**Views on our proposal to change our adult social care charging policy**

**Respondent information**

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| **Respondent Numbers** |
| There were **454** responses to this proposal: of these, the majority (**401 people** or **88.3%)** replied as individuals or as family members.   |  |  |  | | --- | --- | --- | | An individual / member of the public | 359 | 79.1% | | A family | 42 | 9.3% | | On behalf of a voluntary or community group | 10 | 2.2% | | On behalf of a statutory organisation | 3 | 0.7% | | On behalf of a business | 1 | 0.2% | | A Norfolk County Councillor | 0 | 0.0% | | A district or borough councillor | 0 | 0.0% | | A town or parish councillor | 0 | 0.0% | | A Norfolk County Council employee | 2 | 0.4% | | Not Answered | 37 | 8.1% | | Total | **454** | **100%** | |  | | | |

Of the 453 responses we received, the majority (309 or 68.2%) were easy read feedback forms received as a result of our letter to potentially affected service users.

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| **How we received the responses** | | |
| Easy Read feedback form | 309 | 68.1% |
| Online | 112 | 24.7% |
| Email | 20 | 4.4% |
| Paper feedback form | 8 | 1.8% |
| Letter | 5 | 1.1% |

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| **Responses by groups, organisations and businesses** |
| **Twelve** respondents told us they were responding on behalf of a **group, organisation or business**: people who chose this option may not necessarily represent the view of their named organisation, or may chose this option but not name the organisation.  The organisations cited were:   * Chedgrave Parish Council * I Care Service * Motor Nerone Disease Association * Norwich Older People’s Forum * Norfolk Older Peoples Strategic Partnership Board * Poringland Independent Living Group * Norwich Independent Living Group * Norfolk Making it Real Board * Community Action Norfolk (CAN) * Opening Doors * South Norfolk District Council |

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| **Relationships** |
| Respondents described their relationship(s) to NCC as follows:   |  |  | | --- | --- | | I get care and support from the council | 266 | | I care for someone who gets support from the council | 81 | | My family or friends would be affected by this proposal | 136 | | I work for an organisation that supports people who may be affected by this proposal | 22 | | None of the above | 22 | | Not answered | 50 | | (People could pick more than one option) | 577 | |

**Summary of findings**

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| **Q1: How far do you agree or disagree with our proposal to use different rates of Minimum Income Guarantee (MIG)?** |
| **419** people answered this question. The majority of people (247) disagreed or strongly disagreed with the proposal to use different rates of MIG: 73 agreed or strongly agreed. There were 99 people who neither agreed or disagreed, or did not know if they agreed or disagreed, and 34 did not answer this particular question (see below).  The **main** reasons given by people who **agreed/strongly agreed** with the proposal in Q1 were that they felt:   * it is fair for people to contribute the amount they can afford (19 comments) * the thinking behind the proposal is correct or acceptable (18) * some people stated their agreement in the comments box but gave no reason (9)   **(See Table 1 for analysis and comments)**  The **main** reasons given by people who **disagreed/strongly disagreed** with the proposal in Q1 were that they felt:   * the proposed change would create additional financial hardship for people who already have a low standard of living and no or limited ability to boost their income from other sources (102 comments) * the amount of benefit should be based on, or include assessment of need, age should not be the focus (86) * that the thinking behind the proposed change is unsound being based on flawed thinking, particularly about the needs of different age groups (81) * the proposed change would have a negative effect on people’s wellbeing and increase the risk of social isolation and loneliness (44) * the proposed change affects the most vulnerable people in society (22) * people have already had previous reductions to their income: they are now experiencing the cumulative effect of numerous cuts to their income and to services (21) * it is unfair to ask people with disabilities who already face numerous daily challenges to bear additional financial burdens (15) * local government is having to resolve central Government financial issues (14) * carers and family members will be negatively affected (13)   **(See Table 2 for analysis and comments)**  Comments by people who said they **neither agree nor disagree**, **don’t know**, or didn’t tick one of the six options and so are shown in the chart above as ‘**not answered’** did not reveal any new themes. People who ticked ‘don’t know’ mostly said they did not understand the consultation: between all three categories there was general disagreement with the proposed change on the basis of existing or potential economic hardship or perceived age discrimination. One person noted that while the proposed change was acceptable in principle, the practice may be different: “the idea sounds okay but it means assessment for every individual to establish their needs and making sure they have enough money to cover their living expenses. Be honest social services are now 10 months behind with their annual reviews. The time wasted and cost involved in implementing this could exceed the amount you wish to save”. |

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| **Q2: How far do you agree or disagree with our proposal to take the enhanced rate of the daily living component of the Personal Independent Payment (PIP) into account?** |
| **419** people answered this question. The majority of people (267) disagreed or strongly disagreed with the proposal to usethe enhanced rate of the daily living component of the Personal Independent Payment (PIP) into account: 59 agreed or strongly agreed.  There were 93 people who neither agreed or disagreed, or did not know if they agreed or disagreed, and 34 who did not answer this question (see below).  The **main** reasons given by people who **agreed/strongly agreed** with the proposal in Q2 were that they felt:   * it is fair for people to contribute the amount they can afford (16 comments) * some people stated their agreement in the comments box but gave no reason (4)   **(See Table 3 for analysis and comments)**  The **main** reasons given by people who **disagreed/strongly disagreed** with the proposal in Q2 were that they felt:   * the proposed change would create additional financial hardship for people who already have a low standard of living and limited or no ability to boost their income from other sources (120 comments) * the thinking behind the proposed change is flawed: as people have been assessed for the benefit it should be theirs to keep and NCC should not remove it (81) * the proposed change would have a negative effect on people’s wellbeing and increase the risk of social isolation and loneliness (53) * people with disabilities already experience multiple disadvantages and should not be expected to bear the burden of cost savings as well (29) * the proposed change affects the most vulnerable people in society (22) * the amount of benefit should be based on, or include assessment of need, age should not be the focus and expenditure on household necessities (e.g. utilities) is not age related (18) * people have already had cuts to income or services and are feeling the cumulative effects of reductions (16) * people are not able to support themselves through work because of their disability, age, or the lack of suitable opportunities (14) * carers and family members will be negatively affected (14) * government bodies to increase tax not cut services and/or budget better (13)   **(See Table 4 for analysis and comments)**  Comments by people who said they **neither agree nor disagree**, **don’t know**, or didn’t tick one of the six options and so are shown in the chart above as ‘**not answered’** did not reveal any new themes. People who ticked ‘don’t know’ mostly said they did not understand the consultation and the choice of ‘neither agree or disagree’ was selected by some people who felt the need for a proviso such as “depends if it is fairly implemented” / “as long as nobody is worse off after the change”. Generally, over all the three categories there was disagreement with the proposed change on the basis of existing or potential economic hardship or perceived age discrimination. |

