

Public Document Pack



Helen Barrington

Director of Legal and Democratic
Services
County Hall
Matlock
Derbyshire
DE4 3AG

Extension

Alisha.Parker@derbyshire.gov.uk

Direct Dial 01629 538324

Ask for Alisha Parker

PUBLIC

To: Members of Improvement and Scrutiny Committee - People

Tuesday, 30 August 2022

Dear Councillor,

Please attend a meeting of the **Improvement and Scrutiny Committee - People** to be held at **2.00 pm** on **Wednesday, 7 September 2022** in Committee Room 1, County Hall, Matlock, DE4 3AG, the agenda for which is set out below.

Yours faithfully,

A handwritten signature in black ink that reads 'Helen E. Barrington'.

Helen Barrington
Director of Legal and Democratic Services

AGENDA

PART I - NON-EXEMPT ITEMS

1. Apologies for absence
To receive apologies for absence (if any)
2. Declarations of Interest
To receive declarations of interest (if any)
3. Minutes (Pages 1 - 4)

To confirm the non-exempt minutes of the meeting of the Improvement and Scrutiny Committee – People held on 20 July 2022.

4. Public Questions (30 minute maximum in total) (Pages 5 - 6)

(Questions may be submitted to be answered by the Scrutiny Committee, or Council officers who are attending the meeting as witnesses, on any item that is within the scope of the Committee. Please see the procedure for the submission of questions at the end of this agenda)
5. Consultation and Engagement of the Learning Disability Day Opportunities Service Redesign (Pages 7 - 70)
6. Results of the consultation on proposals for the future provision of the assistive technology monitoring service for community alarm only clients (Pages 71 - 116)
7. SEND Strategy (To Follow)
8. Work Programme (Pages 117 - 124)

Public Document Pack Agenda Item 3

PUBLIC

MINUTES of a meeting of **IMPROVEMENT AND SCRUTINY COMMITTEE - PEOPLE** held on Wednesday, 20 July 2022 at Council Chamber, County Hall, Matlock, DE4 3AG.

PRESENT

Councillor T Kemp (in the Chair)

Councillors S Burfoot, C Dale, R George, P Rose, D Taylor, J Wharmby and A Sutton (substitute Member).

Also in attendance was Councillor N Hoy.

Apologies for absence were submitted for Councillors J Woolley and A Griffiths.

18/22 DECLARATIONS OF INTEREST

There were no declarations of interest.

19/22 MINUTES

RESOLVED:

The minutes of the meeting held on 26 May 2022 were confirmed as a correct record and signed by the Chairman.

20/22 PUBLIC QUESTIONS (30 MINUTE MAXIMUM IN TOTAL)

There were no public questions.

21/22 LEAVING CARE SERVICE

Smruti Mehta, Assistant Director Specialist Services, Linda Dale, Director of Performance, Quality and Partnerships, and Claire Connelly-Weston, Senior Team Manager – Leaving Care Service, attended the meeting to provide the Committee with an update on the Leaving Care Service.

The Service had previously been commissioned out of the Authority but, had been brought back in-house in 2019. Ofsted had inspected the service in October 2021 and many positives had been identified.

There was a focus on relationship-building and information sharing to ensure an effective transition to the leaving care service at 18, but also on delivering life skills. The Inspectors had seen many positive and creative examples of direct work being undertaken by leaving care workers.

Effective partnership working at a strategic level was beginning to have a positive impact on health provision for care leavers. Health partners had embraced the role of being a corporate parent and were developing initiatives that would support care leavers.

Risks to individual care leavers were identified well; when risks had escalated, including risks of exploitation, Leaving Care Safety Panel meetings had demonstrated good consideration of risks, needs and actions to reduce risk.

Claire Connelly-Weston highlighted the development work that had been undertaken, in particular with prison work. A space had been created in Nottingham HMP to enable care leavers to have direct visits with their leaving care workers and supporting transition from custody. There was also the opportunity for care leavers to attend evening classes run by the prison, though this provision had been curtailed during the Covid-19 pandemic.

Drop-in groups had been established in the north and south of the county for parent-to-be groups and baby groups with peer support; along with Chesterfield Football Group and a cooking group at Long Eaton.

With regard to partnership work and development, the committee was informed of the Emotional Wellbeing Offer to Care Leavers and Leaving Care Workers, the Care Leavers discounted council tax and the Severn Trent Water 70% discount which was launched on 1 July 2022.

Members of the committee raised issue relating to exploitation, the number of care leavers who were in bed and breakfast accommodation and requested statistics on care leavers who were currently homeless.

There were 6 or 7 young people currently in bed and breakfast accommodation and this situation was constantly monitored. The service was ensuring that these young people would not be moved unnecessarily, particularly during the transition to university or further education.

The Chairman thanked the officers for their most informative presentation, adding that the passion and support provided was commendable.

The officers would return to a future meeting of the committee to provide details of the outcomes that had been achieved. It was suggested that two care leavers who were now working as social workers be invited to attend to inform the Members of their journey and experiences.

22/22 SHORT TERM SERVICES

Linda Elba-Porter, Service Director Adult Social Care and Tanya Henson, Assistant Director Adult Social Care, attended the meeting to present a

report on the offer of Short Term Services (Homecare) for Derbyshire residents. Short Term Services offered an opportunity for local residents to restore all or part of their independence with daily living tasks following an admission into hospital or a crisis in the community. The offer supported people to remain in their own and local communities.

In 2019, the Authority had established a different way of working to support residents of Derbyshire to achieve the most independent outcome possible. Starting in 2020, this way of working had been piloted before it was rolled out countywide in 2021 and Adult Care was committed to maintaining people in their homes and communities whenever possible. An example and timeline of the process was presented.

Early 2022, the demand for the service had increased and a lack of long term homecare had had an impact. Recruitment and retention had also emerged as an issue for the short term service. There were local and national workforce challenges that impacted delivery

Therefore, the purpose of the current review had been to identify opportunities for positive change, which would result in local residents receiving a consistent service that recognised local variation, the expertise of partner agencies and utilisation of voluntary and community support. The focus would be to generate increased capacity so that more local people could benefit from the service

It was acknowledged that during the pandemic many care workers had had to upskill quite quickly in order to deal with end of life care. Members discussed whether this topic was appropriate for further consideration at a scrutiny committee.

RESOLVED:

That the Committee notes:

- a) The offer of the Short Term Services and the benefits for local residents who were either leaving hospital or experiencing a crisis to remain in their own homes; and
- b) The further changes planned for the service.

23/22 COMMITTEE WORK PROGRAMME 2022-23

The Committee's work programme was presented and members were given the opportunity to make suggestions to possible agenda items for the remainder of the municipal year 2022-23.

Consideration would be given to bring the Early Years' Service item forward following the Government's recent proposal on Family Hubs.

RESOLVED:

That the Committee notes the 2022-23 work programme.

Procedure for Public Questions at Improvement and Scrutiny Committee meetings

Members of the public who are on the Derbyshire County Council register of electors, or are Derbyshire County Council tax payers or non-domestic tax payers, may ask questions of the Improvement and Scrutiny Committees, or witnesses who are attending the meeting of the Committee. The maximum period of time for questions by the public at a Committee meeting shall be 30 minutes in total.

Order of Questions

Questions will be asked in the order they were received in accordance with the Notice of Questions requirements, except that the Chairman may group together similar questions.

Notice of Questions

A question may only be asked if notice has been given by delivering it in writing or by email to the Director of Legal Services no later than 12noon three working days before the Committee meeting (i.e. 12 noon on a Wednesday when the Committee meets on the following Monday). The notice must give the name and address of the questioner and the name of the person to whom the question is to be put.

Questions may be emailed to democratic.services@derbyshire.gov.uk

Number of Questions

At any one meeting no person may submit more than one question, and no more than one such question may be asked on behalf of one organisation about a single topic.

Scope of Questions

The Director of Legal Services may reject a question if it:

- Exceeds 200 words in length;
- is not about a matter for which the Committee has a responsibility, or does not affect Derbyshire;
- is defamatory, frivolous or offensive;
- is substantially the same as a question which has been put at a meeting of the Committee in the past six months; or
- requires the disclosure of confidential or exempt information.

Submitting Questions at the Meeting

Questions received by the deadline (see **Notice of Question** section above) will be shared with the respondent with the request for a written response to be provided by 5pm on the last working day before the meeting (i.e. 5pm on Friday before the meeting on Monday). A schedule of questions and responses will be produced and made available 30 minutes prior to the meeting (from Democratic Services Officers in the meeting room).

It will not be necessary for the questions and responses to be read out at the meeting, however, the Chairman will refer to the questions and responses and invite each questioner to put forward a supplementary question.

Supplementary Question

Anyone who has put a question to the meeting may also put one supplementary question without notice to the person who has replied to his/her original question. A supplementary question must arise directly out of the original question or the reply. The Chairman may reject a supplementary question on any of the grounds detailed in the **Scope of Questions** section above.

Written Answers

The time allocated for questions by the public at each meeting will be 30 minutes. This period may be extended at the discretion of the Chairman. Any questions not answered at the end of the time allocated for questions by the public will be answered in writing. Any question that cannot be dealt with during public question time because of the non-attendance of the person to whom it was to be put, will be dealt with by a written answer.



FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

IMPROVEMENT AND SCRUTINY COMMITTEE - PEOPLE

WEDNESDAY 7 SEPTEMBER 2022

Report of the Executive Director – Adult Social Care & Health

Consultation and Engagement of the Learning Disability Day Opportunities Service Redesign

1. Purpose

1.1 A report was presented to Cabinet on 10 March 2022 which sought approval to launch a 12-week consultation on two options for the future delivery of day opportunities for people with a learning disability and/or who are autistic. Following Cabinet approval, the consultation took place between the 28 March 2022 and 19 June 2022.

1.2 The purpose of this report is to inform the Scrutiny Committee of the results of the public consultation and provide an opportunity for the Scrutiny Committee to submit comments to Cabinet for consideration in making its decision.

2. Information and Analysis

2.1 Our aim is to support Derbyshire people with a learning disability and/or who are autistic to live the lives they want to live – safe, fulfilled lives in their local communities.

2.2 Feedback from people with a learning disability and / or who are autistic who we support told us they wanted to live safe, fulfilled lives as independently as possible in their communities with equal access to opportunities and services such as social and leisure, housing, jobs, health and transport. The proposals are also informed by the recent White Paper 'People at the heart of care' which sets out a vision for adult social care that has people and families at its heart.

2.3 Our emphasis is on future planning for independence including helping people to gain valuable daily living skills and confidence so they can explore options for how they might want to live and be supported.

2.4 By working with people and their families, we aim to help them to achieve their ambitions, progress and develop, leading to:

- Better informed choice
- Increased employment rates
- Increased community and digital inclusion
- Effective contingency planning

2.5 Alongside the principles of the Care Act 2014, the recent White Paper 'People at the heart of care' is driven by people with experience of Adult Care and promotes the approach we wish to take in Derbyshire in terms of person-centred support, co-production, independence and enabling people to live as part of their community.

2.6 The options for consideration within the Cabinet report were:

- **Option one – new model**

People are choosing alternatives to DCC day centre provision either for part or all of their services. The proposal is to support more people within the community to achieve greater independence and reduce the amount of building based traditional day service from DCC. Those with complex needs could access building-based day centres where appropriate.

Enhancing the Community Connector service to help support people with learning disabilities and/or who are autistic to use all opportunities available to them; this may include travel training, employment opportunities, social activities, direct payments, private voluntary and independent provision, voluntary work, digital support, relationship building, community groups, education, learning and work experience. Increasing them from 18 to 25 full time connectors as well as an additional manager.

Introducing a new Support Service Team, who would work alongside Community Connectors to provide more intensive support to people and their families for up to two years.

Dynamic Commissioning. Being proactive in identifying gaps in provision for day opportunities. Working closely with the private, voluntary, and the independent sector to encourage the development of creative ideas.

Encouraging micro providers and people using pooled budgets through direct payments to access local, shared support where appropriate.

Discontinue using eight day centres in a three phased approach and consolidate the remaining building-based day services across four centres:

- Alderbrook (High Peak)
- No Limits (Chesterfield)
- Outlook (Erewash)
- Parkwood (Amber Valley)

- **Option 2 – existing offer**

The alternative to the proposed new model is continue with the current twelve traditional building-based services.

2.7 Appendix 2 has further details of the proposals

2.8 The consultation undertaken incorporated current and previous attendees and their carers including the carers of those young people with Special Educational needs, together with private and voluntary organisations offering day care across Derbyshire.

2.9 Colleagues from the Adult Care Stakeholder Engagement and Consultation Team arranged 9 face to face meetings (two were subsequently cancelled due to lack of demand) and 5 virtual meetings (1 was cancelled due to lack of demand). These were hosted by the Service Director of Adult Social Care Transformation and Partnership, and participants were given the opportunity to comment on the proposals under consultation.

2.10 People were also directed to Derbyshire County Council's Consultation webpage which gave information about the proposals and links to either the standard on-line questionnaire or an easy read version.

2.11 The consultation used quantitative and qualitative approaches to gather people's views about the proposals. Officers enabled as many people as possible to take part, by offering a range of ways in which they could share their views:

- Current attendees and previous attendees with a learning disability and / or who are autistic together with their carers received an introductory letter detailing the arrangements for undertaking the consultation and the proposals for consideration

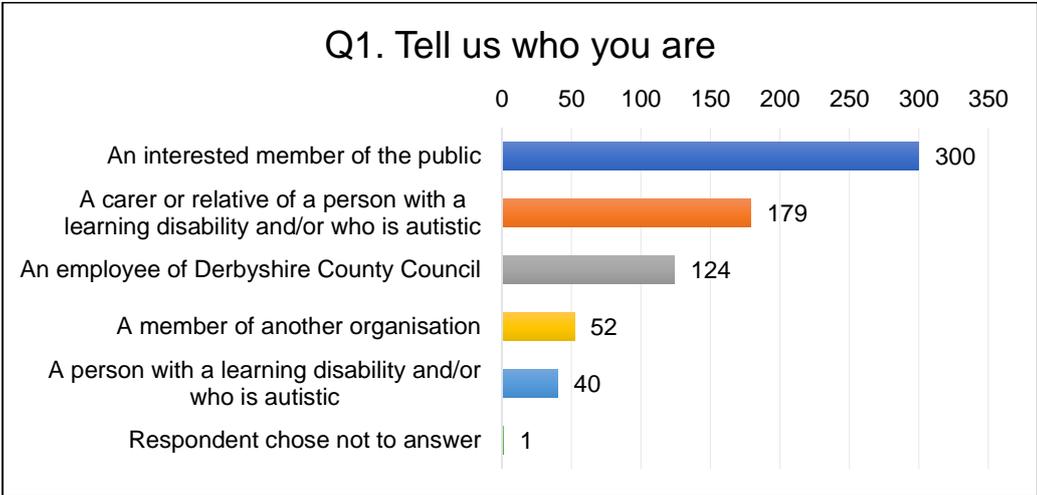
- Carers of young people identified as having Special Educational Needs and Disability (SEND) were sent a letter detailing the consultation and the ways in which they could share their views
- Private and voluntary sector day care providers in Derbyshire were sent an email informing them of the proposals and ways to take part in the consultation
- Offering the questionnaire in different formats, such as an easy read version if this was more appropriate
- Completing the questionnaire online (both in easy read format and standard version)
- Requesting a paper copy of the questionnaires via the Stakeholder Engagement and Consultation Team and sending in comments using the standard or easy read postal questionnaire
- Opportunity to write to the Council via a letter or a dedicated email address
- Telephone interview for those people having difficulty completing the questionnaire
- Being signposted to further information on the Derbyshire County Council website www.derbyshire.gov.uk/learningdisabilityredesign which gave an outline of the proposals and the ways in which people could share their views
- Media releases which were issued at the start and during the consultation encouraging people to take part and these were published on the county council's website. We also promoted the public consultation on a variety of corporate channels.
- Virtual meetings using Microsoft Teams. 4 virtual public meetings took place at various times of the day/early evening to enable as many people as possible to share their views and ask questions about the proposals
- Current day centre attendees and their carers were invited to face to face meetings. There were 7 meetings across Derbyshire giving people an opportunity to ask questions and express their views to the Service Director, Group Manager and members of the Stakeholder Engagement and Consultation Team.

2.12 The results of the public consultation have been collated and is now available by way of Appendix 3 and summarised in this Report.

2.13 There were three distinct approaches to the analysis of the qualitative material from the public consultation.

- a. Information gathered during face to face and virtual meetings
- b. Information gathered from letters, emails, and telephone calls
- b. Qualitative information contained in the online and paper questionnaires, both the standard and easy read versions.

2.13 Below is a summary of people responding



2.14 In total 2269 comments were received about the consultation. SECT themed the responses from all qualitative information, from the questionnaires, letters, emails, telephone calls, and meetings. Overall, 667 standard questionnaires and 29 easy read versions were completed. 244 people agreed with the proposal to redesign the offer, 429 disagreed with the proposal to change the offer. This was across the range of respondents including the general public, staff, carers, and people with a learning disability and/or who are autistic.

2.15 The Adult Care Stakeholder Engagement and Consultation Team analysed the responses, please see appendix 3 for detailed information.

The main themes are highlighted below:

Agreement with proposal

Some respondents agreed with the proposal to retain the four building based offer; to increase the community connectors and develop a Support Service Team. Within these numbers a smaller number agreed but with some reservations. These generally reflected a view in favour of retaining all twelve of the centres for those still wishing to attend, including those wishing to return to them, but that these should continue to be run alongside the proposals to increase the number of Community Connectors and the development of a Support Service Team.

Alternative suggestion

Some respondents utilised the open text boxes to make alternative suggestions to the proposals.

Barriers to change

Some respondents wished to inform of the issues they as carers and/or people with a learning disability and /or who are autistic would face, rendering the first proposal unviable for them.

Consultation

Some of the respondents indicated that they felt that the consultation was not inclusive enough.

As part of the consultation, we wrote to everyone that currently attends and have previously attended a Derbyshire County Council Day Centre. We also promoted the survey with carers of young people with special educational needs and the private, voluntary, and independent sector. The survey was on our website with standard and easy read versions available. We held face to face consultation meetings in each locality and virtual meetings including evening sessions for those unavailable during the day.

Covid

The consultation responses included those where there was some lack of clarity as to the proposals laid out in the Cabinet Report in contrast to the experiences that some individuals had with service provision changes and disruption during lockdown with Covid restrictions.

During the consultation meetings we ensured that any issues which related to covid restrictions in contrast to the current situation were clearly identified as separate issues before discussing the two options for future delivery of day opportunities being consulted upon and seeking views on this.

Disagree with the proposal

Some respondents simply disagreed with all the proposals.

Finance

Some respondents felt that these proposals did not consider the financial implications for the County Council going forward.

Future viability

Some respondents were concerned that should the redesign be agreed, this would bring into question the long-term viability of the four remaining centres.

Impact on people with a learning disability and / or who are autistic and carers

Participants told us of the negative impact that these proposals would have on them as carers and/or people with a learning disability and / or who are autistic. It was clear however that a proportion of the impact was supposed and was based upon the experience people had during lockdown with Covid restrictions. Further and as with impact on carers, some were more specific in reporting the impact on physical health, again supposed, and experienced during Covid.

Impact on colleagues

The consultation undertaken did not directly involve colleagues working for the Council, however as members of the public, such individuals have a right to voice an opinion on the proposals being consulted upon. Some participants identified themselves as colleagues working in day centres. However, some used the opportunity not to voice opinions on the proposals but rather talk about the impact the proposals would have directly on them as a colleague.

Further there was some concern within responses received from other participants as to what would happen to Council employees if the proposals were approved in due course.

Lack of information

Some participants reported feeling unable to answer some questions as they had not been given enough information to make an informed response.

It was important that we sought feedback during the consultation and listened to people's ideas, views, and suggestions to incorporate in future decision making.

We have gained very valuable feedback during the consultation process. All the responses received, and data obtained will be carefully considered as part of a comprehensive and robust Equalities Impact Assessment which will be prepared as part of the decision making process.

Lack of other opportunities

Some respondents reported that in their experience and understanding, there was not enough and good alternatives in the PVI to make the proposal of the redesign viable.

Length of support

Some respondents, in particular those who have already had experience of being supported by the Community Connector Service, felt that 12 weeks was not an adequate length of support.

Loss of community resource

Some respondents reported concern for the loss of a community resource, in particular where garden centres were part of the day service. We have also heard during the consultation how important community space is and the garden centres have scope to provide this. Whatever the decision is from Cabinet regarding the future of day services, we will be looking at how we could support community groups to utilise the garden centres and support links, friendships, and collaboration. We will continue to work to ensure that the garden centres remain part of the local community, accessible to all including people with a learning disability and/or who are autistic.

Loss of social support

Some respondents spoke about the social support that both people with a learning disability and / or who are autistic, and their carers received from peers and colleagues whilst attending the day centre and feared that this would be lost under the proposal to close some of the centres.

NAQ – Not answering the question

There were many responses in each of the open text boxes on the questionnaire that did not directly answer the question. SECT analysed the responses and coded them as a response to the consultation rather than a response to a question. However, there were some responses that were unrelated to the question or context of the consultation and so have been simply coded as Not Answering the Question.

Negative previous experience

Some respondents based their feedback and comments on negative previous experiences. Falling under two categories. 1) Experience of being supported through the Community Connector Service, and 2) Experience of lockdown and covid restrictions.

Reduction in service

Some participants reported already having seen a reduction in service and this having a negative impact. Fearing any proposal to close would lead to a permanent reduction for them.

Regardless of the consultation we have been assessing people's needs to ensure we are offering them a service which they want, and which suits their needs. These reassessments are not to reduce people's support, the aim was to complete a person-centred assessment and outcome focussed support plan. This involved exploring people's aspirations such as meaningful relationships, increased independence, and housing needs. We have pledged to review support plans for everyone that currently attends a day centre following the outcome of the Cabinet decision.

Respite for carers

Carers, clients, and others reported the importance respite plays in the lives of carers and told us that day centres are an integral part of respite.

We acknowledge and appreciate the needs and views of carers, and these are taken into account in the individual assessment and support planning. However, respite for carers can take different forms and needs to be balanced with the outcomes for people with a learning disability and/or who are autistic.

Travel implications

Respondents were concerned that should the proposal to close day centres be approved, there would be travel implications with clients having long journeys and distances to travel to access day opportunities. Further comments described poor transport links that exist in parts of the county.

2.16 The next steps are for Cabinet to consider the responses from the public consultation and the Equality Impact Assessment to decide on future delivery. This is an opportunity for Scrutiny Committee to make comments for the Cabinet to consider. The Scrutiny Committee should be mindful that the EIA, which has yet to be produced, will play a role in the decision making as it must be given due regard by Cabinet.

3 Consultation

- 3.1 There is no requirement in terms of consultation for Scrutiny Committee. The public consultation is outlined above, and further details can be found in Appendix 3.

4 Alternative Options Considered

- 4.1 Not applicable

5 Implications

Not Applicable

6 Background Papers

- 6.1 None

7 Appendices

- 7.1 Appendix 1 - Implications
7.2 Appendix 2– Cabinet Report 10th March 2022: Learning Disability Day Opportunities Service Redesign
7.3 Appendix 3 –Consultation Report on the Future of Day Opportunities redesign in Derbyshire

8 Recommendation(s)

That Committee:

- a) Notes the responses to the public consultation
- b) Notes that all such matters will be considered and included within a comprehensive and robust Equality Impact Analysis which will be incorporated within a future Cabinet Report which will be presented in due course and further notes Cabinet will fully consider the EIA as part of its decision making.
- c) Considers responses to the Public Consultation and provides comments to Cabinet and the Equalities Impact Assessment for consideration when making its decision on the future delivery of the proposals for day opportunities for people with a learning disability and / or who are autistic.

9 Reasons for Recommendation(s)

- 9.1 An Equality Impact Analysis is being prepared to reflect the issues raised during the consultation process, which will incorporate comments from the Scrutiny Committee.
- 9.2 The Cabinet will need to have regard to the comments from scrutiny thereof in any decision making.

Report Author: Linda Elba-Porter

Contact details: Linda.Elba-Porter@derbyshire.gov.uk

Implications

Financial

1.1 Not applicable for Scrutiny Committee

Legal

2.1 Not applicable for Scrutiny Committee

Human Resources

3.1 Not applicable for Scrutiny Committee

Information Technology

4.1 Not applicable for Scrutiny Committee

Equalities Impact

5.1 Not applicable for Scrutiny Committee

Corporate objectives and priorities for change

6.1 Will be included within any future Cabinet Report

Other (for example, Health and Safety, Environmental, Sustainability, Property and Asset Management, Risk Management and Safeguarding)

7.1 Not applicable

FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

CABINET

10 March 2022

Report of the Executive Director for Adult Social care and Health

**Learning Disability Day Opportunities Service Redesign
(Adult Care)**

1. Divisions Affected

1.1 County-wide

2. Key Decision

2.1 This is a Key Decision because, if the proposed changes are made, it is likely to:

- a) result in the Council incurring expenditure which is, or making savings which are, significant having regard to the budget for the service or function concerned; and
- b) be significant in terms of its effect on communities living or working in an area comprising two or more electoral areas in the County.

3. Purpose

3.1 Cabinet is asked to approve the undertaking of a public consultation, including consultation with the current Learning Disability day service users, on two options concerning the future delivery of day opportunities for people with a learning disability and/or who are autistic.

4. Information and Analysis

- 4.1 This report outlines two options for consultation on the future delivery of day opportunities for people with a learning disability and/or who are autistic. This does not affect older adult's day services and all references to day services throughout this report relate to those services for people with a learning disability and/or who are autistic.

Background and context

- 4.2 Our aim is to support Derbyshire people with a learning disability and/or who are autistic to live the lives they want to live – safe, fulfilled lives in their local communities.
- 4.3 The proposed new approach is based on feedback from people who we support who told us they wanted to live safe, fulfilled lives as independently as possible in their communities with equal access to opportunities and services such as social and leisure, housing, jobs, health and transport. The proposals are also informed by the recent White Paper 'People at the heart of care' which sets out a vision for adult social care that has people and families at its heart.
- 4.4 Our emphasis is on future planning for independence including helping people to gain valuable daily living skills and confidence so they can explore options for how they might want to live and be supported.
- 4.5 We will continue to involve those with learning disabilities and/or who are autistic, their families and carers in creating solutions that reflect their individual strengths and needs.
- 4.6 This will be around sustainable models of support that recognise people with disabilities have the potential to be an active part of their community.
- 4.7 By working with people and their families, we aim to help them to achieve their ambitions, progress and develop, leading to:
- Better informed choice
 - Increased employment rates
 - Increased community and digital inclusion
 - Recognition that people are the experts of their own experience
 - Effective contingency planning
- 4.8 Alongside the principles of the Care Act 2014, the recent White Paper 'People at the heart of care' is driven by people with experience of Adult

Care and promotes the approach we wish to take in Derbyshire in terms of person-centred support, co-production, independence and enabling people to live as part of their community.

