

Consultation Findings on Proposed Changes to the Attendance Allowance (AA)

1. Introduction

Leicester City Council is proposing a change to its financial assessment for people who receive non-residential care. A Statutory consultation was carried out between 2 September 2019 and 15 November 2019 on proposed changes to the treatment of disability benefits.

Disability benefits are paid by the Department of Work and Pensions to people who require frequent help or constant supervision during the day and/or night.

People who are eligible for adult social care may have a financial assessment to work out if they must pay towards the cost of their care, and if so, how much. The assessment criteria is outlined in the council's charging policy, which can be found at leicester.gov.uk/financial-assessment

The financial assessment considers any benefits that people may receive from the Department of Work and Pensions (DWP) because of their disability. These benefits are paid at different rates depending on the level of need and are called disability benefits and are paid in the form of

- Attendance Allowance (AA) – for over 65s
- Disability Living Allowance (DLA) – for under 65s
- Personal Independence Payments (PIP) – slowly replacing DLA

The current financial assessment for non-residential care counts up to £58.70 a person receives per week from these benefits as income (this being the lower or standard rate). Any amount a person receives above this middle rate (the higher or enhanced rate) is disregarded in the current financial assessment, and therefore retained by the individual to spend as they choose. This is in line with previous Department of Health guidance.

The Council is proposing to change the way in which these benefits are treated within the financial assessment, to bring it in line with the latest legislation, by including the higher and enhanced level of disability benefits in full, where applicable, within the financial assessment.

The change does not affect people's entitlement or eligibility to any disability benefits or the rates at which they receive those benefit payments.

2. Methodology

a. Letters

Letters were sent out at the start of the consultation to all service users or their carers (approximately 3100), who are in receipt of non-residential care as they would be entitled to disability benefits, if they meet the eligibility criteria. The letter explained that the Council were proposing to make changes to the financial assessment and that the recipient's opinion was important. The letter detailed all of the ways to contact the Council about the consultation and details of the public meetings to be held. A paper copy of the survey accompanied the letter.

The following were sent with the letter:

- A survey for people to complete and return using the freepost envelope provided
- Details of the three public-held meetings, where people could attend and talk about the proposal
- The web address for the consultation website where more information about the proposal could be found, as well as an online version of the survey
- The postal address and email address to contact the consultation team with any queries
- The consultation helpline telephone number and e-mail address to contact the consultation team with any queries

A downloadable copy of the survey, the Adult Social Care Financial Assessment and Charging Policy, and Disability Related Case Studies were made available online via the consultations.leicester.gov.uk website.

An easy read version of the survey was made available for people who were identified through social care records as having learning disabilities. There were no requests for paper copies of this document. The easy read survey was available online via the consultations.leicester.gov.uk website.

The survey was also available to complete online on the council website at <https://consultations.leicester.gov.uk/adult-social-care-health-and-housing/dre2018/>

Attempts were made to channel shift respondents to online where appropriate, in line with corporate vision.

b. Organisations and other stakeholders

E-mails were sent to various board/group members and organisations to inform about the consultation and help where enquiries may be made about the proposals. These organisations represent the interests of people who receive Adult Social Care services:

Voluntary and Community Groups

Organisation Name	Stakeholder Group
Learning Disability Partnership Board	Learning Disability
Mental Health Partnership Board	Mental Health
Leicester Ageing Together Board	Older People
Dementia Programme Board	Dementia
Carers Reference Group	Carers

Service Providers

Organisation Name	Stakeholder Group
Action Deafness	Hearing Impairment
Action on Hearing Loss	Hearing Impairment
Adhar	Mental Health, BME
Advance	Learning Disability and Mental Health
Age UK	Older People
Alzheimer's Society	Dementia
Ansaar	Learning Disability, BME
ASRA Housing Association	Housing Association
Asian Towers Club	Older People, BME
Belgrave Lunch Club	Older People
Citizens Advice Bureau	Catch-all
City & County Care Services (Care Watch)	Home Care Provider
City & County Care Services (Aspire)	Home Care Provider
Clasp	Carers
Community Integrated Care	Home Care Provider
Community Links Derby CIC	Learning Disability
East West Community Project	Older People
Forward Thinking Movement and Dance CIC	Catch-all Disability
Gura Tegh Bahadur Day Centre	Older People, BME
Guru Nanak Community Centre	Older People, BME
Healthwatch Leicester Ltd	Care Reviewer
Hindu Community Centre Lunch Club	Older People, BME
Ibc Quality Solutions	Learning Disability and Mental Health
ICare	Care Provider

