

Cabinet

9 October 2013

**Results of consultation on proposals to
change the non-residential Charging
Policy**



**Report of Corporate Management Team
Rachael Shimmin, Director of Children and Adults Services
Councillor Morris Nicholls, Portfolio Holder, Adult Care**

Purpose of Report

1. To provide Cabinet with the results of the consultation exercise on proposals to change the non-residential Charging Policy.

Background

2. The Council's current MTFP requires it to make savings of approximately £222m from 2011- 2017. Savings targets for 2011/12 and 2012/13 have been achieved but the on-going savings targets for Children and Adults Services are currently: 2013/14 £11.212m, 2014/15 £12.430m and 2015/16 £4.454m. These are likely to increase. A consultation exercise has been undertaken on whether to change the current charging arrangements so that service users with savings over £23,250 are asked to meet the full cost of their non-residential care services, from their savings and investments in excess of £23,250. Once service users have used up their savings to the limit they become eligible for support and return to making an assessed contribution.
3. The relevant statutory guidance, issued under S7 Local Authority social services Act 1970, is Fairer charging policies for home care and other non-residential social services: guidance for Councils with Social Services Responsibilities (September 2003) , Para 62 suggests that "Users with savings of more than the upper (capital) limit may be asked to pay a full charge for the service." All other authorities in the North East currently charge full cost for their services to people with savings over £23,250
4. It is estimated that an additional £200k pa additional income would be raised by implementing this change to the charging policy. The savings estimate assumes that the pattern of savings amongst existing service users is a fair reflection of the likely wealth of future users.
5. If these proposals are implemented, the vast majority of services users will not be affected.

- Around 4,700 people will find that their contribution towards the cost of their services remains the same
- Around 1700 people will still not have to contribute anything at all
- About 190 people will be required to contribute more towards the cost of their services

Consultation

6. The consultation was carried out from 3 June 2013 to 15 July 2013. Consultation information and questionnaires were sent to service users who currently pay a charge.
7. It was also recognised that some service users who are currently assessed as nil charge but have savings over £23,250 would be impacted by this proposal and so they were also included in the consultation.
8. The total number of questionnaires sent out was 4111.
9. Where service users have a family member/carer recorded as managing their finances the correspondence was addressed to them. Service users were also advised that they could contact their social worker if they needed help with understanding or completing the questionnaire.
10. The questionnaire comprised three questions and a free text box for additional comments. The questionnaire was for use by service users, carers and/or members of families and groups and organisations. A freepost address was included for return of the questionnaires.
11. The consultation information and questionnaire are attached as Appendix 2.

Responses received from the Questionnaire

12. During the consultation period 733 responses were received from returned questionnaires and people making their views known by calling a dedicated telephone line. A response rate of 18%. The responses received were as follows:

Q1 I am responding to this consultation as:

- 53% A service user
- 44% Carer or family member
- 2% On behalf of a group or organisation
- 1% Other

Q2. Do you think that service users with savings above the capital limit which is currently £23,250 should meet the full cost of their services, as they do in residential care?

26% Yes
73% No
1% Don't know

Q3. If you had to pay the full cost of your care from your savings would you choose to:

26% Keep the same package of services and pay the full cost
43% Reduce the type or level of service or find a cheaper alternative
20% Stop using services completely
11% Something else

Key Messages from the Consultation

13. 355 (48%) of the questionnaires included further comments in addition to answering questions one to three. The majority of comments were generally based around common themes and a summary is attached as appendix 3.
14. Around 50% of the comments were that people did not agree with the proposal and included comments such as:
 - Those who haven't saved or contributed to society get everything free.
 - People have worked hard and paid Tax and NI should not have to pay again.
 - Seems unfair that people who have spent their money as they went along will still get it for free, and anyone who has been careful and saved money will have to pay.
 - Residential care is a 24 hour service and non-residential care is not so you cannot compare the two.
 - People in residential care do not have to pay for the up keep of their home, food, gas etc.
15. 65 comments were general comments and included people who felt they needed the care so would have to pay; suggestions that the savings limits should be higher and people who were resigned to the fact that they would have to pay as they have the savings. Two people also commented that they were pleased investments do not include their home.
16. Other common themes included:
 - Comments on the quality of care and cost (36)

- These changes do not apply to me (26)
- Comments on the consultation process (18)
- People who agreed with the proposal (7)
- People who were concerned about being able to pay (7)

Responses from other means of consultation

17. During the consultation period:
- 101 Telephone calls were received
 - 11 Emails
 - 5 Letters
18. Of these 117 representations received the majority (41) were from the service user/ carer wondering how the proposals would affect them with a further 17 people asking for clarification on the consultation process. 19 people did not agree with the proposals and 8 people agreed. The remainder of these contacts were in respect of general queries or comments including comments about submitting or not submitting the form.

Equality Act 2010

19. DCC is committed to its responsibilities under the Equality Act and recognises it has the following duties:
- Eliminating unlawful discrimination & harassment;
 - Advancing equality of opportunity;
 - Promoting good relations between people who share a protected characteristic and those who do not.
20. An Equality Impact Assessment (EIA) has been undertaken to identify any potential negative consequences from proposed changes to the charging policy and to mitigate against these. The full EIA is at Appendix 4 of this report and it sets out the specific steps that have and may be undertaken to ensure the Council complies with the above duties should the recommendations in this report be agreed.
21. The EIA has identified the main impacts that would arise from the change to the charging policy and also the mitigating factors that could be put in place to reduce any negative impact. Examples are set out below and they indicate that there are potential impacts which would need to be managed in any transitional arrangements:
- There are more female than male service users who would be affected by these proposals and the population is predominantly older;

- Some service users may be more likely to become anxious about these proposals and would need to have them explained clearly prior to implementation if it is agreed to proceed.
- Most service users have some form of physical disability, mental infirmity, or general frailty due to old age.

Conclusion

22. Whilst taking account of service users' comments the Council must also consider its use of resources given the very significant financial cuts it faces.
23. Should the council decide to implement the new capital ceiling it would implement the following steps by way of mitigation:
 - Where there is evidence of service users using their savings to alleviate the impact of their disability, an allowance for this will be made in the financial assessment.
 - Once service users have used up their savings to the limit they would become eligible for support and return to making an assessed contribution.
 - The maximum contribution anyone would be asked to pay, which is currently £336.17 per week will remain the same.
 - Where the risk associated with a service user stopping using a service would be unacceptably high the Council has the discretion to waive payment. Processes are already in place which would be extended to include this scenario.
24. If the recommendations were to be agreed there are currently 130 service users whose charges would increase by the decision to charge service users with savings over £23,250 the full cost of service and 62 people who are currently not paying a charge who would be required to pay.

Recommendation

25. Cabinet are recommended to accept this proposal and change the current policy so that for the future service users with savings over £23,250 will be charged the full cost of service.

Contact: Nick Whitton, Head of Commissioning Tel: 03000 267357

Background Papers

“ Fairer charging policies for home care and other non-residential social services: guidance for Councils with Social Services Responsibilities (September 2003) Department of Health

Appendix 1: Implications

Finance - Savings of £100k in 13/14 and an additional £100k in 14/15 have been identified.

Staffing – None

Risk – There is a risk that the implementation of these proposals would result in a number of service users deciding to reduce or cancel their services. Service users will be advised to speak to their social workers before making any changes to the services they currently receive. If service users decided to go ahead and make changes to their current level of services the social worker would carry out a risk assessment.

Equality and Diversity / Public Sector Equality Duty– EQIA has been completed with regard to the proposals in this report

Accommodation – None

Crime and Disorder – None

Human Rights – None

Consultation – a consultation exercise has been undertaken

Procurement – None

Disability Issues – Included in the EQIA

Legal Implications – The proposals outlined within the report are in line with the Governments Fairer Charging Guidance.



Consultation on proposals to change the non-residential Charging Policy

Children and Adults Services

Information for Service Users/Carers

We are considering changing the charging policy for non-residential services so that those service users with savings and investments in excess of £23,250 pay the full cost of their care. This would not include the value of their home. This would mean that service users would have to use any savings above £23,250 to meet their care costs. If their savings reduce to below £23,250 they would be eligible for help with the cost of their care.

The current maximum contribution for non-residential care is £336.17 per week and it is proposed that this will stay the same if these proposals are agreed

Examples of non-residential services include home care, extra care, day care services, transport and supported housing.

What does this mean?

Currently for non-residential services savings below £14,250 are ignored in the financial assessment and we are not proposing to change this. This is known as the lower capital limit. For savings over this threshold, £1 for every £250 is taken into account in the financial assessment as weekly income. This calculation is also used for people in residential care.

In residential care, anyone with savings over the upper capital limit, which is currently £23,250, is required to meet the full cost of their care. This does not currently apply to people using non-residential services.

We are proposing that we change the policy for non-residential care so that it is the same as residential care and that anyone who has savings

over the upper capital limit is required to meet the full cost of their care. This would however be up to a maximum of £336.17 per week. If a service user uses up their savings above the limit they will be financially assessed to see if they qualify for help with their charges.

Will I be affected?

If these proposals are implemented, the vast majority of services users will not be affected.

- Around 4,700 people will find that their contribution towards the cost of their services remains the same
- Around 1,750 people will still not have to contribute anything at all
- About 140 people will be required to contribute more towards the cost of their services
- Of the service users currently making a contribution:
 - 61% are subsidised because they have a low income and pay for part of the services they receive
 - Around half who pay charges pay less than 25% of the actual cost of their services
 - Only 12% currently pay for the full cost of the service they receive. In general they pay this from income rather than savings.