- 4.9 In Spring 2020, a team of Social Work practitioners (The Hub) started to reassess all people with a learning disability and/or who are autistic who attended a Council-run day centre prior to the COVID-19 pandemic.
- 4.10 Since then, the Hub Team has worked with everyone living in the community who previously attended a Council day service. The Hub has completed outcome focussed assessments, exploring a range of opportunities for people to build support plans that provide a variety of activities (a blended support plan).
- 4.11 Examples of activity that people are now undertaking include voluntary work, direct payment support, work placements, digital inclusion, private, voluntary, and independent sector day opportunities and inclusion into community groups. One family member of a person who previously had a five day building-based service and is now receiving alternative opportunities that maximise her independence and involvement in the community in the form of a work placement in a local children's nursery said, *"the opportunities being provided are really good, it feels like she is finally leaving school after all these years, she is moving into the world"*.
- 4.12 A summary of the outcome focussed assessments completed since 2020 is as follows:
- **190 people** are now accessing alternative activities to a Derbyshire County Council day centre through the form of a blended support plan approach.
 - **28 people** are now accessing some alternative activities alongside an average of two and a half days attending a Derbyshire County Council day centre.
 - **111 people** have returned to a Derbyshire County Council day centre, although capacity remains constrained due to the current infection control procedures due to COVID- 19.

New Model – Option One

- 4.13 Our findings from the assessment process referred to above show that two thirds of people who historically attended a Derbyshire County Council (DCC) day centre have chosen completely, or in part, alternative opportunities and activities – moving away from a DCC building-based traditional service. We have very little demand for a

building-based service for new people coming into Adult Care such as through transition from Children's Services to Adult's Services. Currently there is no waiting list for new people to attend the day centres, although we do recognise that we have people currently attending who would wish to increase their number of days. Young people and their families want to be included in communities, live as independent a life as possible and seek employment opportunities. We are confident that we can support people to fulfil their aspirations and be active participants in their communities with the following model of working. We know that for some people with complex needs a building-based service needs to be part of their care and support plan. This would be determined through an outcome focused assessment under the Care Act 2014.

- 4.14 **Enhancing the Community Connector Service** we have a team of 18 full-time community connectors who cover the county and support people with a learning disability and/or who are autistic to use all opportunities available to them. These can include travel training, employment opportunities, social activities, direct payments, private voluntary independent sector, voluntary work, digital support, relationship building, community groups, education and learning, work experience.
- 4.15 The new model would increase the Community Connectors team to 25 full time practitioners and an additional deputy manager alongside the existing management structure. We propose to stabilise this team by having permanent posts rather than temporary/fixed term. There is a huge demand for this service from Adult Social Care Teams and Children's Services transition referrals – with a current waiting list of approximately 150 people. Anyone requesting support from Adult Social care who has a learning disability and/or who is autistic would go via the Community Connectors service as well as the team having availability to work with anyone currently known to Adult Care, for example those that accessed a DCC day service previously. This would also provide redeployment opportunities for any Day Service Workers affected by other elements within the new model.
- 4.16 In addition to the Community Connector Service, we recognise that people who have returned to a DCC day centre as their only provision need some additional support due to practical barriers in the community or the confidence of the person and/or their carers. We are therefore proposing a new **Support Service Team** alongside the Community Connectors to provide more intensive support to people and their families to navigate these changes. This would be for up to two years to support people through the transition to alternative opportunities in

addition to their DCC day centre. The Chesterfield Resource Team and Southcroft support teams would also be included in this service design as they currently support working age adults in the community.

- 4.17 The Community Connectors and Support Service would also be heavily involved in influencing development of service provision, community activity and form links with employers and education to enhance the offer and opportunities for people with a learning disability and/or who are autistic across the whole of Derbyshire. Taking this approach will embed a progression model within the new offer, support independence and improve contingency planning reducing the likelihood of residential care when carers are no longer able to support.
- 4.18 **Dynamic Commissioning** we are being proactive with identifying gaps in provision for day opportunities for people with a learning disability and/or who are autistic. We have a new support request form which captures demand and types of opportunities people are requesting along with the area of preference. We are then meeting with providers to feed back and encourage tenders to meet the needs of people assessed. We are working closely with the private, voluntary, and independent sector to align their models and encourage the development of creative ideas. As part of this we are encouraging micro providers and people using pooled budgets through direct payments to access local, shared support where appropriate. We are linking in with community groups and initiatives such as Thriving Communities to build connections and opportunities for people.
- 4.19 **Practitioner Support** - The Hub Team would continue on a smaller scale to support with the transition of this new model. The practitioners will support people, their families, and carers to achieve independent outcomes. The practitioners will also re-assess those people in residential and supported living who previously attended DCC building-based services. These people have been found alternatives by their area Social Worker however we are keen review to ensure this is sustainable long-term support. We will also review anybody affected by the proposed changes.
- 4.20 **Building-based day services.** The following proposals for building-based services would be implemented through a phased approach over a twelve-month period as set out below. This would be achieved with the development of the aforementioned services and the expected reduction of infection prevention control measures which will significantly increase building-based capacity.
- 4.21 **Phase one**

- Discontinued use of four building-based day services - Ashbourne and Waltham (Derbyshire Dales), Oxcroft (Bolsover) and Renishaw (North East Derbyshire) due to lack of demand.
- People who have been attending these services have already been supported to access alternative provision either in the community or at another DCC or private, voluntary, or independently (PVI) operated day centre.
- There are thirteen PVI providers operating across Derbyshire Dales and nine operating across Bolsover and North East Derbyshire.
- This activity would take place over a three-month period.

4.22 **Phase two**

- People attending Whitemoor (Amber Valley) would have their service transferred to Parkwood (Amber Valley). This is a more suitable building as it has significantly more facilities for example a café, training rooms and an IT suite.
- Coal Aston (North East Derbyshire), Carter Lane and Whitwell (both in Bolsover) day services would be discontinued for use. People accessing a service from these centres would be referred into the Community Connector service to identify alternative community-based opportunities or another DCC building-based offer. There are also nine PVI providers that operate across Bolsover and North East Derbyshire.
- Newhall Day Centre (South Derbyshire) would cease provision of a building-based service. People attending the service would be referred to the Community Connector service to identify alternative community-based opportunities or another DCC building-based offer. Additionally, there are ten PVI providers of day opportunities that operate across South Derbyshire.
- This activity would take place over a three-month period following phase one.

4.23 **Phase three** would be implemented over a six-month period. This will be a consolidation of the remaining building-based day services across four centres:

- Alderbrook (High Peak)
- No Limits (Chesterfield)
- Outlook (Erewash)
- Parkwood (Amber Valley)

The transition to the new model would take twelve months from any decision being made.

4.24 A total of **139 people currently access a day centre** as part of their support plan.

- **48 people** would be affected by these proposals.
- **91 people** would not be affected by these proposals as they attend one of the four-day centres, which will remain open, though the proposed new model would also open up alternative opportunities for this cohort.
- The majority of people with complex needs live in the locality of these day centres.

4.25 It is proposed, as part of the new model, that DCC would provide transport to anyone where their DCC day opportunity service is relocated as part of the proposals should they wish to continue to access it.

4.26 Whilst alternatives activities and support have been found for the 151 people who live in residential care or supported living who attended building-based day services prior to March 2020, the intention is to re-assess to ensure all opportunities have been explored for their long term future. The expected reduction of infection prevention control measures which will significantly increase building-based capacity, will ensure opportunity for those who would benefit from this service could return.

Option Two available to the Council

4.27 The alternative to the proposed new model is that the Council continues as at present with twelve traditional building-based services. It should be noted that in doing so, we would be unable to free up investment for the proposed new model of community-based support. This would have implications for the long-term financial sustainability of both Adult Social Care services and the wider Council, as demand for this type of service is reducing. The Council would continue to provide services that are out of line with many other local authorities and national guidance such as the recent Social Care Reform White Paper 'People at the Heart of Care', and "The impact of the COVID pandemic on adults with learning disabilities and / or autism, their family carers and service provision" report by the Association of Directors of Adults Social Services.

Previous Consultation

- 4.28 The proposals for a community-based offer build on work undertaken by the Council between 2018-2020 as part of the 'My Life, My Way' engagement programme. They are not a reflection of temporary measures that have been put in place to Learning Disability day services arising from the Covid-19 pandemic.
- 4.29 Learning Disability Procurement Review: Following approval by Cabinet on 20th December 2018, formal engagement commenced with attendees of Derbyshire County Council Learning Disability Day Centres and family carers on proposals for the future model of support and service delivery for day opportunities. This engagement started on 2nd January 2019 and closed on 31st March 2019, with a final report presented to the Council's Cabinet on 6 June 2019.
- 4.30 The outcome of this engagement was the introduction of a progression model to support more people to access training, skills and opportunities for volunteering or employment, where appropriate, via a Community Connector service. The new eligibility criteria came into effect in November 2019 and applied only to new referrals into the service. It was intended that those already attending a service would have a review to determine their level of support moving forwards and whether the options proposed through the progression model would be appropriate.
- 4.31 These reviews commenced in January 2020 in the High Peak (Alderbrook), Amber Valley (Parkwood initially) and South Derbyshire areas. Significant work had been completed across the service to understand people with a learning disability and/or who are autistic could be supported to gain independence and work towards volunteering or employment. A series of networking events for employment related services and social care professionals i.e. Community Connectors, CVS, and DWP had started and were being well received.

Analysis of the current position

- 4.32 The Council currently operates twelve building-based day centres for people with a learning disability and / or who are autistic:
- Alderbrook, Chinley - High Peak
 - Ashbourne and Wirksworth (combined service), Derbyshire Dales
 - Carter Lane, Whitwell - Bolsover
 - Coal Aston, Dronfield – North East Derbyshire
 - Newhall, Swadlincote - South Derbyshire
 - No limits, Chesterfield

- Outlook, Long Eaton - Erewash
- Oxcroft Lane, Bolsover
- Parkwood, Alferton – Amber Valley
- Renishaw, Eckington – North East Derbyshire
- Whitemoor, Belper – Amber Valley
- Whitwell, Bolsover

4.33 Prior to the temporary decision taken by the Cabinet Member for Adult Care, on 13th January 2022, to consolidate Learning Disability Day Services on a needs-basis in response to reasons relating to covid-19, there were nine building-based day centres open with Infection Prevention Controls in place:

- Alderbrook, Chinley - High Peak
- Carter Lane, Whitwell - Bolsover
- Coal Aston, Dronfield – North East Derbyshire
- Newhall, Swadlincote - South Derbyshire
- No limits, Chesterfield
- Outlook, Long Eaton - Erewash
- Parkwood, Alferton – Amber Valley
- Whitemoor, Belper – Amber Valley
- Whitwell, Bolsover

The Oxcroft Lane service (Bolsover) has joined with Carter Lane to become one service. Renishaw has joined with Coal Aston.

4.34 Currently there are 111 people in total who are only attending a DCC service across the nine day centres open, some of whom would wish to increase the number of days they attend. There are no centres operating a waiting list for new referrals.

Centre	Location	Number of Attendees
Alderbrook	Chinley	11
Carter Lane	Bolsover	3
Coal Aston	Dronfield	5
Newhall	Swadlincote	9
No Limits	Chesterfield	11
Outlook	Long Eaton	18
Parkwood	Alfreton	22
Whitemoor	Belper	26
Whitwell	Bolsover	6
Total		111

The current budget for the learning disability day centre provision is £6.7m with a projected spend of £6.2m, which excludes transport costs.

5. Consultation

- 5.1 If this report is approved, it is proposed that formal public consultation will commence on 28 March 2022 and last for 12 weeks ending on 19 June 2022. A public consultation exercise would be carried out seeking people's views on the two options being presented.
- 5.2 We will support current individual day centre users and their carers to understand and engage with the consultation process and the potential implications for them by offering support to participate in the consultation via a one-to-one interview, where requested, and creating an easy read information pack to ensure the relevant information is presented in an accessible and clear format.
- 5.3 Adult Social Care's Stakeholder Engagement Team (SECT) will arrange and coordinate, subject to risk assessments and any COVID restrictions and advice from Public Health and Health and Safety at the time, a series of face-to-face consultation meetings for current individual day centre users and their carers. In the event that restrictions prevent face to face meetings taking place then arrangements will be made to replace them with virtual meetings via Microsoft's Teams platform.
- 5.4 The SECT will arrange and coordinate three virtual public consultation meetings. Interested parties and members of the public will be invited to book a place on one of the three virtual public meetings via publicity and communications.
- 5.5 The SECT will develop an easy read version of a questionnaire for participants to complete. The questionnaire will be reflective of the proposal/s and give opportunity for participants to comment and give feedback on their views. The questionnaire will be placed on DCC's Have Your Say webpage where consultees will be encouraged to visit and complete a questionnaire.
- 5.6 All Stakeholders will also be given the opportunity to give their views by sending a letter, via email to ASCH.Tell.AdultCare@derbyshire.gov.uk or via telephone contact for SECT. Stakeholders will be given the opportunity to either email a message or leave a telephone voice mail requesting a call back from a member of SECT. SECT members will then record any feedback via telephone interviews and/or assist participants to complete an online questionnaire

5.7 Subject to this report being approved and the consultation exercise undertaken it is anticipated that, once the consultation responses have been considered and an Equality Impact Analysis completed, a further report will be presented to Cabinet regarding the proposed next steps in August 2022.

6. Alternative Options Considered

6.1 In the formulation of the new model being presented in this report additional options have been considered but are not being consulted upon. These options are outlined below.

6.2 Close fewer building-based day centres. However, the centres being proposed as part of the proposed new model have been considered most appropriate to be so based on:

- Locality – ensuring we have sufficient geographically accessible day services; and
- Sufficient capacity – the proposed configuration of buildings would provide the expected capacity to meet future demand.

It is, therefore, considered that other configurations from those proposed in the proposed new model would not meet these criteria.

6.4 Close all building-based day centres. This would see a move to a fully community-based offer with no directly provided building based services by the Council. It is recognised that this option would pose serious challenges to those people who experience barriers to accessing community services, alongside a lack of alternative building-based provision across the County.

7. Implications

7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

8. Background Papers

8.1 Cabinet on 20 December 2018 - Reshaping the learning disability day care offer and commencing consultation on the future service model for all other services for people with a learning disability.

- 8.2 Cabinet on 6 June 2019 - Outcomes from the consultation on reshaping the council's day care offer for people who have a learning disability and/or Autism
- 8.3 Department of Health and Social Care (2021), *People at the Heart of Care: adult social care reform white paper*.
- 8.4 The Association of Directors of Adult Social Services (2021), *The impact of the COVID pandemic on adults with learning disabilities and / or autism, their family carers and service provision*.

9. Appendices

- 9.1 Appendix 1 – Implications.
- 9.2 Appendix 2 – Private, Voluntary, and Independent providers of day opportunities for people with a learning disability and / or who are autistic.

10. Recommendation(s)

That Cabinet:

- a) Approves the programme of formal public consultation for a period of 12 weeks on the two options concerning the future of Day Opportunities for people with a learning disability and / or who are autistic.
- b) Receives a further report following the conclusion of the consultation process, including a full Equality Impact Analysis and Staffing Report.

11. Reasons for Recommendation(s)

- 11.1 Proposals to make significant changes in service provision require consultation with the public and those directly affected, including people who use the service, staff and carers and relevant stakeholders to ensure that their views can be taken into account when a final decision is made. Consultation for 12 weeks is proposed to ensure the Council complies with its legal obligations.
- 11.2 A further report following the conclusion of a consultation is recommended to ensure that Cabinet is fully informed of the outcome of

the consultation and Equality Impact Analysis when it makes a decision on the future of the Day Opportunities.

12. Is it necessary to waive the call in period?

12.1 No

Report Author:
Lisa Redington

Contact details:
lisa.redington@derbyshire.gov.uk

Implications

Financial

- 1.1 The gross budget available as a result of the proposed closure of the eight building-based day centres would be in the region of £3.454m. However, an estimated £1.552m would be required to fund alternative support options for clients along with £0.272m for the creation of a Support Service Team. This would result in a cost reduction of £1.630m which would contribute to the budget savings target allocated to Adult Social Care & Health. These figures don't include provision for potential redundancy costs and site clearance/security costs. Also, potential receipts from sale of land/property are not included.

Legal

- 2.1 Section 1 Care Act 2014 imposes a general duty on the Council to promote an individual's well-being whenever exercising any function under Part 1 Care Act 2014.
- 2.2 'Well-being' is not defined within the Care Act 2014 and is a broad concept. Section 1(2) lists nine individual aspects of well-being as follows:
- (a) personal dignity (including treatment of the individual with respect);
 - (b) physical and mental health and emotional well-being;
 - (c) protection from abuse and neglect;
 - (d) control by the individual over day-to-day life (including over care and support, or support, provided to the individual and the way in which it is provided);
 - (e) participation in work, education, training or recreation;
 - (f) social and economic well-being;
 - (g) domestic, family and personal relationships;
 - (h) suitability of living accommodation;
 - (i) the individual's contribution to society.

Although the well-being principle applies specifically when the local authority makes a decision in relation to an individual, the Care and Support Statutory Guidance is clear that the principle should also be considered by the Council when it undertakes broader, strategic functions.

- 2.3 Section 5 Care Act 2014 places a separate duty on the Council to promote an efficient and effective market, with a view to ensuring that any person in its area wishing to access services in the market:
 - a) has a variety of providers to choose from who (taken together) provide a variety of services;
 - b) has a variety of high quality services to choose from; and
 - c) has sufficient information to make an informed decision about how to meet the needs in question.

- 2.4 Section 18 Care Act 2014 provides that where an adult is assessed as having eligible needs, the Council is under a duty to meet those needs; one way of meeting those needs is by attending a day centre. Should an individual's current day centre close, alternative arrangements to meet those eligible needs must be made. Where a care plan is to be altered, the Council must have regard to, amongst other things, the outcomes the individual wishes to achieve and the impact on a person's well-being. The report details steps which would be taken to support individuals to navigate these changes and identify alternative opportunities to DCC day centre provision.

- 2.5 Proposals to make significant changes in service provision require consultation with the public and those directly affected, including service users, their family/carers, staff and relevant stakeholders.

- 2.6 Case law has established minimum requirements of consultation, which are:
 - a) Consultation must be at a time when proposals are at a formative stage;
 - b) Sufficient information must be given to permit a person to "give an intelligent consideration and response";
 - c) Adequate time must be given for consideration and response; and
 - d) The results of the consultation must be conscientiously taken into account in finalising any proposal and provided to the decision maker to inform their decision

- 2.7 In assessing these proposals, the Council should also have regard to the Public Sector Equality Duty (PSED) under the Equality Act 2010.

2.8 The PSED requires public authorities to have "due regard" to:

- The need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010 (*section 149(1) (a)*).
- The need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it (*section 149(1) (b)*). This involves having due regard to the needs to:
 - remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic.
 - take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it (*section 149(4)*); and
 - encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- The need to foster good relations between persons who share a relevant protected characteristic and those who do not share it (*section 149(1)(C)*).

2.9 Preliminary consideration has been given to the impact of the proposals on persons with protected characteristics in drawing up these proposals. In particular it is recognised that the methods and content of the consultation will need to be designed so as to fully reflect the needs of the relevant protected groups, in particular older people and disabled people.

2.10 In addition, regard has been paid to the Equality Impact Analysis (EIA) carried out in respect of the care pathway redesigns as is referred to in the report. A full EIA will be prepared during the consultation process reflecting issues that are raised during the consultation process. This will be reported in full to Cabinet and a full copy of the EIA made available to Members in order that any adverse impact along with any potential mitigation can be fully assessed. Cabinet members will be reminded at that time of the need to have careful regard to the conclusions of the EIA.

Human Resources

- 3.1 Any workforce implications arising from the proposals will be the subject of further reports on the conclusion of public consultation. Staff will be included in the public consultation and as mentioned in Section 5 of the report, separate engagement with, and support for, all staff of the day services that are the subject of this report will be carried out as part of any consultation exercise.

Information Technology

- 4.1 None directly arising.

Equalities Impact

- 5.1 The Council has a duty to recognise and mitigate the impact of any changes it proposes upon people in protected groups. The proposals in this report affect people with a learning disability and / or who are autistic currently accessing day services provided by Derbyshire County Council.
- 5.2 There are 111 people currently accessing day opportunities at a centre provided by Derbyshire County Council. Of these, 52% are men and 48% women; 98% are of working age with 2% aged 65 or over; 96% are White British with 4% from other backgrounds.
- 5.3 The Council will take account of the challenges which the people affected by the proposals in this report face, both in terms of participation in the consultation and in ensuring that the impact of any changes is mitigated if they are to be implemented. Family, and carers will be invited to participate in the consultation and advocacy services will be arranged for people who require them.
- 5.4 A full Equality Impact Analysis will be undertaken and this will be reported to Cabinet on the completion of the consultation on the proposals in this report, should a consultation exercise be approved by Cabinet.

Corporate objectives and priorities for change

- 6.1 In the Council Plan 2021 – 2025 the Council states that listening to, engaging, and involving local people to ensure services are responsive and take account of what matter most to people, as being a core value.
- 6.2 In the Council Plan 2021 – 2025 the Council states that as part of its actions to create Resilient, healthy, and safe communities it will work with people with learning disabilities and/or who are autistic to develop Council

services to ensure they are tailored to meet individuals needs and help people achieve their personal goals. By 2025 it is expected that the Council will have enabled more people with a learning disability in Derbyshire to work towards achieving their goals and aspirations with less reliance on public services

- 6.3 The Council commits to work together with its partners and communities to be an enterprising council, delivering value for money and enabling local people and places to thrive, and to spend money wisely making the best use of the resources that it has.

Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)

- 7.1 As set out in the report.

Independent providers of day opportunities for people with a learning disability and / or who are autistic

Countywide:

- Derbyshire Autism Services Ltd.
- One to One Support Services Ltd

Amber Valley:

- Autism East Midlands - Mundy Street Day Service
- CCT Community Enablement Team Ltd
- Craftwood Community Interest Group
- Grow Outside C.I.C - Ripley
- Leonard Cheshire - Community Activity Group
- Lovehands Care Services Ltd
- Umbrella

Bolsover:

- CCT Community Enablement Team Ltd
- EMH Care and Support - Five Senses
- Freedom Centre
- New Roots Care & Education
- Rhubarb Farm

Chesterfield:

- Ability Ash Lodge
- Ability Victoria Street
- CCT Community Enablement Team Ltd
- Cygnet Healthcare Ltd. - Sheffield Day Service
- Edmund Street Activity Centre -
- Fairplay Independent Living Group
- Fairplay One to One Support
- Freedom Centre
- High Ashes Rural Project C.I.C - Building With Friends
- Leonard Cheshire - Community Activity Group
- Macintyre - Holmewood
- Macintyre - Queens Park
- Macintyre - Swanwick Memorial Hall
- New Roots Care & Education
- Rhubarb Farm

Derbyshire Dales:

- Beckside Care Farm
- CCT Community Enablement Team Ltd
- EMH Care and Support - Golding Grange
- EMH Care and Support - JT Project
- EMH Care and Support - Medway
- Freedom Centre
- Good News Family Care (Homes) Ltd - Good News Care Farm
- Greenaway Workshop - Craft Package
- High Ashes Rural Project C.I.C - Building With Friends
- Leonard Cheshire - Allotment/Gardening Group
- Little Canyon Outreach Service

Erewash:

- Cygnet Healthcare Ltd. - Long Eaton Day Service
- Leonard Cheshire - Community Activity Group
- Leonard Cheshire - Swimming/Spa
- Umbrella

High Peak:

- Bright Opportunities
- Connex Community Support - Care and Support
- Good News Family Care (Homes) Ltd - Good News Care Farm

North East Derbyshire:

- Derbyshire Stroke and Neuro Rehab Centre - Day Centre
- EMH Care and Support - Five Senses
- Freedom Centre
- High Ashes Rural Project C.I.C - Building With Friends
- New Roots Care & Education
- Rhubarb Farm

South Derbyshire:

- Cygnet Healthcare Ltd. - Long Eaton Day Service
- EMH Care and Support - JT Project
- Grow Outside C.I.C - Church Gresley
- Hickling House
- Leonard Cheshire - Community Activity Group
- Lovehands Care Services Ltd
- The Mixed Craft Workshop Derby Ltd
- Umbrella

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(Appendix 3)

CONSULTATION REPORT ON THE FUTURE OF LEARNING DISABILITY DAY OPPORTUNITIES SERVICE REDESIGN IN DERBYSHIRE

1. Purpose of the Report

A report was presented to Cabinet on 10 March 2022 which sought approval of:

The programme of formal public consultation on the future of the Learning Disability Day Opportunities Service Redesign as set out in the report.

Cabinet were asked to approve the undertaking of a public consultation on two options concerning the future delivery of day opportunities for people with a learning disability and/or who are autistic.

The options for consideration were:

- **New Model – Option 1**

More clients are choosing alternatives to DCC day centre provision either for part or all of their services. The proposal is to support more people within the community. Those with complex needs could access building-based day centres where appropriate.

Enhancing the Community Connector service to help support people with learning disabilities and/or who are autistic to use all opportunities available to them; this may include travel training, employment opportunities, social activities, direct payments, private voluntary and independent provision, voluntary work, digital support, relationship building, community groups, education, learning and work experience. Increasing them from 18 to 25 full time connectors as well as an additional manager.

Introducing a new Support Service Team, who would work alongside Community Connectors to provide more intensive support to people and their families for up to two years.

Dynamic Commissioning. Being proactive in identifying gaps in provision for day opportunities. Working closely with the private, voluntary, and the independent sector to encourage the development of creative ideas. Encouraging micro providers and people using pooled budgets through direct payments to access local, shared support where appropriate.

Discontinue using eight day centres in a three phased approach and consolidate the remaining building-based day services across four centres:

- Alderbrook (High Peak)
 - No Limits (Chesterfield)
 - Outlook (Erewash)
 - Parkwood (Amber Valley)
-
- **Option 2.** The alternative to the proposed new model is continue with the current twelve traditional building-based services.

2. Methodology and Approaches

The report was presented 10 March 2022 to Cabinet and the consultation was approved. This consultation took place between the 28 March 2022 and 19 June 2022. This report will summarise views and opinions submitted by the people of Derbyshire during this period.

Who was encouraged to participate?

Current and previous service users and their carers. The carers of those young people with Special Educational needs. Private and voluntary organisations offering day care across Derbyshire.