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| **Q3: If the council went ahead with these changes how, if at all, would it affect you?** |
| **391** people described the effects of the proposed change as being negative: no one described positive effects. The main themes were **financial hardship, decreased wellbeing, and the possibility of having to reduce care.** Thirty people said they thought they would not be affected at all or at the moment.   * People described how a reduction in their income would mean **less money for essential costs** such as paying housing costs household bills, personal care, travel, and day to day necessities. The **cumulative effect** of successive reductions to income were also noted. Some people said that their **family income was already low** because one person in the house was a full-time carer and this limited the ability of the household to increase their income through seeking better paid employment or working more hours. People also said that further reductions to their income could negatively affect their **physical and mental** **health** as they would be unable to pay for travel to health appointments, or to buy special food or complimentary therapies which improve their health. (198 comments) * As well as describing the potential impact of the proposed change on their finances, some people also explained how the proposed change would affect their **wellbeing**. People described how further reductions to their income could limit their ability to maintain existing relationships with friends and participate in their communities, and could lead to isolation and loneliness. Constant **anxiety** created by financial worries and the wearing effect of such concerns on individuals were also described.   In addition, 17 people felt the proposed change was short-sighted as it would cost the council or its partners more money at a later date. (142)   * Some people said they would need **to stop or reduce the care** they paid for if the proposed change was to go ahead because they would no longer be able to afford to pay carers or to pay for respite care. (40) * The effect on carers was also noted, people said the role of **caring would become more difficult**. (32)   **(See Table 5 for analysis and comments)** |

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| **Q4: If you would be affected by our proposal, what extra support, if any, would you need?** |
| **265** people answered this question and the number of people who chose each of the four options is shown below.  **261** people made comments in the text box, but the majority were general comments about the proposals rather than an explanation of the support needed: of those that were specific about what is needed, the following types of need were identified:   * some people want help to find suitable work, but most pointed out the difficulties of finding appropriate employment or said they do not need help as they are unable to work because of their disability (33) * more care/more money to buy care/respite care/help finding care (17) * discussion about their finance/help with debt/help to claim benefits (17) * support with mental health issues (8) * help to access services/negotiate around departments/signposting (7) * support with accessible transport and travel (5) * help with filling out forms (4) * help with (unspecified) mobility problems (2) * other form of support needed included access to foodbanks (2), help with housing (2), help with life skills (2), help from Children’s Services, help finding local activities, support with learning difficulties/ASD, physiotherapy, and help with funeral expenses (11).   Twelve people told us they do not need help to manage their money; they stated that they needed more money or at least no reduction in their current income: “I know I am claiming all I am entitled to. I do not need assistance "managing my money". What I need is for the council and Government to stop taking from us and expecting us to live on less and less as the cost of living rises. Just because we are disabled does not mean we deserve poverty.”  It was also pointed out that the support offered (help with managing money/claiming benefits/finding work) was not relevant to some respondents, especially those with a level of disability which means they are unable to work, or for those over retirement age: “many people would not benefit from the 1 million you propose to spend on improving work opportunities because they are not fit to work”. One person told us that they would receive no advantage from the proposed change because: “As I have lived with MND for 12 and a half years, gradually losing the movement in my legs, arms, hands and losing speech and affecting my swallow, I had to retire through ill health 8 and a half years ago. I am not suddenly going to be able to work or be able to have training to be able to work, so I won't need that help. The MND Association has access to a benefits advisor to help with claiming benefits, so I won't need that help. I am quite able to manage my money, which I have done all my adult life, so I won't need that help. So, I won't be able to take advantage of the savings you are making by taking my money.” |