Before we ask service users to make a contribution we carry out a financial assessment. Financial assessments will still comply with the Governments “Fairer Charging” and “Fairer Contributions” Guidance which will ensure that no-one is asked to pay more than they can afford to pay.

What is not changing?

We are not proposing to change the way financial assessments are carried out or the lower capital limit and we are not proposing to change the maximum contribution which is currently £336.17 per week.

The following services will continue to be provided free of charge:

- After-care services provided under Section 117 of the Mental Health Act 1983
- Equipment, appliances and adaptations costing under £1,000
- Assessments and providing advice

- Intermediate care/ Mental Health Support and Recovery Service for up to 6 weeks

How will I know what I am required to contribute?

If this proposal is agreed and there is a change to the amount you will be required to contribute we will write to you to let you know what you are required to pay before the new policy is implemented.

What if I can't afford the new charge?

The charge is based on your ability to pay following a financial assessment so this should not be the case. It may be that you have additional costs of disability that we are not aware of that will need to be included in your assessment – we will need evidence of this before allowing them.

What if I want to cancel some of the services I receive to reduce the cost?

We only provide services to people who have been assessed as having a need for social care services. This assessment has been carried out by a qualified and experienced member of staff. We ask you to think carefully before giving up any of your services. Please contact your care co-ordinator/ social worker to discuss the options.

When might these changes be introduced?

Once the consultation has closed all responses will be analysed and a report on the consultation will be produced. This report will be presented to Cabinet in order to help them make a final decision. The findings will be taken into account in the making of the final decision. This report will also be available on the Council's website.

Should Cabinet decide to implement these proposals, we will let you know the outcome if your charges will be affected.

Why are we proposing changes?

There has been much publicity recently about the importance of Councils using resources efficiently to ensure value for money. You may also have heard that Durham County Council is required to make large scale

savings over the next few years. We have involved local people in helping us decide where we can be more efficient and where savings need to happen. The need to make savings will affect almost all areas of the Council.

How can I let you know my views?

- Return the enclosed questionnaire to:




Freepost RSCJ-YXET-UUZE
Fairer Contributions Review
Commissioning Service
Durham County Council
Adults Wellbeing and Health
County Hall
Durham
DH1 5UG

- Email us on chargingconsultation@durham.gov.uk
- Phone us on **03000 268944**
- Write to us at the above address

The consultation will run from 3 June to 15 July 2013

Please ask us if you would like this document summarised in another language or format.

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polski (Polish)	ਪੰਜਾਬੀ (Punjabi)	Español (Spanish)
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Français (French)	Türkçe (Turkish)	Melayu (Malay)

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Consultation on Proposed Changes to the Non-Residential Charging Policy



We would like your views on proposals to change the charging policy. Please answer the following questions. Your views are important to us. All the information you provide to us will be treated in the strictest confidence.

Please tick the box that you feel is most appropriate.

1. I am responding to this consultation as:

- A service user
- Carer or family member
- On behalf of a group or organisation
Please specify _____
- Other, please specify _____

2. Do you think that service users with savings above the capital limit which is currently £23,250 should meet the full cost of their services, as they do in residential care?

Yes

No

3. If you had to pay the full cost of your care from your savings would you choose to:

- Keep the same package of services and pay the full cost?
 - Reduce the type or level of service or find a cheaper alternative?
 - Stop using services completely?
 - Something else?
-

4. Do you have any other comments you wish to make?-

Thank you for taking the time to give us your views.

Please return this questionnaire to us by 15 July 2013 to:

Freepost RSCJ-YXET-UUZE
Fairer Contributions Review
Commissioning Service
Durham County Council
Adults Wellbeing and Health
County Hall
Durham
DH1 5UG

Alternatively you can let us have your views by:

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- Write to us at the above address

Please ask us if you would like this document summarised in another language or format.

altformat.awh@durham.gov.uk

03000 261 381



Children and Adults Services

Consultation on Proposed Changes to the Non-Residential Charging Policy

Summary of Comments

Consultation on proposed changes to the non-residential charging policy

1. A consultation exercise was undertaken on whether to change the current charging arrangements so that service users with savings over £23,250 are asked to meet the full cost of their non-residential care services, from their savings and investments in excess of £23,250. Once service users have used up their savings to the limit they become eligible for support and return to making an assessed contribution.
2. The consultation was carried out from 3 June 2013 to 15 July 2013. Consultation information and questionnaires were sent to service users who currently pay a charge and to service users who are currently assessed as nil charge but have savings over £23,250.
3. The total number of questionnaires sent out was 4111.
4. During the consultation period 733 responses were received from returned questionnaires and people making their views known by calling a dedicated telephone line. A response rate of 18%. The responses received were as follows:

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- 53% A service user
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- 26% Yes
- 73% No
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Q3. If you had to pay the full cost of your care from your savings would you choose to:

- 26% Keep the same package of services and pay the full cost
- 43% Reduce the type or level of service or find a cheaper alternative
- 20% Stop using services completely
- 11% Something else

Q 4. Do you have any other comments you wish to make?

355 (48%) of the questionnaires included further comments in addition to answering questions one to three. The comments have been grouped into common themes.

Do not agree with the proposal (196)

- I do not think that anyone that has worked hard as an engineer in the mines etc. from the age of 14 to 64 1/2 years and never claimed Sick Pay or Dole should have to pay the full cost or a large amount of money for care, considering the amount they paid in stamps etc. as my husband did while he worked. Surely such ones should be considered when they need care.
- Would put even added pressure where it really isn't needed. Absolutely horrendous.
- Clients with excess of £23k should not be financially penalised, as my 'child' has every penny spent on her needs. Is D.C.C. run by the Tories? Those 140 who will pay more should be consulted, not every Tom Dick and Harry. That would save money.
- Why should service users pay extra as they are using their own facilities and paying for them already in their own homes.
- Wouldn't be happy paying same amount as residential as my care is not 24/7.
- Always assumed residential care was 100% living and would be more expensive in any case. As a recent user of home care for my husband (one A.M. visit) still "learning"!!
- Can I say that I am absolutely furious at these proposals. Why should my parents who have worked hard all of their working lives, been frugal, saves hard for their retirement and contributed to this country and local authority, now be in serious danger of having to find some £300+ per week as they are right on the threshold?
- I do think everyone needs to be reviewed. I wouldn't be pleased to pay more for my husband's care as everything seems to be more and more expensive, our savings are in the bank for emergencies and when needed, but do not amount to £23,000.
- Only the very wealthy should pay the full cost of their care and services not ordinary people with moderate amount of savings.
- I strongly disagree that Service Users should be charged for Non-Residential Services on the same basis as Residential Services. The reason being Non-Residential Services are a daily service i.e.9:00am – 4:00pm whereas Residential services are 24 hours per day. Your supporting information states under "Will I be affected" – bullet point 4 last point – in general they (Service Users) pay for this (contribution) from income rather than savings. Why then are the Council taking

saving into account? The Council may have to make large scale savings but why are they targeting the disabled and vulnerable members of society. I WISH THESE COMMENTS TO BE GIVEN IN FULL TO CABINET.

- My mother is almost 92 & could not manage without the care, she has been careful with her money, why should she now have to use her savings to pay more than she does now.
- I think the present system is unfair as my client has to pay set amount of his income whether he received 1 day or 4 days of day services. I think it should be reflected in payment also he has to pay for Bank Holiday Monday when services do not open.
- I do not think that after paying into the NHS all my life I should have to pay for help in my old age.
- By introducing this some elderly people may reduce package of care which increases risk. Also why be penalised for saving and being careful.
- I believe cost cutting can be achieved by addressing spending internally. Disabled people should be given more financial support. Look close to home.
- I was means tested to receive benefits, very demeaning to declare savings need to be stated. I did not have any other bank accounts other than a current A/C. All monies received or outgoing – there to be seen in black & white. Benefits granted based on income. Using up savings to pay for necessary help, could soon soak up savings. To change rules need legislation. Please consider this in your decision.
- I have filled this in on behalf of my mother Mrs. Potts. My mam is 98 years old and has worked from the age of 14 years old and really can't understand why after saving all her life has to use her savings to be care for.
- I am a carer and I think the care fees are too much (means tested). What has happened to the NHS supposed to look after us from the cradle to the grave. Also carers are not given 'time out'. Time to also consider carers.
- Care is already very expensive, and if the price was to rise I'd consider finding an alternative.
- As a local priority set by the area action partnerships adult care is of vital importance any acceptance of this proposal by the council can be seen as in direct opposition of the wishes and priorities of the local communities for the people set by the people for the benefit of the

people. Care of the elderly should follow the community wishes. An uncaring council.

- I think that it is terrible that when you get to my stage in life and having paid into the system all of my working life that my care has now to be funded according to my savings and my pension.
- If lives and service has been devoted to the country I feel the country should give more to its wellbeing in old age.
- At moment = pay £153.74 per month for 14 hours care. I think costs are already high.
- Look after these clients and provide them with a service instead of giving money to alcoholics & drugs used to feed their habit, which they choose to do. Our disabled people have no choice in the way they are. It is so unfair.
- I don't think people who are on benefits should have to make contributions.
- Some tapering would be best. Someone with 1m would easily pay £336/wk. Someone with £30,000 would still find this a large amount.
- I am on benefit at present and I am assisted with care payments but ---- £305 per month that I pay.
- The services of carers in the home and residential care are not comparable. They are time limited and only allow for microwave meals, soup, or a sandwich compared to freshly produced meals using fresh ingredients.
- Because of not wasting money we have worked for and saved we would be penalised as are all working people at present in this country. I am paying to have a day off which no one should have to do while people who have not worked or not saved get everything free.
- In my opinion if you have been careful or thrifty over the years with your income you are penalized, whereas people who have spent their money on unessential things get all the benefits. This to me is unfair.
- People in their own homes have other expenses which when in residential care do not have to pay i.e. upkeep of the home, repairs, cleaning, shopping etc. Having savings is a 'safety valve' for emergencies.
- Old people who have worked hard all their lives have paid in – N.I. and taxed all their lives. Now you are going to take everything they have left.
- This change would be detrimental to care services.