Staff from the Adult Care Stakeholder Engagement and Consultation Team arranged 9 face to face meetings (two were subsequently cancelled due to lack of demand) and 5 virtual meetings (1 was cancelled due to lack of demand). These were hosted by the Service Director of Adult Social Care Transformation and Partnership, and participants were given the opportunity to comment on the proposals.

Derbyshire Webpage

People were directed to the Derbyshire Consultation webpage which gave information about proposals and links to either the standard on-line questionnaire or an easy read version.

The consultation used quantitative and qualitative approaches to gather people's views about the proposals. Officers enabled as many people as possible to take part, by offering a range of ways in which they could share their views:

1. Current and previous attendees together with their carers received an introductory letter detailing the arrangements for undertaking the

consultation and the proposals for consideration

2. Carers of young people identified as having Special Educational Needs and Disability (SEND) were sent a letter detailing the consultation and the ways in which they could share their views
3. Private and voluntary sector day care providers in Derbyshire were sent an email informing them of the proposals and ways to take part in the consultation
4. Offering the questionnaire in different formats, such as an easy read version if this was more appropriate
5. Completing the questionnaire online (both in easy read format and standard version)
6. Requesting a paper copy of the questionnaires via the Stakeholder Engagement and Consultation Team and sending in comments using the standard or easy read postal questionnaire
7. Opportunity to write to the Council via a letter or a dedicated email address
8. Telephone interview for those people having difficulty completing the questionnaire
9. Being signposted to further information on the Derbyshire County Council website <https://www.derbyshire.gov.uk/council/have-your-say/consultation-search/consultation-details/the-redesign-of-day-services-for-adults-with-a-learning-disability-and-or-who-are-autistic.aspx> which gave an outline of the proposals and the ways in which people could share their views
10. Media releases which were issued at the start of the consultation and news releases were published on the Derbyshire County Council website. We also promoted the public consultation on a variety of corporate channels.
11. Virtual meetings using Microsoft Teams. 4 virtual public meetings took place at various times of the day/early evening to enable as many people as possible to share their views and ask questions about the proposals
12. Current attendees their carers were invited to face to face meetings. There were 7 meetings across Derbyshire giving people an opportunity to ask questions and express their views to the Service Director, Group

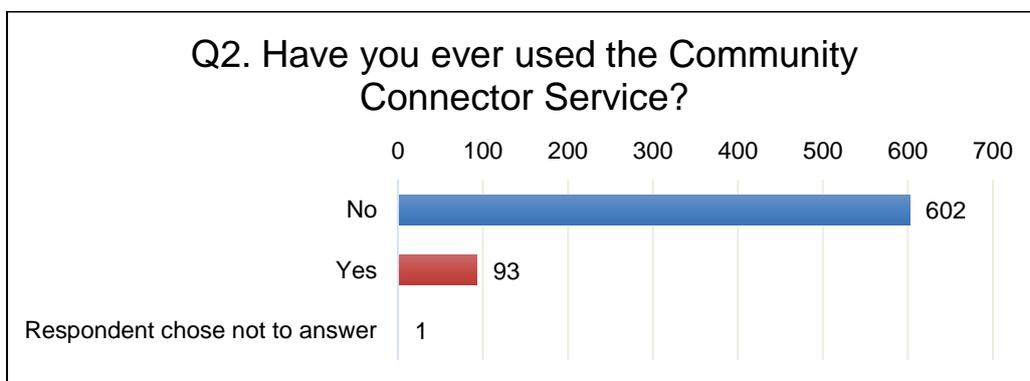
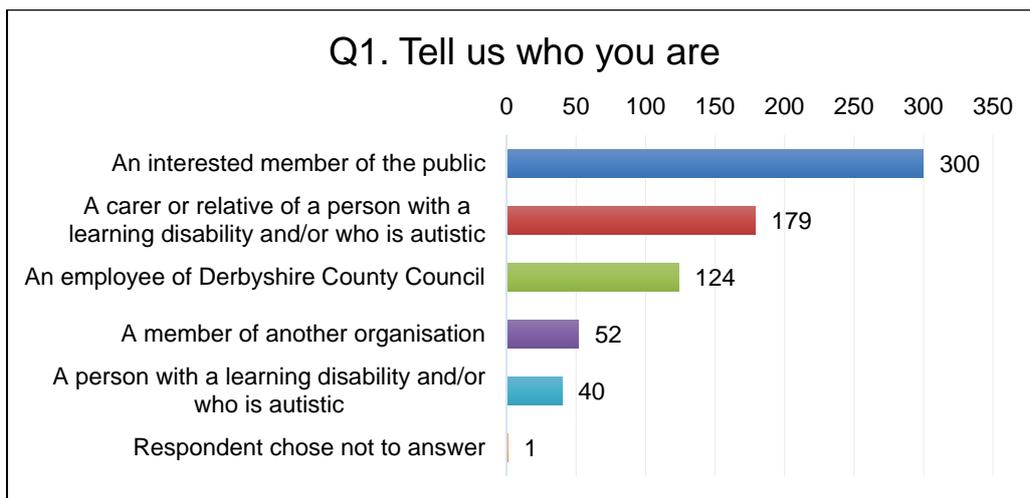
Manager and members of the Stakeholder Engagement and Consultation Team.

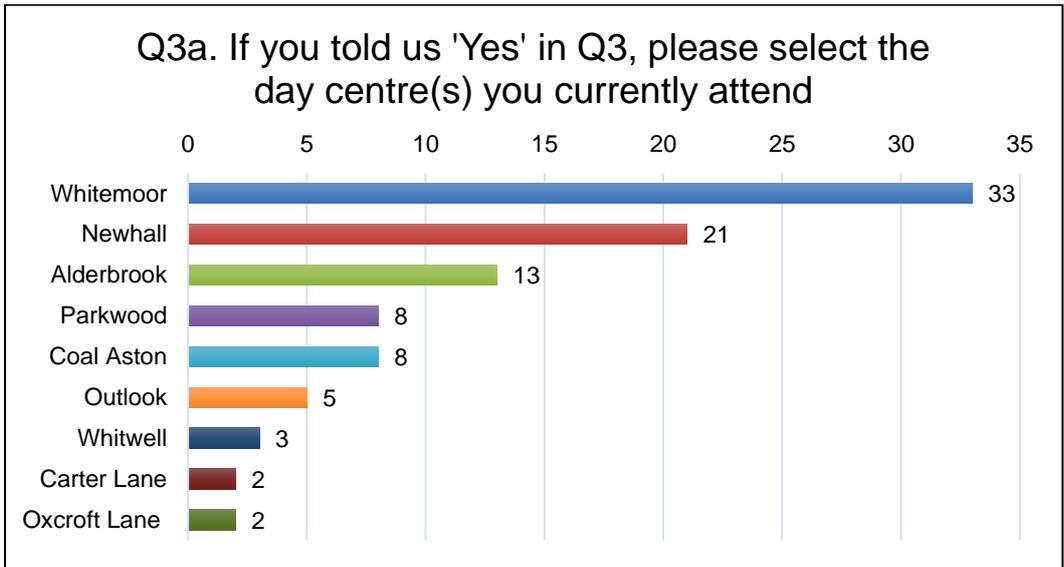
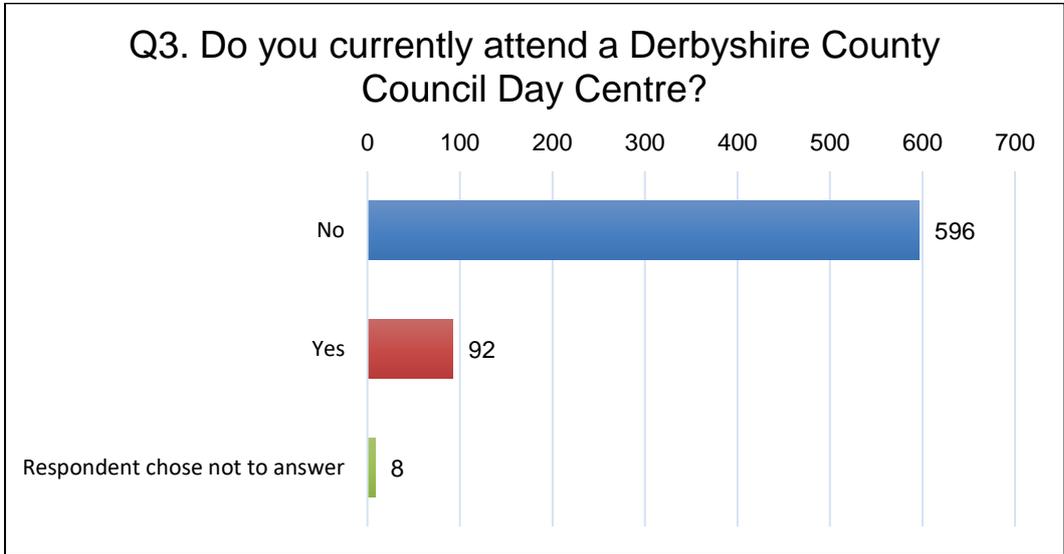
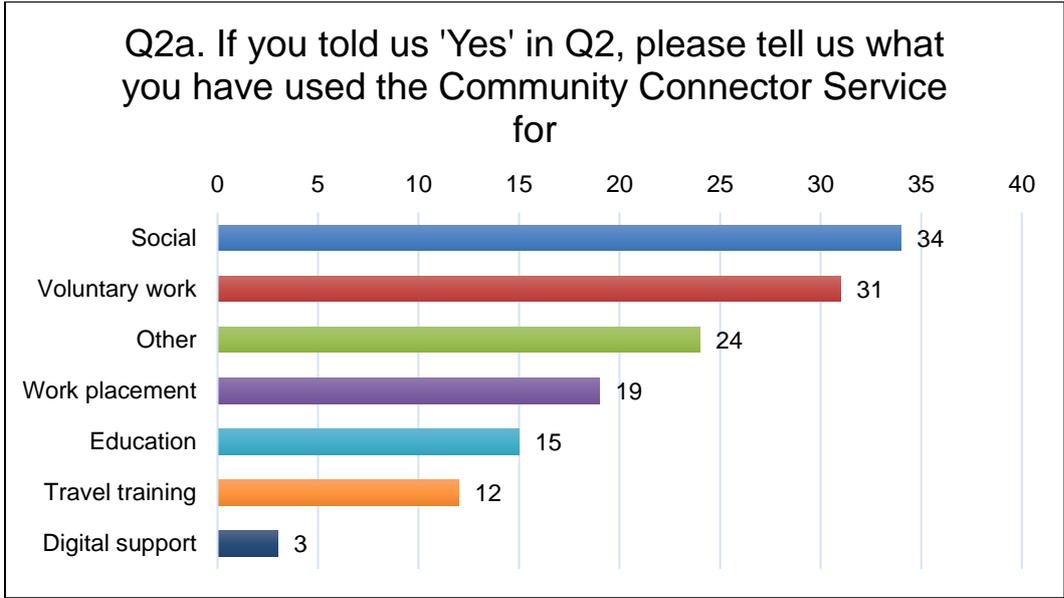
Qualitative Approach

There were three distinct approaches to the analysis of the qualitative material.

1. information gathered during face to face and virtual meetings
2. information gathered from letters, emails, and telephone calls
3. qualitative information contained in the online and paper questionnaires, both the standard and easy read versions.

The following 5 charts show the respondents by categories





Combined Analysis of the Qualitative Information

In total 2269 comments were received about the consultation. SECT themed the responses from all qualitative information, from the questionnaires, letters, emails, telephone calls, and meetings.

Overall, 667 standard questionnaires and 29 easy read versions were completed.

Scope of the summary themes used within the qualitative approach

SECT analysed the responses, theming them under the following categories in alphabetic order:

Agree with proposal

Some respondents agreed with the proposal to redesign the day opportunities; retain four; to increase the community connectors; and develop a Support Service Team. Whilst some respondents agreed with the proposal, a number agreed but with some reservations. This was largely in favour of retaining all twelve of the centres for those still wishing to attend, including those wishing to return, but run this along-side the proposals to increase the number of Community Connectors and the development of a Support Service Team.

Alternative suggestion

Some respondents utilised the open text boxes to make alternative suggestions to the proposals.

Barriers to change

Some respondents wished to inform of the issues they as carers and/or people with a learning disability and /or autism would face, rendering the first proposal unviable for them.

Consultation

Some respondents indicated that they considered the consultation was not inclusive enough.

Covid

It requires noting that there has been within the consultation response some blurring of the proposals laid out in the Cabinet Report and what people have experienced during lockdown with Covid restrictions.

Disagree with the proposal

Some respondents simply disagreed without an explanation , with the proposals.

Finance

Some respondents felt that these proposals did not consider the financial implications for the County Council going forward.

Future viability

Some respondents were concerned that should redesign be agreed, this would in their opinion bring into question the long-term viability of the four remaining centres.

Impact on people with a learning disability and /or who are autistic and carers

Some respondents told us of the negative impact that these proposals would have on them as carers and/or people with a learning disability and / or who are autistic using this type of support. However, it was clear that a proportion of the impact was based upon the experience people with a learning disability and / or who are autistic, and carers have had during lockdown with Covid restrictions.

Impact on physical health

Further and as with impact on people with a learning disability and / or who are autistic and carers, some were more specific in reporting the impact on physical health, experienced during Covid.

Impact on colleagues

The consultation was not directly involving colleagues, however, as members of the public staff have a right to voice an opinion on the proposals. Some participants identified themselves as colleagues working in day centres. However, some used the opportunity not to voice opinions on the proposals but rather talk about the impact the proposals would have directly on them as a colleague.

Further there was some concern from other participants for what would happen to colleagues if proposals were approved.

Lack of information

Some respondents of reported feeling unable to answer some questions as they had not been given enough information to make an informed response.

Lack of other opportunities

Some respondents reported that in their experience and understanding, there was not enough and good alternatives in the PVI to make the proposal of closing eight centres viable.

Length of support

Some respondents, in particular those who have already had experience of being supported by the Community Connector Service, felt that 12 weeks was not an adequate length of support.

Loss of community resource

Some respondents reported concern for the loss of a community resource, in particular where garden centres were part of the day service.

Loss of social support

Some respondents spoke about the social support that both people with a learning disability and / or who are autistic, and carers received from peers and staff whilst attending the day centre and feared that this would be lost under the proposal to redesign the support.

NAQ – Not answering the question

There were many responses in each of the open text boxes on the questionnaire that did not directly answer the question. SECT analysed the responses and coded them as a response to the consultation rather than a response to a question. However, there were some responses that were unrelated to the question or context of the consultation and so have been simply coded as Not Answering the Question.

Negative previous experience

Some respondents based their feedback and comments on negative previous experiences. Falling under two categories. 1) Experience of being supported through the Community Connector Service, and 2) Experience of lockdown and covid restrictions.

Reduction in service

Some participants reported already having seen a reduction in service and this having a negative impact. Fearing under the proposal to redesign , that this would lead to a permanent reduction for them.

Respite for carers

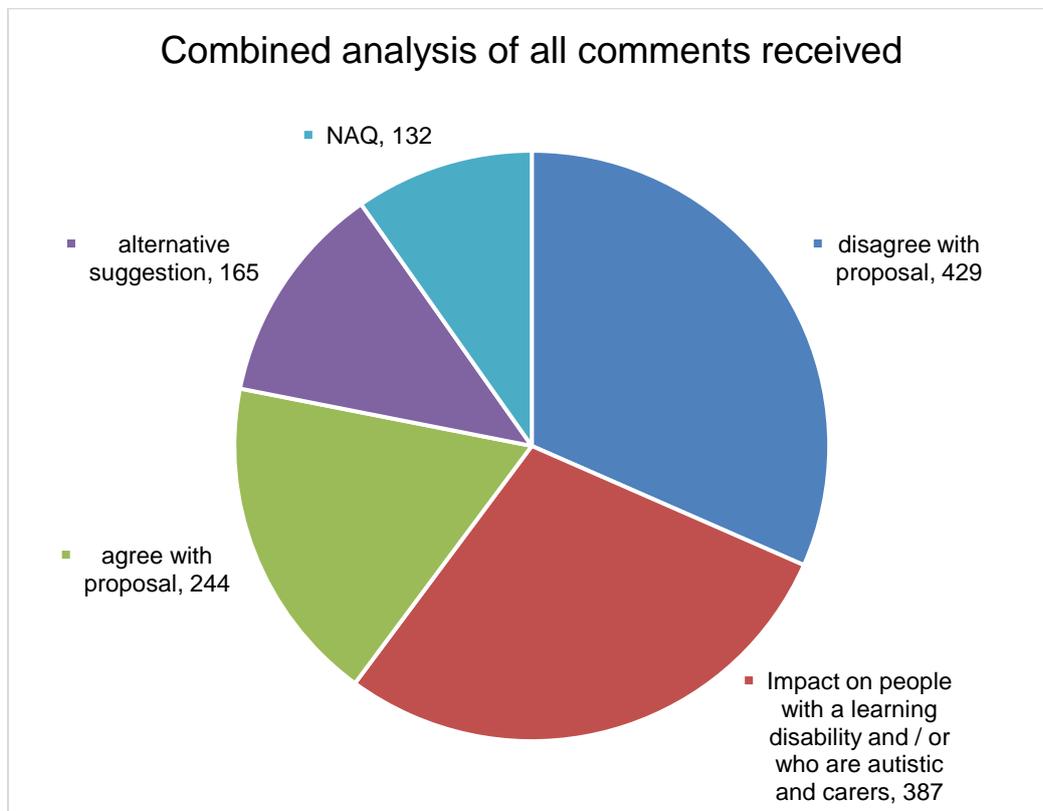
Some respondents reported the importance respite plays in the lives of carers and told us that day centres are an integral part of respite.

Travel implications

Respondents were concerned that should the proposal to redesign the offer be approved, there would be travel implications with people with a learning disability and / or who are autistic having long journeys and distances to travel to access day opportunities.

Further comments described poor transport links that exist in parts of the county.

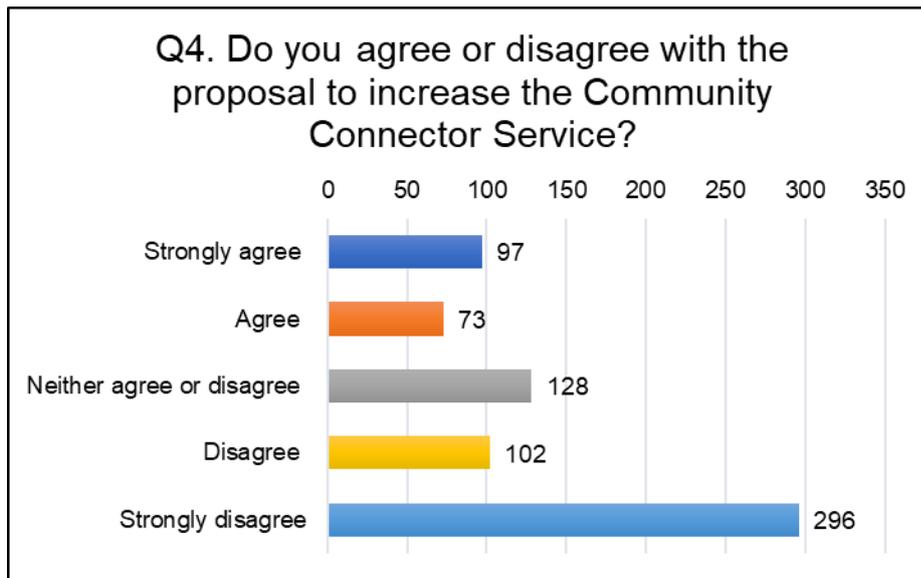
The chart below is a representation of the top 5 themes for the qualitative information, from the questionnaires, letters, emails, telephone calls, and meetings



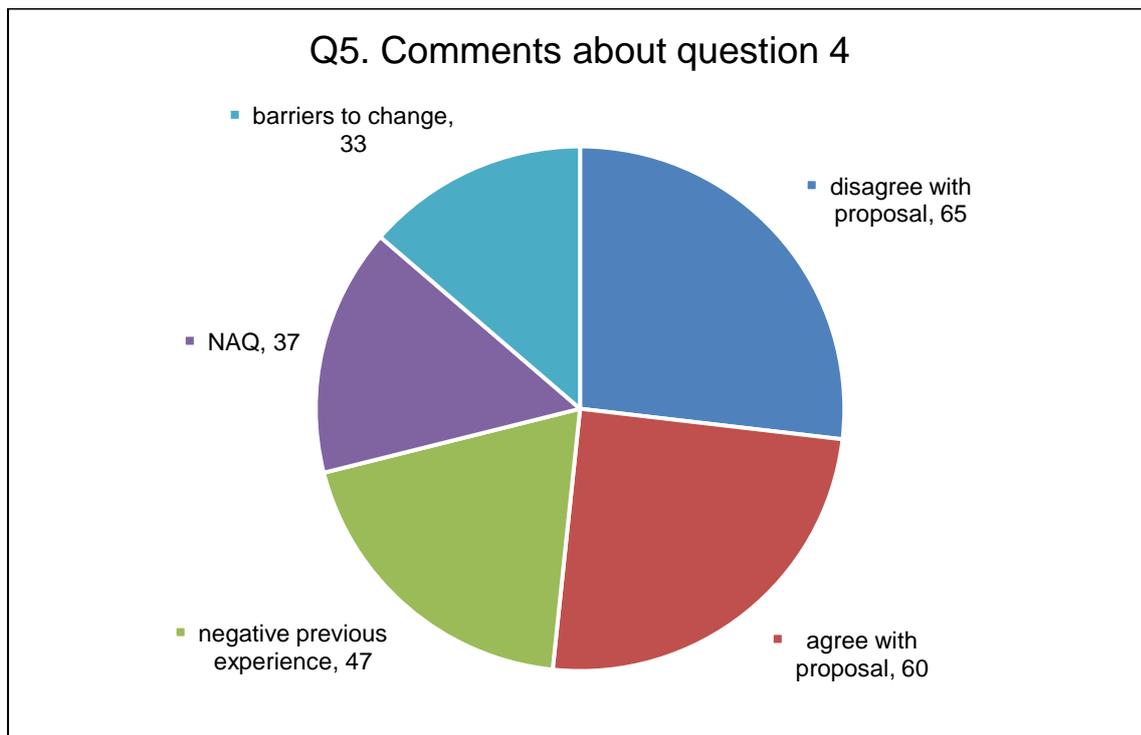
Analysis of the Qualitative and Quantitative Material within the Questionnaires

The following highlights the quantitative and qualitative responses for the questions within the two questionnaires. The free text boxes following questions that requested an explanation of the respondent's choice of answer, were analysed and coded by the SECT to establish themes from the individual questions.

Question 4



Question 5



Overall, 320 respondents gave an explanation for their choice. The top themes are as follows:

Disagree with proposals with 65 comments such as:

- Community Connector Service is not suitable for everyone. Some service users need a building-based service due to their vulnerability and safeguarding issues. They are unable to access the community without someone accompanying them at all times. They are unable to access public transport alone. Any work-based service would need one to one support at all times in a sheltered environment where providers are trained to understand and relate to people with Learning Disabilities and Autism
- I strongly disagree with the proposal to increase the community connector service. From contact with the community connector scheme, there seem to be issues with lack of opportunities for clients to be connected to, sometimes a lack of in depth understanding of a client's needs, and a lack of opportunities that can offer the level of support that many clients require. For the community connector service to be offered as an alternative service to a day centre feels inadequate

Agree with proposals with 60 comments such as:

- I want the Community Connector Service to find me worthwhile long-term activities to replace my pre-covid day centre placement
- Members of the local community are in need of the Community Connector Service to help individuals and families to access appropriate facilities and activities to ensure that all live an enriched and fulfilling life. Part of this is being part of a larger group, meeting outside of the home in a safe, nurturing environment. The CCS should be expanded, in that more people are informed about what is required to match their needs, enrich their lives and help deliver a well-rounded support service

Negative previous experience with 47 comments such as:

- I think the service is good but currently is only a time limited intervention. Once the service is withdrawn individuals often disengage with the community activity as they require ongoing support to maintain engagement
- Proved to be ineffective due to short allocation of 12 weeks and lack of suitable activities in most areas.

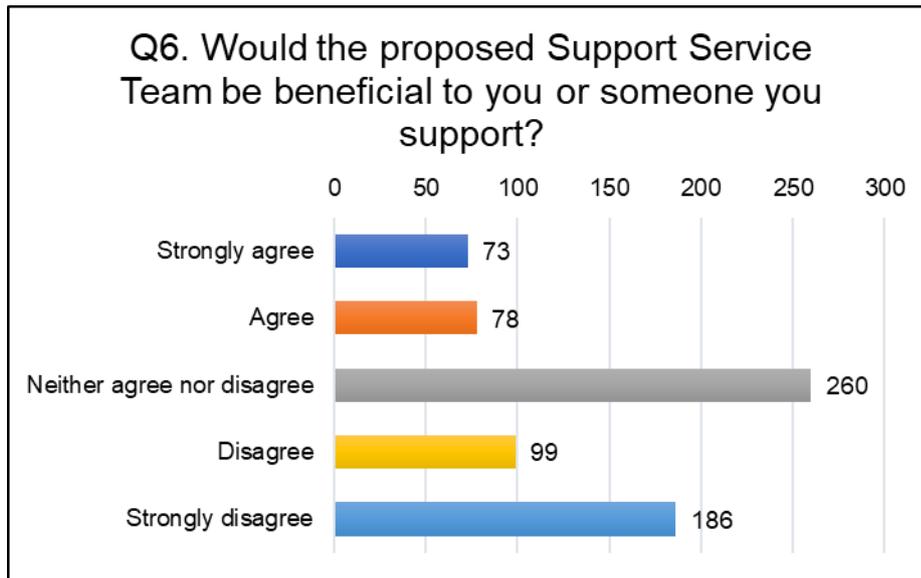
Not answering question with 37 comments such as:

- The proposal does not set out the cost of the new proposed structure compared to the present. It is not credible to consider this question in isolation. It is certainly not preferable to the closure of centres vulnerable people rely upon
- If we don't have enough staff to have assessments how can we go ahead with a plan as it will leave hundreds of people without adequate care and respite for families

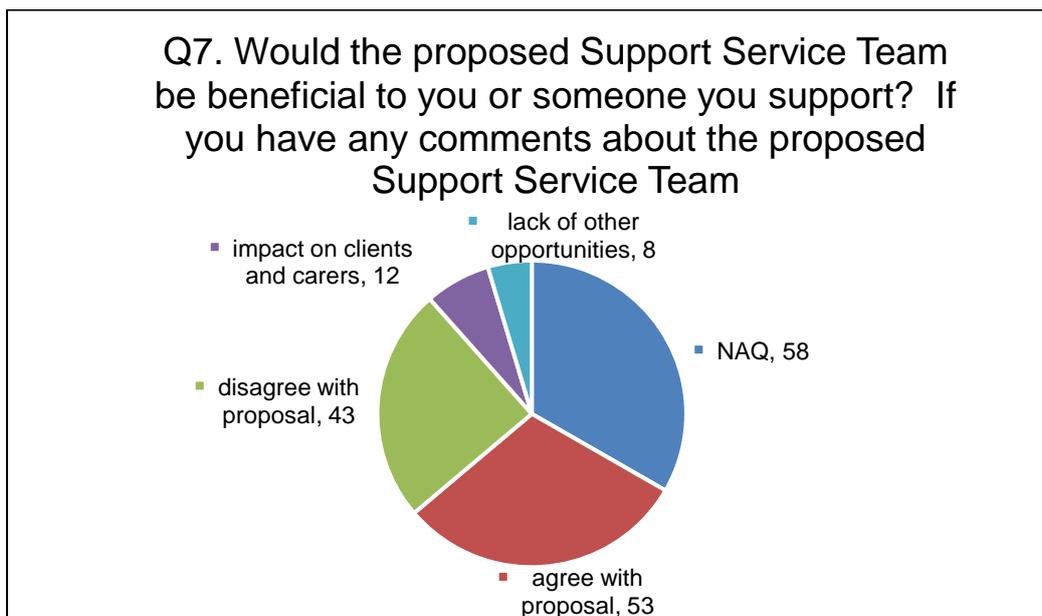
Barriers to change with 33 comments such as:

- Day centres have an important role to play for some people, these people who cannot cope with change. The community groups cannot cope with the challenging behaviour my son displays
- Whilst it is possibly true that some adults with learning difficulties don't wish to use day centres and want to pursue a more independent life, even moving into the world of work, there are still - as far as I've been made aware so many adults who would prefer the communal experience that a day centre offers. These are people like my Down's daughter X who needs her day centre as she regards it as her second home. She needs that sense of belonging.