**Other information**

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| **Other information relevant to the consultation** |
| **Comments related to equalities**  **Some respondents told us that they thought the proposed changes were potentially discriminatory and would affect some people in protected groups more than others or may be unfair to people with differing levels of need within a protected group, or those with particular medical conditions such as Motor Neurone Disease**. As the proposed changes concern people with disabilities, and involved an element of change based on age, some people felt that **people with disabilities were being treated unfairly in comparison with older people** (both with and without disabilities), or that **younger people were being discriminated against**. Although the proposed change follows central Government process, some told us that to “fix a benefit system based on age is discrimination”. There were **105** such comments plus **eight** concerning the rural nature of the county. Two people queried the legality of the proposed change. *Please refer to comments in the Tables in the ‘Analysis and Comments’ section below, particularly those concerning age.*   * A lot of living costs which are applicable to the elderly are mirrored by those with severe disabilities - why therefore should one group be penalised. * You are penalising younger people with disabilities and you are banking on the fact they may still be living at home/with relatives. * If you change the MIG then you are being discriminant as you can be disabled at any age and everyone should be treated the same, why should a 24 with down's syndrome be treated any different from someone with down's syndrome at 50 or someone at 65? * Penalising young people. young disabled people have similar costs to elderly. * If there’s a minimum it should the same across the board regardless of age, younger people tend to have more commitments, more hobbies + eat more so need more money than over 65s, pricing people based on age is discrimination, which is a criminal offence. * It would mean me paying more than I do now as I'm not 65 so it's discriminating. * It would mean that younger people who are more likely to wish to go out and socialise will be at a disadvantage. This would be in my view direct age discrimination. * The government still states the MIG is £189, and you are proposing major cuts in this MIG to younger disadvantage persons. You at proposing a cut in the MIG of £37.55 a week to the over 25 age group, which is a reduction of 20% of their disposable income, at a time of rising inflation in all sectors of the economy. Obviously this cut is targeted at those in the most disadvantaged in society, and I think this may amount to disability discrimination. In addition, you do not propose in your document any improvement in services for these clients. * This is disability discrimination - the more disabled I am you want to take my money although I live at home with my parents. … I am so disabled I receive a personal budget as I cannot be on my own at any time, so you are targeting me for being more disabled. This is derogatory, humiliating, patronising and punishing that I am very disabled. * The enhanced rate is awarded to those who need it after being properly assessed..... I need it because I cannot do a number of tasks myself ... Without it my quality of life would be seriously degraded. Too me this looks like u r punishing me for being more disabled than somebody else.. * People get enhanced rate for specific reasons, by then taking some of that away, their health/care may suffer. Agreed needs to be changed but I feel that its targeting those with extra health issues than others without, the extra money already pays towards disability/health issues. * Again you are exempting the elderly and expecting the most vulnerable people to pick up the tab for their care, to the detriment and reduction of their own needs being met. Previous mismanagement of public money by councils and a growing elderly population does not justify compromising the support and well being (financial, psychological and physical) of younger, vulnerable adults who experience enough daily struggles already. * … Norfolk County Council proposes to re-invest some of the savings as a result of this policy change into initiatives to help Norfolk residents find work. It is important to note that these initiatives will be of no benefit for people living with conditions such as MND, once their condition has progressed to the point where they are no longer able to remain in work. Consequently, working age people living with MND will see a significant negative financial impact from the proposed MIG changes, while receiving no benefit from the resulting investment in many cases. The proposed policies will therefore have a disproportionately negative impact on disabled adults of working age. * I should like to point out that since 2008 I have suffered cuts to my services, and removal of my benefits, and increases in my costs from different agencies for each of the years since; this is discrimination against me because of my disability. No other group of people has been so targeted throughout austerity, which for me is worsening, not easing. NCC is responsible for increases in my costs for three consecutive years; you have never protested to the Government when it has demanded of you that you target the disabled in reducing council costs. If you prevent me in future from leading as normal a life as possible in the community, then you will have knowingly discriminated against me. * It [the proposed change] is also causing harm in terms of our mental wellbeing as you gradually remove autonomy and freedom and push us back into the position of people on the receiving end of care rather than people with dignity in charge of our lives. This demonstrates a basic ignorance of the right of disabled people to be equal and autonomous in the things that affect our lives so deeply. * Minimum Income Guarantee is a very hard thing to understand. We think it is rules about how much money people have to be left with to live on after paying for care. People who are 65 and older have their money stay the same. This means these changes will affect people with learning disabilities more because lots of them are under 65. How many people will it affect? Have you checked this is fair? * I live in a rural environment and need to access towns for shopping, my PB budget has already been reduced and I use my PIP mobility to access other locations. * In a rural area costs are greater that in an urban area - especially travel * The negative impacts of these proposals are further magnified by the financial challenges that living in a predominantly rural area cause. Transport costs are generally higher particularly as many journeys are not possible by public transport. Most of the bus routes are focussed on providing a service into the nearest town, whereas cross country travel either needs private transport, often requiring the family to change their car or relying on taxi firms. The local MND Association branch experience is that there are few companies operating wheelchair accessible taxis and the lack of accessible transport leaves people isolated and often incurring additional costs to carry out everyday activities like shopping or visiting their GP. Access to employment can also be limited in rural areas, which means that some families affected by MND are in low pay jobs or are unemployed. Care services are difficult to arrange and are often more expensive due to the lack of local carers.   **Comments about the consultation**  **Comments (128) were also received about the consultation process itself.** The subject matter of this consultation was complex and people found it hard to understand, the examples did not help some people: some people said that holding a consultation over the busy Christmas period was not ideal. More generally, people told us they lacked faith in the process and felt that decisions have already been made.   * It depends on an individual's present circumstances was not able to understand example you provided * Although you have used large print, photosymbols and emoticons, the document contains abstract ideas, complex information and mathematical calculations. This means that talking this person through all 25 pages of the document is meaningless and confusing for them. I understand that NCC needs to consult a range of individuals, but how can the most vulnerable people be genuinely included in this way? * Cannot understand the question. * Despite the inclusion of your “easy read version of our consultation” we are unable to make any sensible comments because the illustrations you provide make no reference to whether those who will have to pay towards their care will have the money available. The monetary explanations don’t seem to make sense to us. If the money isn’t available what will be the implications for individual’s care? … * It's alright saving money but to take it AGAIN from the disabled is disgraceful. Why you wasted money sending this out, in this format also, was it necessary to do this as big, also in colour? do you think people are that stupid? What was the reason you sent it, as you have obviously already made your decision, ( like the last 2 years!) Another waste of money. * There were many parents who were not set thse forms to see & complete, surely this is not fair, I had to telephone 3 times to get any response * Why waste money on a survey – youa re going to do what you want anyway! * Again I will fill in the request forms - but in my experience the Council do not listen to people & just go ahead and charge people more - and do not take our views into account. * You need to be more honest- your proposal is to reduce the amount of benefit to all those under the age of 65 years, there are no examples where you propose to increase payment. Therefore the use of the word 'change' should be replaced by 'reduce'. * After giving further thought to the consultation it seems to us that because the proposals are complicated and the form sent out is very difficult for anyone to understand and therefore complete knowledgeably, the consultation is ineffective and as such is not being conducted properly. We therefore think that the proposals need to be dropped until proper, meaningful consultation is carried out. This is essential when the proposed actions will all affect at least some, probably most, of the recipients of care in a negative way. * My opinion is these proposals will go ahead just like the changes in disabled related expenses did because people with learning difficulties are in the monority. They do not have the intelligence to fill in surveys or oppose this and lots no longer have living family to speak up for them. * Form to difficult to understand. A total waste of money sending this out. From the examples you have given it is an unfair proposal. How are we meant to give you sensible feedback if you can't give us sensible information? * Firstly the communication you sent was not understandable, particularly the mathematical examples, for people who have limited or no understanding of money. * Has it been Co designed with service users e.g. Direct Payments / personal budget users? * This is merely a cost cutting exercise and I have no faith in your assertion that it is a consultation. * As we all know there are a disproportionate number of people in Norfolk who are illiterate. There has been no other form of consultation to enable these people to understand the content of the consultation. The consultation does not define the terms used such as: ‘care costs’, ‘disability related expenses’ and ‘benefits’. This makes it impossible to understand what the financial implications are for families. Many people whom this may affect have not received the 26 page consultation letter at all so cannot be involved in the consultation. We therefore feel that this consultation is unfit for purpose. * I feel bamboozled by numbers. * We do not feel this consultation is fit for purpose. Also the timing of it is atrocious. We are filling this in at 1am - the only time when we were not working, caring or preparing for Christmas. * My daughter is never going to be able to advocate for herself. She will never protest at a council meeting or even reply to a consultation. She was able to read the 26-page easy-read consultation document you sent but in no sense able to understand it. (And by the way, it showed contempt for our young people that there were spelling errors and, I think, even a maths error in the document.) As one of the most vulnerable people in our society, should she suffer from the need to make budget cuts? Are you influenced by her lack of power to protest?   