- I do not agree in principle to being penalised for having savings. Also by someone living in their own homes they have lots of additional costs to face e.g. gas, electricity, water, rates, council tax, food, repairs and maintenance to their homes etc. etc.
- I believe the limit of £23,250 is too low in today's society. Those people with more than say £30,000 - £40,000 should pay more – so on.
- It is unfair to make people who have worked & paid NI & taxes to meet cost when others do not have to pay anything & usual been kept all their lives.
- My Mother's savings above £23,000 are all providing an income. Delve into these and the savings will deplete dramatically.
- The Government should stop sending tax payers money out of this country and spend it on those at home who need help.
- Charging policies penalise those who have saved money – I have agreed with policy as it brings it in line with residential charges.
- I feel this is very unfair. In Res Care you don't have to pay £1000 per month rent & pay for your food. Savings are reducing rapidly. Sister has saved this money and receives not benefits. Would not be comfortable having to apply for benefits when her capital reduced.
- Have worked all life and has savings because of redundancy and it's not fair that people who haven't worked still have subsidised services. My savings are my husband's not my own but were put into my name. It's very unfair.
- I feel the ceiling should be raised from £23,250 to £100,000. People will be coming back to the council very quickly when savings drop due to care fees being raised.
- In my opinion those who have paid into the system all their lives shouldn't have to pay anything at all. I served in the Airforce for the full length of the war. I'm 93. I won't be affected by the change
- Wish to keep it as it is now with no change.
- If a way could be found to spread the cost evenly between all people I would prefer it that way rather than subsidising others. Feel the carers are under paid.
- NHS/Gov't should pay for it all. After all families have saved them money providing care for relatives before they eventually have to ask for help.

- Don't see why people should have to pay for the full cost of their service just because they have savings when they've paid tax and N.I. all their lives.
- If you can afford to pay should contribute something towards your care but not be expected to pay for all of it.
- When people have contributed all their working lives paying taxes and National Insurance and managed to put a little aside for their old age. At a time they require help they may have to pay £17,480 per year. As a Labour controlled council children and adult services (the easy targets) are been hit again. PLEASE STAND UP FOR YEARS OF LABOUR POLICIES! P.S. How many Residential Homes have DCC closed. It's a disgrace!
- There are many ways of saving money without taking it off old people that have ---- ----- every year.
- People in Residential Care have included in their costs meals, heating, full time care. In your own home after caring costs, there are also heating, rent, food costs to pay for.
- Savings (as encouraged by the Government to do) should be viewed only for the purpose of comfort and peace of mind of the saver.
- Non-residents have higher outgoings re upkeep of their home, therefore need savings. This doesn't encourage people to remain in their home. Interested in cost of review. You'll no doubt go ahead in any case.
- Home care saves the state a great deal of expense and there should be some incentive top service-users and carers to choose this option. I am aware that councils are under huge pressure to reduce costs but there are areas in their own administration which still require pruning and should be addressed. Finally, I hope this is a genuine consultation and not a futile exercise after a decision has already been made.
- I feel I am paying enough already for the services given.
- Once again penalising those that have saved all their lives (or worked hard) (morally wrong)
- Homeowners may need additional savings (than non-homeowners) for maintenance upgrades to their homes to accommodate their changing needs – i.e. stair lifts, wheelchair access, install shower instead of bath etc.
- Again I feel carers are being hit again, my mother wouldn't pay this which would mean I may need to stop working to provide the care she needs putting myself in poverty.

- As a carer it must be recognised there are often additional costs to keeping service users in their own home – e.g. gardener, cleaner, additional help with shopping, cooking, petrol, house running costs, outings. This must be taken into account when assessing to increase payments towards minimal care.
- I think everyone who needs non-residential care services should get them free of charge irrespective of savings under £100,000.
- Depending entirely on age & circumstances. At my present age I consider that I have more than contributed towards costs – having had a very healthy life, paid contributions beyond retirement – what more could you ask for!!!!
- Unlike residential clients, those in their own homes have a lot more expenses, especially the more severely disabled. I agree to charging but not at the proposed level.
- For what services we do get, if they ---- trying to cut the times down, we might as well have none at all.
- If the costs of non-residential care are to be increased to the same as those for residential care, those people living in their own home should surely be entitled to the same level of care as those in residential homes. So will the council be providing 24 hour care and help with associated services and the costs necessary to provide the same level of care for those living in their own houses as those living in residential homes?
- The Government not so long ago wanted to help keep people in their own homes. If the full cost was to be met by someone in their own home who still have gas, elec, water rates, insurance etc to pay this would not be fair as someone in a residential services it is all inclusive.
- Residential service users have 24hr service therefore I do not think non-residential service users should pay the same rate.
- If people with savings above the limit have to use them to pay for care then they will soon run out of money. They will have nothing left to enjoy themselves with.
- Disgraceful. What about the Council's Chief Executive's huge salary, councillors getting big fees & even dress allowances. You should reduce those before robbing the savings of pensioners who have worked to build their life savings. Those who have not saved & spent their money on holidays/booze etc will not be affected as usual!!
- I think when people have paid tax, N.I. all their working lives, they should receive the highest quality of care at nominal cost regardless of their personal savings.

- The sliding scale of payments after 14,250 is fair. The current arrangement of residential users paying full cost of services if savings are over £23,250 is unfair. Both major political parties recognise this . Why is DCC going in the opposite direction?
- £23,250 is not a large amount of money these days. I don't believe in penalising people for having a bit of financial security to the point where they will be in a position where they have next to nothing.
- I have not understood the question asked, even after my Project Support Worker , from Stonham Disabilities has read them out to me, and I feel any changes to cost would not be good for me, I told had to pay more.
- Why should the working man/woman be penalised when they need care?? Work – get paid – save a little – get penalised!! Don't work – get benefits – get Sky TV – smoke – drink = get everything free!!! It's wrong!! Immigrants should pay in full regardless.
- Work – pay taxes – save a little – buy own house – get penalised!!! Don't work – claim lazy person benefits – drink a lot – smoke a lot – get everything free!!! It's wrong. Immigrants should pay in full!!!
- I think people have saved to make live easy & work hard so people who have not worked but could have should pay their share.
- If u had that much saving my answer would be yes as they r savings. I would probably go for a cheaper alternative as 23 000 pounds is not going to last long if u had just pension to live on.
- Yes mental illness is hard for me and my family to cope with, so anything to help make it easier to cope with helps all the family with money and rest bit and more that we wouldn't be able to do.
- Residential is 24/7 home care is not – this should be taken into consideration. Why should I be penalised for saving.
- Residential users have everything paid for them. Non-residential have utilities, food and other costs. This should be taken into account.
- Brian has no savings. Just want what I fort for two to three year money for Brian. I think we pay to much now. Why have we got to pay for Brian seat when at rest bite care I don't know, the money I fourt for you are take it off him.
- My mother & I both consider the proposal disgraceful – as is the current position for residential care. People are encouraged to make provisions for their old age – pensions, saving etc. and when they do they are hit harder than those who have not done so. I thought the current thinking was to increase the savings threshold considerably to allow the elderly

to keep their home? My brother & I both work full-time but trying our best to keep our mother safe and comfortable in her own home. She already make a contribution of around £650 per month for care she received and we consider this to be reasonable, given her circumstances.

- Council trying to support its local services I don't think.
- This is concerning my father and his savings will diminish rapidly if he had to pay. He is concerned that he will end up with no money to pay bill, any building repairs to his home etc. Stress will also be put on family members as to the best way to provide an alternative cheaper service.
- I think it would be unfair to charge top rate for non-residential care.
- With Care Connect services and a sitting service weekly, expenses are very costly. If I had another means of looking after my mother I would not be putting her into respite.
- I feel I contribute enough for my daycare.
- I do not think that the charge for residential care and non-residential should be at the same level.
- I think support for the elderly and disabled should be free..
- Full residential care users have no other expenses. Non- residential care users have home to support (rent council tax heating & lighting etc.).
- Why penalise us for being disabled. Take money from the fat cats who earn way above what we receive in benefits. It is always the vulnerable that get penalised. Carer and disabled person.
- I have worked all my life for my money and am a widow. I live in rented bungalow. I have been house bound for 7 yrs. I have been house bound for 7 yrs. I have not got these amounts of savings but I still disagree with it.
- I have Multiple Sclerosis and as a pensioner there is no way I can afford to pay for care. I have a little pension but nothing else coming in. How can you justify all that money when I am living in my own home, eating my own food, paying my own bills. It is ludicrous. It is 'total stupidity'. If you put money up I will have to stop the carers as I can't afford to pay.
- Why should people with savings be penalised for looking after their money to make life more comfortable. People who waste money and spend/squander their money get everything for free.