Question 6



Question 7



Overall, 196 respondents explained their choice. The top theme was Not Answering the Question (NAQ), and this was not helpful in ascertaining a quality response so therefore the next top themes relevant to the questions were as follows:

Agree with proposal with 53 comments such as:

- This is vital and needs to be ongoing not just during the period of change. The "placements" will need to be managed and evaluated to ensure they continue to meet the needs of each service user and that their carers are supported
- We feel that this would be beneficial if this was a continuous support service.

Disagree with proposal with 43 comments such as:

- Centres are good way of bringing people together. New proposal is isolating people
- Keep the centres open and add extra support in the community.

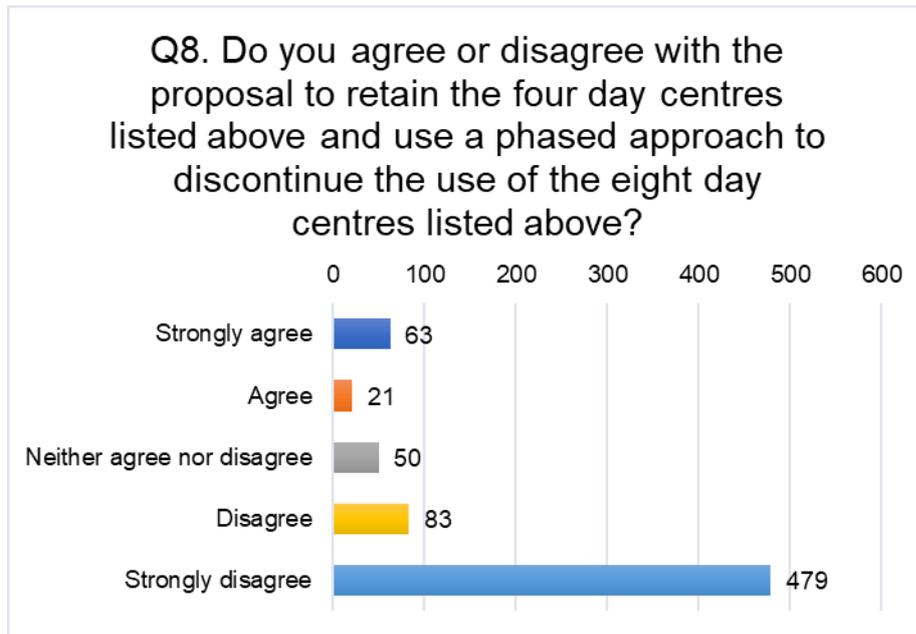
Impact on people with a learning disability and / or who are autistic and carers with 12 comments such as:

- I'm not convinced by this service. Where will respite care come from for families? As this is largely what the day centres provide for families
- The clientele are aging and do not want proposed changes, they have been with their peer group for 30 years or more and suddenly they don't see or socialise with them and have no contact whatsoever and also their parents are elderly with no support at all!!! DISGUSTING BEHAVIOUR DCC.

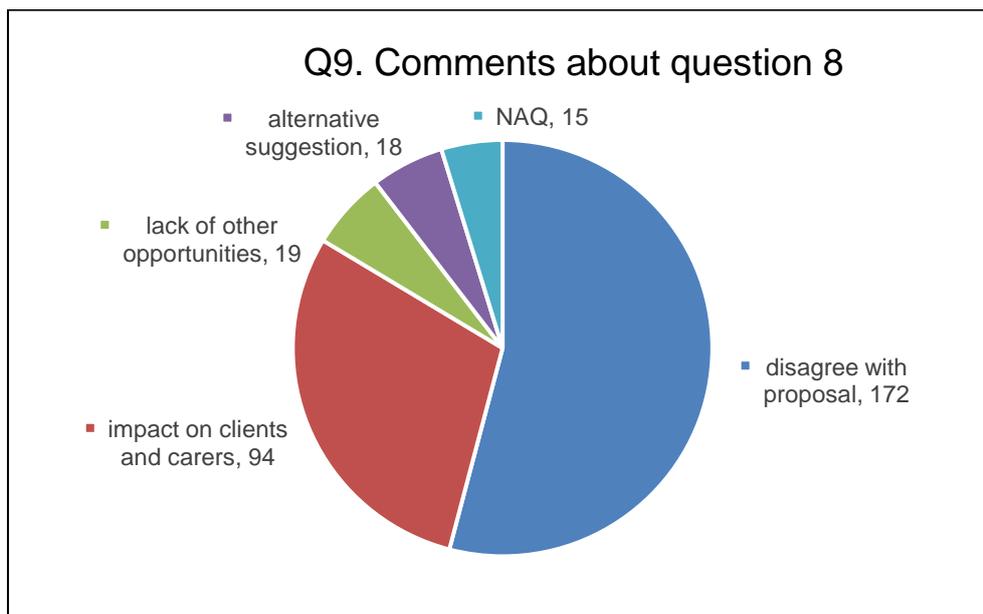
Lack of other opportunities with 8 comments such as:

- Potentially, but with no experience of how the Team would operate in practice it is difficult to judge. I do question whether there are sufficient opportunities available in the PVI sector now to accommodate service user who are and will be assessed as non-building based and be directed away from Day Centres
- I am one of the lucky ones in that I get a direct payment for a PA and was doubly lucky to find a good match for my son after 2 attempts to recruit. The number of people interested in this type of work is very small and carers will struggle to find suitable people.

Question 8



Question 9



Overall, 348 respondents gave an explanation for their choice. The top themes were as follows:

Disagree with proposal with 172 comments such as:

- People should be able to access a day centre within their local area, so they can be supported by day centre staff to make connections and friends in their own locality
- These 4 day centres are not for the people who now attend the other eight. These centres were set up so that people could integrate into their

surrounding community, become more independent within that community and be accepted by the community they live in, not bussed out to on a thirty minute journey and over 20 miles away from where their community is. This is going back to how it was 30 years ago.

Impact on people with a learning disability and / or who are autistic and carers with 94 comments such as:

- Some have now lost their friends and regular activities which they loved, having attended their Day Centre for many years. New opportunities are not the best way forward for everyone, it has left many feeling isolated and missing the friends they've known for many years
- There are a large number of clients with a learning disability who require specialist support and can't manage without this, which day services provide. Families need to work and have carer relief, and this cannot be achieved through a low level service. Clients need to maintain relationships with their peers they already know with support as well as having other opportunities.

Lack of other opportunities with 19 comments such as:

- There is not enough community engagement opportunity particularly in rural areas. People miss their day services and the roles and friendships these offer. If graded training opportunities and work skills were available for the more able this may work. For people with PMLD or severe LD, community facilities do not accommodate, too often people are wheeled around cafes. This is not person centred care and often for people with sensory needs this is overwhelming and challenging to say the least
- I feel that South Derbyshire desperately needs to continue to offer day care and respite facilities, albeit change to a more modern and updated service, but the private services we are having to contract with now, are extremely expensive.

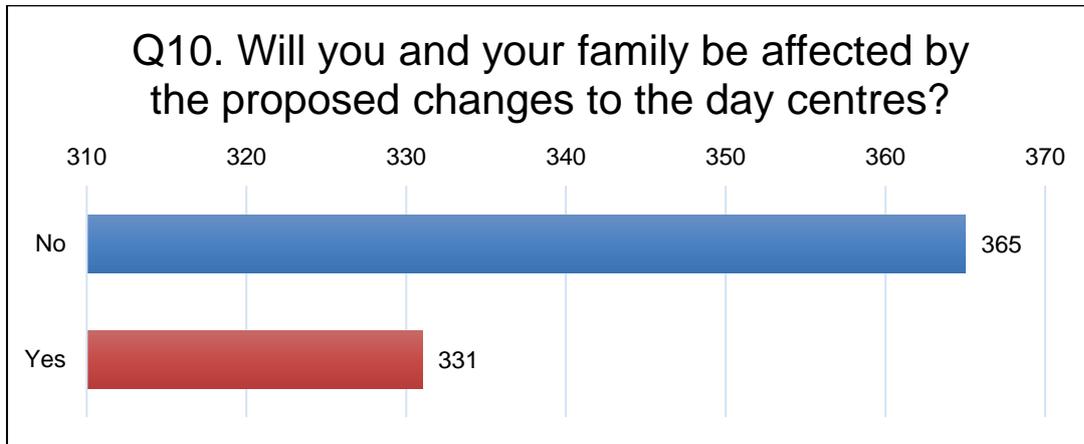
Alternative suggestion with 18 comments such as:

- I have no opinion on which centres should close or not, but I would ask do the clients know that there might be an alternative support with shared lives scheme, are they aware of the scheme and what it is. I do think that the day centres should be used only for those clients who have severe and complex needs
- Yes, there possibly is a case for reduction in some day services but there should be more integration and sharing of spaces across the health and care sector so that they become community assets to be used by all local people rather than seen as 'special' places where only certain members of the public go, this will lead to better integration of people.

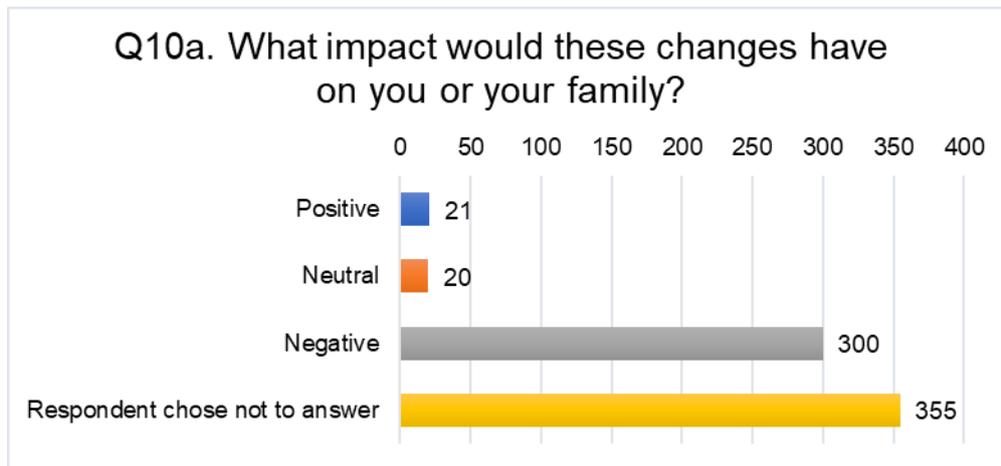
NAQ – not answering the question with 15 comments such as:

- This would depend on the recovery period to the day centres following the covid restrictions being relaxed eg face mask and vaccination
- What is going to happen to those buildings that are marked for closure?

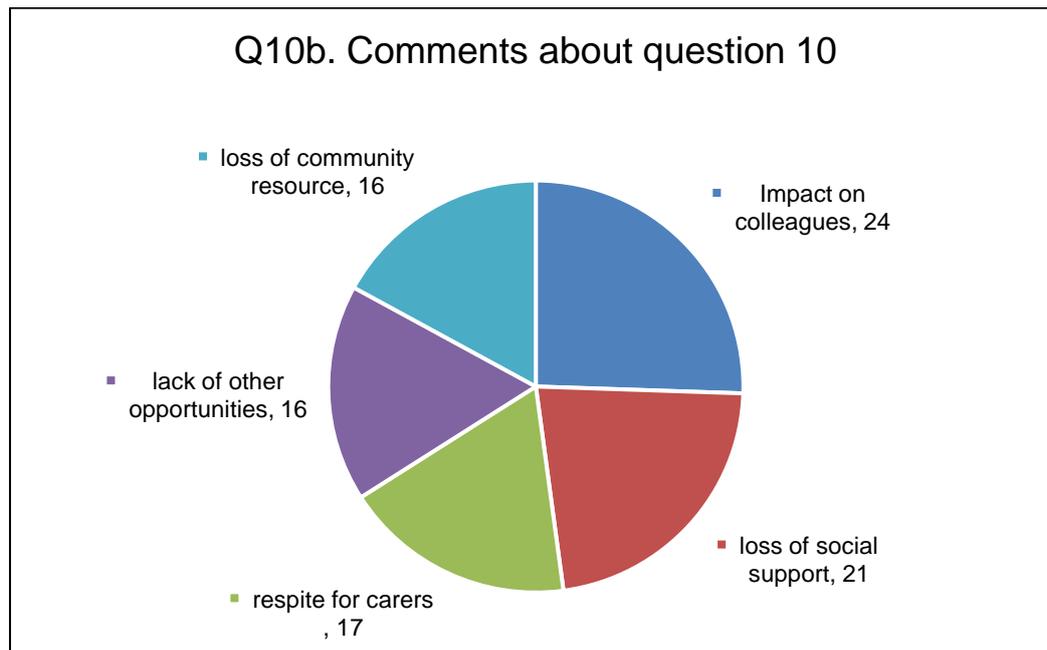
Question 10



Question 10a



Question 10b



Overall, 143 respondents explained their choice. The top themes were as follows:

Colleagues were concerned about the impact the proposals would have directly on them as a staff member and that was the top theme with 24 comments. However, SECT moved to include themes with less responses in the top reported. The reason for this was the public consultation is not to consider impact on colleagues. Impact on colleagues and any consultation in line with such impact would be carried out with colleagues directly as required following a cabinet decision.

Loss of social support with 21 comments such as:

- Our son would lose contact with all his friends he has been with since leaving school. He would have no social life and we would not get any break
- I will not meet my extended family which that is what I call my friends at Newhall Day Centre.

Respite for carers with 17 comments such as:

- The day centre is the only place my daughter goes out to. She will not leave the house at all so the day centre is absolutely vital to her and her well-being. It is the only time my husband and I manage a few hours of respite from the 24/7 job of looking after her. If this was to change it would be catastrophic for our family
- Serious reduction of day time respite for carers. Serious reduction in opportunities for service users to mix with their friends. Creating stress and worry regarding vulnerability and health and safety.

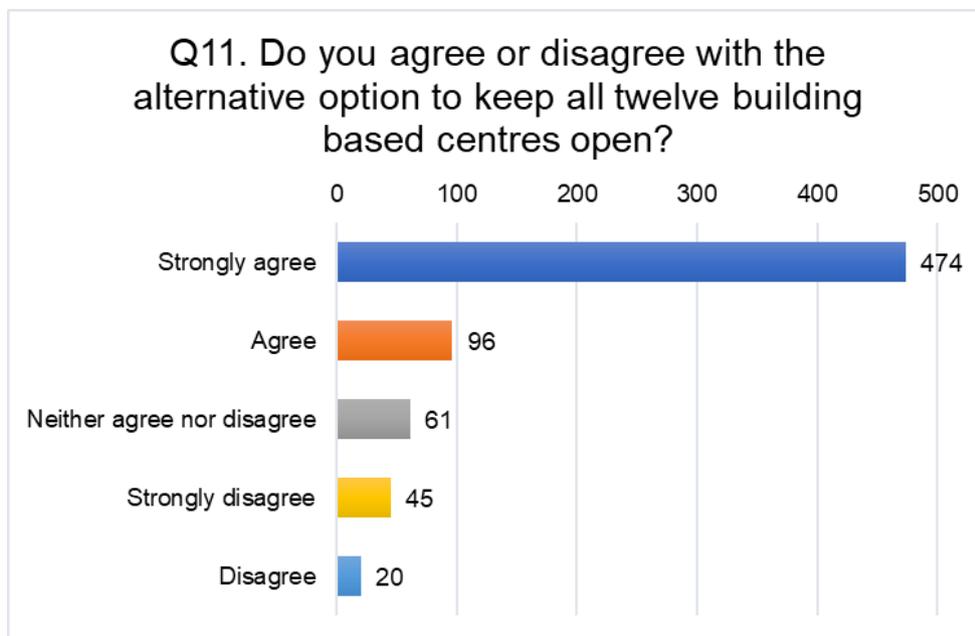
Lack of other opportunities with 16 comments such as:

- My son needs a safe space to go outside of the home. Unfortunately, even with direct payments we could not find an organisation or people who were willingly to take him out into the community. So, we were left with no support except the council run overnight respite service. Community based does not work for everyone
- There are NO suitable or effective alternatives to the level of care and treatments offered at day centres. It requires specialist care that outreach or community programmes simply do not come anywhere near delivering. The physical, psychological, emotional health of people with learning disabilities will continue to decline as they have been without the day centres since the covid pandemic began. Families tackle the shortfall themselves experiencing burnout impacting public services more.

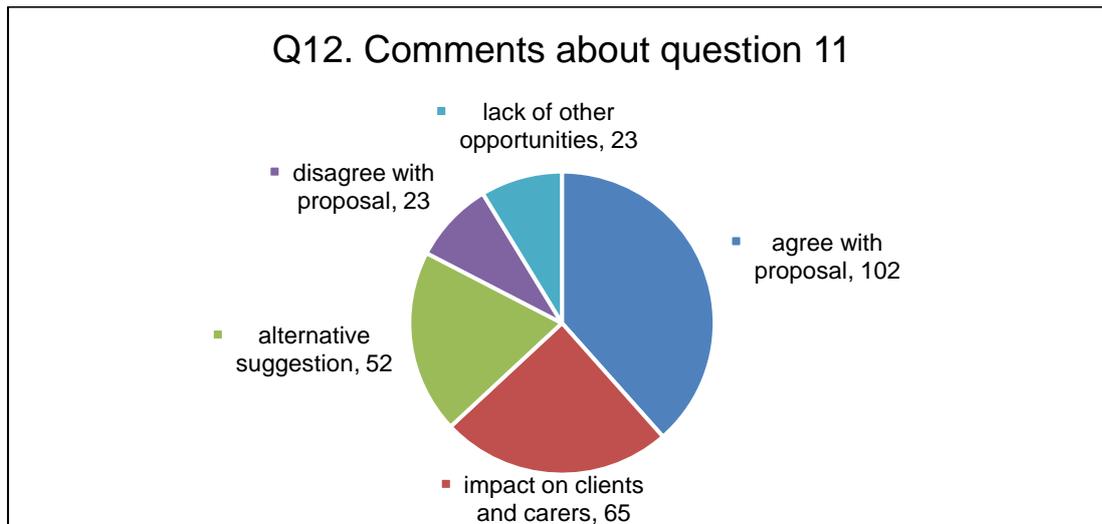
Loss of community resource with 16 comments such as:

- Losing an asset to the community and value of bringing people together
- Closure of the garden Centre at Alderbrook would be a huge loss to the community and reduce vital opportunities for both children and adults that work there or use the facilities

Question 11



Question 12



Overall, 293 respondents gave an explanation for their choice. The top themes where as follows:

Agree with proposal with 102 comments such as:

- This would be the ideal solution. It has been tried before to change things and make them more community based. It doesn't work due to lack of funding and staff. People slip through the net and are forgotten. Some people with additional needs require the structure of a day centre without the stress of travelling miles
- They are all needed. KEEP LOCAL ACCESS, SO EVERYONE HAS THE CHOICE.

Impact on clients and carers with 65 comments such as:

- Why change and make it so difficult for the users and their families to get the help and support they need
- You have got to keep something open for people in south Derbyshire area not fair on people who have nowhere to go or can't get there and plus they don't want to be stuck on transport most of the day as they should be in wheelchairs or in same position for that length of time. Derbyshire are not thinking of clients if they wanted to do community connectors they would of done it years ago when they were younger and where is the respite for carers, this is so unfair.

Alternative suggestion with 52 comments such as:

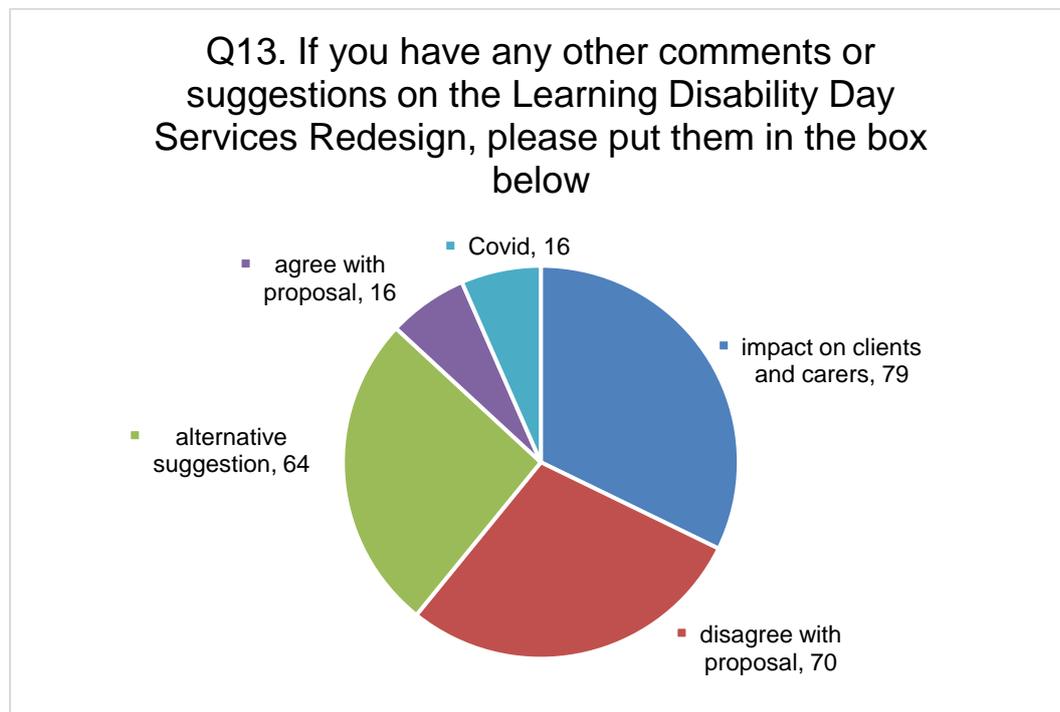
- I agree that they need to stay open whilst there are no alternative provisions. Other options need to be available (new community groups, private day centres etc) need to be available BEFORE the centres shut, otherwise the alternatives will never appear
- My Life My Way resulted in large numbers of people with LD/autism doing things outside of day centres. Are you certain that all these people and their

parents/carers are satisfied with the suitability/quality/duration of these alternatives? This requires a proper determination before this approach is rolled out further.

Lack of other opportunities with 23 comments such as:

- As the only centre in the South of the county I think it's vital for clients social/relationship needs
- If there are suitable alternatives in place there should be no need for traditional day services, however there needs to be viable alternatives in place already.

Question 13



The top themes were as follows:

Impact on clients and carers with 79 comments such as:

- Day services if appropriately managed are a wonderful resource for people, where they feel safe, wanted, cared about, safe amongst friends, and supported with fulfilling activities, for a couple of years before the "consultation" Day Centres were dragged into the dark ages, with very little money to spend, making them seem unattractive to people so that the carrot of 'activities of your choice- when you choose' seemed very attractive, the reality is an hour bowling with a PA once a week
- Whilst attending the day centre our son received rebound therapy and physiotherapy provided by trained day centre staff, which formed part of his care plan, this would no longer be available if the day centre was to close. Speech and language therapist could visit the day centre. Whilst our son was there and discuss any concerns and actions with the staff and ourselves. The

day centre was a good contact point for wheelchair services to carry out any repairs/maintenance.

Disagree with proposals with 70 comments such as:

- I am outraged that people in 'authority' think it is acceptable to forcibly remove those that attend day service provision. Many have been attending for 20 - 30 years. Their friends attend too, this is where they feel safe, supported, not judged, understood. It is where they feel "part of a family". Families (including siblings) and carers also feel comfortable and supported by the day service provision that their adult/ child/sibling receives
- It is important to keep places open to aid independence and social mixing. It also helps individuals to feel empowered and of value.

Alternative suggestion with 64 comments such as:

- Utilise the buildings to enable both community based and building based services. Allow Community Connectors to introduce their service to those more able to explore any opportunities that may be suitable too. Do more skills based and independent skills
- Keep a variation of outdoor activities as this is the creative area which needs to be built up not reduced. If help is needed use community and education facilities to be more engaged and support as many in these locations don't know they exist. Security would need to be upheld but this possible DBS checks etc. Marketing these asking for community support. If people can come together in lockdown they can continue to support and build a much needed community to reduce pressure on council staff.

Agree with proposal with 16 comments such as:

- We fully support the principal of giving people with learning difficulties the support and care they need in the best way possible for each individual. The days of putting everyone behind 4 walls when they leave school is long gone and as society's attitudes have changed and the opportunities expanded it is vital that every opportunity is made available. However, this cannot be a one size fits all attitude and great care and attention must be given to satisfy individuals needs and capabilities
- Whilst day centres are not helpful for everyone, I would hope that for those who rely on them would be accommodated. Also, a lot of effort needs to be put in to ensure that there are plenty of meaningful alternatives available for the well- being of all adults with Learning Disabilities and/or Autism. This must be a priority.

