and are run by the same staff team.

The service runs from 9am to 4.30pm and clients spend the day at the centres.

3 centres take 15 service users each day Mon-Fri. This equates to 75 places each week at each centre but not 75 different people as some people attend more than one day.

1 centre opens Mon and Thurs and take 12 service users The other centre opens on Tues, Weds and Thurs and take 15 people.

Some days there might be vacancies or people might not attend i.e. are in hospital.

Below is an indication of the numbers of people currently using day care services at the proposed sites across Thurrock:

On the present figures people attending are as follows*;

Weekday	Number of Attendees
Monday	51
Tuesday	53
Wednesday	55
Thursday	54
Friday	54

*These numbers change frequently as people come and go.

People currently attending;

Number of days attending per week	Number of Attendees
1 day a week	53
2 days a week	58
3 days a week	28
4 days a week	0
5 days a week	1

Transport:

Most people come in by the transport provided which is in 2 runs some people come in later than others and leave later in the afternoon.

Number of people requiring transport	125
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Specific attendance information (broken down by Centre)

The service runs from 9am to 4.30pm and clients spend the day at the centres.

Kynoch Court: Billet Lane, Stanford-le-Hope SS17 0AF**Number of people attending each day:**

Weekday	Number of Attendees
Monday	11
Tuesday	15
Wednesday	12
Thursday	15
Friday	13

Number of days attending per week	Number of Attendees
1 day a week	17
2 days a week	14
3 days a week	6
4 days a week	0
5 days a week	0

Number of people requiring assistance/support with transport	33
Number of people not requiring assistance/support with transport	4

Morning / Afternoon transport	N/A
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Specific attendance information (broken down by Centre)

The service runs from 9am to 4.30pm. Attendance is per day. Each client receives up to 6 hours care per day

The Lodge (c/o Piggs Corner) Tennyson Avenue, Grays RM17 5RS

Number of people attending each day:

Weekday	Number of Attendees
Monday	13
Tuesday	12
Wednesday	10
Thursday	12
Friday	10

Number of days attending per week	Number of Attendees
1 day a week	8
2 days a week	15
3 days a week	4
4 days a week	0
5 days a week	1

Number of people requiring assistance/support with transport	26
Number of people not requiring assistance/support with transport	1
Morning / Afternoon transport	1 client has AM transport, 1 client has PM transport

Specific attendance information (broken down by Centre)

The service runs from 9am to 4.30pm. Attendance is per day. Each client receives up to 6 hours care per day.

Harty Close & Arthur Barnes Court Day Care Centres: Halton Road, Chadwell St Mary, Grays RM16 4SA

Number of people attending each day:

Weekday	Number of Attendees
Monday	12
Tuesday	15
Wednesday	15
Thursday	12
Friday	15

Number of days attending per week	Number of Attendees
1 day a week	10
2 days a week	17
3 days a week	6
4 days a week	0
5 days a week	0

Number of people requiring assistance/support with transport	39
Number of people not requiring assistance/support with transport	0
Morning / Afternoon transport	N/A

Specific attendance information (broken down by Centre)

The service runs from 9am to 4.30pm. Attendance is per day. Each client receives up to 6 hours care per day.

Bell House Day Care Centre: 23-25 Derwent Parade, South Ockendon RM15 5EF

Number of people attending each day:

Weekday	Number of Attendees
Monday	15
Tuesday	15
Wednesday	15
Thursday	15
Friday	15

Number of days attending per week	Number of Attendees
1 day a week	18
2 days a week	12
3 days a week	11

4 days a week	0
5 days a week	0

Number of people requiring assistance/support with transport	37
Number of people not requiring assistance/support with transport	0
Morning / Afternoon transport	N/A

Day Care & Personalisation

A Report from Age UK¹⁹, highlights the continuing popularity of Day Care as an option for Older people that could co-exist and be complimented by move towards greater personalisation, personal budgets and direct payments:

Despite their popularity amongst older people, day services are often depicted as an outdated model of service provision that does not reflect what would be wanted within a market shaped by today's older people.

This argument is often made in the context of the moves to personalisation and personal budgets, but it is largely based on experience in the learning disability field.

There is substantial evidence, that many older people in receipt of personal budgets positively choose to use day services, but there is certainly scope for increasing the personalisation of support within a day service setting.²⁰

Consideration of evidence in relation to Disability and Age (including evidence relating to access) - those groups of people most likely to be negatively impacted by changing Day Care Services in Thurrock

The main affected groups will be:

- Parents, carers and families
- Older people

¹⁹ Age UK: "Effectiveness of day services - Summary of research evidence - October 2011". Available at: http://www.ageuk.org.uk/Documents/EN-GB/For-professionals/Research/Day_services_evidence%20%20of_effectiveness_October_2011.pdf?dtrk=true

²⁰ Ibid p.3

- Disabled people
- People with more complex needs
- People who are already more socially excluded when not attending Day Care
- People made vulnerable through long-term illness

Specific feedback on how the changes to Day Care Services could impact on Disabled/older people/carers