One organisation which criticised the consultation, offered to work with NCC to help people fully understand proposed changes: “ yet again, the NCC have not shown a very strong empathy and understanding of this client group in the way that they have communicated. The “easy, clearer” version was still way too long and complicated for many of our clients to have read and fully understood the implications. I think that this should have been sent as well, to the next of kin or POA or other advocates of clients. As a provider we would have been happy to have been briefed and had the carers offer an informed synopsis to those clients who may have needed it”.  **Additional points**  **1. The effects of proposed changes for care providers and organisations which support people with disabilities was**  **mentioned by some respondents:**   * “Although it will not affect older people immediately it will affect many people in the voluntary sector by adding to workload and absorbing distress and anger from those directly affected.” * “I am looked after by Norfolk CC and my income goes to my care providers to pay for my costs, as it should do. The costs I cover are determined by NCC and the care provider between them; I have no choice, yet you have not consulted with the care provider in demanding this extra money in charge. There will not be enough to cover my current costs and your charge.” * “I am concerned that there is too much focus on taking from the already low incomes of vulnerable individuals (particularly those who are already contributing to the costs of their care), when the Council could be much more effective at saving costs across the care providers it uses- why isn't there any mention of looking at whether Norfolk is getting value for money from the care providers it uses?” * “Each decision should be made upon the specific needs of the individual. There is also the quality of the support given to be taken into account. If the person needs help with domestic tasks to become more confident and independent, are they receiving that support and how much does it cost? Recent reorganisation of support services in Norfolk have resulted in attempts to remove this type of assistance and what is provided in its place is not necessarily appropriate or as effective- therefore you would be charging more for a less effective service.” * “Given that the Adult Social Service budget was inflated in 2018 by the new increased fees for Framework providers; the powers to be might want to consider whether continuing such higher rate for band threes, exclusively to a section of provision which we have agreed is performing at a level well below the spot sector. (Using CQC ratings as a guide submitted at the HSCCF meeting 6/12/2018) is defensible. How much could be saved by moving a band three payment to band two?”   **2. Many respondents made relevant points which are not discussed in the sections relating to the four consultation questions**  **because they did not emerge as consistent themes. However, the points made are important, and should be considered**  **alongside the more frequently mentioned points:**   * **The additional help on offer is already provided by national or voluntary bodies and NCC should not be ‘subsidising’ these organisations**: “Help to find work appears to be NCC subsidising DWP whose responsibility this should be. Help with claiming benefits is again the responsibility of B A and advice is already provided by a number of voluntary and commercial agencies.” * Respondents said that **parents caring for disabled children face multiple financial disadvantages over their lifetime** as they care for the dependent child through into adulthood and older age and that this should be recognised by NCC. They are often unable to work because they are the main carer for their child and so lack opportunities to boost their income or save; also, because their income is often low, or they depend on benefits, they are unable to make good financial provision for their own old age. * **Some respondents noted knock-on effects of the proposed changes for NCC**: “This proposal will make claiming Disability Related Expenses (DRE) essential and NCC will need to provide more guidance and support about how to claim DRE. We hope that NCC will not implement this proposal or at least, if they adopt the age related MIG, then reinstate DRE at a fixed rate and do not consider DLA/PIP high care as income (even for night care) to align with other local councils.” * **It was suggested that NCC should look more closely at other councils’ rationale**: “You say in your consultation paper “Other councils like Suffolk, Cambridgeshire and Lincolnshire have already done this” and although it may be true for the age related Minimum Income Guarantee (MIG) others do not consider all of someone’s high/enhanced rate DLA/PIP Care benefit as income, even if they have night care. Lincolnshire and Suffolk are continuing to automatically pay DRE at a fixed rate (£25/week for someone on high DLA/PIP care). If this idea is implemented it would make NCC the most mean council in East Anglia!” * **The reality of opportunities in the employment market must be acknowledged**: “In the case of my daughter and young people like her, I would love her to have paid employment and we work towards this every day, but we need to be realistic about this. Training the young people, which is what is on offer at the moment, is only a small part of the story. My daughter, because of her cognitive development, will never be as fast or as flexible as any number of other workers. No employer will see her as an asset compared with others in need of work. And remember that these 'others' include young people with lesser learning difficulties who still need support and help but are better able to contribute to the job market. I could not blame any employer who prioritised giving someone like this 'a chance' over someone like my daughter who in economic terms will be able to add little to a company's profitability. Of course, as an advocate for young people like my daughter, I believe that they have more to offer than mere financial advantage to an employer, but in today's uncertain retail and service economy, where businesses themselves struggle to survive (of which I have personal experience), my daughter's chances of ever finding paid work are minimal.” * **NCC has a role in monitoring quality of care**: “The cared for person is now contributing towards care, which is understandable but until recently was neither receiving the hours of care, nor the type or quality of care needed. The more people pay the more vital it is for the council to ensure that the type of care given is high quality and gives both the service user and the council value for money.” * **People worry about potential changes to their income and some people may suffer serious financial consequences as a result of not being able to manage their finances**: “Anything to do with money is scary for people with learning disabilities. If you do not understand things then it all feels out of control. We know lots of people with learning disabilities who have got in a muddle with Equal Lives and the County Council about their money. This was not their fault. Things like changing a standing order at a bank can be very difficult for people with learning disabilities. People might leave it and get a debt. The consultation says things would change in July but people would not get the first bill until September. We think this is very bad. This could mean people end up with a big bill to pay off. When things are tight this is just too much for people. It makes people unsafe. If people get into a muddle about their money they might give up hope of getting it sorted out. This will mean they go into debt. When you have very little money it is hard to stay on a budget. People might borrow from unsafe places like a loan shark. If you owe the County Council money and are paying this back they do not count this in minimum income guarantee sums. This can mean you get less than the government says you need to live on. People who support people with learning disabilities when they are in debt need to know how to do easy read and how to explain things in a really easy way. * **The proposed changes may affect people’s capacity to become independent**: “We are being encouraged to be independent but it feels like these changes make it harder and more scary for us.” * **The proposed changes may result in unsafe practices:** “We are very worried that people with learning disabilities will be so scared of having to pay more for care. We think they will say they can manage when they can’t. We know this has already happened. People’s social workers say they can pay less for their care if they cut down how many support hours they have. We think this is dangerous. We think this puts people with learning disabilities in Norfolk at a big risk of harm.” * **Claiming benefits can be a barrier**: “You say about Disability Related Expenditure that people can claim. You cannot claim anything for transport from this. People with learning disabilities who have no-one to drive them around have to find the money for this. Most people with learning disabilities find it too hard to claim DRE so we are worse off again.”   **3. Some respondents suggested ways of saving money, ways in which the proposed changes might be rolled out, or ways in**  **which the council could operate more efficiently:**   * **Paying for care:** “It would be fairer and much more sensible to have an automated system where we filled in an online timesheet monthly and were automatically invoiced for the actual number of hours used, adding a separate charge for the use of employment support and recruitment and training services if we choose to use those services. This would be much more cost effective as you would only be providing the service as needed and we would have a financial incentive to make our care provision as streamlined as possible.” * **Preventing duplication of work**: “If a benefits ‘award’ has been granted at previous assessment for an ongoing diagnosis to a person with ongoing disabilities, is it possible to re-apply this award? This would help to reduce the stress and trauma of going through the whole process repeatedly and to reduce time spent by council staff in duplicating the work.” * **Using available evidence**: “The stress to service users/carers of going through the assessment procedure, especially for those that have on- going mental health problems that repeatedly go through this procedure and then have go to an appeal, could be avoided if the assessor is asked to take into account any evidence available at the outset.” * **Using peer support**: “We understand that the Council proposes to deliver the savings and we are concerned that there is no mention of Peer Support in the budget proposals. The council’s peer support project is just starting out and we would like to see this work protected. Peer Support is a vital part of living independently. Peer support can help to fill the gaps where statutory bodies can no longer provide a service.” * **Continuing to work closely with district council partners** including: continuing to focus on partnership approach to preventative work and to growth and investment, NCC to support District Council’s Network’s call for 3% prevention precept for district councils, careful consideration of the wider picture (“it is important that any cuts made do not increase pressure on services provided by the wider public-sector system”), and continuing county/district collaboration on key strategic matters through joint working on locality-based issues. * **Means test winter fuel payments** * **Reduce payments to Members** * **Stop pay rises for staff** * **Revise contracts with care providers** * **Phase the proposed changes in over time** |