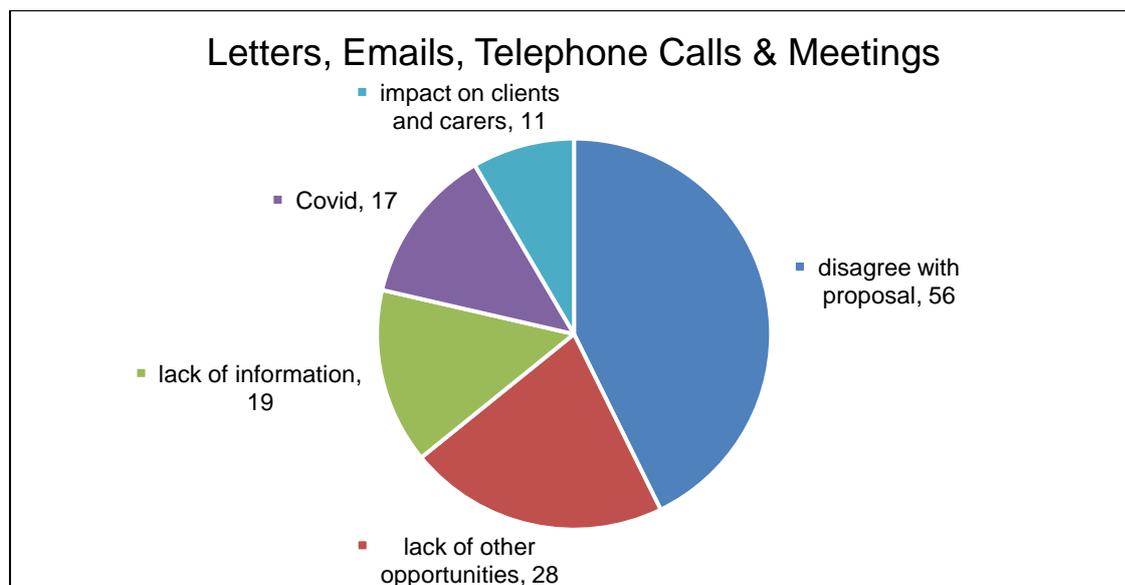
Covid with 16 comments such as:

- You have made a statement that we are 'under used' - this now looking true due to being shut because of Covid. This wasn't the case before Covid, our day service was thriving, our clients loved coming. We had 58 client's that attended our day centre before Covid. We have also provided a service to clients from other services since reopening. You have swept this service away from under the client's feet and it's not fair. They haven't been given a choice on whether they can come or not
- Keep the projects open they give them a purpose and valuable experience to join society and be part of the community. They want to be able to mix with their own peers the council have just dumped them for the last 2 years and Covid was the councils dream to cut services using excuse after excuse.

Qualitative analysis from consultation views on proposal from Letters, Emails, Telephone Calls, and Meetings

Overall 334 comments were captured from those who chose to respond via email, letter, telephone calls or participation in meetings.

This chart represents the top 5 themes:



Impact on clients and carers with 115 comments such as:

- We liked it when they were picked up in the morning, then went out and about doing different activities during the day and then you brought them home in the evening. We knew where we stood – we are left now not knowing what is happening for the rest of the day. We need planned support so we can plan and co-ordinate our working lives too
- There seems to have been a push towards using PAs but this is stressful for carers. You have to find someone, sort their holidays, make sure they have the right car etc. Then you need to plan activities where there are accessible

toilets – how many changing places are there across the Country? You can't even just pop in and use the ones at the centres. It is so very stressful.

Disagree with proposal with 56 comments such as:

- He's not safe to leave the house alone (referring to care in the community). Who will take him to the toilet or make sure he's eating the correct things?
- I feel we have explored all the alternatives to the day centre, but that is where he would like to go.

Lack of other opportunities with 28 comments such as:

- The idea that all these people are being offered opportunities in the community, volunteering, PVI – where is the capacity for that? I don't see any of those things out there
- Community Connectors may grow in number but there is a worry if there aren't the activities to access there will be nothing to connect to.

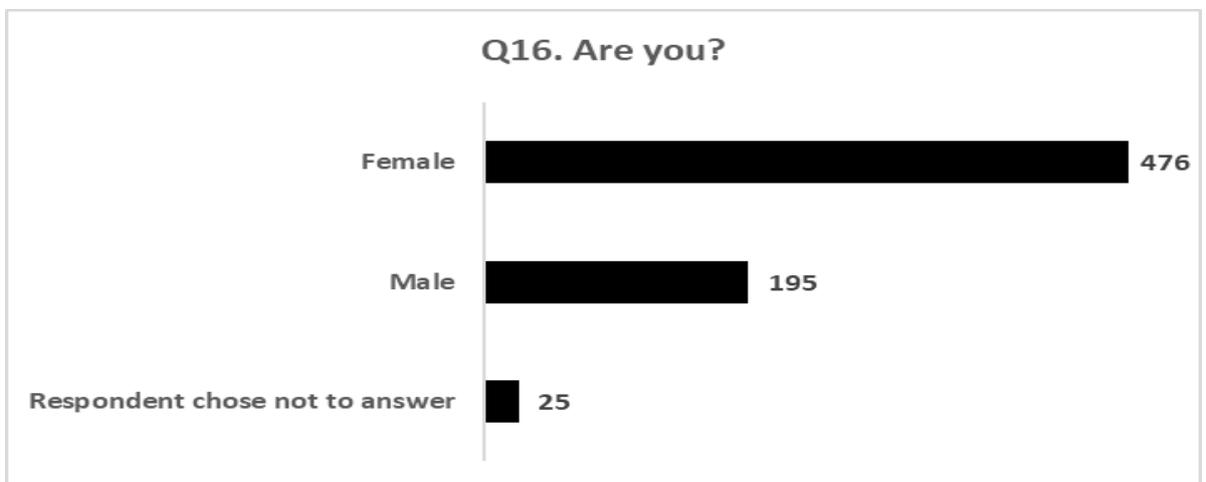
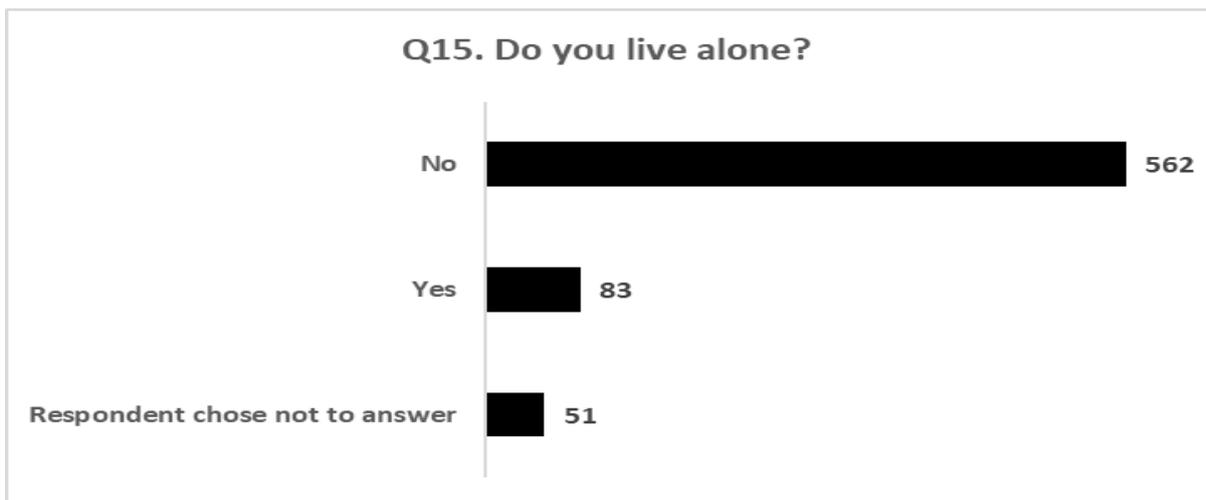
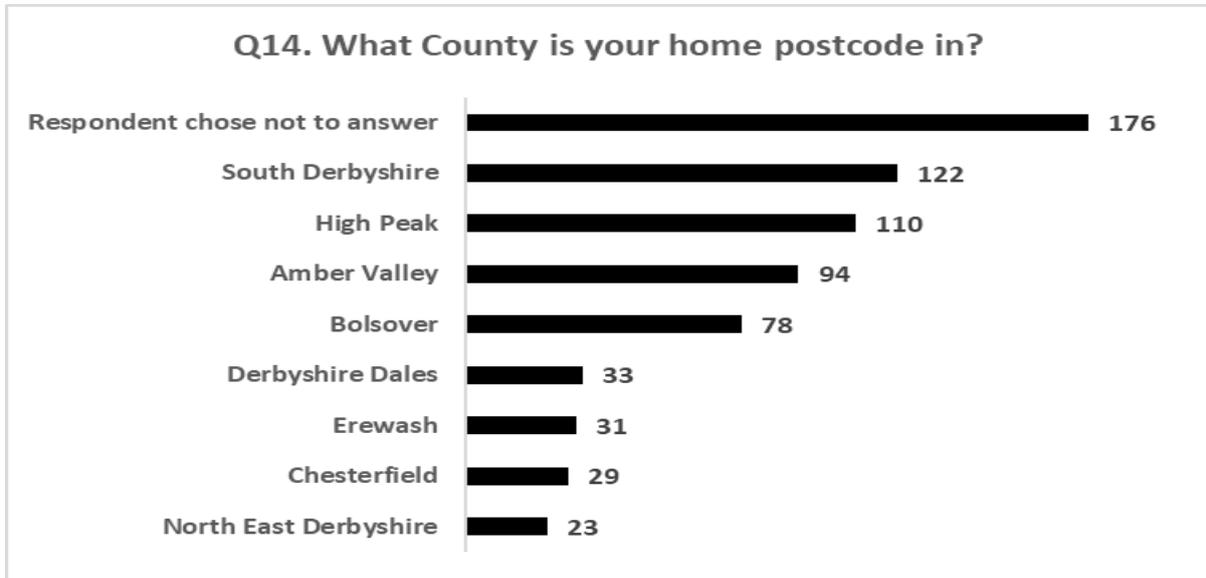
Lack of information with 19 comments such as:

- The figures in the paper could change if you haven't finished assessing people in assisted living
- It would reassure people to see evidence of alternative services. I know they don't exist.

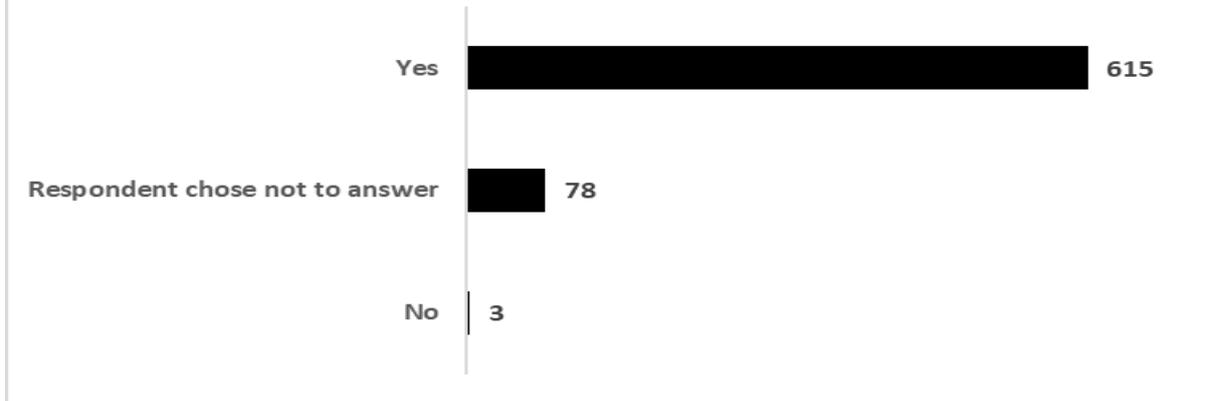
Covid with 17 comments such as:

- I'm not sure how you will express the level of true demand in the cabinet paper when people haven't been given the option to return to centres
- An adult with learning disability pre covid was going 4 days a week, and now post covid she can only go once a week and the other 3 days she is at home upset and wants to go to Whitemoor.

Demographic information



Q17. Is the gender you identify with the same as your sex registered at birth?

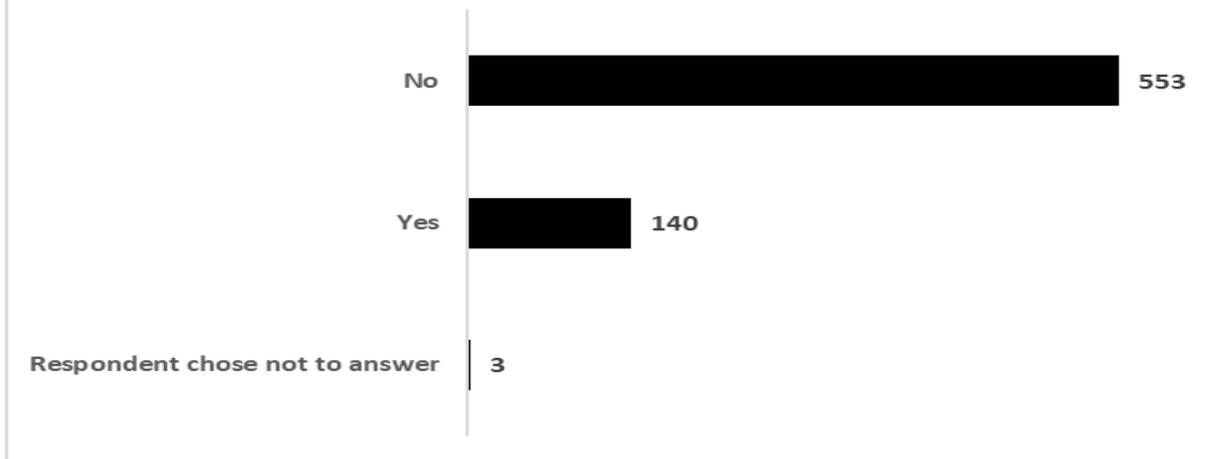


Q18. What was your age at your last birthday?

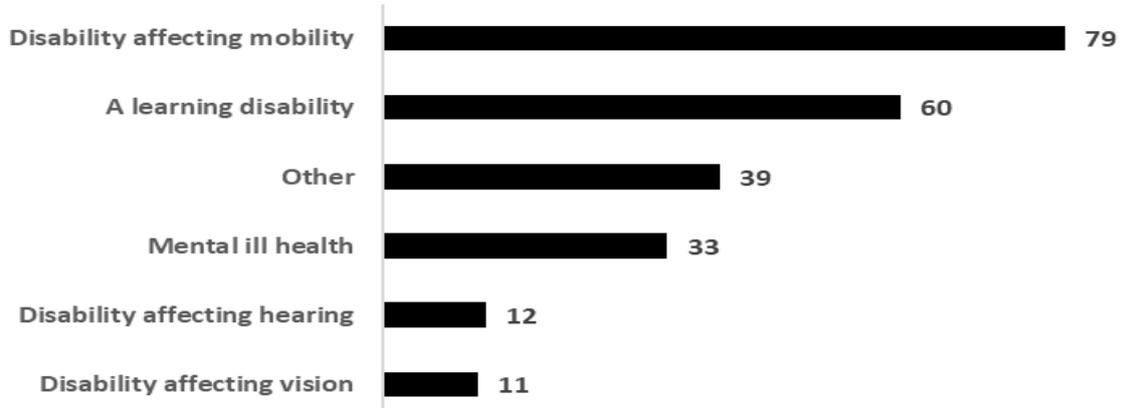
Count	Sum	Mean	Minimum	Maximum	Range
637	33844	53.1	16	89	73

59 respondents chose not to answer

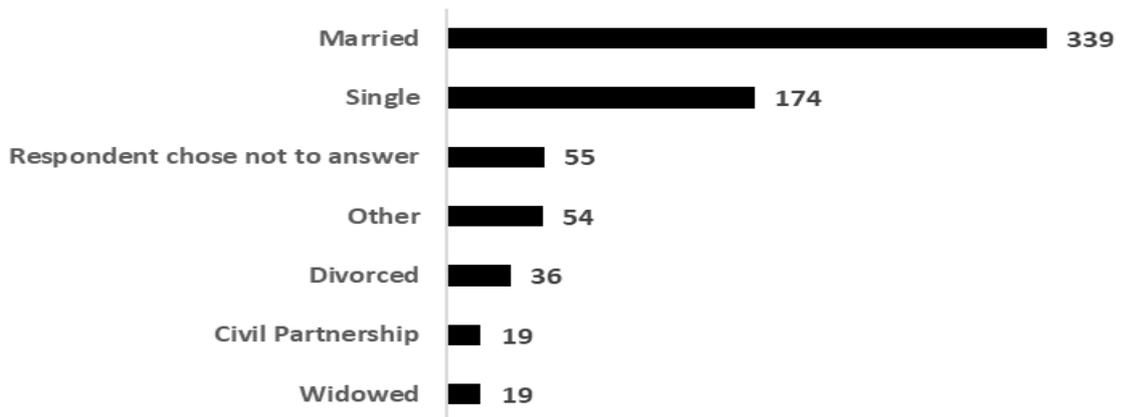
Q19. Do you consider yourself disabled?



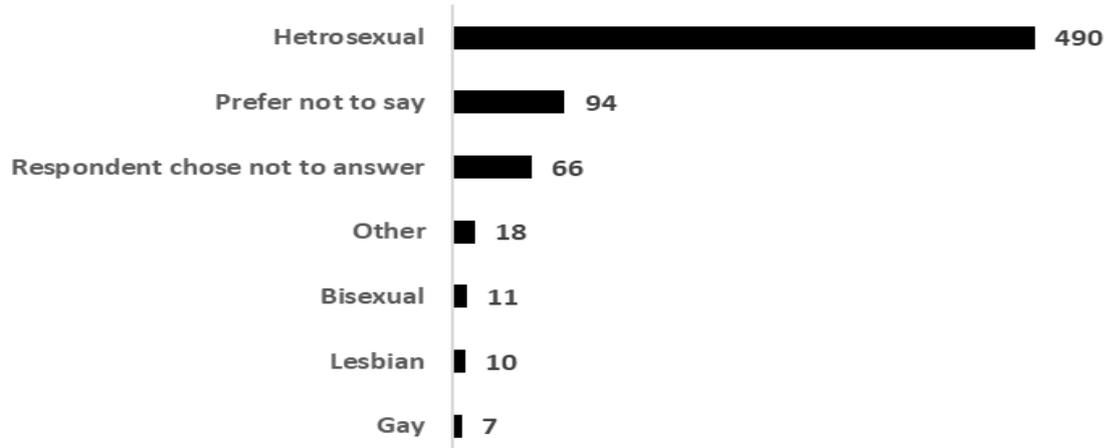
Q19a. If you do consider yourself disabled, what type of disability do you have?



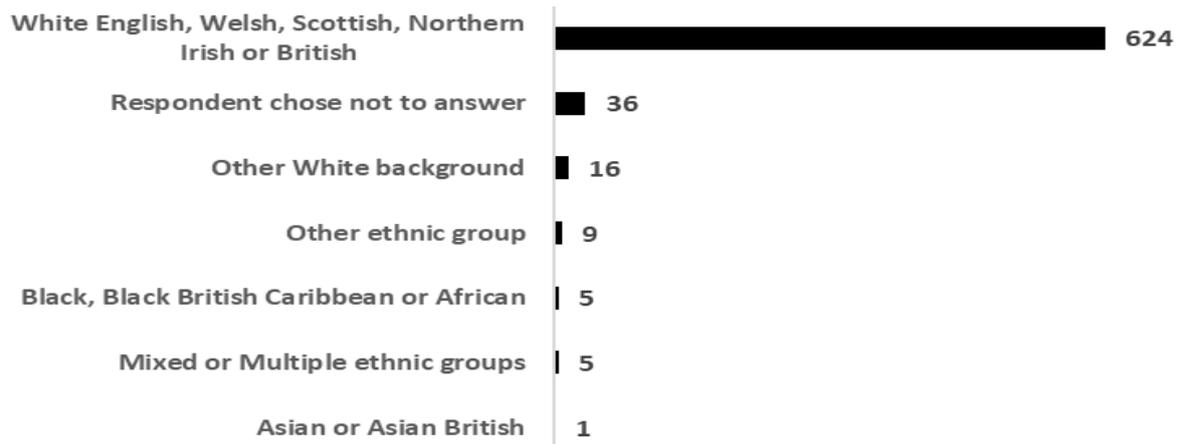
Q20. Which of the options best describes your marital status?



Q21. What is your sexual orientation?



Q22. What is your ethnic group?



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FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

IMPROVEMENT AND SCRUTINY COMMITTEE - PEOPLE

WEDNESDAY 7 SEPTEMBER 2022

Report of the Executive Director – Adult Social Care & Health

Results of the consultation on proposals for the future provision of the assistive technology monitoring service for community alarm only clients

1. Purpose

- 1.1 A report was presented to Cabinet on 10 February 2022 which sought approval to undertake a public consultation on proposals for the future provision of the Assistive Technology Service for all community alarm only clients. Following Cabinet approval, the consultation took place between 21st February 2022 and 1st May 2022.
- 1.2 The purpose of this report is to inform the Scrutiny Committee of the outcome of the public consultation and provide an opportunity for the Scrutiny Committee to submit comments to Cabinet for consideration in making its decision.

2. Information and Analysis

- 2.1 The AT service (previously called community alarm and telecare service) has been in place since 2003, when the responsibility of the Supporting People programme transferred to the Council. As part of this transfer of funding responsibility, the Council was required at that time to maintain the funding arrangements for nearly 5000 people who were supported by the provision of community alarm and telecare.

There are 3 main types of assistive technology available, which can be used either independently or as combined assistance. They are community alarms, telecare and activity monitoring.

- Community Alarm: An analogue based system with a pendant or wristband that connects to a telephone line through a base unit. If help is needed, the person can get help by pressing the button on the pendant.
- Telecare: It can be used throughout the home to support people with identified social care needs and their carers, for example, bed/chair occupancy sensors, falls detector and property exit sensors.
- Activity Monitoring: The system is used by social care professionals to monitor activity when working with people who may have difficulty communicating their needs to other people including their family or social care professionals.

Both the community alarm and telecare equipment operate 24 hours a day, seven days a week and are either installed in individual homes that use the person's telephone line or connected to hard wired systems in sheltered accommodations. The community alarm and telecare equipment can either be connected to a monitoring centre or stand-alone equipment (e.g. pager) to alert others if assistance is needed.

- 2.2 In June 2019, the Council's Cabinet made a decision to continue funding the monitoring charges for the legacy clients and approved implementation of the new eligibility criteria for new clients from 1 November 2019 [Cabinet report](#). The new criteria limited eligibility to only those aged 18 and over, assessed under the Care Act (2014) as having eligible needs and who would benefit from use of the AT service. Eligibility for support would also be subject to a co-funding assessment meaning some individuals would have to pay for or contribute to their own support [Paying for non-residential care - Derbyshire County Council](#).
- 2.3 A report was presented to Cabinet on 10 February 2022 to request approval to consult with clients of the community alarm only provision of the AT service on proposals for making changes to the eligibility criteria to ensure it is fair and equitable across Derbyshire. This is because there are currently two groups of funded clients, the legacy clients (individuals who have received the service prior to 1 November 2019) and the Care Act eligible clients.

2.4 The options for consideration within the consultation were:

Option One – New Model

Anyone who currently receives the DCC funded community alarm service because they are considered to be a 'legacy client' would no longer automatically have their monitoring charge paid for by the Council. Instead, everyone whose current service is limited to a DCC funded community alarm would be subject to an assessment and would be reviewed in accordance with the Care Act (2014) to decide whether they are eligible under Section 2 or Section 18.

Those people assessed as eligible for support under Section 2 would be provided with the equipment free of charge and would need to pay the monitoring cost directly to the provider of the service.

Those people assessed as Care Act eligible under Section 18 and requiring a wider package of care, which includes a community alarm, would be provided with the equipment free of charge but in relation to the ongoing monitoring charges, would be assessed in accordance with the Council's co-funding policy and the individual's personal budget would reflect this.

Those people assessed as Care Act eligible under Section 18 requiring a community alarm only and no wider package of care would be provided with the equipment free of charge, but in relation to the ongoing monitoring charges, would pay the monitoring cost directly to the provider.

The DCC funded community alarm service would continue to be provided free of charge (including equipment and monitoring charge) as part of the Council's short term service offer. At the end of the period of short-term support, people would be assessed, as set out above, to confirm whether they are eligible to continue receiving the community alarm service in the longer term.

Anyone not eligible under the Care Act (2014) and/or any self-funding clients would continue to have the ability to obtain a community alarm from available providers at their own cost and would be signposted accordingly.

Should a person become otherwise eligible for the DCC funded community alarm service in future, they would be assessed as set out above.

A transition period would be offered to all clients that are assessed as responsible for their ongoing monitoring charges, to identify any alternative arrangements they wish to put in place.

Option Two – existing offer

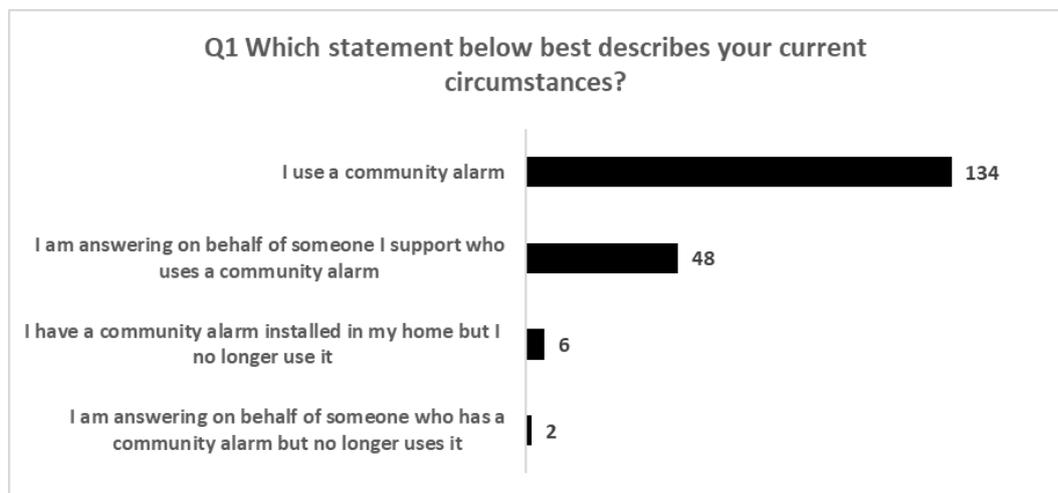
The alternative to the proposed new model is to continue with the two-tier inequitable system of eligibility. Under this model, new clients would continue to be assessed against Care Act (2014) criteria and ongoing monitoring charges are paid for by the client themselves or reflected in their personal budget, and legacy clients would continue to be funded by the Council.