- The changes in service will have a detrimental impact and potential risk to the health and well-being of people who use services brought about by the closure of their day centre. Concerns were raised that this will have an unsettling effect and could lead to disorientation, particularly among the very old and most vulnerable.
- Importance of the need to ensure day care for people with dementia is retained to support older people to remain independently at home.
- Concern around the loss of friendships and fears around social isolation. Transport issues and travel arrangements to alternative day care also an issue.
- Must ensure that the needs of carers are recognised.
- Built environment - Older people are likely to find changes more difficult to cope with both physically and mentally in terms of changes in routine and to their care needs. The built environment may dictate some of these changes.
- Location of premises - Changes to transport arrangements may be required and a longer journey time and/or different route could have an adverse effect.
- Also potential difficulties for those with high dependency needs if they choose mainstream services with less support for their impairment, or are dependent upon less reliable support services (e.g. accessible transport is not available or unreliable).
- In addition potential difficulties for carers dropping off individuals who use the services.
- Concerns about loss of contact with friends etc.
- Consider ways of ensuring continued contact between people.
- Transport is vital and needs to form part of each current service user's assessment.

- Some service users may not be able to make their own decisions, or may need 1-1 help in understanding the proposed changes through the use of independent advocacy.
- Also older people affected by age-related conditions or limited mental capacity will have to take on more control of their care than they would choose.
- Of utmost importance is that day services for older people have provided an important respite function for carers, providing them with a significant, regular and reliable break from caring.
- Even if day care centre provision is organised in a different way the respite needs of carers must be considered.
- Further impact upon carers - The proposals could negatively impact on carers who are reliant on the centres for respite from their caring role, and so may need to make other arrangements. There is a risk that the changes to care provision could decrease economic well-being among older people as some users may be financially worse off as a result of a change to day care.
- We are concerned about the potential for increased journey times and the impact that this would have on individuals who use day care who already spend a significant time on transport.
- Also concerned for Carers in terms of providing support to individuals in readiness for transport in the mornings.
- Help to better resource and use community transport more effectively as part of the Day Care Service Model to promote timely pick up and drop off times, and avoid long circuitous journeys to pick up other people who use services and then facing the return journey.
- The potential negative, unsettling impact of change of venue/locality, particularly on clients with dementia.
- A key aspect of service utilisation patterns is distance decay, or the tendency for interaction with facilities to decrease with increasing distance (see Joseph and Bantock, 1984; Cromley and McLafferty, 2002 for examples). Distance decay is a function of the added time, cost, and effort of travelling long distances; as an individual's costs increase their willingness to travel decreases. People's knowledge of, or familiarity with, service opportunities also decline with distance, exacerbating the pattern of distance decay (Cromley and McLafferty, 2002).

Further potential impacts and effects include:

- Emotional stress upon carers coupled with a lack of respite for carers
- Loss of Therapy for the person

- Safeguarding issues could arise due to lack of opportunity for contact and checking on the well-being (emotional and physical) of vulnerable people
- Increased social isolation
- Reduced opportunity for peer support and reduced opportunity for information sharing
- Increase in the numbers and costs of Care Packages – resulting in longer waiting lists – particularly with fewer staff members
- We understand that there is currently at least a 6 months waiting list for Day Care in Thurrock
- Greater demand over time due to changing demographics and the ageing population
- More impact upon G.P. surgery as not seeing anyone who is able to check well-being of individuals
- People pressing the Pendant Alarms to talk to Careline
- Greater pressure on Ambulance Services, when preventative services are not in place, leading to major events resulting in avoidable hospital admissions and higher costs of care

Details of actions that could be taken to reduce/minimise potential negative impacts and deliver positive impacts. Including consideration of possible alternative options that may be available

Actions:

- To mitigate against any adverse impacts and ensure that any such impacts are minimised, each potential option should be subjected to an equality impact assessment. The assessments should then be considered through the Council's decision making process.
- As part of the review, the Local Authority should consider that its role in ensuring that the need for specialist provision in key areas such as the increasing need for dementia services and intermediate care is met.
- In relation to day services, profiling of the individuals and carers who use the services should be undertaken to identify those people with personal care and high dependency needs to ensure that their needs are continued to be met.
- The emerging key themes to alleviate the impact of any of the proposed changes are that the following are important:
 - Alternative provision is local and of similar nature and quality
 - Keep friends together
 - Consider individual needs
 - Make more effective use of and support for community transport. E.g. Trans-Vol