- Capital would soon be eroded & what then? Users of non-residential care usually have heavy utility bills i.e. gas & electric. Reassessments cost money. No doubt the decision has already been made.
- I think we pay enough. I do not have a works pension just my old age pension & I think charges are quite enough to pay at the present level.
- I don't agree that people residing in their own homes should pay the same weekly charge as those living in residential care, as they have other payments to make e.g. cleaners, gardeners, help with shopping etc.
- Do not agree at all for any of it.
- Why should I pay the same as someone in Residential care with 24 hr care, I have costs of running my own home.
- Why should I pay the same as someone in Residential care, as I live in my own home and have running costs and I don't have 24 hour care.
- Most people live as a couple, therefore their joint income + savings is assessed not just the person receiving care / unfair. Also they do not receive the same level of care as residential for example no home-care is given through the night. There for to use the same assessment is unfair.
- A contribution would be fair but to ---- the whole cost would not be.
- Home care is very basic compared to residential and meals only consist of sandwiches, soup or microwave meals as carers only have sufficient time to prepare these meals. Dirty dishes have to be left until next visit. The services do not compare.
- I think it shameful that older people who have worked hard to have savings and paid into the Government funds all their lives should continue to pay for their twilight years – they have earned the right to be looked after.
- I have paid tax through my working life and don't see why I should be penalised for having savings. Those who have spent everything they have are effectively being supported for nothing. Where is the incentive?
- My daughter has no savings at all + neither have I. I think this would be unnecessary if the Government had the balls to tackle tax avoidance by multi-millionaires & big companies and cut bankers bonuses.
- In my opinion elderly people who really need the care should be helped financially to do so. Anything that makes life harder & more complicated should be avoided.

- This is a disgrace, there are many people who have saved & worked all their lives who are penalised for doing so by having to use their savings to pay for care in later life. People who spend all their money then get their care paid for them.
- Most unfair proposal considering the cost of keeping someone in care vis a vis in their own home at much less financial burden to society.
- The current limited service provision is poor to average at best and is not worth anything like £336/week. Why is it that those who have worked hard, saved for the future & paid taxes all their adult life are expected to use their hard earned savings to pay for the same basic services that those who have not? Fairer contribution review? Doesn't sound like it.
- Politics have changed again. Many users who need the services have already collapsed services due to the new charges. These people are now being neglected and put in danger. The NHS should cover care costs for health reasons and not the care companies. Domiciliary should be carried out by trained nurses as the gap between trained and non-trained is too large. It appears to the public that Government want elderly and sick to fade away so costs are kept lower to run the country. It's a disgrace, don't allow Labour to do what Conservatives want of them, stand up for vulnerable people. Do not allow us to be third world. Neglect puts more strain on other services, A&E. hospital admissions through falls, mental health units, residential care, G.P.s and so on. So in the long run it will cost the country more.
- I find it ridiculous that you are considering this, why should someone with a disability who has worked all their lives have to pay the full cost from their hard earned savings/retirement/ pension fund. P.S. a return envelope would have been appreciated.
- After a lifetime of work & financial prudence to accumulate my life savings charging me for services whilst less hard working or prudent people receive these services "free" is fundamentally unfair & unjustifiable.
- It is unfair to apply the same criteria to homecare as residential care because – a) it takes no account of the on-going cost of maintaining, heating & running one's own home or of providing food etc. b)
- Those who are least able to earn a living through various disabilities are again being penalised by cost cutting methods. Funds to finance the disabled should be found from other sources. Suggest start with County Council member's expenses.
- This is yet another example of DCC reducing services to the most vulnerable people. The Councillors who have any sense of decency

and responsibility should stop this now. It costs more to do these false consultations than you will save.

- Residential Care are covered with their contribution for electricity gas. Non-residential have to pay that on top. I also pay for a cleaner to come in weekly, so that's extra.
- Any savings may be needed for many, many years. I don't think such a simplistic route should be applied as many service users have very complex needs. Perhaps savings could be made from the Public Spaces Arts Fund which finance 'outdoor art' in various parts of the county including the 'Outdoor Bowl' talked about for the County Hall grounds – perhaps that could be shelved & the money used elsewhere for non-residential services.
- I don't think any pensioners should have to pay full amount.
- People living at home and receiving non-residential services continue to rely on other people and services in addition to their care package. This potentially needs funding too e.g. gardening, shopping, housework, laundry etc. People in residential services generally have all costs met.
- I do not believe my father should pay anything or any other person who has worked all their life and contributed to nat insurance for care in later years. My sister and myself do the majority of care for dad. I'm 64 she's 57. I travel 20 miles a day to do this. How many other carers are shouldering the responsibility of aged parents? We also provide support for another person – a sibling.
- £23,250 in this present climate is not a suitable level and would not provide living security to many people if this were on the borderline of their savings – their money would soon go.
- We have worked hard all our lives and should not have to pay that much for care, especially when there are people out there that get £100's in benefits a month.
- How can non-residential care be compared to residential care where 24 hour care/cover is provided. Once again vulnerable people, easy targets are being penalised for saving over their lifetime. Perhaps if you looked at the way the care providers are monitored/assessed on an on-going basis, from my experience a huge saving could be made. 'Tail wagging dog' under the current procedures!!
- Charging service users will effect many people who use the service to be able to maintain a level of dignity and independence.

- For people living in their own homes repair bills may run into many £1000's. £23,250 may not be sufficient to cover these costs but this is all that will remain ---- care costs have reduced it.
- Life is stressful enough without the burden of finding the money.
- You are penalising old people who can't look after themselves so have no choice but to ask for help.
- Far too expensive when you consider all the bills you have to pay in your own homes.
- It would be grossly unfair to charge clients who are living in private accommodation the same as those receiving Residential services. Clients receiving DLA and Income Support get £165 per week so they would have to receive additional monies to meet the sum of £336.17.
- Why should people who have worked and saved a little bit of money pay for this service when people who have never worked and get this service for almost nothing. £23,250 would not last very long at the rate you will be charging. The answer to this is spend your money.
- My parent receives excellent care, one paying full, however the lady in the next room receives the exact same care while only paying a minimum charge. It always seems the people who worked hard & saved for their future are the people who are penalised for having savings. I think this is totally unfair & this does not encourage people to save /better themselves. We would have just the same if we lived off benefits.
- Having worked hard all my life to save money for my retirement I feel penalised for my thrifty habits whilst others who squander money are getting away scott free.
- I understand that Councils are having to cut back on their budget but I feel that targeting the old and vulnerable section of society is unacceptable. These people are extremely vulnerable and in need of help to stay in their homes or they would not need the Care Service in the first place.
- The lower capital limit should be higher for non-residential (N-R). Recipients of N-R support have additional costs to budget for: laundry, food, gas/electricity, rent, house maintenance, Careline, transport to essential services e.g. doctors & many other daily expenses. People who do not have property assets instead supplement basic income from savings are once again being penalised. The financial assessment rate of £1 for every £250 does not reflect current savings interest rates.

- Whilst we accept that capital funds are severely restricted this will not help. Someone saving over 50 years will be adversely affected by being prudent & frugal – simply unfair & does not reflect at all well on Labour Council.
- Yes I think it's disgraceful to take people's money from them.
- Non-residential care is expensive enough at present. People who have worked hard, paid their dues all their lives should be looked after in old age & not penalised for having save by doing without.
- The amount we pay now just went up again in April and some time hard to meet the payments now. We cut down the level of service last year to try to save some money. If it went up again I would have to think of something else or stop it completely.
- People who need non-residential services shouldn't have to pay anything. Those people should be looked after. As it is, families or friends save the country an awful lot by looking after these people for the bulk of the daily time.
- Service users in their own home have to buy groceries, general household requirements, heat & light. All that is provided in a care home. Also, if a person has reasonable income/savings they have rent to pay + council tax. I personally am by no means rich, but receive no Housing Benefit so if I had to find that much extra money, it would cause me extreme hardship.
- I served throughout the war and am disabled – my country now owes me I think. As a war veteran I feel I have served my country in its time of need and at the age of 93 I feel my country owes me a debt. My wife has been my carer for 70 years and we have lived all this time without assistance, only requiring help recently.
- Once again targeting the most vulnerable + those who cannot fight back. Look at the waste re. councillors expenses (most councillors are retired) and waste where gangs of people are at a site either road works/gardens etc. only one doing any work.
- As well as being a carer to a family member I am also employed as a home care worker. I think many elderly people will cancel or refuse to have home care. Most are very conscious of cost. This proposal will cause distress and worry.
- I have worked all my life and I think I should be entitled to help so I can live in my own home.
- I do not understand why non-residential service users would be asked to pay the same as residential users when they have all of their living expenses to pay on top of these charges. This Labour controlled

council is playing into Tory hands and condoning Tory policies. Why not just, say that you agree with the Tories and don't canvas for votes on a Labour ticket. These adults are very vulnerable and need these services but not at Tory policy prices. More people will do without these services at the detriment of their social lives and the lives of carers which are already difficult enough. Surely these vulnerable people in our society should be helped as much as possible. It says a lot about our society when the ones who are least able to fight back, are the ones to be picked on.