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**Analysis and comments**

**Table 1**: Analysis of main comments by people who **agree/strongly agree** with the proposal in **Q1** ‘How far do you agree or disagree with our proposal to use different rates of Minimum Income Guarantee (MIG)?**’**

**Table 2**: Analysis of main comments by people who **disagree/strongly disagree** with the proposal in **Q1** ‘How far do you agree or disagree with our proposal to use different rates of Minimum Income Guarantee (MIG)?’

**Table 3**: Analysis of main comments by people who **agree/strongly agree** with the proposal in **Q2**: ‘How far do you agree or disagree with our proposal to take the enhanced rate of the daily living component of the Personal Independent Payment (PIP) into account?’

**Table 4**: Analysis of main comments by people who **disagree/strongly disagree** with the proposal in **Q2**: ‘How far do you agree or disagree with our proposal to take the enhanced rate of the daily living component of the Personal Independent Payment (PIP) into account?’

**Table 5**: Analysis of main comments about Q3 ‘If the council went ahead with these changes how, if at all, would it affect you?’

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| **Table 1: Analysis of main comments by people who agree/strongly agree with the proposal in Q1 ‘How far do you agree or disagree with our proposal to use different rates of Minimum Income Guarantee (MIG)?’** | | | |
| **Theme** | **Issues** | **Number of comments** | **Comments** |
| Comments about fairness of contributions | People should contribute according to what they can pay  It is a fair way to charge | 19 | Some people get more benefits than others so people should pay accordingly to there benefits.  Different people have different needs & should be assessed on their incomings / outgoings to ensure a "fair" system.  People should pay according to their ablity to pay.  It seems fair if you can afford to pay a bit more.  Will be a fairer way for people to pay.  If people get the right benefits the should cover their care.  Because it’s fairer. |
| Comments about the thinking behind the proposal | Acceptance or agreement with the thinking behind the proposed change | 18 | Given the finances it's hard to see an alternative - but it is a move towards the lowest possible standard not the best. It isn't an attractive stance to take.  People have different needs if money is short, it should be fairly allocated.  Because different people have different living costs, so amounts should be person and situation specific. |
| Comments which agree with proposal | General agreement | 9 | Seems to make sense if applied correctly.  A better way of charging for care |

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| **Table 2: Analysis of main comments by people who disagree/strongly disagree with the proposal in Q1 ‘How far do you agree or disagree with our proposal to use different rates of Minimum Income Guarantee (MIG)?’** | | | |
| **Theme** | **Issues** | **Number of comments** | **Comments** |
| Comments about the cost of living | People with disabilities have additional expenditure that people without disabilities do not have  People do not have enough money to live on as it is  The cost of living is already high/rising  People with disabilities have limited means of raising additional income | 102 | We don't get enough money at the moment. Any less and we won't be able to get by.  People are struggling enough as it is  Money is tight as it is, if I have to pay more I will have to go without other things ie (shoes, cloths) ect.  Because its hitting the poor once more. I will have to turn to food banks Its disgracefull  I strongly disagree because people with chronic illnesses and disabilities need more, not less, money to enable them to have any reasonable quality of life. The amount should be based on how much a person's illness or disability prevents them from doing normal everyday activities, not by age. Doing this by age makes no sense  Realise you need to save money but feel it unfair that vulnerable Adults are losing out. Cost of living is going up so how do you expect us to live with less money?  The money we have coming in is all accounted for and wouldn't be able to Afford to pay any money for my wife's care. Also my wifes condition has got worse and will need more care in the future and will cost more money to look after her  I cannot afford to pay anymore. I pay £224.28 every four weeks now.  As this was decided to be the amount we need to live on. Prices are not falling, costs only ever go up and not down, so how you think you can reduce this amount, which I would say really IS a minimum amount, is beyond me. All of our costs are continuously rising, some beyond the rate of inflation, while our benefits this year, increased by 35 pence a week (for two people), which is ridiculous. Eventually we will run out of money.  Reducing someones MIG is very wrong. You cant expect to buy the same commodities with £40 £50 reduction. People will definitely suffer hardships. Everything keeps going up and you want to reduce MIG. you are basically asking people to go form a reasonable standard of living, to a low standard. |
| Comments about the relevance of people’s age to the proposal | Assessment of a person’s needs should not focus on their age: extent of disability and family circumstances should also be considered  Expenditure on household necessities (eg. utilities) is not age related | 86 | Because people's disabilitys are irrelevant to age brackets.  Why is there some strange assumption young people deal with £200 a month less money? If someone is ill enough to be receiving enhanced PIP, they need as much money as they can. Do young people pay less for food? For bills? Is there some special 'under 24 only' deal from BT I'm unaware of?  I am in the 25 - 64yrs bracket, will that acknowledge that I have children? Someone in their 50's - 60's in same bracket, may (impact less in household) live alone.  I don't feel that age is the only factor when calculating a persons required living expenses-although the elderly are impacted by cold weather this is the same for any person who has severe disabilities who may have poor circulation and need a warmer environment, to prevent health problems. A lot of living costs which are applicable to the elderly are mirrored by those with severe disabilities-why therefore should one group be penalised.  All benefits should be based on the need of the individual in your example why would Susan's situation change from being 24 yrs 11 months and 364 days old to being 25 and then having a cut in her MIG of £56 and to have the upper limit of MIG set at 65 when your own statistics show adults with LD die 14 years younger than those without and the average age at death is 63 for women and 65 for men you have clearly calculated that you will not have to pay the upper limit  The 18-24 year olds need more money for transport to higher education, jobs etc. Its very hard starting out in life, incredibly expensive becoming independent. Their opportunities must not be hindered  Age is not relevant to a person with disabilities, a disability affects an individual regardless of the age . The reality is that most people over 64 probably have no dependents, probably have paid off mortgages whilst most working age people have the dependents /mortgages etc . There is no reasoning why over 64s require more money than people whom are younger. If a person are sufficiently disabled to preclude them from working how can you justify taking monies away from them just because they are younger  You don't say why you think that people under 65 don't need such a high MIG. Is that because you are relying on parents to fund the difference for their adult children?  The impacts of the condition [Motor Neurone Disease] on working-age adults are no less severe than for older adults. It is unfair and unjustifiable to reduce the level of support available to disabled people for no reason other than their age.  Older people also have access to a wider range of social housing, specifically one bedroomed properties, which are often reserved for those over 65 (or sometimes 55). younger such as myself can find themselves having to accept larger properties (I have a two bedroom flat) because that is all that is available in my locality. As a result these younger people are more likely to have no choice but to pay an 'Under Occupancy Penalty' out of their MIG.  Care needs are not necessarily less simply because of age. It also feeds the intergenerational sense of inequality felt by many younger people and does treat them inequally. |