- Make any resulting transition as stress free as possible and provide ongoing support to older people to access alternative provision
- An alternative/remaining day care services should offer a wider range of activities in more socially inclusive settings that will make it possible to support older people in different situations.
- Any alternative service must support older people in working out personalised activities plans and must be proactive in ensuring that older people benefit from the opportunities available through Self Directed Support arrangements.
- An assessment of every individual should be undertaken in accordance with all relevant legislation, Thurrock Council policies and procedures.
- Changes to routine should be minimised
- Visits to new/altered provision to lessen confusion should be provided
- **Communication and Information** - Clear and timely communication to all service users and carers, particularly that which provides information about alternative provision.
- All current users of the day care services must be offered alternative day services, also when managing the change it is important to consider and engage with carers throughout.
- An assessment of every service user and carer should be undertaken by qualified social workers to ensure that current, individual needs are properly understood.
- Individuals and their relatives/carers should be offered support to seek appropriate alternative services following a reassessment of their needs and should be given comprehensive information on cost, quality and all alternatives in order to make an informed decision.
- **Customer care and staff training** – Day Centre Staff should play a lead role in understanding the concerns of people who use the service, helping them understand the proposed changes and helping them make the right decisions for themselves. Staff will need to address issues, particularly for older people about having to adapt to a new environment, different staff, concerns for friendship groups, concerns over changes in routine and that their care needs will not be met by new staff and concerns over disruption to relationships/friendships.
- Provide appropriate support to staff through awareness raising events
- We are conscious of the fact that there are proposals to change other Adult Social Care Services that affect older and disabled people, therefore Adult

Social Care must ensure a joined up approach and effective coordination and communication of the various programmes

- The Council should provide people who use services and their carers with opportunities to let the Council know what impact all changes may have on them.
- Review carers access to respite to ensure that they are not negatively impacted upon
- Ensure that a full benefit and financial review is undertaken as part of service user assessments to ensure no financial detriment for individuals.
- Increase charges for those that can afford it (to be determined through financial assessment)
- Outsource services
- If necessary shut one building –as the services are not all at full capacity. Then maximise capacity at the other sites (manage any transition in a person-centred manner with dignity & respect – see above).
- Look at sharing premises with other businesses, voluntary organisations etc.
- Many commented that they do not see Day Care as 'Care'. Many go for the social interaction, meal and activities. It has been suggested that perhaps this be rebranded and another separate service be created at a realistic, affordable cost.
- Comments received that if the eligibility criteria for day care attendance was at a lower threshold potential attendance could increase and make it more financially viable. This suggestion could be considered with the previous suggestion above

Review of Extra Care Services in Thurrock

We are very concerned about the impact that any proposed changes to Extra Care Services will have on the individuals concerned, primarily older, vulnerable people, carers, and family members.

We have used the “Everyone Guide to Diversity Impact Assessments” Version 1.1 to present the evidence to inform an Equality Impact Assessment, focusing specifically upon Older people, (Age) Disability and Disabled people as Protected Characteristics under the Equality Act 2010.

We have included:

- A Summary of information about the diversity of the people potentially impacted by any changes to Extra Care Services in Thurrock, including research on the issues affecting their inclusion.
- Further information relating to how those groups of people are most likely to be impacted any changes to Extra Care Services in Thurrock.
- Details of actions that could be taken to reduce/minimise potential negative impacts and deliver positive impacts. Including consideration of possible alternative options that may be available.

For further information, questions or queries, please contact Ian Evans (Director, Thurrock Coalition) on 01375 389 864 or email: ian@thurrockcoalition.co.uk

Thurrock Profile

According to the Thurrock Council Market Position Statement 2015-2018:

The Council owns 2 two extra care housing sites with a total of 73 units, and demand for these units is high. Also we have in partnership with Hanover developed a new purpose built extra care scheme which provides 18 one bedroom and 47 two bedroom extra care flats for rent and sale.²¹

Summary of information about the diversity of the people potentially impacted by the proposals relating to Extra Care Services in Thurrock, including research on the issues effecting individual inclusion

The Protected Characteristics

The following provides an overview of the relevance of the Review of Extra Care Services to the Protected Characteristics under the Equality Act 2010 and where identified, action to mitigate any impact.

²¹ Thurrock Council Market Position Statement 2015-2018, p.20. Available at: <https://www.thurrock.gov.uk/sites/default/files/assets/documents/asc-market-position-2015-v04.pdf>

Age: The proposals for change to Extra Care services are aimed at older people of the 65+ age group. Older service users might find it difficult to adapt to change and may find change worrying.

Disability: By the nature of the Extra Care service, all residents are older people who may find it difficult to adapt to new accommodation because of their impairment and/or long term condition(s), or have concerns about doing so.

Gender – The consequences of the proposed changes, stopping providing Extra Care at certain sites may cause uncertainty or anxiety for those older people and staff involved, affecting both genders.

Race: The services are provided to people irrespective of, but with respect for race and ethnicity, as this must be taken into consideration in any needs assessment

Religion or belief: The services will be provided to people irrespective of, but with respect for religion and belief, as this must be taken into consideration in any needs Assessment

Marriage – No disproportionate effect intrinsic to the changes as such. However, a proportion of carers are partners. Charging for Carers Services may result in partners not accessing respite.

Pregnancy/ Maternity – The proposed changes have no disproportionate effect.

Carers/ families: The review of Extra Care should seek to identify changes which promote independence and choice and facilitate support for carers.

Cohesion: Integrating people into communities wherever possible will enable them to access universal services and make links with their own communities, but should not be done at the expense of forgoing much needed support in more personalised and appropriate settings for each individual concerned (see below).