- I think it is wrong for people to have to pay for 'care' when they are old just because they have been thrifty, careful with their spending and have savings above £23,250.
- Why should people who some may have worked all their lives and have paid national insurance and tax have to pay for these services when they need them and others on benefits pay nothing. Some people save for when they get old or become ill so why have they got to pay for these services out of their savings.
- Don't think it is fair for someone living in their own home and having to buy and cook food and pay all bills and do repairs should pay the same as someone in residential care and having it all done for them.
- It appears that the disabled are being targeted again.
- The old and sick 'service users' who accept care in their own homes save the 'authorities' millions of pounds. This campaign to force the old and the sick out of their homes is extremely distressing. We all know that – 'old folks homes' – hospitals – are overflowing (and understaffed). Bullying old people is despicable.
- Yes I agree you should pay something but my point is you saved paying taxes worked all your life then when you are ill in old age it has to go on care.
- Those receiving care in their own homes still have household expenses to pay and at the moment their savings are , and have not been, increasing, so to pay the full cost of over £17,000 a year will soon reduce whatever they have, and possibly hoped to leave their children.
- Why target disabled people again? Do you not think they have enough to contend with?
- This proposal will put a lot of people at risk as people will not be able to sustain the costs. Money is tight and people don't need this worry on top of everything else. We need 24hr care but we would have to try to make savings. How safe that would be I don't know.

- This penalises people who have worked hard all of their lives and saved money for their retirement as promoted by Government. People who have never worked and lived on benefits all their lives will get the service free whereas people who have worked will have to pay. Totally unfair.
- If I was in residential care I would be having 24hr care plus all food heating and no bills. At home I only receive 1hr 20min per day care. I would not be prepared to pay £336.17 per week.
- Feel that people who work all their lives are being punished for saving money.
- It seems the Government are always making old people pay more than they already are. Why don't you look more into people who are fiddling their benefits and leave old people alone.
- In residential care you are getting 24/7 care in your own home this does not apply. My care package is 4 times day, therefore the same charges should not apply.
- Don't see why my savings that I worked + saved for should be used when those people who didn't bother to save + squandered their money will not be penalised!!
- 1). Capital limit is far too low. 2). Do not consider that the cost of non-residential care should be the same as residential care.
- You penalise people who have worked very hard and saved you look after people who have wasted money, smoking, drinking, bingo, holidays etc. It's grossly unfair. I have found it is best to just live for today now, and not save anything over the minimum amount. It's shocking and a disgrace.
- In residential care the client has no big out payments in your own home we still have utility bills rent and so on a lot of out payments.
- It is important to point out that people who receive care at home are also responsible for rent & paying utility bills as well as food. Also additional costs can be incurred in order to remain at home e.g. ----- costs. In residential care all above are catered for.
- Ridiculous idea.
- People in residential care have all their personal care meals etc. in the price they pay. I would still have to pay electric, gas food etc. I also still have to pay for carers while I live in the community. £23 thousand would very quickly disappear. Why pick on the most vulnerable in society.

- I don't think the saving should be used as they have saved to leave the family something when they pass away plus some have worked and paid tax all their life and paid into the system.
- I (carer/husband) appreciate that there is a need for authorities to be careful with money – but not at the expense of people who have already been assessed as regards contribution towards care. Marjorie pays the full cost of one week's respite every six weeks - + all care she gets is designed to keep her living at home for as long as possible (Alzheimer's) (you may add these comments to your case file on Marjorie – in fact I would like you to).
- Residential users have no other outgoings, non-residential users after maybe having to pay for some of them, would have to live and be cared for, in my sister's case still be fed 7 days, cared for 4 full days, 3 part days, 3 nights kept warm and taken out. Day centre gives my sister no food. Her day at her centre consists of ½ hr exercises and then sit and knit and talk to her friends. I really could not manage without the day centre 3 days as I am now 67, I only hope there won't be too many changes in the future.
- I do not think residential and non-residential people should be charged the same amount. One is 24/7 care and the other like mine is 11hrs 30mins per week.
- When you are 94 and have had a stroke you need help without having to pay excessively for 2 15min visits each day. Don't rob the elderly!!
- Myself, my husband & my brother all worked for 40 years and paid tax & insurance so it's not fair that we have to use all our savings to pay for care when others get it for free.
- When a person's care becomes more complicated and more expensive, it's not fair to have the stress and worry about finances.
- I know that savings must be made however you councillors could set an example, remuneration clothing allowance are crazy sums. Bring your own costs down in line with other councils. Socialist principles?
- No service is worth £300+ per week, apart from Residential service, and a financial assessment on people's income should always be made. Income is what should count, not savings.
- I am shocked at this proposed change of care policy. Older people who have worked and saved all their life should be entitled to care to be able to stay in their own home.
- I don't agree with the idea of my mother having to pay the same amount for home care as residential as you are not getting 24 hour

care. She has big heating bills and other cost of running a home. That's what you get for working till 65 and saving.

- I feel £23,500 is too low a threshold for people to pay full cost of their care. Factor in they are probably also paying full rent and council tax and this is a massive drain on what can only be considered modest savings in this day and age.
- People who have been careful or thrifty during their lives and plan for their old age are again targeted to pay for the profligacy and financial irresponsibility of others. It's unfair for elderly people to be expected to pay more when so many in the country who have contributed less sponge and receive more.
- When people have worked all of their lives, never had any debt, paid their taxes and never relied on the state it is grossly unfair that the people who haven't bothered will receive the same with no cost to themselves.
- Perhaps, instead of my husband working 12 hour shifts down a mine for a large part of his life, me saving every spare penny we had and not spending it on booze, bingo and holidays – we should have enjoyed our money when we were able.
- Do not think that users of non-residential care should be costed in the same way as users of residential care. Particularly where non-residential user is looked after by parent(s) and the care cost is heavily subsidised by them (parents).
- We believe that non-residential care should be heavily subsidised by the council – if possible free. This will encourage people to stay in their own homes as long as possible taking the pressure off residential services.
- Back to the dark ages picking on the disabled again.
- My husband and I saved our money for a lot of years and now, because I have had a stroke, I will now have to pay using savings which I could have spent years ago.
- The current additional charges for savings greater than £14250 are sufficient. Possibly a £2 per £250 above £23250 may be an alternative and fairer but not full payment.
- My mum has motor neurone disease, a hideous and progressive illness. I think it is appalling that she might be forced to pay more for her care than someone who has a much less serious condition. My dad, who died shortly after my mum's diagnosis, worked hard all his life to provide a good quality of life and he would be devastated to know that all of their carefully managed savings would be swallowed up in

this way. It seems like those people who have managed their money well are being penalised, and this is totally unfair. Payment should take into account the individual condition of each person.

- More money is required to look after someone in Residential care. It is therefore unfair to ask someone to pay the same who is not in Residential care.
- As my mother (service user) and myself (carer) live at home, we are already on the lowest cost to the state and have paid in our lifetimes more in NI contributions, taxes etc. than we are getting out without paying any more in.
- From your figures there are 6,590 people receiving assistance from the Council. You say about 140 will be required to contribute more. My father is 89 and worked in the community for 50 years. How about the community assisting him (and the other 139 people) by contributing i.e. of the 40,000 – 50,000 households in the town would somewhere in the region of one or two pence increase in council tax not achieve the same object?
- I feel people of my dad's generation worked hard for what they got, none of it came easy. Today's generation get everything placed before them on a plate. Caring for people isn't easy, I have cared for my dad for over seven years it is only now I have asked for help. I think you should think twice before you go ahead with your proposal.
- Expecting a person to contribute £336.17 per week because they have life savings of £23,250 is extortionate. I would encourage my relative to spend their savings above the £14,250 threshold to purchase the things she has done without – a new kitchen, a new bathroom etc. to make her life more pleasant. If Durham County Council wishes to penalise old people who need care it should realise that relatives will find alternative provision for elderly relatives. Durham County Council should reduce contributions by senior citizens. This could easily be achieved by axing some of the jobs of its overpaid executives earning in excess of £100,000 per annum. When the leader of Durham County Council earns more than the Prime Minister, it is cruel to expect old people to pay £336.17 per week because they have been thrifty all their lives and done without. The £23,250 threshold is far too low to expect full contributions. People in their own homes have bills to pay e.g. council tax, fuel, phone, food. It is probably better value to be in residential care, pay extra and have none of the stresses, financial and otherwise, of living at home.
- Living at my own home rather than as a residential patient I have a range of expenses which I understand that a residential patient does not; such as food, council tax, heating and lighting etc. Therefore it

seems equitable that there ought to be a differential wrt the capital limit to compensate for this.

- People have saved and worked all of their lives and do not need this hassle in retirement.
- Don't think it is fair to compare non-res with res.
- Wrong that they have worked hard shouldn't have to use their savings.

Comments on the quality of care/cost (36)

- The girls of Applejack are great with my mother 94 years of age but the new people in the office who have took over are no good do not care.
- I receive very little help from the carers who come to see me twice a day.
- The carers that come into my home don't do enough to merit paying all that money.
- I have had a lot of help from you which I am grateful for. I do not have savings to pay more for my care and it would cost more to put me in a home or hospital.
- I am satisfied at the moment but sometimes they have to be told that I'm not. They are too quick to be hurry their work and do not do it right.
- Not just care provided but the companionship and friendship is valued by the client and would be missed if service was cancelled.
- My son goes to a day centre 1 day a week it costs £43 and all he does is read a train magazine thinking of cancelling this so could luxury.
- I think there should be better systems in place to report when we do not feel we or the Council are getting value for money.
- Whilst I don't object in principle that anyone with savings over the capital limit should be asked to contribute towards their care, what concerns me is that the care provided does not always represent value for money.
- Before penalising clients we believe Council monies are being waste. In 2 years we have challenged half of your invoices due to charges for cancelled visits or second carers failing to arrive.
- We appreciate the excellent way DCC is helping us to look after my 93 year old mother, despite the dreadful cuts which this Conservative Government is forcing onto Local Authorities. Thank You.