- 2.5 Appendix 2 has further details of the proposals.
- 2.6 The consultation used a quantitative and qualitative approach to gather people's views about the proposed changes. Officers enabled as many people as possible to take part, by offering a range of ways in which they could share their views:
- a) All clients who currently receive a community alarm only were sent a letter following the Cabinet decision to consult on the proposals for the of the Assistive Technology Community Alarm Service.
 - b) The questionnaire was made available in different formats on request, such as other languages or larger print if this was more appropriate.
 - c) Information regarding the consultation was available on the Derbyshire County Council Consultation webpage [Changes to the eligibility criteria for the community alarm system - Derbyshire County Council](#) which gave an outline of the proposals and the ways in which people could share their views.
 - d) People were also given the opportunity to request a paper copy of the questionnaire via the Stakeholder Engagement and Consultation Team and returned their response using the postal questionnaire.
 - e) There was also opportunity to write into the Council via a letter or email to a dedicated email address.
 - f) Telephone interviews were offered for those people requiring support to complete the questionnaire.
 - g) Staff from the Adult Care Stakeholder Engagement and Consultation Team arranged four virtual meetings co-hosted by a Service Manager from Adult Social Care Commissioning Team, in which participants were given the opportunity to give their views. Only two meetings went ahead due to no bookings being made for the other two virtual meetings.

2.7 There were 5 distinct areas from which qualitative information was analysed where the feedback was clearly coded and reported as information.

1. Information gathered during virtual meetings
2. Information from letters
3. Information from emails
4. Information from telephone calls
5. Information contained within the open text boxes on the questionnaire.

2.8 Below is a summary of the number of people who responded:



2.9 In total, 190 questionnaires were completed, and 9 responses were received via email, letter, at a meeting or via telephone call. The Stakeholder Engagement Team (SECT) themed the responses from all qualitative information gathered from the questionnaires, letters, emails, telephone calls, and meetings. Overall, 268 comments were received in addition to the quantitative data received.

2.10 The Adult Care Stakeholder Engagement and Consultation Team (SECT) analysed the responses, please see Appendix 3 for detailed information.

The following summary considers all questions asked and responses received, including quantitative responses and themes identified during the analysis by SECT.

Summary from responses received:

Service benefits

The questionnaire asked people to consider the main benefits of the service. Respondents considered there to be multiple and almost

equally important benefits to having a community alarm, in particular feeling safe, providing reassurance and getting help when needed.

Importance of technology

The questionnaire asked people to consider how important technology was as part of the overall social care support they receive. Almost two thirds of respondents answered that using technology is 'very important' or 'important'.

Eligibility

There was a mixed response regarding the proposed eligibility criteria for the provision of community alarms. This can be further seen in the comments provided by respondents which shows responses are based on individual circumstances.

Introduction of monitoring charges

56.3% and 54.7% of respondents either disagreed or strongly disagreed with the proposal regarding monitoring charges, the higher figure being for those with a community alarm only and the lower for clients with a wider package of care. There were similar levels of overall agreement (24.2% and 23.2%), but with more respondents suggesting they neither agreed nor disagreed with monitoring charges as part of a wider package of care.

Overall, 23.2% of respondents said they would be happy to pay the monitoring charges for their community alarm, with 25.3% being neither happy or unhappy and 51.6% being unhappy with only around half of these were extremely unhappy.

However, when asked what they would be prepared to pay, 52.6% said they would be willing to pay up to £5 per week, with a very small number of respondents saying they would be willing to pay over £5. The remaining 44.74% stated saying they did not want to pay.

Summary of themes from qualitative comments:

Agree with proposals

Some respondents felt that the proposals were acceptable, and they agreed. Largely, people want to continue using their community alarm but also agree this option should be available to more individuals who might need them.

Alternatives available

Some people indicated that they might choose to use their mobile phone instead of continuing to use their community alarm.

Appreciation of service

Some respondents made comments that they were appreciative of the value of having a community alarm and provided examples of where this has been effectively used. The community alarm provides peace of mind and is considered vital to helping people to feel safe, build their confidence and maintain their independence and avoids the need for additional services.

Concern for vulnerable clients

Some respondents felt that the proposals were a concern, and they had concerns for the new criteria's being addressed. There is feedback suggesting that based on the age and/or individual circumstances of those people who currently have their monitoring charges paid for them that it would be inappropriate to leave them without this support, regardless of eligibility.

Confusion over monitoring charges

Some people appear to have been unclear about the way in which the monitoring charges would work and who would have to pay this, for example if they receive a wider package of care.

Disagreement with the proposal

Some respondents made comment that they were not in agreement with the proposals being addressed and did not want the changes to happen. Some people commented that people shouldn't have to pay, by virtue of their age or need, regardless of Care Act eligibility.

Distress to clients

Some respondents felt that the proposals were causing them some distress and anxiety, due to the uncertainty as to whether they would have to pay their community alarm monitoring charges in the future.

Prepared to pay

A significant number of people commented that paying towards monitoring charges was reasonable to maintain a good service but requested that charges should be kept to a minimum.

Pressure on personal finances

Some respondents made comment that the proposed charges could not be paid for. There was particular concern around the charges in addition to the continuing rise of the cost of living. Many respondents stated that they are already struggling to make ends meet, without the additional pressure of paying for their community alarm.

Regular assessment

Some people felt that assessments should be ongoing to ensure the correct people are receiving the service.

- 2.11 The next steps are for Cabinet to consider the responses from the consultation and the Equality Impact Assessment (EIA) to decide on proposals to change the eligibility criteria. This is an opportunity for Scrutiny Committee to make comments for the Cabinet to consider.

The Scrutiny Committee should be mindful that the EIA, which has yet to be produced, will play a role in the decision making as it must be given due regard by Cabinet.

3 Consultation

- 3.1 There is no requirement in terms of consultation for Scrutiny Committee. The public consultation is outlined above, and further details can be found in Appendix 3.

4 Alternative Options Considered

- 4.1 Not applicable

5 Implications

- 5.1 Not Applicable

6 Background Papers

- 6.1 None

7 Appendices

- 7.1 Appendix 1 - Implications
- 7.2 Appendix 2 – Cabinet Report 10th February 2022: Assistive Technology Service
- 7.3 Appendix 3 – Consultation report on proposals for the future provision of the assistive technology service for community alarm only clients

8 Recommendation(s)

That Committee:

- a) Notes the responses to the public consultation
- b) Notes that all such matters will be considered and included within a comprehensive and robust Equality Impact Analysis (“EIA”) which will be incorporated within any future Cabinet Report which may be presented in due course and further notes that in the event of this occurring Cabinet will fully consider the EIA as part of its decision making in the
- c) Considers responses to the Public Consultation and provides comments to Cabinet for consideration when making its decision on the Assistive Technology service.

9 Reasons for Recommendation(s)

- 9.1 An Equality Impact Analysis is being prepared to reflect the issues raised during the consultation process, which will incorporate comments from scrutiny.
- 9.2 The Cabinet will need to have regard to the comments from scrutiny thereof in any decision making.

Report Author: **Colin Selbie** **Contact details:** Colin.Selbie@derbyshire.gov.uk

Implications

Financial

1.1 Not applicable for Scrutiny Committee

Legal

2.1 Not applicable for Scrutiny Committee

Human Resources

3.1 Not applicable for Scrutiny Committee

Information Technology

4.1 Not applicable for Scrutiny Committee

Equalities Impact

5.1 Not applicable for Scrutiny Committee

Corporate objectives and priorities for change

6.1 Will be included within any future Cabinet Report

Other (for example, Health and Safety, Environmental, Sustainability, Property and Asset Management, Risk Management and Safeguarding)

7.1 Not applicable



FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

CABINET

Thursday, 10 February 2022

Report of the Executive Director - Adult Care

Assistive Technology Service
(Cabinet Member for Adult Care and Health)

1. Divisions Affected

County-wide

2. Key Decision

2.1 No

3. Purpose

To seek Cabinet approval to carry out a ten week consultation exercise on the future provision of the Assistive Technology (AT) service for all community alarm only clients.

4. Information and Analysis

4.1 Background

The AT service (previously called community alarm and telecare service) has been in place since 2003, when the responsibility of the Supporting People programme transferred to the Council. As part of this transfer of funding responsibility, the Council was required at that time to maintain the funding arrangements for nearly 5000 people who were supported by the provision of community alarm and telecare.

The AT service currently offers an analogue range of equipment with a traditional approach to support people to live independently for longer such as activity monitoring, community alarm and telecare.

- 4.1.1 Activity Monitoring: The system is used by social care professionals to monitor activity when working with people who may have difficulty communicating their needs to other people including their family or social care professionals. The system can be used to assist the identification of a baseline for the activities of daily living, support the tracking of progress and the effectiveness of interventions for the person. The report generated from the activity monitoring system provides evidence and support to social care professionals when carrying out Care Act 2014 eligibility assessments for people. The activity monitoring system is only available to social care professionals and a telephone line is not required for installation.
- 4.1.2 Community Alarm: An analogue based system with a pendant or wristband that connects to a telephone line through a base unit. If help is needed, the person can get help by pressing the button on the pendant.
- 4.1.3 Telecare: It can be used throughout the home to support people with identified social care needs and their carers. It is usually supported by a base unit connected to a telephone line and automatically raises an alert when help is required. Examples of some of telecare equipment are bed/chair occupancy sensors, falls detector, property exit sensors and smoke /carbon monoxide detectors.

Both the community alarm and telecare equipment operate 24 hours a day, seven days a week and are either installed in individual homes that use the person's telephone line or connected to hard wired systems in sheltered accommodations. The community alarm and telecare equipment can either be connected to a monitoring centre or standalone equipment (e.g. pager) to alert others if assistance is needed.

The AT service is provided across the eight Derbyshire districts by a range of providers providing different elements of the pathways which creates multiple handovers, inbuilt inefficiencies and increases costs. The current providers include District and Borough Councils and Housing Associations. The Council currently coordinates the provision in Derbyshire Dales, Erewash and North East Derbyshire following the decision of these District and Borough Councils to no longer offer these services. The installation, maintenance, review, decommissioning and

recycling of community alarm and telecare equipment is currently provided by the Handy Van service. There is a contract with Tunstall Healthcare for the provision of the community alarm and telecare equipment.

The current service model has not been competitively procured since the Council took over the responsibility for funding these services in 2003. Therefore, the current service model has not been subject to a value for money assessment as part of a commissioning exercise. Since November 2018, the service was re-focused to provide a person centred, outcome focused approach, which reflects the underpinning principles and requirements of the Care Act 2014.

In September 2018, Cabinet approval was sought to extend the contracts for a period of two years whilst service transformation and consultation activity took place. In November 2018, the consultation exercise was carried out (from 19 November 2018 to 25 January 2019) with the legacy clients who were users of the service in their own home via Adult Social Care funding. (Cabinet Report [8-11-2018 Consultation on eligibility criteria for community alarms and telecare services \(derbyshire.gov.uk\)](#)).

In June 2019, the Council made a decision to continue funding the service for the legacy clients and approved the new eligibility criteria for new clients from 1 November 2019 (Cabinet Report [2019-06-06 6h Consultation Community Alarms and Telecare \(derbyshire.gov.uk\)](#)). The new criteria limited eligibility to only those who were aged 18 and over, assessed under the Care Act 2014 as having eligible needs and warranting the use of the AT service. Eligibility for support is now also subject to a co-funding assessment which may mean some individuals will have to pay for their own support. [Paying for non-residential care - Derbyshire County Council](#)

The Council commenced a transformational programme called Better Lives in November 2019. The programme was established to redesign existing services to ensure that the Council is putting people at the heart of everything we do, to embed strengths based approaches to delivering care and support and to make sure the right solutions are available in the right place, at the right time. It is about maximising and regaining independence and reducing and delaying the need for intervention, focussing on resilience, social connection and health and wellbeing. The Better Lives programme focusses on improving the wellbeing of local people by supporting them to live independently for as long as possible, ensuring they remain a part of their local community. AT is

integral to supporting an individual's independent living in the community.

During this period, inter authority arrangements were put in place with the District and Borough council providers, and service level agreements for the other providers to allow flexibility in how these services are managed until March 2021. However, due to the COVID-19 pandemic, it was not possible to commence the procurement process, and the contracts were extended to March 2022 following approval by senior management team in November 2020.

A further 12 - 24 month contract extension to March 2024 (12months + 6months + 6months with 3-month termination clause) has been approved to allow time to carry out the consultation and depending on the outcome of the consultation, implement the proposals and to allow a full and open procurement exercise to be undertaken.

The continued provision of services to legacy community alarm only clients costs the Council over £0.400m per annum for the monitoring charges alone. This expenditure excludes equipment, installation, maintenance and decommissioning costs. Whilst the cost of service provision for legacy clients is a diminishing expenditure, the rate of reduction is slow and practically these responsibilities will remain with the Council for another 10 years or more.

The Council is proposing changes to the community alarm provision of the AT service to ensure that the eligibility criteria is fair and equitable across Derbyshire. This is because there are currently two groups of clients, the legacy (individuals who have received the service prior to 1 November 2019) and the Care Act eligible clients. It is proposed that an assessment will be carried out for all community alarm only clients including both legacy and Care Act eligible community alarm only clients to ensure that the provision of the service is based on either Section 2 or Section 18 of the Care Act (see Section 2.1 of Appendix 1 of this cabinet paper for details of Section 2 and Section 18 of the Care Act).

The ongoing monitoring charges associated with the community alarm element of the AT service for all clients assessed as having eligible needs under the Section 18 Care Act 2014 will be assessed under the appropriate charging regulations and the individual's personal budget will reflect this.

4.2 Eligibility for Current Service Provision

Following the consultation exercise undertaken by the Council in November 2018, a new eligibility criteria was implemented for new

referrals, whereby the provision of community alarm and telecare services is provided only to those assessed as eligible under the Care Act 2014, under the provisions of either Section 2 (prevention) or Section 18 (assessed need). In addition, these services have since been provided to children who have been assessed as eligible for this service by Children Services.

4.3 Analysis of Current Users

Initial analysis of individuals in receipt of the AT service as a whole including children in March 2021 suggests 50.1% of people had a primary support need of physical support, 0.7% for carer support, 1.2% for memory and cognition support, 2% for learning disability, 2.5% for mental health support, 2.4% each for sensory support, 2.6% for social support, 0.3% for children, followed by 36.8% with non- primary support reason users.

82.5% were aged 65 and over, 17.1% aged 18-64 years old and 0.3% for children. This indicates that the adult care social care technology offer is currently focused on supporting older people.

Further analysis shows that 95% of individuals in receipt of the community alarm only service are legacy clients whose eligibility is based on them being in receipt of housing benefit and/or pension credit while the remaining 5% are assessed as Care Act eligible. The data clearly highlights that a large proportion of the users of the service are legacy clients rather than those who have an assessed need under the Care Act.

However, this analysis needs to be treated with some caution as there are different counting and reporting methods across the range of service provision. There has been ongoing data cleansing exercise to reduce data quality issues and throughout the proposed consultation, further work will take place to analyse updated information and to provide a more accurate picture for the Equality Impact Analysis.

4.4 Drivers for Change

4.4.1 Financial Challenges

Adult Social Care is tasked with making further budget savings which requires undertaking review of current services, eligibility criteria and service redesign to ensure good quality services and value for money. Other local authorities have already revised their AT offer and currently only provide telecare and bespoke AT packages for Care Act eligible clients with an ongoing support package. In light of reducing budgets Derbyshire now needs to consider similar proposals.

4.4.2 Welfare Reform

Another driver for proposing changes to the eligibility criteria for legacy clients is the Welfare Reform agenda and Universal Credit. By 2023, the Government has stated that it intends that there will be no legacy benefit claimants and Universal Credit will be fully adopted. Therefore, options regarding future eligibility criteria for legacy clients, needs to be considered in light of ongoing changes to the benefits system.

4.4.3 Impact of COVID-19

Local authority finances are under significant pressure in the context of the COVID-19 pandemic, with central government asking local authorities to deliver many additional services while the cost of many existing services increasing. Opportunities to implement savings programmes have been disrupted and various locally generated income streams have fallen.

These challenges follow a decade in which local authority funding has reduced while demand for key services has risen. As a result, the ability of local authorities to maintain financial and service sustainability this year and over the medium-term is being tested.

4.4.4 Digital Switchover

There is a need to review the existing analogue service in operation across Derbyshire because this will be affected by the proposed switch-off of the public switched telephone network (PSTN) in 2025. Current AT equipment is analogue based and would need to be replaced with digital equipment. The notification of each area in Derbyshire being switched over is called a 'stop sell date' and Open Reach are releasing these dates across the country. Different parts of the County have different 'stop sell dates and will therefore begin switching over at different times.

According to the Technology Enabled Care Services Association (TSA) Commissioner / Buyer Guidance published in November 2021, **“Organisations must no longer procure social alarms that can only establish connections to Alarm Receiving Centres using analogue tone-based communication. It is mandated that those organisations that have an ongoing requirement to communicate in analogue protocols (e.g. ARC infrastructure has not been upgraded) must procure ‘hybrid’ social alarms that communicate in both analogue and digital protocols (and can be switched remotely without the need for an on-site reprogramming)”**. As a result of this, additional investment would be required to replace current analogue equipment with digital equipment.

4.4.5 New opportunities through technology

As part of the Enterprising Council approach, the Council Plan sets out clear ambitions to be an efficient and high performing Council delivering value for money services. As a result, the Council is exploring creative ways to deliver better services for less and ensuring that the operating model is fit for purpose. The approach will also see the Council modernise and take advantage of new technology and better ways of doing things for both residents and employees. There are opportunities to explore how the authority develops its AT offer to support people by including the service as part of the person's Care Act eligible support package.

There is a wide range of other technologies that allow people with impaired mobility, with disabilities (physical or learning), and sensory impairments to live as independently as possible on a day to day basis.

This might include:

- 4.4.5.1 Technology to help with activities such as switching on lights, controlling the temperature in the home, cooking and preparing meals, medication and appointment reminders, and technology to support social activities and interaction
- 4.4.5.2 Consumer technology such as smart home hubs (e.g. Hive) and voice activated virtual personal assistants (e.g. Alexa, Google Home) may be offered to eligible people where there are demonstrable benefits (a pilot was carried out in June 2019 in Derbyshire). Wearables like smart watches, GPS trackers, fitness and activity trackers may also be part of this offer.
- 4.4.5.3 Whilst there are many generic devices available, there are also increasingly technologies targeted at people with particular conditions such as dementia or long-term health conditions and communication devices to support people who have communication difficulties which might form part of their support package
- 4.4.5.4 Remote monitoring and virtual solutions for social interaction and to connect with professionals virtually (e.g. video / virtual calls for social purposes through tablets or screens)
- 4.4.5.5 Applications (apps) for mobile devices that promote independence, health and well-being may also be provided by the service to target particular needs such as Brain in Hand which the Council is currently piloting with 30 licences.

The technologies above are increasingly connected and integrated to each other and to dashboards to support remote monitoring. There is an opportunity proactively to use data generated from technology to support independence and improve outcomes, provided we do this in a way which complies with the GDPR. Also, some new technological

solutions do not require a third party to manage a service via a calls monitoring centre. It is now possible to purchase pieces of technology which do not require external agency involvement and can be operated privately between individuals and their friends, carers or neighbours.

4.4.6 Current service utilisation

Data analysis suggests that utilisation of current services by provider varies across the County with underutilisation between 24 – 84%. A summary on a district-by-district basis can be found in Appendix 2. Therefore, there is an opportunity to look at how the current funding invested in these services, provides value for money and whether the service approach is equitable and focused on the Council fulfilling its statutory duties.

5. Consultation

- 5.1 Adult Social Care is seeking to consult for ten weeks with individuals who are in receipt of community alarm only as their package of care funded by Adult Social Care, their representatives and current contracted AT service providers. The proposals outlined below will form the basis of the consultation.

It is proposed that:

- 5.1.1 Individuals who are community alarm only clients will be subject to an assessment to identify whether they would be eligible either under Section 2 or Section 18 Care Act 2014. Individuals who are currently in receipt of the service by virtue of their entitlement to housing benefit and / or pension credit (legacy clients) will no longer be automatically eligible for a DCC funded community alarm element of the AT service. Any individual identified as not eligible for ongoing support would be offered a transition period to identify alternative arrangements, should they wish to pursue this.
- 5.1.2 The community alarm provision of the AT service will continue to be provided free of charge (to include provision of the equipment and monitoring charge) as part of the short term service (see details of short term service in appendix 4) offer and the client will be subject to an assessment of need at the end of the short term service.
- 5.1.3 Those clients assessed as eligible under Section 2 will be provided with the equipment free of charge and it is proposed that they either pay the ongoing monitoring charges (which is currently an average cost between £2.50 - £5.00 per week) directly to the provider or the Council recharges the client for this activity.
- 5.1.4 The ongoing monitoring charges associated with the community alarm element of the AT service for those clients assessed as having eligible needs under the Section 18 Care Act 2014 will be assessed under the

appropriate charging regulations and the individual's personal budget will reflect this.

- 5.1.5 Any self-funding clients will continue to have the ability to obtain a community alarm from available local providers at their own cost.
- 5.1.6 Should a self-funding client become eligible under Section 18 Care Act 2014, they would then be provided with a personal budget, if considered an appropriate way to meet their eligible needs.

It is proposed that the consultation would run from 21 February until 1 May 2022. Consultation activity will include an online questionnaire, paper version and letters to the community alarm only clients their representatives and current contracted AT service providers. The consultation will be promoted at existing stakeholder groups and networks. There will also be an option for telephone conversations with the Stakeholder Engagement and Consultation Team and online virtual meetings.

Following the consultation, results will be analysed and a further report tabled to Cabinet for consideration outlining the key themes, issues and findings which need to be considered to inform the future of the community alarm element of the AT service provision. Irrespective of the consultation outcome, individuals in receipt of the service will be made aware of further changes to service provision as the current contracted arrangements need to be re-procured on a competitive basis and a new service model developed and implemented.

6. Alternative Option Considered

- 6.1 The alternative to consulting on future arrangement would be to do nothing. The Council could continue with current arrangements i.e. providing the AT service which includes community alarm, telecare and activity monitoring as a single service or as a wider support package.

However, this is costly due to continuous increased cost of service provision for legacy clients and digital switchover and it is difficult to identify how savings could be delivered. Thereby making it financially unsustainable to keep the AT service in its current operational model (see AT costs in section 1.1 of appendix 1). In addition, the current regime also includes service provision for clients with two different eligibility criteria which provides for differing outcomes which are not fair and equitable across the County for those in receipt of the service.

7. Implications

- 7.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

8. Background Papers

- 8.1 [8-11-2018 Consultation on eligibility criteria for community alarms and telecare services \(derbyshire.gov.uk\)](#)
- 8.2 [2019-06-06 6h Consultation Community Alarms and Telecare \(derbyshire.gov.uk\)](#)
- 8.3 [Paying for non-residential care - Derbyshire County Council](#)

9. Appendices

- 9.1 Appendix 1 - Implications.
- 9.2 Appendix 2 - Analysis of current users of the Assistive Technology service
- 9.3 Appendix 3 – Users of AT service not subject to the consultation proposals
- 9.4 Appendix 4 - Short term service

10. Recommendation(s)

That Cabinet:

- a) Notes the proposals to be consulted upon
- b) Approves a ten-week consultation exercise on the proposed changes to the provision of the AT service for all community alarm only clients. The consultation will include details of the proposed eligibility criteria and funding arrangements.
- c) Is informed following the outcome of the consultation exercise by way of an updating report.

11. Reasons for Recommendation(s)

- 11.1 If any significant changes are proposed to the provision of services, the Council is required to undertake a period of consultation for the people affected to better understand their views before any decision is made.
- 11.2 The proposal to consult is required to ensure that the future provision of the entire AT service effectively meets the needs of those clients who are assessed as having Care Act eligible needs following assessment which necessitates this service provision.
- 11.3 To ensure that the eligibility criteria for future provision of the community alarm element of the AT service is fair and equitable and any change to the current charging arrangements relevant to the provision of the service is transparent and meets the Council's statutory responsibilities.

12. Is it necessary to waive the call in period?

a. No

Report Author: Olu Ogunbuyide

Contact details: Olu.Ogunbuyide@derbyshire.gov.uk

Implications**Financial**

- 1.1 Regard has been made to financial implications, the current contractual commitment (monitoring costs) for 2021-22 is summarised in the table below. The cost below excludes installation, maintenance, decommissioning and recycling costs which is £0.305m.

Contract provider	Funding 2021-22 (£m)
Futures Housing Group (Amber Valley)	0.126
Yorkshire Housing Group (M&D)	0.003
Chesterfield Borough Council	0.128
Bolsover District Council	0.144
High Peak Borough Council	0.064
South Derbyshire District Council	0.065
Tunstall Response Ltd - Derbyshire Dales, Erewash, North East Derbyshire	0.070
Equipment	0.180
Total	0.780

The current total cost of the Assistive Technology service is £1.08m and the AT service will continue to be financed from existing budgets.

However, due to the digital switchover (see section 4.4.4 of this cabinet report) the Council is required to provide additional investment between £0.5m - £1.1m to replace current analogue equipment with digital equipment. This is required to be carried out imminently in preparation for the digital switchover by 2025 where BT Openreach have already started providing digital lines in some areas in Derbyshire.

In the Budget report considered by Council in February 2021, the increased use of AT was identified as an area for potential savings through the re-shaping of the service. The report outlined a potential savings of £0.3m and the proposals for consultation outlined in this paper may help contribute towards these identified savings targets. The delivery of the identified savings is dependent on the outcome of the proposed consultation and the Cabinet's response to the outcome.

Legal

2.1 Section 2 of the Care Act 2014 requires local authorities to provide or arrange for the provision of services, facilities or resources, or take other steps, which it considers will:

- contribute towards preventing or delaying the development by adults in its area of needs for care and support.
- contribute towards preventing or delaying the development by carers in its area of needs for support.
- reduce the needs for care and support of adults in its area.
- reduce the needs for support of carers in its area.

The Care and Support Statutory Guidance is clear that the care and support system must work to actively promote well-being and independence and does not wait to respond when people are in crisis by early interventions which prevents need or delays deterioration wherever possible. The importance of preventative services is highlighted further within Section 1(3)(c) Care Act 2014, which requires local authorities to have regard to the importance of preventing or delaying the development of needs for care and support.

Adults who are in receipt of the preventative services will not necessarily require a wider package of care and may receive this support in isolation.