Social Exclusion: The Review of Extra Care will need to ensure that socially excluded people are not disproportionately disadvantaged as a result of these changes.

Sexual orientation: No specific issues have been identified in relation to sexual orientation. The service will be provided to people irrespective of, but with respect of their sexual orientation, as this must be taken into consideration in any needs assessment.

Gender reassignment: No specific issues have been identified in relation to gender reassignment. The service will be provided to people irrespective of, but with respect of their gender reassignment, as this will be taken into consideration in any needs assessment.

The proposals will mainly affect the residents, (including families and carers thereof) of the 2 sites, who are all over 65 and physically frail. There will be no

impact on the other groups because the proposals will not specifically affect any of these groups.

We recommend that Person-centred planning be carried out ensure that the needs of people in terms of their faith, race, sexual orientation are fully met in any alternative services. If required, appropriate guidance and training in addressing these needs should be provided to relevant Adult Social Care staff.

The Key elements of Extra Care Housing

Research from the Housing Learning & Improvement Network²² shows that there are 5 core elements of Extra Care Housing that help older people to achieve fulfilling, socially-connected lives, through participation, inclusion, activity, improved opportunities for maintenance of health & well-being with onsite support 24/7. These are as follows:

1. *The ethos of extra care housing promotes the concept of a home (and community) for life, independence, homeliness and flexible care pathways.*
2. *The design of extra care housing schemes promotes social contact through 'building in' communal areas and facilities - such as cafes and leisure facilities - that encourage residents to mix. Sometimes these facilities are also open to the wider community.*
3. *Residents of extra care schemes can also participate (or not) in a wide range of activities both onsite and in the wider community. These range from onsite exercise classes through to joining local organisations outside the housing development. Although many residents, particularly the younger and fitter ones, will take part in a range of 'mainstream' activities off-site, the less active ones can still gain the social contact offered by even relatively low-key activities within the housing scheme - such as exercise classes or quizzes.*
4. *With care and support staff available on-site around the clock, new residents have access to some social interaction from the off. Most studies of social wellbeing in extra care note the importance of staff in supporting new residents as they develop and strengthen social relationships. We see this as an in-built sense of community and the fourth building block of social interaction in extra care.*
5. *And finally, there is evidence that extra care housing offers improved health and functional ability with, for example, fewer falls and shorter hospital stays. Residents feel more confident about - and are more capable of - engaging in social activities.*

²² <http://www.housinglin.org.uk/>

Consideration of evidence in relation to Disability and Age (including evidence relating to access) - those groups of people most likely to be negatively impacted by the changes to Extra Care Services in Thurrock

The main affected groups will be:

- Older people, carers and families
- Older people are disproportionately affected by this proposals
- Disabled people
- People with more complex needs
- People who are already more socially excluded due to their situation
- People made vulnerable through long-term illness

Specific feedback on how the changes to Extra Care Services in Thurrock could impact on Disabled/older people/carers

- Worried about people paying a weekly charge, amounting to £300 per month (particularly those unable to afford it)
- This is a step back towards putting people into institutions – What’s happened to the recognition and practical implementation of the Social Model of Disability?
- Having less time or support means peoples’ conditions become more likely to deteriorate and require more costly support in the longer terms
- 6 months of a financial year to save £50k is too quick
- Carers may have to increase the remit of their caring role and care for longer
- Carers will become ill
- The Council will not be fulfilling their Statutory duty to reduce, remove or delay the need for care (under the Care Act 2014)
- A smaller Social Work Team will mean a longer wait for assessment, therefore people may deteriorate whilst waiting
- People will become more isolated which could lead to mental health conditions, and a potential increase in suicides.
- Moving people and changing routines will result in undue stress

Suggested actions that could be taken to reduce/minimise potential negative impacts and deliver positive impacts? Consider possible alternative options that may be available

²³ Full Report available at:

http://www.housinglin.org.uk/library/Resources/Housing/Support_materials/Reports/HLIN_Report_Isolation.pdf

- Council staff are too expensive – recruit cheaper staff to support us
- Focus upon the individual – deliver tailored support on the ground
- If you reduce the numbers, will equality increase?
- Is the development being built in south Ockendon big enough (50+ individuals) to be viable?
- People must be given a full follow up assessment/review after any change
- Promote Asset Based Community Development (ABCD)/ Local Area Co-Ordination (LAC) initiatives – e.g. develop intergenerational groups, baking, dancing, keep fit etc. Make the communal lounges really communal in a meaningful way
- The suggested concierge needs to be properly trained in a wide variety of disciplines and support.

Conclusion & Recommendations

- The consultation and outreach exercises engaged people, of a varied demographic and with a range of impairment types each of whom provided valuable insight and input into the consultation around proposed changes to Equipment, Charging, Day Care and Extra Care Provision in Thurrock.
- We recommend that the evidence and information relating to the diversity of people who are likely to be affected, as well as the potential impacts upon the affected groups and the suggested actions to minimise adverse effects contained within the report and appendix be adopted to inform the future delivery of Adult Social Care provision wherever possible.
- It is hoped that the evidence, discussions, questions and issues raised throughout the workshops and outreach exercises, along with the references to and application of key policy and good practice documentation will be used by the Local Authority to inform, develop and carry out an Equality Impact Assessment in a positive and meaningful way, informed by person-centred principles alongside the people who use Council Services.