- I know we don't see the staff very often but when I need them they are always there I don't think you could alter anything Thank you.
- The girls I get do what they are set to do + more. I myself would be lost without them. The amount I myself pay is getting tougher but I could not manage on my own.
- I think the cost of daycentre users are very high as my gran attends 2 days a week and when she is off for a week she still has to pay for that week.
- The good quality care we have received for mam has been a boon to our family + has given us some kind of life as well.
- At the moment quite satisfied with my care, the girls are all very nice whom I have.
- My present situation is that I am a widow aged 87 living alone. I find the services provided by the D.C.C invaluable. Each morning I cannot get motivated and find the help given by the carer is of benefit.
- If they have an increase in cost then there will be a corresponding increase in the standard of care.
- The carers who look after my father, use his facilities, cleaning equipment etc. If we did not do what the carers should do, he would need the extra expense of residential care on grounds of safety & health. You should look to acquiring value for money from care providers and reviewing how care is provided.
- Cost of services is already far too expensive.
- I don't think I could cope without Waddington Street, they're a great support to me.
- DCC provide a very good service I'm sure, if the service I receive is typical.
- I feel the service is inadequate as it stands and the standard of some carers is poor. I have had to change carers 3 times. Better training is required to raise care standards.
- The quality of the homecare provided by the council's preferred supplier is of a very poor standard.
- Attendance at Day Centre may be the only contact social or otherwise for some elderly clients. Charging for this sometimes limits choices for day to day living expenses. Remembering "Home-Help" used to be supplied by Councils and not out-sourced privately brings everything down to money and not down to providing best care for elderly & handicapped people.

- I enjoy the present level of the caring service.
- Times given are not punctual.
- I must say that I am very satisfied with all my carers, they do a marvellous job and after having a stroke and then a mini stroke, they are there for me all the time. I would never have lived long enough to enjoy my life as I do now. They are not just carers they are my friends.
- If our son was in residential it would cost the Government a lot more. I gave up my nursing to be our son's carer and what we get paid is an insult. £59.75 week carer's. My salary at the time was £1200 1980. My husband works full time with Autistic people. We have no family to help. No respite as it closed due to cut backs and even though we have a great co-ordinator there is none suitable via respite.
- Premier Care staff cares excellent administration lousy.
- Quality of care in some cases, leaves a lot to be desired, certainly room for improvement.
- The service is very poor. Carers don't stop the correct amount of time & do very little when they come. Carers just seem to care for themselves when there ----- . They come & go when they feel like it.
- To justify any increase in payment I feel that the standard of care provided by care companies needs to dramatically improve as it currently falls way below my own personal standard. Having to rely on this care is bad enough at present rate without paying more for carers who cannot wait for full visit.
- If you propose to impose the charges then the quality of home care needs to be improved drastically. It would be far more beneficial to study and review the quality of care before looking at price increases. Those who have worked and been careful with their finances are being made to suffer again!
- Do you agree with the Service User paying when they are ill or on holiday or have hospital appointments? This surely isn't correct.
- I do feel that some contribution should be made for services as day care is excellent.

Proposals do not apply to me. (26)

- I think I contribute enough. I have no savings and pay almost £90 weekly – just a trust fund which is probate.
- I do not have savings above that amount.

- I only have 1 hr per week. 2 showers Mon + Thurs so I can afford that. I don't think it's fair to take peoples savings which they must have worked hard for.
- In Question 2 we have said no as our son does not have savings.
- My mother would have no choice but to have same care package. Fortunately she has nowhere near savings of this level so hopefully she would not have to pay the full cost.
- Miss Jackson is currently paying the full cost so wouldn't be affected immediately
- Wouldn't affect me because savings aren't at that level.
- Happy with the service I receive and I won't be affected by the proposals.
- I don't have more than £23,250 but think you should leave the people who have worked all their lives alone & not take away what they have worked all their lives for.
- Aunt does not have more than £23,250 in savings.
- Feels it is a way of the Government claiming money back. Do not agree with saving the Government money. Those that have more get more & those that have less have more taken away. I currently pay the full cost and won't be affected but I'm concerned about others.
- I can say yes to these questions as I will never have that amount of money.
- This will not affect us. My brothers bank account is nowhere near £23500 quoted.
- As I have no savings it does not affect me directly, however I do not agree to penalising people who have scrimped and saved all their lives to have to pay for full care. The Government should pick up all the payments by saving monies, cut down on MP's pay and expenses and save money by getting back scroungers to work.
- Cannot afford to pay as I am in overdraft at the bank, therefore paying interest. Please advise. Thank you – have no savings.
- I am paying for the service I am receiving at the moment.
- Mum doesn't have this kind of savings and the service she has is very much needed as she is not mobile & relies on carers for her needs such as toileting & dressing.

- I as a user and under the lower limit it will not affect me. Still it must be pointed out that residential get 24-7 care where many people only get 1-2 hours a day with families picking up the rest so I don't feel they can be assessed equally.
- As I don't have anything like savings of £23,250 it wouldn't make no difference to me personally, but I think it is grossly unfair to those people who have probably worked hard all their life to save up a little nest egg. I think it would only be fair to charge the full amount to people who have much more than this because they can afford it and it would save resources for those people who would struggle or people who couldn't afford it.
- I have fifteen minutes work with the carers so I would not have to use my savings.
- Would like to keep the same package but would have to consider the options. This does not apply now as savings are under the stated amount.
- I think 23,250 is a low figure to up that figure would be reasonable to up it to 40,000 savings P.S. my mam is well below the 23,250 figure but she would need the full package whatever.
- My father is in need of carers as he is 92 years old but has not got that kind of money to pay for it.
- Mrs Anderson has not got the capital limit.
- Rely on carers as family live away. Think letter was frightening. If had to pay more couldn't afford to pay it as has to pay for everything as only has retirement pension and work pensions.
- I would not be able to manage the care my husband needs. He is unable to walk and has to be hoisted around. I could not afford to pay the full cost as we do not have plenty of money for me to do that. We have both worked all our lives and paid our stamps. We would be in dire straits without the help we get.

Comments on the consultation (18)

- I don't know why you want to ask people as you will make the decision according to budget, not human need or what is fair. I think it is just a protocol you're following because of public image and being seen to do the right thing.
- Unfortunately I cannot be choosey about my care. I think these decisions should be made by someone in the same situation as me and not men in suits with a --- ----- they need to protect.

- We pay £138 per month for Care, this is one of the Benefits gone. I have to pay for Laundry, Petrol, Gas, Electricity, food etc. with what is left to her, she has savings, I get nothing for looking after her, when I die, what I leave. I will go to Social Services to look after her, would it be worth all this from a few people it would cost more in paperwork, think again is it worth it. Can I also point out, that you will have made up your minds already, as you do and these reviews are pointless.
- Should have provided an pre-paid envelope to return this questionnaire.
- I am very unhappy that you have sent this document to my 92 year old mother in law. She has instantly panicked as it seems to tell her that her contribution is going up from £49 a week to £336 a week. I think another document sating that this will not happen is urgently needed.
- Council will implement these changes no matter what people say.
- This consultation looks very much like a foregone conclusion.
- I feel £23,000 is too low a benchmark. I would pay for service if I needed it. I am sick of questionnaires when money could be better spent giving us information of appropriate i.e. care charge increase
- Why send out these stupid 'consultations' when you take no notice and do what you like e.g. Stair Lift Survey. It would also save money!!
- What's the point you won't take any notice.
- How can you evaluate the impact these changes will have or effect service users in 4 questions.
- Please do not send any more forms to fill in, as my mother is 86 yrs old and has not got £23,250 in the bank.
- The questions are too "black & white". They make no allowances for the general benefits of being in institutional care, such as no maintenance of property – heating – and general support. These are costly factors and the burden remains with the individuals and families of users in their own home.
- Appreciate County Council is required to make savings and the proposed change to the charging policy needs to be considered. I'm not so sure that this is consultation. A very limited questionnaire.
- Should send envelope for returning questionnaire.
- Letters should not be sent to service users who have account payees – this can cause unnecessary stress & worry. Mum has Alzheimer's & is 99 years old.

- This is a waste of time as you have made up your mind.
- Questionnaires are difficult to design to cover all situations. People vary not just in need but in capability. Consider: Respondent is 84 years of age!!

General Comments (65)

- If we had to fully fund the care package I would expect a higher level of service. I currently provide quite a lot of care & support to my father but if he had to pay more toward this care I would reduce my care input and expect more from the service provider & yourselves (DCC) in monitoring the care received.
- I think that it is a lot of money to pay weekly and it should be done how you use the service so if you use it a lot then yes, but if not it should be done on calls to the service as the Government put this service in place to keep people out of home and in their own homes and why not put a cost of £2 week to have the service in your home to everyone. That £8 month.
- In this respect service user needs essential care services to remain at home so would have no choice if thresholds change. Possibly an assessment scheme where costs are tiered dependent upon services needed and banded into categories.
- I was assessed last year result – 1 hour per week. When I came out of hospital – 1 hour per day. I have had a spate of “fw&t” – namely renewed – washer, toaster, microwave + garden fence – bungalow roof now at risk – all big items. Because of the climate of the day I will be very interested to know of result of “Fairer Contribution Review”.
- I am pleased investments do not include my home.
- The house value must always be excluded.
- Stop foreign aid which no member of the public has agreed to and there would be no need for cuts.
- I have been very happy with the services provided but would feel inclined to investigate the possibility of alternative providers should costs increase considerably.
- Just another way of cheating those people who can't defend themselves.
- Consider a graduated percentage charge from a lower savings level say £20000 to spread the cost.