| Comments about the thinking behind the proposal | The proposal is based on flawed thinking about the needs of different age groups | 81 | With household bills going through the roof, your figures are complete madness  I disagree on principle that people should be treated differently based on their age . NCC appear to be basing a proposal on guidelines from government that simply reflect an existing ideological standpoint that young people do not need as much money as an older person.  I checked with NCC officers and they confirmed there is no separate explanation from central government behind their guidelines relating to care charges i.e. they are using the an existing ideological standpoint (inherent in benefit regulations), transferring it to another scenario (care charges) without any publicly available assessment of whether this approach is appropriate, fair and/or justified .  NCC - in considering the impact on vulnerable people - should be rigorous in properly considering the logic behind the government's 2 tier approach; if there is no justification for this they should not simply accept it. In other words - NCC should explicitly be able to answer the question "What- if any - is the justification for claiming that young people age 18 - 25 with care and support needs require a lower income than someone with care and support needs who is over 25? " The answer to this question should be publicly available, considered by elected members as part of the decision making process.  How can you justify this and with respect how can anyone with a consience live with the idea.  Every person/claimant is an individual. This system is putting claimants into stereotypical boxes that may/ may not be relevant to their needs The care they receive should not be dependant on whether the council needs to save money.  For the amount of savings you are expecting the whole proposal is flawed and should be abandoned. |
| Comments about potential negative effects on people’s wellbeing if the proposal goes ahead | People will have fewer opportunities to take part in activities that promote positive mental health  People may become more socially isolated and lonely | 44 | Think yet again disabled people are being made out to cost the government the most money if your proposal goes ahead I will cancel my care as I would not be able to live, eat, keep warm, pay for utilities.  She will not have any money to pay outgoings and do as many supported activities, to improve her social interaction/skills. Not good for her health and wellbeing.  The possibility of having less money would mean she would have to cut back on integrating in the community. Which may have an impact on her mental health.  Reading through the examples it seems as if people who are paying for their care will end up with no money left for leisure and social times. This will result in them having a boring and lonely existence.  Using different amounts of benefits would have an impact on my daily activities and not being able to have a better quality of life.  Because any spare money is used to pay for a holiday, a carer & any costs. It's the one thing that is looked forward to. rather than being trapped at home. |
| Comments about who would be affected | The proposed change affects the most vulnerable people in society | 22 | Realise you need to save money but strongly disagree as it always affects disabled people & the most vulnerable in society.  You are targeting the most vulnerable people in society no matter how much training I will recieve I will never be able to work and this money will be the only income I will ever receive.  The Conservative Council is asking the poorest, most vulnerable & defenceless people to pay more. |
| Comments about the  cumulative effects of cuts | People have already experienced reductions to existing services and/or had their income frozen | 21 | Disabled people have suffered enough from government cuts already.  I would like to take this opportunity to plead with you not to go ahead with this proposal. He has had cuts to services and finance last year, I.E. D.R.E Automotive payments, Funding for Sheltered Housing Warden and Emergency Alarm System. My wife and I are very worried about what you will withdraw from him in the future.  I think you are taking from a pot that has already been cut greatly and there are PLENTY of other ways to get the money but you prefer the easier route of taken it from the voiceless more helpless parties.  Also you are reducing what for years the minimum income guarantee at a time when some benefits are frozen or being reduced. |
| Comments about the unfairness of the proposal | People with disabilities already experience multiple disadvantages and should not be expected to bear the burden of savings. | 15 | So many people with disabilities will be affected by these proposals, why choose us? Are our lives not hard enough as it is now?  Young adults like XXX with a learning difficulties have a very difficult life, they face obstacles that most of us will never have to face as having a moderate learning difficulty and knowing that youre different in many ways is devastating for the individual.  Disabled people are being discriminated against although its' not their fault they got in. We need support and help as life is tough as it is, don't need the worry. |
| Comments about the role of local and central Government | Local government is having to resolve central Government financial issues | 14 | NCC appear to be basing a proposal on guidelines from government that simply reflect an existing ideological standpoint that young people do not need as much money as an older person.  We should not be trying to save money by penalising those who need care. Council needs to explain to government that more money needs to made available for adult social now that austerity is officially over.  Because the government is forcing councils to reduce benefits for people with disabilities as a result of it's mismanagement of the country's finances. |
| Comments about carers and family | The proposed change will negatively affect carers or family members | 13 | It's almost like you live with your parents they will have to shoulder the shortfall of Norfolk county council.  I would ask you to take into account that for some socail care is for a short day and the rest of the burdon is placed on families who give their time free of charge.  Many young people still live at home with family and this will place an extra burden on families who are already trying to deal with having a young person who is in need of care |