Thurrock Coalition – December 2015

Appendix 1

Consolidated Verbatim Consultation Responses – September to December 2015

Equipment provision

Summary of information about the diversity of the people potentially impacted by the reductions in Equipment Provision and any research on the issues effecting their inclusion. Note: (Stopping issuing equipment under £50. People will need to pay for this themselves). Including evidence in relation to Disability (including evidence relating to access and inclusive design)

- This will affect Pensioners
- Equipment under £50 - You should not make cut backs on rails and chairs are for safety and prevention, making these changes will have an impact on the ambulance services and NHS as the peer group targeted are and have limited means, because the falls (no.s) will increase and safety aspect is jeopardised. Due to finances.
- Equipment under £50 - Should all be free! = a lot of money to people on benefits or pensions.

Specific feedback, views and comments on how the reductions to Equipment Provision impact on Disabled/older people/carers (including evidence relating to access and inclusive design).

- Equipment under £50 - Again! Where do you expect the pensioners to find this extra money? They already pay Council tax and tax on their pensions!
- Equipment under £50 - People would go without rather than buy. Also, special equipment like 'long white cane'.
- Equipment under £50 - Wrong! Money out of people's pockets that they cannot afford. Struggle enough.
- Equipment under £50 - Where are pensioners going to find the extra money from. They can just about eat and heat house and now additional costs to help with aids req.
- Equipment under £50 - Surely a financial assessment should be done. Can't expect people on low income to pay for these.
- Equipment under £50 - My small items I had to buy myself. Totally unacceptable. O.T would not give me my small items. I have a perching stool, special bread board, adapted cutlery.
- Equipment under £50 - Has no problems or concerns with any increase in costs as she's provided adaptations and careline herself and can afford to do so.

- Equipment under £50 - Charging for equipment – people shouldn't have to pay for it themselves – people are trying to better themselves and to make things easier at home –to make people pay is making life harder. It would mean difficult choices.
- Equipment under £50 - If only one item is required – ok – under £50 but if more than one item required i.e. 4 separate items = £200 or there about where do pensioners find this money hate the idea of “means testing” going back 100 yrs.
- Equipment under £50 - Outrageous!! Worked for years and to get no help. Paid National Insurance all life!!
- Equipment under £50 - I've various items for my essential use, the cost of having a disability is already high.
- Equipment under £50 - Understandable – equipment – overpriced e.g. buy rails in B and Q and buy them but need someone to fit – recognised installer – e.g. £50 p/h. Hour per rail £200 = £240 per job and delivery insurance and safety concerns. - Horrendous – alterative: flat fee – more acceptable – e.g. £20 – or banded approach – e.g. like a dentist. Is it £50 per item or £50 cumulative?
- Quality, availability, suitability?
- Time, training, decisions of suitability. The carer will have more responsibly – choosing – ordering – fitting.
- Seek better prices, bargaining power, fitter and supplier same company.
- Social enterprise with support.
- Equipment under £50 - I work for blind and sight impaired society as long canes and symbol canes are specialist equipment these cannot be bought without need for training: I feel these and other items as still needed provided free. There are many other costs still to be needed and paid for by service users.
- Equipment under £50 - I pay what I can afford.
- Equipment under £50. Need 8 weeks training for long cane – [it] is a specialist piece of equipment and is ordered to meet people's needs, so if I just bought one it could not be right for me.
- Equipment under £50 - Sum sounds expensive I don't mind paying if I can afford to pay? It's dangerous if people can't afford it!
- Equipment under £50 - There again means testing some people cannot afford it, may have accidents because of lack of these items and end up long term in hospital care costing thousands more.
- Equipment under £50 - Use charity more but charities need enough funding to provide these services this would be cheaper all round.
- Equipment under £50 - Should look into our income to assess them.
- Equipment under £50 - Look into recycling plan – social care, contractors, recyclers all work together to provide the correct equipment i.e. height. Could provide a better quality service and cheaper.

- Equipment under £50 - Recycle equipment which does not happen now, it is a waste. We recycle our rubbish, why not valuable equipment?
- Equipment under £50 - Disgusting. Unacceptable. If medical professions say they need appliances – then charging for them is disgusting.
- Equipment under £50 - with benefit cuts this has a double impact.