- My wife has Dementia so I have filled the form in. I think it would be difficult to judge other peoples circumstances, a lot depends on how much they have coming in per month.
- The comments I would wish to make are probably unprintable. The Government does not live in the real world when it comes to Pensioners.
- I am a carer and will have to wait and see how I will be affected when the changes come
- I think that anyone who has saved all their lives should have the same treatment although having £23,250 may be a bit high. Even £14,250 is perhaps on the high side.
- What if in that figure of £23,250 a person's funeral expenses are included in their savings what happens?
- Whilst I have voted "yes", I am a little concerned about the level of the capital limit. £23,250 is not a lot for a lifetime's endeavours. It's unlikely to affect me, but you do wonder whether it is worthwhile saving or just "enjoy the day". In later life, you are certainly penalised for having comparatively modest savings.
- Shorten your address.
- It seems only fair that if cuts have to be made the better off should bear the cost, but the sum suggested is rather low and as someone with savings above that limit I would like it to be higher.
- Carers are a band of people whose first concern to the person they are looking after. We are saving you vast amounts of money at a very high cost to ourselves. We have no social life and if we did we would be too tired to enjoy it. The cost of putting carers in is very prohibitive.
- If only 140 out of a total of 6500 users are affected the net savings are not worth the alteration.
- This is very unsettling for my mother who is 85 years old. She now can't sleep because of worrying about what will happen to her.
- I hope the Government have looked very carefully at other ways to make cuts before focussing on vulnerable groups. As a service user my son is severely disabled due to a life limiting condition he was born with, not through choice. In normal circumstances he would not need to access care services.
- I am resigned to the fact that I shall always have to pay top price for everything having worked all my life and been prudent.

- Always concerned about white goods replacements which are necessary also insurance.
- I pay I have liver problems with taken tablets I do not drink. Should I have to pay for blood tests and scans. That is illness so why should I have to pay for a mental illness. It is segregation mental illness. I was a nurse it was my life I loved it but I could not do my job. Never thought I ----- ---that.
- Due to level of care needed for my mother, there is no alternative but to keep the package of service she already has.
- I am happy
- Depends if monies are savings or awards for injury where compensation has to last all persons life.
- I would be unable to continue if I did not get any help.
- I would need to keep the same care package as my care is necessary so I can remain in my own home.
- Paying £336.17 per week does not make economic sense in view of the limited activities that the user of this service is offered at Day Centre. The user is basically changing the environment she sits in & therefore she/he could remain at home FREE of charge.
- We should look after the old.
- Don't save!!
- Don't work, don't save because it just gets taken by services. Lie around and get everything free!!!
- Wouldn't have a choice but to keep service because she needs it and care isn't provided unless it is needed
- I would like to tell you that from the 1-4-13 I will be paying Hanover Housing £952.35 month. I then have the usual expenses inc electricity, council tax, shopping etc.
- Having been a carer for more than 30 years now, hence 30 years older, caring is now quite hard at times. Being past retirement , but still wanting to carry on caring, I was hoping I would get more support, but this is not the case. Life gets harder. Having been a carer, the life you hoped to have had did not happen. All carers ask for is some time to be themselves. Don't think I could find myself now.
- If services had to stop a deterioration in condition would occur.

- Yes. I have worked all my life, also served 7yrs + in Royal Navy and always paid my National Insurance.
- I personally feel that the present charge we pay of £11.09 per hour for what we receive is excessive. I would personally advise my mother to cut back on the service to ensure she paid no more.
- Carers are already saving the council millions of pounds but this is not appreciated.
- I would make a decision if and when there are changes.
- I consider day care services essential but in comparison to residential care which is 24hrs – day care is only 5hrs per day – this would make costs considerably expensive per hour of care.
- Why should some people who have worked and saved, been careful and done without pay for help when others who have spent all their money get everything handed to them. If it was a higher limit – say £50,000 it might be fairer.
- As a carer of a dementia relative there really is no choice of cancelling the existing level of day care, as you cannot put a price on peace of mind when you are not with the patient.
- What exactly do you see for £336.17 a week? How many hours? What sort of care? Residential care can be considerably more than non-residential. Full time care/part time care.
- I feel I shouldn't have to pay for anything.
- If a person has worked hard and saved hard all he or she's working life I think it would be wrong. In a case where a person has millions or who is extremely rich elderly people should be equal.
- I am quite happy with things the way they are.
- The capital limit of £23,250 is far too low
- I am disgusted at the lack of financial support given to my elderly mother as a result of her infirmity in old age. Not only does she have to pay the full cost of her care and accommodation in "Extra Care" but she is also paying full council tax for the property she has had to move out of – in addition to the charges for her Extra Care accommodation.
- It is better to squander money than to save!
- My mother is 101 years old. We would need to keep the same package of care that she currently has.
- I would have to have some service for my son to give me a break.

- You could not manage without them.
- Does this mean the carer has to pay? or mother? of the service user as son is on middle benefits and we already pay £27.32 for 12 hrs care
- Unfair that people who have saved are yet again penalised.
- Don't save for your old age because you're penalised.
- Please let us know if the change happens. Thank you.
- I live at home with my mother I get £7540 per year that includes care-allowance + and mobility. I also have to pay £98.40 per month to work at Gap Gardeners Annfield Plain.
- I would have no choice but to stick with what we have as I am a widower of nearly 80 years. The only other way would be to put my daughter into permanent care.
- I find this good value as my wife has been in for 1 week. Top marks.
- My son unfortunately can neither read or write he has no ground level - ---- so must be accompanied everywhere all this was explained in a letter from his Doctor.
- If this proposal is brought in, I will employ a carer privately. Probably a family member.
- No 2. Not correct. This includes the value of a home in Residential Care. No 2 states savings.

People who were concerned about being able to pay (7)

- My wife pays direct debit to County Hall. We both struggle to keep up with payments.
- I think it is far too much money and we could not afford to pay. We struggle now, with what we pay which means my son would be stuck at home every day.
- Cannot afford new charges will have to give up service I receive.
- I could not afford to pay 350 pounds a week for care, so it would be with reluctance that I would have to cut the level of care.
- Our savings are already eroded by the cost of living so are finding that we just cannot afford it. We have worked hard all our lives until 65 yrs. Also in a home they have more carers and get their food.
- I find it hard to meet the bills and cost of living as it is. I would have to try and look after myself if these changes took effect.

- My brother is severely brain injured. He needs people around him, but he cannot instigate friendships nor can he control his appetite for spending. His money disappears faster than it comes in and we are fearful that if you start taking more the day will soon come when he is destitute and alone. We are all considerably older than he is. Please don't take this security away.

Agree with proposals (7)

- Quite happy with current assessment arrangements and that the capping be a fair amount of £23,250.
- There are no pockets in shrouds.
- If you can afford it you should pay full cost.
- I believe people who can have savings of £23,250 should have to pay full but the likes of myself who is have no saving or not in any position to pay in full I only get enough to live on and at the best of time I may have up to £1000. I don't drink smoke or gamble. Only spend my money on living a below normal life!
- People who have over £20,000 should get no help with anything. They are abusing the system.
- Speaking as a carer and a mother to my special needs adult son, wherever possible, I would hope to maintain his level of care if financially possible. I do think whoever is in a position to do so, should without question. That is fairer to all who partakes.
- No other option as my mother needs the 4 x daily care package

Durham County Council – Altogether Better equality impact assessment form

NB: Equality impact assessment is a legal requirement for all strategies plans, functions, policies, procedures and services. We are also legally required to publish our assessments.

You can find help and prompts on completing the assessment in the guidance from page 7 onwards.

Section one: Description and initial screening

Section overview: this section provides an audit trail.	
Service/team or section: CAS/ Financial Services - Commissioning	
Lead Officer: Susan Elliott	Start date: 3/6/13 Review date: 19/8/13
Subject of the Impact Assessment: (please also include a brief description of the aims, outcomes, operational issues as appropriate)	
<p>Changes to the Non- Residential Charging Policy</p> <p>This proposal is to amend the current charging policy for non-residential services to enable the full cost of care to be met by those service users with savings and investments in excess of £23,250. Currently savings under £14,250 are ignored in the financial assessment, and for savings over this £1 for every £250 is added to the financial assessment. Once savings are less than £23,250 they become eligible for support and return to making an assessed contribution. There are currently approximately 6,600 service users receiving non-residential services and of these there are around 420 people currently receiving services with savings over £23,250, with 192 of these service users not currently paying the full charge. The current maximum charge for non-residential care is £336.17 per week and it is proposed this maximum charge will be retained. Non-residential services include home care, day care services, transport, supported housing etc.</p> <p>Background</p> <p>For non-residential care services the Health and Social Security and Social Services Adjudication Act 1983 (HASSASSA) gives councils the power to decide whether to charge. If a decision is taken to charge, the Department of Health has provided councils with “Fairer Charging” and “Fairer Contribution” Guidance which aims to help Councils design charging policies which are</p>	

reasonable and fair.

The Guidance advises that as a minimum the same savings limits as for residential care charges should apply and that service users with more than the upper capital limit may be asked to pay the full cost of the service.

Risks and Mitigation

There is a risk that the implementation of these proposals would result in a number of service users deciding to reduce or cancel their services. Service users will be advised to speak to their social workers before making any changes to the services they currently receive. If service users decided to go ahead and make changes to their current level of services the social worker would carry out a risk assessment.