Whilst Section 2 of the Care Act 2014 permits a local authority making a charge for the above, the Care and Support (Preventing Needs for Care and Support Regulations explicitly prohibit making a charge for a service which consists of the provision of community equipment (aid and minor adaptations). Community equipment is defined within the Regulations as as an aid, or a minor adaptation to property, for the purpose of assisting with nursing at home or aiding daily living and, for the purposes of these Regulations, an adaptation is minor if the cost of making the adaptation is £1,000 or less.

In addition to the duty under Section 2 of the Care Act 2014, the local authority is also under a duty to meet an adult's eligible needs. The eligibility criteria is set out within the Care and Support (Eligibility Criteria) Regulations 2015. An adult's needs meet the eligibility criteria if:

- the needs arise from or are related to a physical or mental impairment or illness.
- as a result of the adult's needs, they are unable to achieve two or more of the outcomes (outcomes defined below); and

- as a consequence, there is, or is likely to be, a significant impact on the adult's well-being.

The outcomes referred to above are:

- managing and maintaining nutrition
- maintaining personal hygiene
- managing toilet needs
- being appropriately clothed
- being able to make use of the adult's home safely
- maintaining a habitable home environment
- developing and maintaining family or other personal relationships
- accessing and engaging in work, training, education or volunteering
- making use of necessary facilities or services in the local community including public transport, and recreational facilities or services; and
- carrying out any caring responsibilities the adult has for a child.

Where an adult is assessed as having eligible needs, the local authority must consider what can be done to meet those needs; this may include the provision of AT.

Whilst Section 14 Care Act 2014 permits a local authority to charge for meeting needs under Section 18 Care Act 2014, the Care and Support (Charging and Assessment of Resources) Regulations 2014 explicitly prohibit making a charge for a service which consists of the provision of community equipment (aid and minor adaptations). Community equipment is defined within the Regulations as as an aid, or a minor adaptation to property, for the purpose of assisting with nursing at home or aiding daily living and, for the purposes of these Regulations, an adaptation is minor if the cost of making the adaptation is £1,000 or less.

The proposal is to consult in relation to changes being made to the community alarm element of the AT service by altering the eligibility criteria for legacy clients to ensure a consistent approach. There is no statutory duty to consult, however, the proposals do trigger a duty to consult by virtue of common law. The clients currently in receipt of the community alarm service have a legitimate expectation of being consulted as the proposals will directly impact their current service provision. The clients, their representatives and the current contracted AT service providers also have a legitimate expectation to be consulted due to an established practice of consultation, as demonstrated by the consultation exercise completed in November 2018.

Human Resources

- 3.1 There are no human resources considerations associated with this report.

Information Technology

- 4.1 There are no information technology considerations associated with this report.

Equalities Impact

- 5.1 An Equality Impact Analysis will be undertaken to assess the proposals on the protected characteristic groups. The Equality Analysis will include an assessment of the response to the consultation and engagement and will include a range of recommendations and potential mitigations.

Corporate objectives and priorities for change

- 6.1 Enterprising Council: Transforming the organisation, working as one council, ensuring we are prepared for the future and able to respond to the challenges and opportunities that lie ahead.

As part of the Enterprising Council approach Adult Social Care intend to broaden and expand its use of a range of assistive technology over the next five years. This is a fast paced and constantly evolving area of work due to technological and digital advancements. Nationally evidence suggests technology can have a positive impact for an individual whilst potentially reducing demand and the cost of care. This was also evidenced during the COVID-19 pandemic, as organisations deployed different digital technological aids, equipment, apps etc to help meet the needs of the people by providing care and support, promote independence and reduce isolation. Technology also acts as an enabler providing a range of interventions for people with a long-term health condition of disability.

Other (for example, Health and Safety, Environmental Sustainability, Property and Asset Management, Risk Management and Safeguarding)

- 7.1 In preparing this report the relevance of the following factors has been considered: Social Value, Human Rights, equality of opportunity, health, environmental, transport, property, social value and crime and disorder considerations

Appendix 2

Analysis of current users of the AT service (March 2021).

The summary below provides an overview of current AT service provision.

Area	Provider	Capped Client	Current Clients	Monitoring Centre	Comm Alarm Ownership	Telecare Owner	Self-funding Market
Amber Valley	Futures Housing Group	1650	759 (46% utilisation)	Third Party (Astraline)	DCC Adult Social Care	DCC	Futures Housing Group
Bolsover	Bolsover District Council	1300	900 (69% utilisation)	Bolsover District Council	Bolsover District Council	DCC	Bolsover District Council
Chesterfield	Chesterfield Borough Council	1650	771 (47% utilisation)	Chesterfield Borough Council	Chesterfield Borough Council	DCC	Chesterfield Borough Council
Derbyshire Dales	DCC Adult Social Care	650	162 (25% utilisation)	Third Party (Tunstall)	DCC Adult Social Care	DCC	DCC Adult Social Care
Erewash	DCC Adult Social Care	1500	352 (23% utilisation)	Third Party (Tunstall)	DCC Adult Social Care	DCC	DCC Adult Social Care
High Peak	High Peak Borough Council	650	545 (84% utilisation)	Third Party (Tunstall)	High Peak Borough Council	DCC	High Peak Borough Council
North East Derbyshire	DCC Adult Social Care	1500	417 (28% utilisation)	Third Party (Tunstall)	DCC Adult Social Care	DCC	DCC Adult Social Care
South Derbyshire	South Derbyshire District Council	900	441 (49% utilisation)	Third Party (Tunstall)	South Derbyshire District Council	DCC	South Derbyshire District Council

AT service provision, infrastructure and operational arrangements by district

Clients access AT service via a geographical place based offer, the service is provided by four district or borough local authorities, a housing association, in three areas is co-ordinated directly by Adult Social Care. There is also one housing scheme in Derbyshire with DCC funded community alarm provision for eight clients, the scheme has a total budget allocation of £3,499 per annum and the contract is due to expire at the end of March 2022.

Users of AT service not subject to the consultation proposals

There are a number of scenarios where individuals may be in receipt of services either commissioned by the Council or as private arrangements. None of these service types below will be impacted by the proposals for consultation detailed in this report.

- Any AT client in receipt of a service other than community alarm only.
- Community alarm only clients in receipt of other services funded by the Council.
- Individuals in receipt of standalone equipment which is not connected to a monitoring service, such as pager units that allow individuals to alert a nearby carer wearing a pager that they require help and assistance.
- Clients in Extra Care settings that are operated by DCC or a registered social landlord and Adult Social Care Direct Care establishments, such as the Community Care Centres, which utilise AT services other than community alarm only to provide support in both the communal spaces and individual rooms.
- Children's Services clients who access the services to support young carers and young people with a physical or learning disability; this service is recharged to Children's Services.
- Private clients who are not known to Adult Social Care who self-fund community alarm and telecare services operated by the same providers as those utilised by DCC.
- Individuals who may have put independent arrangements in place themselves or through their landlord for community alarm and/or telecare support within their property or with a national provider.

The Short Term Service

The Service is used to:

- Support a person to gain or re-gain their independence with independent living tasks in their own home
- Support a person to improve their level of independence through maximising their own strengths and/or through identifying the best approach to supporting them
- Support a period of assessment
- Respond to an urgently presenting need in the community whilst further assessment can be carried out by adult social care or others

The Short Term Service should be used in the following circumstances:

- To facilitate a discharge from hospital
- To prevent a hospital admission
- As a new home care response to support a new assessment of the person's need for care and support or increase independence
- As a new or additional home care response where there is a significant change in need for a person already in receipt of services

Eligibility for the Short Term Service:

As a preventative service the Short Term Service is available to those who would benefit. They do not need to be eligible under the National Eligibility Criteria.

Prior to a referral to the Short Term Service, consideration must be given as to what else could help the person meet their needs and achieve their goals. Where appropriate, the person may be signposted to alternative services rather than being offered support from the Short Term Service.

The service is free at the point of entry.

**CONSULTATION REPORT ON PROPOSALS FOR THE FUTURE
PROVISION OF THE ASSISTIVE TECHNOLOGY SERVICE FOR
COMMUNITY ALARM ONLY CLIENTS**

1. Purpose of the Report

A report was presented to Cabinet on 10 February 2022 which sought approval to undertake a public consultation on proposals for the future provision of the Assistive Technology Service for all community alarm only clients. Following Cabinet approval, the consultation took place between 21st February 2022 and 1st May 2022.

The options for consideration were:

- **Option One – New Model**

Anyone who currently receives the DCC funded community alarm service because they are a legacy client would no longer automatically have their monitoring charge paid for by the Council. Instead, everyone whose current service is limited to a DCC funded community alarm would be subject to an assessment and would be reviewed in accordance with the Care Act (2014) to decide whether they are eligible under Section 2 or Section 18.

Those people assessed as eligible for support under Section 2 would be provided with the equipment free of charge and would be required to pay the monitoring cost directly to the provider of the service.

Those people assessed as Care Act eligible under Section 18 and requiring a wider package of care, which includes a community alarm, would be provided with the equipment free of charge but in relation to the ongoing monitoring charges, would be assessed in accordance with the Council's co-funding policy and the individual's personal budget would reflect this.

Those people assessed as Care Act eligible under Section 18 requiring a community alarm only and no wider package of care would be provided with the equipment free of charge, but in relation to the ongoing monitoring charges, would pay the monitoring cost directly to the provider.

The DCC funded community alarm service would continue to be provided free of charge (including equipment and monitoring charge) as part of the Council's short term service offer. At the end of the period of short-term support, people would be assessed, as set out above, to confirm whether they are eligible to continue receiving the community alarm service in the longer term.

Anyone not eligible under the Care Act (2014) and/or any self-funding clients would continue to have the ability to obtain a community alarm from available providers at their own cost and would be signposted accordingly.

Should a person become otherwise eligible for the DCC funded community alarm service in future, they would be assessed as set out above.

A transition period would be offered to all clients that are assessed as responsible for their ongoing monitoring charges, to identify any alternative arrangements they wish to put in place.

- **Option Two – no change**

The alternative to the proposed new model is to continue with the current arrangements. Under this model, new clients would continue to be assessed against Care Act (2014) criteria and ongoing monitoring charges are paid for by the client themselves or reflected in their personal budget, and legacy clients would continue to be funded by the Council.

2. Methodology and Approaches

The report was presented 10 February 2022 to Cabinet and the public consultation took place between 21 February and 1 May 2022. This report will summarise views and opinions submitted by the people of Derbyshire during this period.

The consultation used a quantitative and qualitative approach to gather people's views about the proposed changes. Officers enabled as many people as possible to take part, by offering a range of ways in which they could share their views:

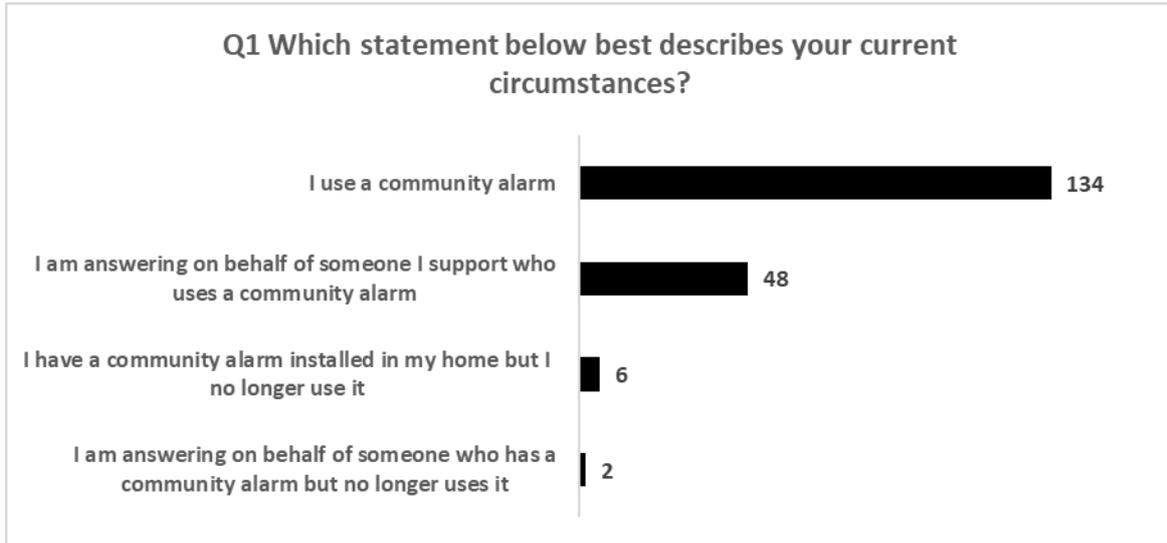
1. All clients who currently receive a community alarm only were sent a letter following the Cabinet decision to consult on the proposals for the Assistive Technology Community Alarm Service.
2. The questionnaire was made available in different formats on request, such as other languages or larger print if this was more appropriate.
3. Information regarding the consultation was available on the Derbyshire County Council Consultation webpage [Changes to the eligibility criteria for the community alarm system - Derbyshire County Council](#) which gave an outline of the proposals and the ways in which people could share their views.
4. People were also given the opportunity to request a paper copy of the questionnaire via the Stakeholder Engagement and Consultation Team and returned their response using the postal questionnaire.
5. There was also opportunity to write into the Council via a letter or email to a dedicated email address.
6. Telephone interviews were offered for those people requiring support to complete the questionnaire.
7. Staff from the Adult Care Stakeholder Engagement and Consultation Team arranged four virtual meetings co-hosted by a Service Manager from Adult Social Care Commissioning Team, in which participants were given the opportunity to give their views. Only two meetings went ahead due to no bookings for the other two virtual meetings.

Qualitative Approach

There were 3 distinct areas from which qualitative information was analysed where the feedback was clearly coded and reported as information.

1. Information gathered during virtual meetings
2. Information from letters, emails and telephone calls
3. Information contained within the open text boxes on the questionnaire.

The following chart shows the respondents by category:



Combined analysis of the Qualitative information

In total, 268 comments were received about the consultation. These were made up of 151 from the qualitative data within the questionnaire and 17 comments from those who chose to respond via email, letter, at a meeting or via telephone call.

Overall, a total of 199 people responded to the consultation, including 190 respondents who completed questionnaires, and 9 who chose to respond via email, letter, at a meeting or via telephone call.

Scope of the summary themes from the quantitative responses:

Service benefits

The questionnaire asked people to consider the main benefits of the service. Respondents considered there to be multiple and almost equally important benefits to having a community alarm, in particular feeling safe, providing reassurance and getting help when needed.

Importance of technology

The questionnaire asked people to consider how important technology was as part of the overall social care support they receive. Almost two thirds of respondents answered that using technology is ‘very important’ or ‘important’.

Eligibility

There was a mixed response regarding the proposed eligibility criteria for the provision of community alarms. This can be further seen in the comments provided by respondents which shows responses are based on individual circumstances.

Overall, 50% of respondents disagreed or strongly disagreed with the proposals to assess all those legacy clients currently in receipt of a community alarm only, in accordance with Care Act (2014) criteria, with 30.5% agreeing or strongly agreeing and 19.5% neither agreeing nor disagreeing.

Introduction of monitoring charges

56.3% and 54.7% of respondents either disagreed or strongly disagreed with the proposal regarding monitoring charges, the higher figure being for those with a community alarm only and the lower for clients with a wider package of care. There were similar levels of overall agreement (24.2% and 23.2%), but with more respondents suggesting they neither agreed nor disagreed with monitoring charges as part of a wider package of care.

Overall, 23.2% of respondents said they would be happy to pay the monitoring charges for their community alarm, with 25.3% being neither happy or unhappy and 51.6% being unhappy with only around half of these were extremely unhappy.

However, when asked what they would be prepared to pay, 52.6% said they would be willing to pay up to £5 per week, with a very small number of respondents saying they would be willing to pay over £5. The remainder of respondents stated saying they did not want to pay.

Scope of the summary themes within the qualitative approach

SECT analysed the comments received, theming them under the following categories in alphabetical order. In the development of the themes, some contained within them a range of responses rather than a set of tightly aligned responses. Others were responses highlighting the same issue.

Agree with proposals

Some respondents felt that the proposals were acceptable, and they agreed. Largely, people want to continue using their community alarm but also agree this option should be available to more individuals who might need them.

Alternatives available

Some respondents indicated that people would use their mobile phone instead of continuing to use their community alarm.

Appreciation of service

Some respondents made comment that they were appreciative of the service that they were receiving. A large number of responses were related to the value of having a community alarm and provided examples of where this has been effectively used. The community alarm provides peace of mind and is considered vital to helping people to feel safe, build their confidence and maintain their independence and avoids the need for additional services.

Concern for vulnerable clients

Some respondents felt that the proposals were a concern, and they had concerns for the new criteria's being addressed. There is feedback suggesting that based on the age and/or individual circumstances of those people who currently have their monitoring charges paid for them that it would be inappropriate to leave them without this support, regardless of eligibility.

Confusion over monitoring charges

Some people appear to have been unclear about the way in which the monitoring charges would work and who would have to pay this, for example, if they receive a wider package of care.

Disagree with the proposal

Some respondents made comment that they were not in agreement with the proposals being addressed and did not want the changes to happen. Some people commented that people shouldn't have to pay, by virtue of their age or need, regardless of Care Act eligibility.

Distress to clients

Some respondents felt that the proposals were causing them some distress and anxiety, due to the uncertainty as to whether they would have to pay their community alarm monitoring charges in the future.

Prepared to pay

A significant number of people commented that paying towards monitoring charges was reasonable in order to maintain a good service but requested that charges should be kept to a minimum.

Pressure on personal finances

Some respondents made comment that the proposed charges could not be paid for. There was particular concern around the charges in addition to the continuing rise of the cost of living. Many respondents stated that they are already struggling to make ends meet, without the additional pressure of paying for their community alarm.

Regular assessment

Some people felt that assessments should be ongoing to ensure the correct people are receiving the service.

Unused equipment

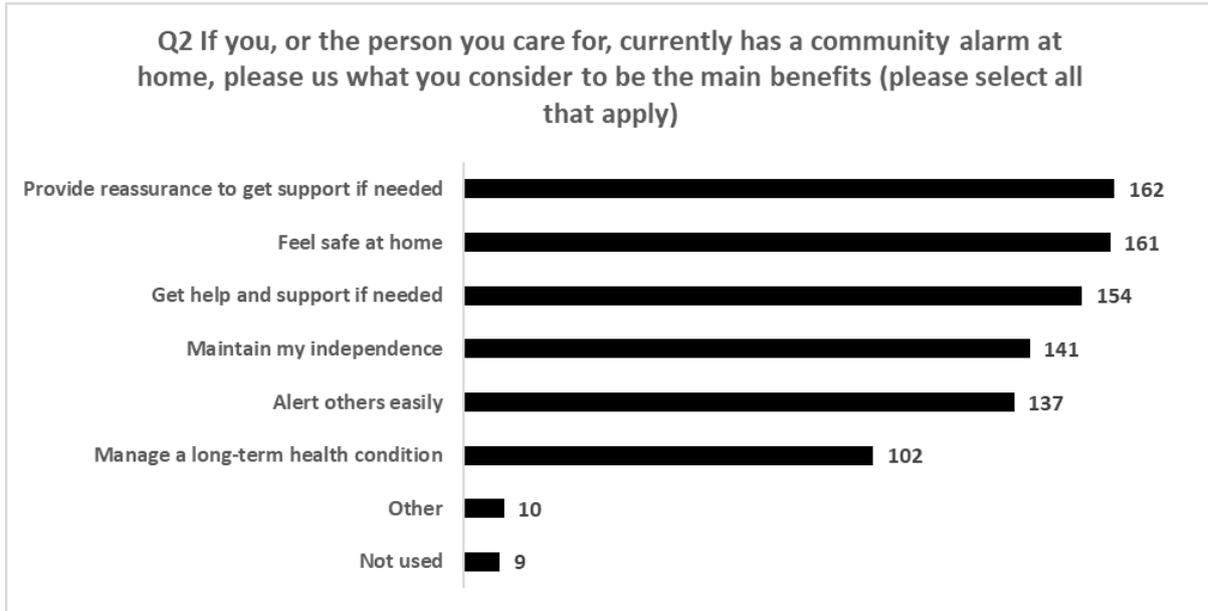
Some respondents made comment that the equipment they have is not used.

Other - Not falling into a theme.

There were a number of comments captured which were of a random nature and did not fall into a theme. Some responses particularly in the questionnaire were not addressing the question posed or the proposals in general and therefore were placed under 'other'.

Analysis of the Qualitative and Quantitative data within the questionnaire

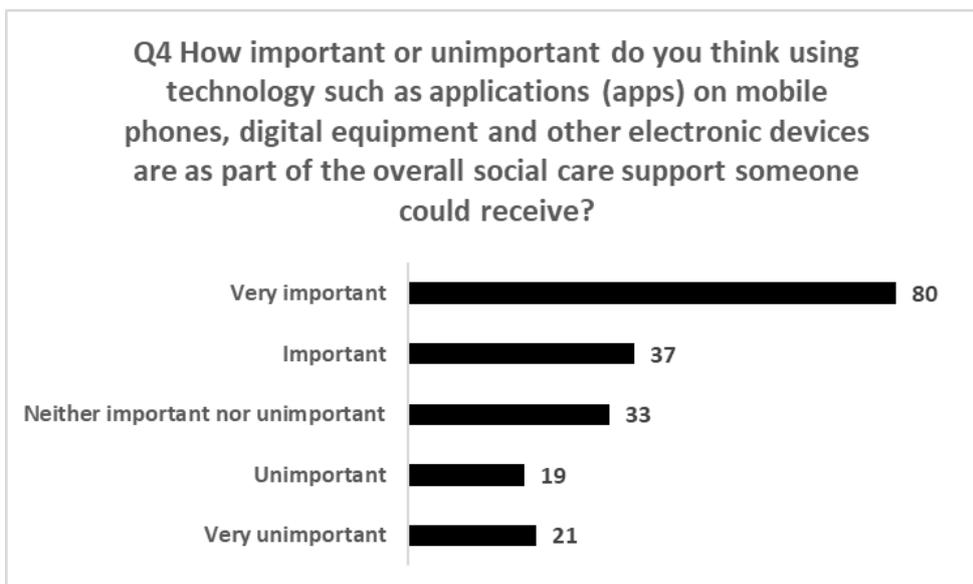
The following highlights the quantitative and qualitative responses to the questions asked within the questionnaire. Tick boxes on the questionnaire both on-line and paper version were analysed, and graphs produced from the data. The free text boxes, following questions that requested an explanation of the respondent's choice of answer, were analysed and coded by the SECT to establish themes from the individual questions.



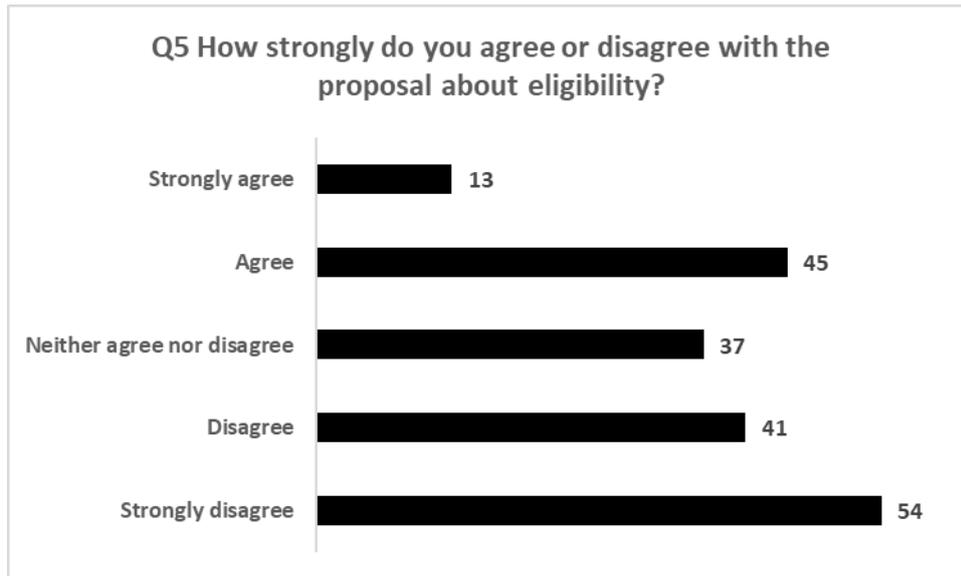
Question 3 - If you told us in Q2 that the alarm is not used please tell us why it is not used?

There were only 5 comments in the open text box, there was one overarching theme, which is, they currently don't need the alarm at their stage of lives. Below are 3 examples of comments:

- I am forced to pay for this by careline who insist I have it and pay for it and I have never used it and don't want it.
- Never needed it and feel I'd use my mobile phone
- I've only used to test if it's working. They are some distance away so if I had a medical emergency, I would call doctor or ambulance



YOUR VIEWS ON ELIGIBILITY: Anyone who currently receives the DCC funded community alarm only service because they are in receipt of Housing Benefit or Pension Credit will no longer be automatically eligible for the service. Instead, the consultation proposals are that all those currently in receipt of a DCC funded community alarm only, will be reviewed in accordance with the Care Act 2014 to decide whether they are eligible to continue receiving the service.



Question 6 - If you have any other comments about the proposal regarding eligibility for the service, please put them in the box below.

Overall, 75 respondents explained their choice. The top themes were as follows:

Appreciation of service, with 32 comments such as:

- You depend on it, the older you get the more you need it
- I think it's essential that I've got the alarm
- It is a valuable lifeline to my elderly mother who has dementia
- I live alone. I cannot guarantee my neighbours will be home or the friends on my list will be home
- Well, I don't know what to say, this alarm is needed to keep me safe.