Specific feedback, views and comments of actions that could be taken to reduce/minimise potential negative impacts and deliver positive impacts. Including consideration of possible alternative options that may be available

Actions:

- Equipment under £50. Yes what happens next? Have they already made their decisions and “ok’d” it?
- Why not get rid of some of the big pay packets of senior officers on the Council do we need all of them? No, would save a lot of money for the elderly’s Welfare. That is where the cut backs must be made the top Councillors should be made to suffer not the elderly! Why should Councils have their grants cut back, yet government waste billions giving away to foreign countries with nothing in return? The government are saving billions of money by using family’s to care for their loved ones. Have they already made their decision and “ok’d” it.
- Short breaks – How much is it now? Why pay?
- There are more questions needed to be answered.
- There isn’t any mention of any other caring groups in Thurrock that help with the elderly that will be effected.
- Why is the government victimising the older generation of today and the future older generation.
- They should not be cutting back on the grants for care and support! The government are saving over a billion pounds on relying on family and friends to be cheap carers.
- Equipment under £50. Recycle equipment to reduce costs also to stop people who don’t need equipment for getting it from charity shops and misuse them for benefit claims.
- Equipment under £50. Council should speak to people affected to see how they feel. People would like to know the potential of increased cost’s regarding carers.
- Equipment under £50. The Council would have a rough idea of what equipment is used yearly, things could be bought in bulk to reduce costs.
- Equipment under £50 - This would not directly have an impact on our son / ourselves at present but could have an impact on him in the future. This matter should be means tested.
- Equipment under £50 - Investigate the market.

- Equipment under £50 - Investigate the market for competitive pricing. Improve I.T skills with support from an organisation for Disabled people to access the internet to obtain the equipment. Need assistance once arrives to fit and install the equipment safely.
- Equipment under £50 - Always seek best value!
- Equipment under £50 - All costs should be checked to ensure best value all procurement should be open.

Charging for Adult Social Care Services

Summary of information about the diversity of the people potentially impacted by the in- year savings proposal that Thurrock Council are recommending around Charging for Adult Social Care Services and any research on the issues effecting their inclusion.

- Careline emergency services - It's disgusting they are cutting costs and targeting the most vulnerable and needing.
- Short breaks - Respite is a much needed service – making changes will affect both carers and client's wellbeing.
- All the above effect everyone not just one person, so all should be taken into account.
- The 2 centres that are only part of the week, maybe they should go and keep the others open with extra staff.
- Careline emergency services - I'm isolated and transport is difficult. I get meals on wheels. I'm epileptic and get DLA. I have a neck, wrist and bed pendant alarm it's really important. I'm happy with the pendant, the service is good, for keeping people safe, and there is a good response for people getting in touch if the alarm goes off. The service and cost should stay the same and only charge if it means the only way the service could carry on.
- Short breaks - Don't agree!! Harder for carer than the sick person.
- Careline emergency services - We got rid of careline because they were going to increase charges before.
- Short breaks - Can't answer as not aware of cost now. Will a financial assessment be done?
- Careline emergency services - Unfair!! Disgusted that you already have to pay.
- Short breaks - Breaks are meant for poorly people and carers. Not fair!! Should not be an increase.
- Careline emergency services - Wouldn't mind at all with rise in cost.
- Careline emergency services - Extra costs for people with financial problems. Appalled by TBC putting costs up.
- Careline emergency services - The increase suggested is much too high in comparison to our pension. Unfair – a smaller increase which remains static

for the 3 years can be considered. This careline service is a great idea proved it really does work a “godsend” for people living alone a necessity not a luxury.

- Careline emergency services - The most vulnerable, how about it being means tested, so free to those who cannot afford it and prices rising to full amount depending on income.
- Short breaks - Respite care is well earned and much needed, especially if you are the long-term carer. They save the Council THOUSANDS compared to full time care costs, that bill will go up if people cannot afford these breaks and end up ill themselves and unable to do the caring again.
- Careline emergency services - I think this could stop some people having this service as they could not pay for it, and this could be detrimental to the people involved.

Specific feedback, views and comments on how Charging for Adult Social Care Services could impact on Disabled/older people/carers (including evidence relating to access and inclusive design)

- Careline emergency services - We feel this is disgusting! Where do you expect the pensioners to find this amount? That is more than what the pensioners will receive on the anniversary of the pay rise in April. Pensions were paid at the retail price index this government (conservative) charged this to the lower rate consumer price index, which meant a pay cut to the pensioners.
- Careline - Life's over – should be free for all who needs it.
- Short breaks - Do not like it – but accept that user must pay a small proportion.
- Short breaks - it's there for people that need it badly. It should not be put up. Only lifeline for people to get a rest / family.
- Short breaks - I've never been involved with “short breaks” difficult to comment!! Perhaps those that can afford it will take advantage of this “break” – but those that need it can be helped with cost unfair – otherwise.
- Careline emergency services - Got to be paid as this is essential.
- Short breaks - Yes there should be a reasonable charge but over £50 seem far too much.
- Careline emergency services - I've careline this is out of necessity not choice.
- Careline emergency services - Introducing an increase in charge could stop vulnerable people using the service. The result could be catastrophic.
- Short breaks - I fail to see how this suggestion would raise enough income I feel carers will reduce the amount of respite they have, therefore an increase in revenue will not happen.
- Short breaks - Respite days – taken up – carry on with running and finance of the house – unities going up. Breakaway £245 p/n – shocking. Older people – other needs e.g. meals on wheels- financial assessment – if alter the ceiling –

what will be the effect? ½ the cost would be a lot for people – fear for elderly carers and health. P.As would be £13 p/hour – costly for 24 hrs what monies would the Council generate as a result of this?