Should the proposals not be implemented then:

- The MTFP savings related to this proposal will not be achieved.
- Alternative savings proposals will need to be considered which may result in the loss or reduction of services to vulnerable adults.

Before we ask service users to make a contribution we carry out a financial assessment (means test). Financial assessments will still comply with the Governments “Fairer Charging” and “Fairer Contributions” Guidance which will ensure that no-one is asked to pay more than they can afford to pay. During this assessment a benefit maximisation check is also carried out for those who require it. It is not proposed to change the way in which financial assessments are carried out. The maximum contribution of £336.17 per week will also remain.

The following services will continue to be provided free of charge as we are not allowed legally to make a charge for them:

- After-care services provided under Section 117 of the Mental health act 1983
- Equipment, appliances and adaptations costing under £1,000
- Assessments and providing advice
- Intermediate care/ Support and Recovery for up to 6 weeks

Consultation

The consultation ran from 3 June to 15 July 2013. We wrote to service users who currently pay for non-residential social care services (4,111). We also put the consultation on the DCC web site. We believe this is a big enough sample to enable us to make

an informed decision.

The consultation will be presented to Cabinet in order to help Cabinet make a final decision. The findings will be taken into account in the making of the final decision. This report will also be available on the council's website.

Should Cabinet decide to implement these proposals, we will write to service users if their charges will be affected.

Legislation/Guidance

- Health and Social Security and Social Services Adjudication Act 1983 (HASSASSA)
- Fairer Charging Policies for Home Care and other non-residential Social Services (2003)
- Fairer Contributions Guidance (2010) Calculating an Individual's Contribution to their Personal Budget

Who are the main stakeholders: General public / Employees / Elected Members / Partners/ Specific audiences/Other (please specify) –
Service users

Is a copy of the subject attached? No

If not, where could it be viewed?

Information can be provided in various formats upon request including hard copy and electronic format.

Initial screening

Prompts to help you:

Who is affected by it? Who is intended to benefit and how? Could there be a different impact or outcome for some groups? Is it likely to affect relations between different communities or groups, for example if it is thought to favour one particular group or deny opportunities for others? Is there any specific targeted action to promote equality?

Is there an actual/potential negative or positive impact on specific groups within these headings?

Indicate :Y = Yes, N = No, ?=Unsure

Gender	y	Disability	y	Age	y	Race/ethnicity	n	Religion or belief	?	Sexual orientation	?
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How will this support our commitment to promote equality and meet our legal responsibilities?

Reminder of our legal duties:

- Eliminating unlawful discrimination & harassment
- Promoting equality of opportunity
- Promoting good relations between people from different groups
- Promoting positive attitudes towards disabled people and taking account of someone's disability, even where that involves treating them more favourably than other people
- **Involving people, particularly disabled people, in public life and decision making**

Potential across all given profile of service users however may be more likely for gender, age and disability.

As more service users are women, then it is likely that more women will be affected by the changes than men. (Source: SSID data). Most service users have some form of physical disability, mental infirmity, or general frailty due to old age.

What evidence do you have to support your findings?

If these proposals were implemented it would affect current service users in the following way:

- Approximately 192 people will be required to contribute more towards the cost of the services
- Around 4,700 people will find that their contribution towards the cost of their services remains the same
- Around 1,750 people will still not have to contribute anything at all

For services which currently have a charge:

- 27% of service users pay nothing for their service
- 61% of service users are subsidised because they have a low income and pay for part of the services they receive
- Around half of people who pay charges pay less than 25% of the actual cost of their services
- Only 12% of service users currently pay for the full cost of the service they receive. In general they pay this from income rather than savings.

Decision: Proceed to full impact assessment – Yes at decision stage following consultation

Date: 13.5.13

If you have answered 'No' you need to pass the completed form for approval & sign off.

Section two: Identifying impacts and evidence- Equality and Diversity

Section overview: this section identifies whether there are any impacts on equality/diversity/cohesion, what evidence is available to support the conclusion and what further action is needed.			
	Identify the impact: does this increase differences or does it aim to reduce gaps for particular groups?	Explain your conclusion, including relevant evidence and consultation you have considered.	What further action is required? (Include in Sect. 3 action plan)
Gender	<p>More service users are female therefore they are more likely to be impacted by the charging policy. Service provision is unaffected.</p> <p>Reduced care for some may lead to increased risk of requiring residential care.</p> <p>More older women, are likely to live alone and rely on others for care.</p> <p>This may reduce level of service or potential users may need to make alternative arrangements for care with relatives or friends.</p>	<p>Data on SU group predicted to contribute more for services if charging policy amended:</p> <p>Gender Female = 146 Male = 46</p>	<p>Service users potentially affected by this change will be written to and informed of the impact to them. They will also be advised to contact their social worker if they intend to make any changes to the level of care they are currently receiving.</p> <p>Clear explanation provided if implementing changes to ensure SUs feel supported and reduce anxiety.</p>
Age	<p>The majority of service users are over 65 and a large amount over 85 therefore older people are more likely to be impacted by the charging policy. Service provision is unaffected.</p>	<p>Data on SU group predicted to contribute more for services if charging policy amended:</p> <p>Age 18 – 64 = 8 65 – 74 = 27 75 – 84 = 63</p>	<p>Service users potentially affected by this change will be written to and informed of the impact to them. They will also be advised to contact their social worker if</p>

	Those in older age group more likely to live alone (see note under gender).	85+ = 94	they intend to make any changes to the level of care they are currently receiving. Where there is evidence of SUs using savings allowance to alleviate impact of disability an allowance will be made in the financial assessment.
Disability	<p>All service users will have some form of physical disability, mental infirmity, or general frailty due to old age.</p> <p>Some SUs may be more likely to become anxious about proposals e.g. people with mental health conditions.</p> <p>Some may have higher care costs related to their disability- this will be considered in the financial assessment.</p> <p>Reductions in care may exacerbate existing conditions – social workers will consider risks in their assessment.</p>	Data on SU group predicted to contribute more for services if charging policy amended: Older persons / physical & sensory frailty and disability = 192	<p>Service users potentially affected by this change will be written to and informed of the impact to them. They will also be advised to contact their social worker if they intend to make any changes to the level of care they are currently receiving.</p> <p>Clear explanation provided if implementing changes to ensure SUs feel supported and reduce anxiety.</p>
Race/Ethnicity	Services are available to anyone who meets FACS eligibility	Data on SU group predicted to contribute more for services if charging policy amended:	

	<p>criteria, regardless of their known or perceived race / ethnicity.</p> <p>The majority of service users are White British.</p>	<p>Ethnic Group White British – 190 White English – 2 Total 192</p>	
Religion or belief	<p>Services are available to anyone who meets FACS eligibility criteria, regardless of their known or perceived religion / belief.</p> <p>It is not felt that this work will increase differences or reduce gaps.</p>	<p>Insufficient data recorded in terms of religion and belief to fully analyse the impact.</p>	
Sexual orientation	<p>Services are available to anyone who meets FACS eligibility criteria, regardless of their known or perceived sexual orientation.</p> <p>It is not felt that this work will increase differences or reduce gaps in respect of sexual orientation.</p>	<p>Data on sexual orientation is not currently collected.</p>	
How will this promote positive relationships between different communities?			
Supporting people to remain in their own home and community is a key aim.			

Section three: Review and Conclusion

Summary: please provide a brief overview, including impact, changes, improvements and any gaps in evidence.

This assessment relates to the potential impact of implementing the proposal to amend the current charging policy for non-residential services to enable the full cost of care to be met by those service users with savings and investments in excess of £23,250.



Prior to the start of the consultation it was realised that some service users who are currently assessed as nil charge but have savings over £23,250 would also be impacted by this proposal and so they were included in the consultation.

If the recommendations were to be agreed there are currently 130 service users whose charges would increase by the decision to charge service users with savings over £23,250 the full cost of service and 62 people who are currently not paying a charge who would be required to pay. The majority being female, over 65 and all are White British.

A consultation process has been carried out, and feedback from this process is included in the text of the report to Cabinet. A full Consultation Report will be submitted to Cabinet as an appendix to the main report.

Update July 2013 (post consultation): There were 733 responses to the consultation, an 18% response rate. 53% were service users, 44% a carer or other family member, 2% on behalf of a group or organisation and 1% other. The majority (73%) did not agree that SUs with savings above £23,250 should meet the full cost of their services. The majority (43%) said if affected they would reduce the type or level of service or find a cheaper alternative however 26% would still keep the same package and pay the full cost. Many of the comments related to concerns around the impact on disabled and older people especially those who had saved during their working lives. Also how people receiving services also needed to provide for all other living costs such as food, heating and the upkeep of their home as they were not in residential care.

Action to be taken	Officer responsible	Target Date	In which plan will this action appear
Service users potentially affected by this change will be written to and informed of the impact to them. They will also be advised to contact their social worker if they intend to make any changes	Susan Elliott	TBC following Cabinet consideration	

to the level of care they are currently receiving.			
Where there is evidence of SUs using savings allowance to alleviate impact of disability an allowance will be made in the financial assessment.	Susan Elliott	TBC following Cabinet consideration	
Clear explanation provided if implementing changes to ensure SUs feel supported and reduce anxiety.	Susan Elliott	TBC following Cabinet consideration	
When will this assessment be reviewed?	Date: TBC after report process		
Are there any additional assessments that need to be undertaken in relation to this assessment?	No		
Lead officer - sign off: 			Date: 28.8.13
Service equality representative - sign off: 			Date: 30.8.13

Please email your completed Impact Assessment to the Equality team - equalities@durham.gov.uk