Disagree with the proposal, with 15 comments such as:

- It will put a lot of people in danger. leave it as it is. people are worried enough at is it, don't give them more to worry about

- Having this alarm service is very important to me as I have needed help in the past. I am in receipt of a State Pension and Pension Credits. I feel it is very unfair to have me having to pay towards this service. What with the cost of living and numerous other things taking up my money. I object to this alarm service doing the same.
- It will put a lot of people in danger. leave it as it is. People are worried enough at is it, don't give them more to worry about

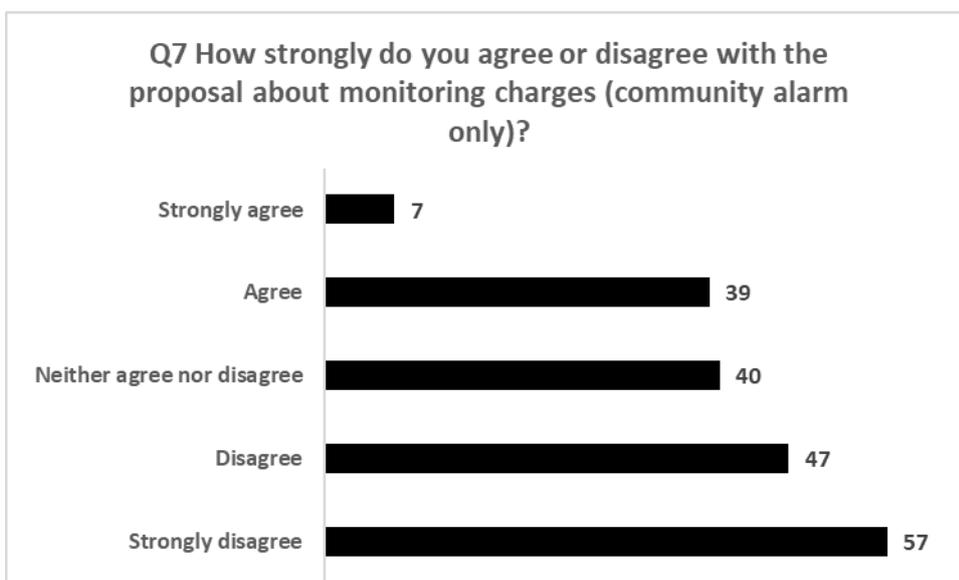
Concern for vulnerable clients, with 12 comments such as:

- I believe there are a lot of people that are struggling with funds already and may cancel if they have to pay and will put them at serious risk
- Anybody receiving housing benefit or pension credit has to be struggling financially already. To put another financial burden on these people is unfair. People who rely on these devices for their safety (possibly lives) could lose this service because they cannot afford it. Others may need to go into residential care because they are not safe without it which will be much more expensive to Derbyshire County Council.

Other, with 10 or less comments included:

- This is not taking in to account the age group of the people this affects.

YOUR VIEWS ON PAYING MONITORING CHARGES (community alarm only): People assessed as eligible to receive a community alarm that is not part of a wider package of care, will be provided with the equipment free of charge, but will need to pay the monitoring cost (currently £2.50 - £5.00 per week) directly to the provider of the service or the Council.



Question 8 - If you have any other comments about the proposal regarding monitoring charges (community alarm only) please put them in the box below.

Overall, 80 respondents explained their choice. The top themes were as follows:

Pressure on personal finances, with 37 comments such as:

- That's a lot of money every month and when you are on pension credit that is a lot of money, particularly at a time when bills are rising
- I can't find money that I haven't got. My ground rent is huge, I just haven't got the money spare
- I have worked hard and paid my taxes all my life why should I have to start paying for a little luxury like this that helps to keep me safe in my old age. £5 a week is £240 a year which is a lot of money to a senior citizen.

Disagree with the proposal, with 19 comments such as:

- You have the nerve to put up council tax but are taking services away that are vital especially to the elderly
- I feel strongly it should be free
- People who are eligible shouldn't have to pay.

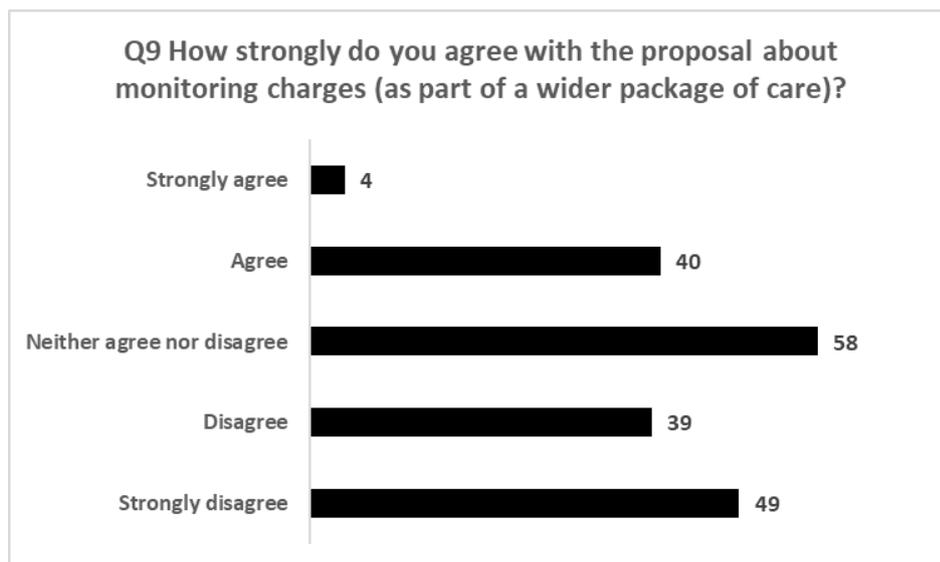
Prepared to pay, with 12 comments such as:

- I would agree to be charged a small amount, as long as i receive the same service
- If I had to pay it, then I would pay it as I need it so desperately.

Other, with 10 comments or less such as:

- I live on my own with just a dog for company and no carers. Without my alarm I doubt I would be found if fallen unless I carried my mobile phone everywhere with me

YOUR VIEWS ON PAYING MONITORING CHARGES (as part of a wider package of care): People assessed as eligible and requiring a wider package of care, which includes a community alarm, will be provided with the equipment free of charge but in relation to the ongoing monitoring charges, will be assessed in accordance with the Council's co-funding policy. Further information about co-funding can be found on the Council's website.



Question 10 - If you have any other comments about the proposal regarding monitoring charges (as part of a wider package of care) please put them in the box below.

Overall, 37 respondents gave an explanation for their choice. The top themes were as follows:

Pressure on personal finances, with 16 comments such as:

- I reiterate that we are elderly people with deteriorating health who really need this aid and should not have yet another cost to add to the already rising cost of living
- Again, it depends on a person's financial circumstances. If they can contribute, then fine - but if it means that they will no longer have the alarm that would be a worry.

Disagree with the proposal, with 12 comments such as:

- We don't have internet we want it to stay the same
- I've received it free since 2003 so why do I have to pay now

Appreciation of service, with 6 comments such as:

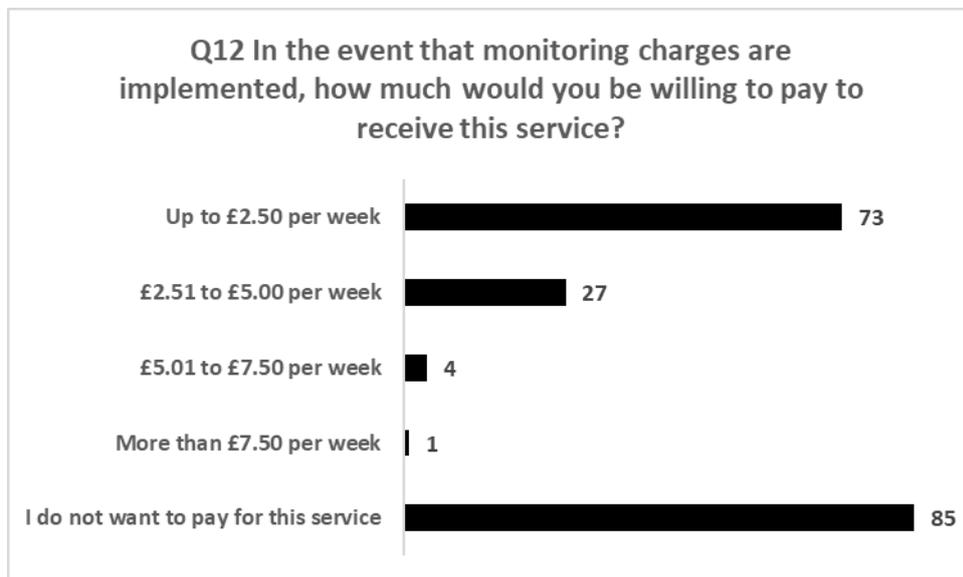
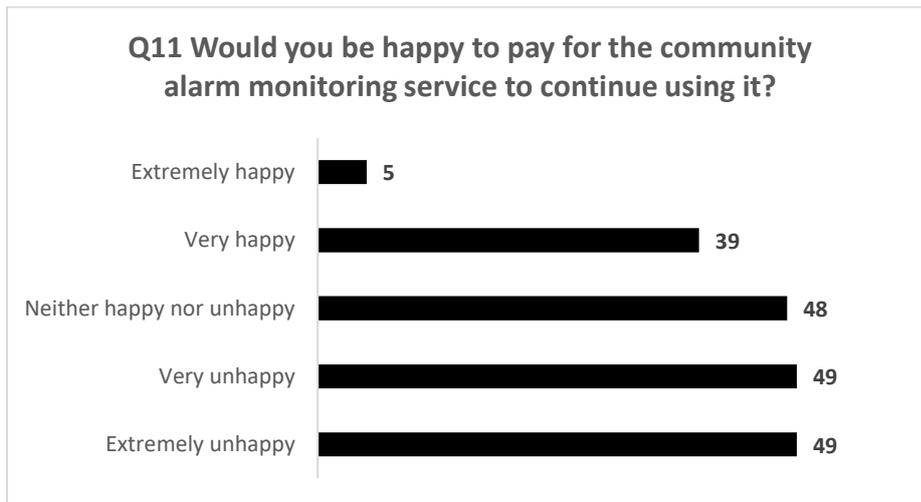
- My illness worsens by the month, and I will rely on it more often
- I want to be able to manage in my own home for as long as I can. The alarm helps with that

Other, with 10 comments or less such as:

- I feel I live independently without being a burden on anyone. I do get help from my family

YOUR VIEWS ON PAYING FOR A COMMUNITY ALARM MONITORING SERVICE

Thank you for your comments on the proposals. Should the proposals be agreed by the Council’s Cabinet following the consultation, some people who currently receive the service for free may, in future, be required to pay for the monitoring element of the service. In this section, you are asked for your views about this.



Question 13 - If you have any other comments about the proposed changes, please put them in the box below.

Overall, 59 respondents gave additional comments. The top themes were as follows:

Pressure on personal finances, with 27 comments such as:

- Worried that people who can't afford it will end up without one
- Elderly people often worry about money to pay for food heating etc. Charging for this service may put people who need it off getting it installed
- I would sooner have it taken out than pay for it. I can't afford it. I have enough debt

Disagree with the proposal, with 11 comments such as:

- People requiring help that are proved not fit to care for themselves should definitely not have to pay
- The gentleman for whom I am completing this for lives on his own, does not have a landline phone, a mobile phone, or a computer. His community alarm is his ONLY method of communication in an emergency. To expect him to pay for this service is shameful
- The service should be available without having to pay if you are vulnerable to falls or disabled.

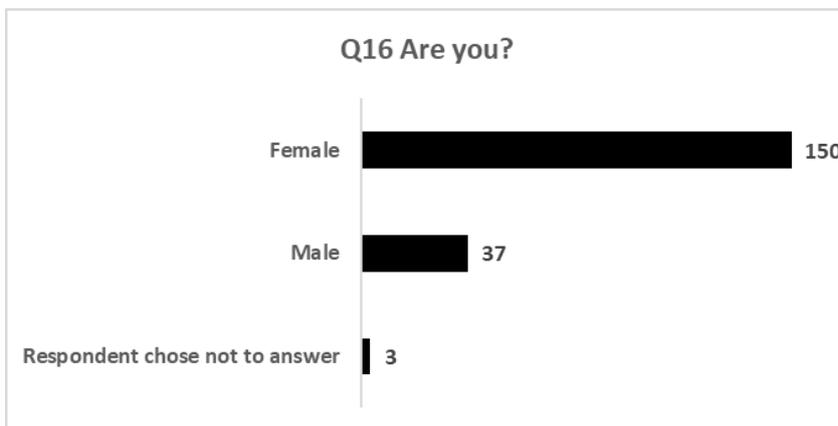
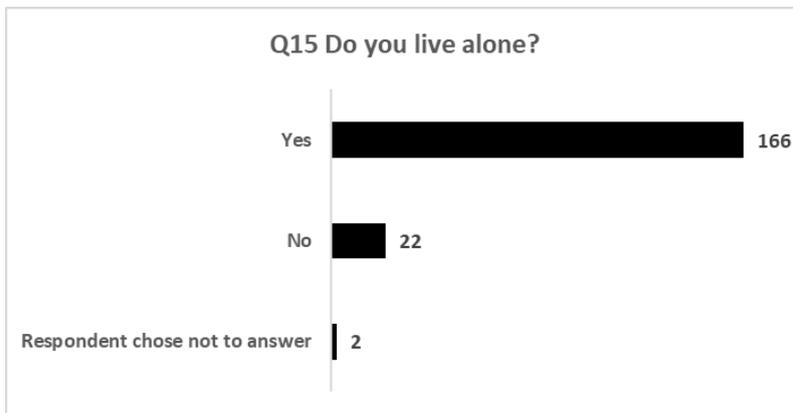
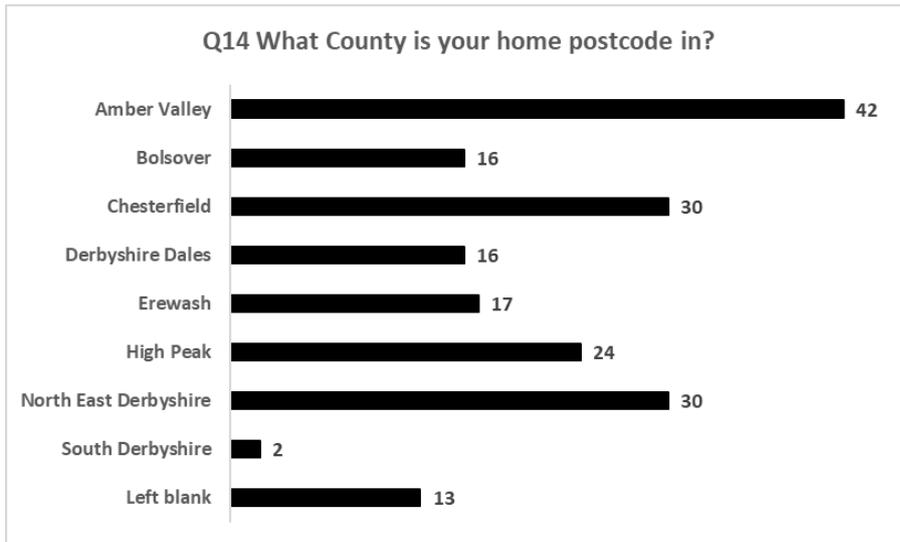
Prepared to pay, with 8 comments such as:

- If I have to pay, I want the charge as small as possible
- I haven't paid so far but would be willing to contribute £10 month. As you are aware all other services are increasing and £10 would be my limit

Other, with 10 comments or less such as:

- I'd like my personal information to stay within DCC rather than be out sourced to other people

About you section:

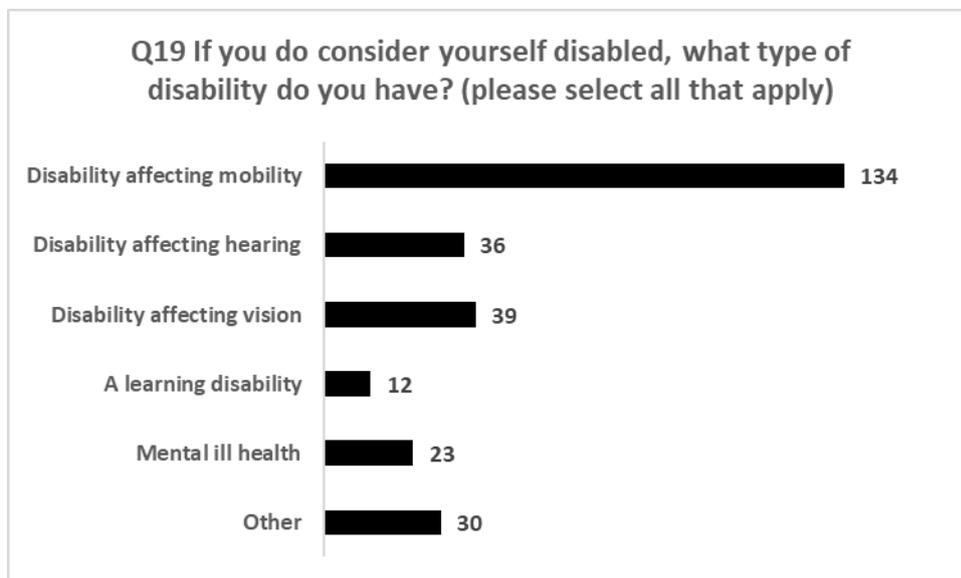
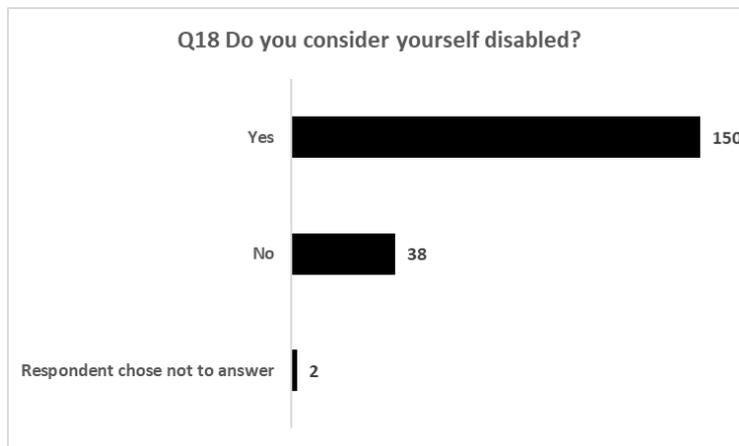


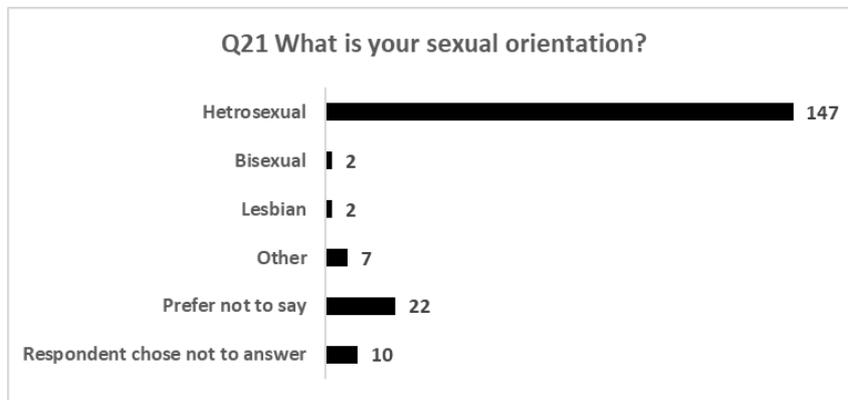
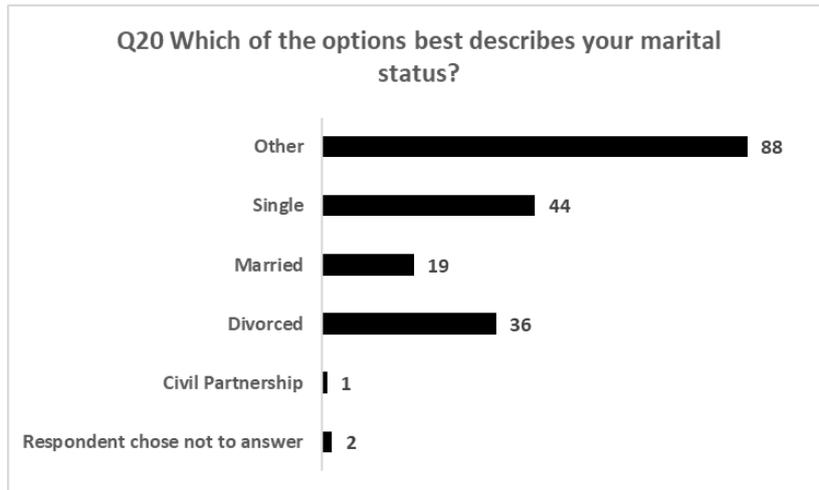
Q17 What was your age at your last birthday?

186 people answer this question. The minimum age was 27 and the maximum age was 101. This gave an age range of 74 and an average age of 75.

Count	Sum	Mean	Minimum	Maximum	Range
186	3308	75.2	27	101	74

4 respondents chose not to answer





Letters, Emails, Telephone Calls, and Meetings:

Overall, 17 comments were captured from the 9 respondents who chose to respond via email, letter, at a meeting or via telephone call. Of the 17 comments that were captured the following were the top themes:

Appreciation of service, with 6 comments such as:

- It allows me to live more independently in the home, yes. I feel safe with it and knowing it's in the place. I still want the system there because it's my lifeline, stops me worrying. You know you've got something and it's piece of mind
- I had vertigo; it was causing me to lose cells in the brain. Yes, it did save my life. Otherwise, these brain cells would have died off and I would have been dead.

Pressure on personal finances, with 3 comments such as:

- Every year, even when we had a rise, everything goes up by more than the rise in pension. So, we get less than the rise. Get less and less, big worry on gas and electric. I need more as I don't have immune system to keep warm. Every time you have a rise it's taken off you, supermarket puts price up. Before you've got it, it's taken. It's going to be difficult; I pay £60 per month for gas and electric. I know I haven't got enough in. Always had money as a standby. By time it goes up

The remaining 8 comments were stand-alone comments and did not fit in with or constitute any other themes e.g.

- "I understand. It's very little pension when you think about it. There's no rise this year. £5 a week, don't even buy bread and milk. When you've worked all your life from 15 to 60. I had cancer and couldn't carry on, had no choice."



FOR PUBLICATION

DERBYSHIRE COUNTY COUNCIL

IMPROVEMENT AND SCRUTINY COMMITTEE - PEOPLE

WEDNESDAY, 7 SEPTEMBER 2022

Report of the Director - Legal and Democratic Services

Work Programme 2022/23

1. Purpose

- 1.1 To review the Committee's work programme and invite committee members to suggest possible agenda items for the remainder of the municipal year 2022-23.

2. Information and Analysis

- 2.1 It is considered good practice that each Scrutiny Committee develops and agrees an annual work programme. The identification of relevant topics and their allocation to a specific meeting date, focuses the work of the Committee and promotes transparency.
- 2.2 Scrutiny work programmes are best viewed as flexible documents. The timescales are indicative of when each issue will be considered by the Committee. Throughout the year timings may change and new issues may emerge. For example, new items may be identified from the Council's Forward Plan.
- 2.3 The work programme for 2022/23 is given at Appendix two and Members are invited to propose additional items to be considered for inclusion.
- 2.4 When identifying issues for the work programme Members are advised to consider:

- Whether the issue falls within the remit of the Committee
- How the issue aligns with the Council Plan priorities
- Whether the issue is in the public interest
- If there has been a change to National Policy and how this will affect people in Derbyshire
- If there are any performance, financial or safety concerns about a particular service or function
- How consideration by the Scrutiny Committee will add value.

3. Consultation

- 3.1 Scrutiny work programmes are developed in consultation with Committee members. They are also informed by discussions with Executive Directors, who offer guidance about the timing of the Committee's involvement, to ensure that scrutiny work coincides with the availability of performance data, specific milestones, and appropriate stages of policy development.

4. Alternative Options Considered

- 4.1 The option of not having a work programme was rejected as it is considered important that topics are allocated to specific meeting dates in order to focus the work of the Committee and promote transparency.

5. Implications

- 5.1 Appendix 1 sets out the relevant implications considered in the preparation of the report.

6. Background Papers

- 6.1 None

7. Appendices

- 7.1 Appendix 1 – Implications
- 7.2 Appendix 2 –Work Programme 2022/23

8. Recommendation(s)

That the Committee:

a) Notes the 2022/23 work programme and considers any proposed revisions.

9. Reasons for Recommendation(s)

9.1 To focus the work of the Committee and promote transparency.

Report Author: Roz Savage

Contact details: roz.savage@derbyshire.gov.uk

Implications

Financial

1.1 None Identified for this report

Legal

2.1 None Identified for this report

Human Resources

3.1 None Identified for this report

Information Technology

4.1 None Identified for this report

Equalities Impact

5.1 None Identified for this report

Corporate objectives and priorities for change

6.1 Resilient, healthy and safe communities.

6.2 High performing, value for money and resident focused services.

6.3 Effective early help for individuals and communities.

6.4 A prosperous and Green Derbyshire

Other (for example, Health and Safety, Environmental, Sustainability, Property and Asset Management, Risk Management and Safeguarding)

7.1 None Identified for this report

Improvement and Scrutiny Committee - People
2022/23 Work Programme

Wednesday 2 November 2022

Topic	Lead Officers	Lines of Enquiry/Purpose	Portfolio Holder
Prevention and personalisation assessments and reviews	Simon Stevens	Does the assessment process maximise independence, choice and autonomy to enable individuals to live independent lives?	Natalie Hoy
Low Level Prevention	Sue Whetton	What are the proposals for the future, how will these help people to maximise their independence, improve access to support and enable ASC to meet its duties?	Natalie Hoy
Social Work Practice	Carol Cammiss Ali Noble Peter Lambert	What is the Council doing to improve the quality and consistency of social work practice?	Julie Patten
Transition to Adulthood	Joint presentation by ASCH and Childrens Services Carol Cammiss Linda Elba-Porter	<ul style="list-style-type: none"> • What are the pathways for children transitioning from Childrens Services to their onward journey (to independence or adult services?) • What are the experiences of children transitioning to adult services and how can the outcome for individuals be improved? • Are working age adults with disabilities being enabled to be as independent as possible and achieving their aspirations? • What measures are proposed to improve the quality of person-centred care for people with learning disabilities and autism (Pre-decision scrutiny of the 	Julie Patten Alex Dale Natalie Hoy

		People with a learning disability and autistic people strategy)	
Wednesday 8 February 2023			
Topic	Lead Officers	Lines of Enquiry/Purpose	Portfolio Holder
Accommodation for Older People	Simon Stevens	Is the Council's approach effectively facilitating the delivery of appropriate accommodation and support for older people? What are the implications of the Government's Social Care reform agenda?	Natalie Hoy
Early Intervention Prevention Strategy	Ali Noble Peter Lambert	Pre decision scrutiny of the Early Intervention Prevention Strategy	Julie Patten

Wednesday 3 May 2023			
Topic	Lead Officers	Lines of Enquiry/Purpose	Portfolio Holder
Early thinking on Youth Investment Fund (Youth Offer)	Ali Noble Carol Cammiss	What are the proposals for the provision for young people aged 14-25?	Julie Patten
Early Year's Service	Carol Cammiss	Update on Family Hubs and Start for Life Programme	Julie Patten

Notes:

- It is proposed that a working group will be established to develop a performance dashboard to assist the Committee in fulfilling its role of scrutinising policy development and service delivery.
- Earmarked for the 2023/24 Work Programme (July) is a meeting on education issues including, the implications emerging from the Government white paper:

"Opportunity for all: strong schools with great teachers for your child", and consideration of how the Council is meeting its obligation to ensure that all children have access to a suitable learning environment.

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