- Bed lining, pads – disability related expenditure.
- People would forgo respite.
- Short breaks - How do you expect family carers to find extra money when the cost of living keeps going up!
- Affect most vulnerable – suffering in silence.
- Stress for carers and cared for.
- A cumulative effect.
- Careline - A bit of a hike from 93p to £2.52 p/w even over 3 years.
- How will the cuts affect the implementation of the older people's charter and making sure the promises are kept?

Specific feedback, views and comments of actions that could be taken to reduce/minimise potential negative impacts and deliver positive impacts. Including consideration of possible alternative options that may be available

Actions:

- Careline emergency services - Should not be charged. Should be free! Worked and paid NI etc. all life Council should pay for these charges.
- Short breaks - Absolutely disgusting. Should be no increase at all. People need these breaks. This service is brilliant and should not be affected.
- Careline emergency services - Why the increase? Council cuts? MP salaries should be cut!!
- Hold back on wastage. Waste money – items should be re-used, not used just the once.
- Careline emergency services - I think charging is wrong, pensioners, and certainly those older than us shouldn't have to pay. Means testing would be better as otherwise people on the breadline would have to go without eating or heating.
- Careline emergency services - People with pensions and disabilities should be entitled for free.
- Short breaks - Disgusting! These people rely on these breaks. There should not be no increase. These people deserve well-earned breaks.
- Respite - this should be means tested to those who can afford to pay. People on the breadline shouldn't have to. Re: increasing charges at all – I can see that with increasing charges – 6-12 months down the line there's always a chance of creeping charges – I am against this totally.
- Careline emergency services - Paying for good quality staff and resources will improve conditions for workers and in turn they're work harder so could less staff be needed.

- Careline emergency services - Essential - not a choice – already vulnerable by virtue of getting careline. Increase Council tax by £1 and ring-fence it to preserve service for people.
- Short breaks - Chelmsford CHP for example is £15. Per night and is good value. People from outside can use it – can be booked. This is a better cost model. Carers unlikely to use respite if cost goes up – and wouldn't enjoy a break or time away.
- Careline - People can't afford it. Save money? Can't save it elsewhere?

Day Care

Specific feedback, views and comments about the diversity of the people potentially impacted by the in- year savings proposal that Thurrock Council are recommending around reductions in Day Care and any research on the issues effecting their inclusion.

Consider evidence in relation to Disability (including evidence relating to access and inclusive design)

- Will affect older people, carers, families
- Family provide transport as fits in, but able to use bus when required.
- Quality of service = good = if staff available (activities good).
- Day care just as important for the carer.
- Transport – Thurrock bought buses already falling apart handles falling off – safety issue. Charging for transport - £1 per trip.
- Not all people (older people) are told not to sign anything or show anyone their bank details as to security.
- Can't manage without carer.
- Depends on the level of dementia of the person.
- A bit of care is better than none.
- I use CARIADS
- Day care - Public transport unsuitable due to vulnerability of people. Provided transport vital otherwise impacts carers.

Specific feedback, views and comments on how the reductions in Day Care impact on Disabled/older people/carers (including evidence relating to access and inclusive design)

- Bell house – very good, transport good – would hate to see it go to the wall. Once get rid of a centre, never introduce a new one.
- 3 hour sessions – not enough – taking into account time to get ready, get there, get back – not worth going but carer will suffer – and not cost effective.

- No reasonable ideas to cut costs!! Would only mean cutting centres and losing jobs = not an acceptable way of cutting costs!!
Sitting service good for appointments, shopping only etc.
- Whole days to half days – not good.
- Time consuming morning routine – mobility, continence, personal care.
- Actual reduced hours for the person doing the caring time to themselves.
- 4 hour sessions not practical for carers or people with high needs.
- Applying for respite – feels emotional and selfish lots of red tape financial assessment, finding a place, stressful – should be easier. Individual review and carer review and respite review – should happen at the same time. A4 information sheet and details should be provided.
- Some care better than no care.
- If hours are cut, effects family 'alone' time! (Shopping and chores etc.) This does not cater for people who fit day centres around family and working!!
- Depends on how severe of condition? Each person is individual and all needs are different. More support required at Kynoch Court for people on dementia days. People with short term dementia are capable of learning and tasks and may be put in with people with severe dementia and make that person even worse.
- Depends how many people use service, have to get ready quite early. People rely on this service, who haven't friends etc. to rely on. If transport is taken away, people won't attend centres. Buses that are used are not suitable for elderly people – lift to be used to get them in.
- I don't think the council should close the day centres, some people are less mobile than others and for many people the centres are the only way of communicating with people and socialising. It's good to have a choice. I go to Cromwell road once a week and crafts for Christmas starting on Monday 5th October.
- It's not fair to discriminate due to cost.
- All the above effect everyone not just one person. So all should be taken into account.
- Everyone should be eligible.
- Depends on the level of dementia – specialised is good but mixed groups also benefit those with dementia.
- All get transport, but those who can afford it should pay for it.
- Care services should be available to all.
- I think people should get care if they need it regardless.
- Day care. Should be available on all sites.
- A little care is better than no care.
- Depends on the level of dementia.
- Day care / Careline emergency services: Older people, people in sheltered housing, disabled people will be affected

- If the cuts go ahead and we have to pay more for day care and careline it would give us less money to pay for other things that we need e.g. gym membership to alleviate a blood disorder and seated chair exercises.
- Day care - Hourly sessions not good – insufficient time for carer to do anything meaningful. Especially difficult if family working.
- Day care- Increased usage – increases viability of the service – should be open to anyone who needs it.