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| **Table 3: Analysis of main comments by people who agree/strongly agree with the proposal in Q2 ‘How far do you agree or disagree with our proposal to take the enhanced rate of the daily living component of the Personal Independent Payment (PIP) into account?’** | | | |
| **Theme** | **Issues** | **Number of comments** | **Comments** |
| Comments about fairness of contributions | People should contribute according to what they can pay | 16 | If necessary I feel it would be fairest to take money from PIP to contribute towards care eg - out of enhancement rate. As this money/benefit is given to help live with disability & carers enables this.  If it is being used for the persons care then this would seem appropriate.  As long as someone has a fair amount to live on there should be no problem |
| Comments which agree with proposal | General agreement | 4 | I think people should only have enough money left to live on - I gets lots of money to live on  Seems to make sense. |

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| **Table 4: Analysis of main comments by people who disagree/strongly disagree with the proposal in Q2 ‘How far do you agree or disagree with our proposal to take the enhanced rate of the daily living component of the Personal Independent Payment (PIP) into account?** | | | |
| **Theme** | **Issues** | **Number of comments** | **Comments** |
| Comments about the cost of living | People with disabilities have additional expenditure that people without disabilities do not have.  People do not have enough money to live on as it is.  The cost of living is already high/rising.  People with disabilities have limited means of raising additional income. | 120 | Being disabled often means a lot of extra costs, like pads, high electric bills due to a lot of laundry, machinery used in your care, special diets and similar which people rely on this money to pay for. It is awarded to the person to pay for their needs not the councils!  People with the enhanced rate of the daily living component were given this for a very good reason, because of their high needs. When a person is totally dependent on others not everything can be covered within their personal budget. Choices have already had to be made as to whether you have carers in to get washed and dressed or you go to a centre.  Cant manage now? taking more off would mean I starve!  Because I can't live with anything less. The money I now get, I can't live with any decrease or anything less that what I'm getting now.  Benefits are already awarded to people with special needs according to their need. I don't feel its up to the council to take benefit which has already been assessed as needed by the recipient. I am not aware that the cost of living has reduced.  Strongly disagree. I think this is a very a bad idea. Benefits now are very low and people can't afford to take a cut. If Benefits Rise N.C.C. take that money off us for are care costs. this means each year we will be sores off, due to inflation. If N.C.C. change the amount of benefit we can keep, it will have a Devestating impact on my life.  I'm struggling now to keep my head above water - This is causing me stress.  It’s not enough to live on.  Homelessness is a real worry as how to continue paying my rent/service charge on limited means, such as Universal credit and paying out more for care, I would be devastated totally, so very much, I know I would cut heating and eating. I can’t have that worry any more , really I can’t.  Because all of my money goes on essential bills food, and taxises as the direct payment stopped covering those as sometime I have more than one medical appointment and the cost is £14 per journey and I am all ready missing some medical appointments because I cannot afford to get there. |
| Comments about the thinking behind the proposal | As people have been assessed for the benefit it should be theirs to keep – NCC should not remove it.  The thinking behind the proposal is flawed. | 81 | The enhanced rate of PIP is given because it is recognised that that persons disability is of a sufficiently evidenced extreme nature that it clearly requires a degree of extra support. How can the council justify taking that money from an individual when it has been identified that that person requires that extra money to support their disability .  You should be supporting us, why give us money to then take it away?  Because the result is that a lot of people, approx 2,400, will be financially worse off and their lives will be negatively affected. For the amount of savings you are expecting the whole proposal is flawed and should be abandoned.  People awarded the higher rate were given it as they needed for other things not to bail the county Council out, when they can’t manage their money properly.  People should be allowed to keep all their benefit its wrong to reduce it. How much more do you want to take from the poor & struggling?  Having care doesn't change the general cost of living, or bills in our home we have to fund. In my experience, when you say additional costs incurred by our disability will be taken into account, they usually aren't because a narrow minded list of what is deemed admissible extras is drawn up by yourselves. This list often (usually) doen't take into account mental health needs.  I really have no idea how you have come to make the decisions as too how much people get to keep to live on. I have looked at your examples and cannot make an sense as to how you have come to your decisions.  Why should YOU be able to have control over people's benefits it is absolutely disgusting you have no right to help yourself to people's benefits, people who have no say in what you are doing, how would you like someone being able to help themself's to your wages you wouldn't would you.  PIP should be protected, if you claim a benefit that the government agree an amount that's what you need, taking an enhanced rate from those that need it the most is immoral and impedes peoples way of life |
| Comments about potential negative effects on people’s wellbeing if the proposal goes ahead. | People will have fewer opportunities to take part in activities that promote positive mental health.  People may become more socially isolated and lonely. | 53 | The enhanced rate is an essential part of a disabled persons income enabling them to make small individual choices to improve their independent living and wellbeing.  I would be come isolated within my community as I would be unable to access schemes to help me go out.  Most claimants of disability benefits are entitled to them. Mental wellbeing caused by these cuts should be forefront on the agenda. any change however small can affect this & cause isolation or stress fir the recipient.  She will not have any money to pay outgoings and do as many supported activities, to improve her social interaction/skills. Not good for her health and wellbeing.  A reduction in benefits for vulnerable people where they can genuinely never be able to recieve income from any other source will become even more destitute and deprived of a quality of life.  Changing the amount of benefits would affect me to fulfil my daily activities not being able to afford a better quality of life.  This will lead to social isolation an more mental illness.  I would not have enough money for my pet cat who keeps me company and helps with mental health issues and relaxation. |
| Comments about the unfairness of the proposal | People with disabilities already experience multiple disadvantages and should not be expected to bear the burden of savings. | 29 | So many people with disabilities will be affected by these proposals, why choose us? Are our lives not hard enough as it is now?  Everybody needs to live a life, not have to worry especially people with learning difficulties - they have a hard time as it is.  Life is already difficult for people on disability benefits. This would just make it worse.  Disabled folk are robbed of enough already. What do we have to pay bills with, we can't get out to earn, that is our bill money! |
| Comments about vulnerable groups of people | Money should not be taken from the most vulnerable in society. | 22 | Vulnerable people should not have money reduced or taken away.  There are many other areas that NCC could save money that reduce payments to very vulnerable people like my son.  So if you get this element it’s because you must be very disabled, why take money from the most vulnerable.  By changing the amount of benefits people can keep you are causing a vunerable section of the population to become even more vulnerable. |
| Comments about the relevance of people’s age to the proposal | People’s disability is more of a factor than age.  Expenditure on household necessities (eg. utilities) is not age related. | 18 | Because it depends on the disability and care requirements rather than persons age.  I don't see why it should be age related. If it costs x to live then it should be the same for everyone. Some would say it costs more if you work as you have travel costs whereas those that don't must pay more to heat homes.  Why should older people keep more money. The younger ones go out more and if they have to pay more they aren't going to be able to do this. |
| Comments about the  cumulative effects of cuts | People have already experienced reductions to existing services and/or had their income frozen | 16 | My daughter has £272 per week to live on, the proposal could take up to £87 per week off her, a 31% cut in her money. Would you accept a 31% pay cut? Note this is on top of the transport cuts that are being made.  Want to remain the same amount. I have already had. £500 yearly of benefits taken away over the last 3 years.  People need benefits to live on. It is not disposable money. There will be extreme hardship to a lot of people if benefit allowances change. This is already vulnerable group who have been cut by DWP already. I think it is morally wrong.  How much more are u going to take? |
| Comments about employment | People cannot work because of their disability.  There are no job opportunities for people with disabilities.  Some people are already over working age so the creation of job opportunities are not relevant | 14 | Many other organisations are trying to help disabled people find work but not everyone can work, and WHAT WORK IS AVAILABLE? Why not have a Remploy factory, for instance.  No point giving people more, then to take it away. I am 61 and do not need training in a job as I am unable to work.  Looking for a job is completely out of the question but I would love a job If I had different physical situation. The money I receive is the only income I have.  As I have no plans to work due to AGE 63 and health issues. The changes will not be advantages to myself. So as I am unable to work and cuts in my weekly MIG you will possibly carry out, does not help me. |
| Comments about carers and family | The proposed change will negatively affect carers or family members | 14 | For our particular situation the ‘income’ my son receives is only just covering his needs. Taking a percentage of that places more financial pressure on the care giver.  I am a pensioner myself with health problems , my son had 6 hours care from you, I care for him the other 18 hours and all weekend. My son is 40 and I am still caring for him , this will affect our life terribly, no treats, outings with friends etc.  If you are disabled enough to receive this payment then you need extra help and this is not all met by Adult Social Care we need help from family members as well who would not be able to support us if we did not have the money to support them!. |
| Comments about the role of Central and/or Local Government | Government bodies to tax not cut / budget better | 13 | If the Govt wants councils to help people get into JOBS then the money should come from Central Taxation & not the poorest, disable people in the country to take benefit which has already been assessed as needed by the recipient.  This payment is nothing to do with Norfolk County Council.  everyone has to tighten their belts Tis is the only social interaction for many Disabled people. DO NOT penalise them for the government errors in Budgeting. |