Specific feedback, views and comments of actions that could be taken to reduce/minimise potential negative impacts and deliver positive impacts. Including consideration of possible alternative options that may be available

Actions:

- Day care - We are unsure of what centres to be affected? Doesn't explain enough!! Location!! Keep the Mon-Fri centres. Longer hours? Open longer a day or 7 days a week. Extra staff and extra costs!
- But pay for it if you can.
- If it is open longer how will it work? All sites need to stay open so people can get to them.
- If it's open longer hours but still difficult to get too
- Adapt to new centres?
- If dementia clients are put solely with others of the same condition they usually just sit there, if mixed they come round and join in because their memories become jogged.
- All get transport but pay for it if you can.
- I believe it's a fair [approach] to meet all needs.
- It's good to provide an all-round service.
- Day care. Would you only do 1 day, ½ day or hourly sessions? Is the centre going to be open for a full day and clients can just turn up as and when (for 1/1 day or few hours?) Facilities not to be cut just to make these changes ½ a day doesn't give carers enough time to do own thing.
- Adapt to new centres? If hours are cut, effects family 'alone' time! (Shopping and chores etc.) This does not cater for people who fit day centres around family and working!!
- Day care. If people are willing to pay no-one should be left out if require service etc.
- Day care - Train volunteers.
- Day care - I believe that carers centre should remain local.
- Day care - So it's flexible to the person's needs.
- Day care - Keep all sites open because this keeps transport cost down. Adjust times to suit the customs needs.

- Depends on needs but mixed may encourage dementia patients / people.
- Day care - Pay volunteer workers to train to support paid workers.
- Pay expenses to volunteers.
- Day care. Pay for volunteers – should get expenses paid supported and trained.
- Day care - Which centres out of the 4 will be affected / closed / moved this needs to be clearer. Perhaps close Harty Close (as near Ockendon) and close geographic Arthur Barnes (as near Stanford) both are part time centre provision.
- Day care - The 2 centres that are only part of the week, maybe they should go and keep the others open with extra staff.
- Pay for volunteers to do training and expense, so they stay providing the service.
- Yes you need to concentrate at the top, and rearrange your command structure (cut down on unnecessary management) and stop picking on the little people.
- Day care - Volunteers should get their expenses paid supported and trained.
- Day care - Specific needs to be catered for. More cost effective with full capacity.
- Day care - Always seek best value!!
- Day care - Perhaps use community spaces with heating, lighting accessible ramps, toilets, automatic doors and adequate insurance – e.g. halls - for gatherings - responsible affiant and care staff with professional social care qualification for support and personal care.
- Day care - This should be spent ensuring that best value is always obtained. This should be overseen and enforced staff should be hold accountable.

Extra Care

Summary of information about the diversity of the people potentially impacted by the in- year savings proposal that Thurrock Council are recommending around reductions in Extra Care Services and any research on the issues effecting their inclusion. Including evidence in relation to Disability (including evidence relating to access and inclusive design)

- Extra care housing - Agency care not governed standards are lower. Changes to the courts closure will end up long term cost more to the Council. Standards of care will be lost costing more.

Specific feedback, views and comments on how the reductions in Extra Care Services impact on Disabled/older people/carers (including evidence relating to access and inclusive design)

- Proposals affecting extra care housing - Certain buildings aren't accessible.

- Extra care housing - These proposals could impact older people who want or need to go into care may have to go out of area where they have lived all their lives and not be able to use their nearest home.
- Extra care housing - I don't think agencies should be involved. I think it's a manoeuvre of the Council.
- I think it's an attack on the less able to fight back. The Council will do what the Council wants to do anyway.
- Extra care housing - Do not agree with agency staff as they cost more and lack of continuity of care. £40 flat rate may be too much for people on low incomes.
- Updated or abolished = financial assessment. What other authorities did they use – mentioned on letter. Kynoch Court / empty properties = what is the new lettings policy going to be? Elderly?? Warden scheme?? Conference course = so public able to attend and have their say.

Specific feedback, views and comments of actions that could be taken to reduce/minimise potential negative impacts and deliver positive impacts. Including consideration of possible alternative options that may be available

Actions:

- Extra care housing - Keep Council staff, no agency - for standard and cheaper continuity. Rates should be mean tested. Better for people to live in community groups rather than separated and isolated.