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| **Table 5: Analysis of main comments about Q3 ‘If the council went ahead with these changes how, if at all, would it affect you?’** | | | |
| **Theme** | **Issues** | **Number of comments** | **Comments** |
| Comments about the effect of reduced income, or of futher reductions to income | Existing low income / no spare money  People would be unable to buy essentials (housing, utilities, health)  People’s physical and mental health would suffer. | 198 | My mother struggles as it is. If you take any more money from her, that DIRECTLY impacts her health. She needs heating, she needs a specialised diet. Her money has been pruned continuously every year as it is. You don't seem to appreciate, either, that PIP is a points system. 'Enhanced' rates are not a catch all. People will be caught up in this, who CANNOT EVER work. Who live on the breadline as it is - even with my financial support.  I would not afford to heat my home I have a lung condition and need to keep warm or I get pneumonia I would not afford to eat either!  I use my care component of PIP to pay for many things i need because of my disability and i can not get funding for such as certain medications not paid for by the health service and treatments such as massage which helps with mobility. Also extra heating due to my p There is also equipment to help me which i have used my PIP care money to purchase such as a helping hand used to reach and also to pick items up off the floor etc Alarm system for keeping safe which social services no longer funds etc  I barely get enough to survive on now, so the changes would affect me.  It would definitely affect me. My husband is my full time carer so is unable to work. He is paid £64 a week for roughly a 126 hour week. We are trying to support ourselves and our children and be as independent as possible. I work very hard to help myself and live a decent quality of life. This means trying different therapies and treatments (most of the time at my own cost). Life is already very difficult for us as a family, finances are very tight. I also have many other costs due to my illness. Putting me under more financial pressure just might be the straw to break the camels back. I'm only just keeping my head above water now, if my mental health deteriorates further it will end up costing the council when i'm hospitalised, in need of mental health support and other services to help me and my family. This would be so counterproductive.  It would affect me a lot, it would mean giving up a course that helps and supports me with certain aspects of my mental Health. I already struggle to buy the correct "Free from" food I'm supposed eat due to health conditions simply because I cannot afford it. I feel the council charge enough with Bedroom tax and council tax payments rises, why do they need to take money from people who already struggle.  The person I care for will have a reduction in their disposable income of 20%, but no improvement in the services they receive from the Council. Given that their income will be 20% lower than the MIG currently set by the government, this means almost certainly that they will be below the poverty threshold- directly as a result of the Councils action. |
| Comments about reduced wellbeing | Risk of poorer quality of life.  Risk of increased social isolation.  Risk of increased loneliness. | 139 | I am currently able to leave my house once a week using [Name] Door to door service to go to physiotherapy. if these changes were to go ahead I would not be able to do this and I would be house bound my entire life.  Their would be less money for me to do the things that help me become more sociable and learn life skills and keep fit. This would effect my wellbeing as I could not afford to go out. In effect you would be institutionalising me.  My quality of life would deteriorate.  These proposals which would limit quality of life, even not being able to afford a trip to the cinema or petrol to go shopping in our rural environment, would create mental health problems and behaviour that is difficult to handle from some with a learning disability who does not understand or has routine disrupted.  This would mean I would be hit twice by having a lower MIG and the enhanced rate of my PIP being taken away. This would result in me losing £65 80 a week leaving me less able to access many of the activities with my peers, as I need a carer to support me constantly. This would have a knock on effect of me becoming more isolated and lonely. This is not good for a young person who is already limited to suitable activities.  Simply.... By paying more for my non residential care I would not be able to do the other things outside of that...... This things help me lead an independently life as possible and give me some purpose... Not doing them would mean I would feel isolated... My mum and dad help me a lot in trying to lead a normal life.... Often giving up there own time, lifestyle and work, so I can have mine.... The proposed cuts don't just effect me... It effects my mum and dad and if they can't cope I would probably go to care.. How much more would that cost you..  Daughter will be stuck at home and will not be able to attend as many supported activities - daughter also pays for her careers to attend = less money. (1-2-1 support).  If the proposed changes went ahead and I was charged anymore for my day care I may be unable to afford to go to the [name] which has been my lifeline for the last 20yrs when I had a severe stroke which left me parylised and then became a widow shortly after [Name] have helped me through all of this & if I couldn't go you will have taken everything away form me can you imagine how that could feel?  Everyday living, getting around, meeting friends, leading to loneliness & the associated mental health issues of being disabled & vulnerable.  You would MAKE ME isolated no Access to the Cummity & left on my own.  I would struggle to meet my expenses and maintain my wellbeing as my social care doesn't meet all of my needs despite my assessment saying it does  I would have less money to spend on the basic living style that I have now. My life style would be more restricted that it is already. I would become more socially isolated and my wellbeing would be affected.  Financially not being able to fulfil my daily needs and different activities. Not being able to integrate within the community.  I would not be able to afford the specialist trauma counselling I currently pay for with my benefits. I would not be able to afford the nutritional supplements that help to keep me as well as possible. Life would close in around me again and I would have fewer opportunities to socialise. I would feel under financial pressure which affects my mental +physical health. I hope with counselling my mental and physical health will improve. I self - fund because it is not available on the NHS + feel I am making good use of my benefits to make the best of things + get as well as possible. |
| Comments about people reducing their care | Unable to pay for care  Caring responsibilities will be taken up by family members.  Respite care for carers would be reduced. | 40 | Would have to think about stopping the care.  Would have to choose between heating/eating and care services.  We are two pensioners looking after our son in our home if he had to pay this money we would have to give up the care from conal and care for our son without help. we are not well off ourselves and we want to give our son as good a life as we can we couldn't do this without his money the older we get the harder it gets  I would lose my carer as I've been told my contribution is being increased. I CANNOT afford the new contribution amount so when it comes into force - I will be giving my carer her 4 weeks notice!!  On a scale from 1 to 10 9 It would cause a knock on effect. How it is currently I can continue day services which are an important part of my day, changing would mean cancelling day services putting people out of work, for them to then have to seek benefits for their income.  We would not be able to continue having help which would mean my husband would have to pick up the shortfall and not get a break at all which I'm sure would be depermental to his health and end up with two people needing care instead of one We would not be able to continue having help which would mean my husband would have to pick up the shortfall and not get a break at all which I'm sure would be depermental to his health and end up with two people needing care instead of one.  If these proposals go ahead, many would not be able to afford any form of respite care for the unpaid carer. This in turn could and would lead to many disabled people being left alone, with no care in any way shape or form. This could lead to falls , hunger and starvation which would be unacceptable. |
| Comments about the effect of the proposed change on carers | Continuing to care for people will become more difficult | 32 | My 23 year old daughter goes to a day centre which she loves every day.She only receives respite one weekend a month.I work around her hours for my own sanity.This means I receive no carers allowance.If she were to go into residential care it would certainly cost a whole lot more.If you keep making cuts more people will go into care!  We would not be able to continue having help which would mean my husband would have to pick up the shortfall and not get a break at all which I'm sure would be depermental to his health and end up with two people needing care instead of one.  We are two pensioners looking after our son in our home if he had to pay this money we would have to give up the care from conal and care for our son without help. we are not well off ourselves and we want to give our son as good a life as we can we couldn't do this without his money the older we get the harder it gets. |

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| **Feedback received outside of the consultation period**  We received 34 responses outside of the consultation period. Of those who answered the question about our proposal to use different rates of minimum income guarantee 1 strongly agreed, 3 agreed, 2 neither agreed not disagreed, 5 disagreed, 16 strongly disagreed and 2 did not know.  When it came those responding to the question about our proposal to take Personal Independence Payments into account, 1 strongly agreed, 2 agreed, 1 neither agreed nor disagreed, 5 disagreed, 17 strongly disagreed and 3 did not know.  The key issues and concerns closely matched those responding during the formal consultation period, as did the impacts that people listed such as increased costs, decreased wellbeing and potential for people to reduce their care. The impact on carers also featured, with comments such as:  “People are only getting a minimum amount of care as it is. Losing money will mean they will cut care payments to carers. Therefore more strain on relatives that will make them ill, therefore more actual care needed.”  Of those responding to our question on what extra support people felt they would need, 3 said ‘Help to find work’, 11 said ‘Help with claiming benefits’ 6 said help with managing money and 3 selected ‘other’.  People also commented on both the consultation materials and the consultation process:  “ …targeting the vulnerable and not telling them what is going to happen to them or what the future holds in an appropriate timescale with visiting social workers on a one to one basis is wrong.” |