Leicester Action for Mental Health (LAMP)	Mental Health
LCPT	Vulnerable People
Leicester Aging Together	Older People
Leicester Jamaica Community Service Group	Older People, BME
Leicester, Leicestershire & Rutland Headway	Brain Injury
Leicester Quaker Housing	Older People, Housing Association
Mosaic: Shaping Disability Services	Catch-all Disability
Network for Change	Catch-all Disability
Nottingham Community Housing Association (Leicester Quaker Housing)	Housing Association
Norton House	Learning Disability and Mental Health
Pathfinders	Catch-all Disability
POhWER	Catch-all Advocacy
Rawal Community Association	Catch-all Information
Royal Mencap Society	Learning Disability
Santan Manavta Society	Older People, BME
Santosh	Older People
Signing Networks CIC	Hearing Impairment
Sikh Community Centre	Catch-all
St Peters Lunch Club	Older People
The National Autistic Society	Autism
The Centre Project	Vulnerable People
The Monday Club	Autism
Values	Catch-all Advocacy
Vista (Royal Society for the Blind)	Visual Impairment
Voluntary Action Leicester	Catch-all Advocacy

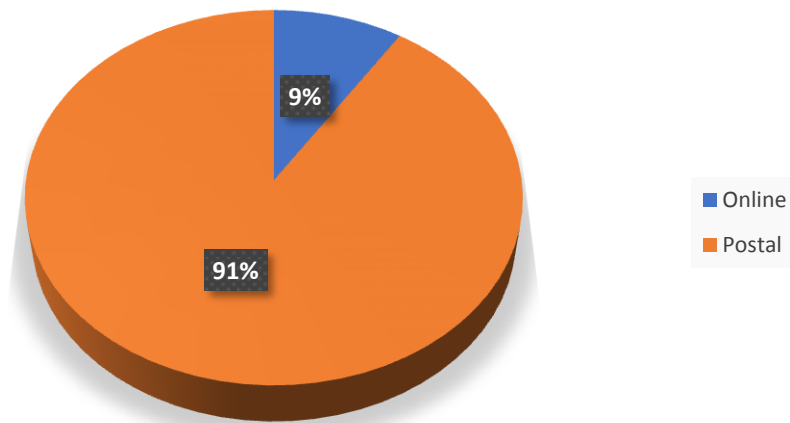
The full stakeholder engagement plan can be found in Appendix Ci.

c. Survey

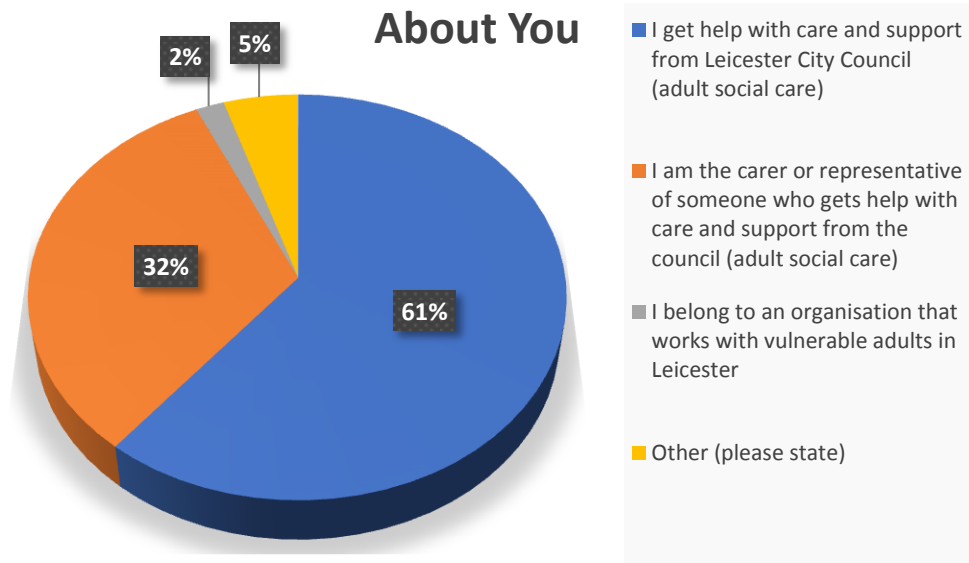
A survey was developed to find out what people's views were about the proposal to change how disability benefits were to be treated in assessing an individual's ability to contribute to the cost of their services. A paper copy was attached to the letter informing them about the consultation.

A total of 3078 surveys were sent and 1011 surveys were completed and returned, a response rate of 32.8% was achieved.

Survey Method of Return



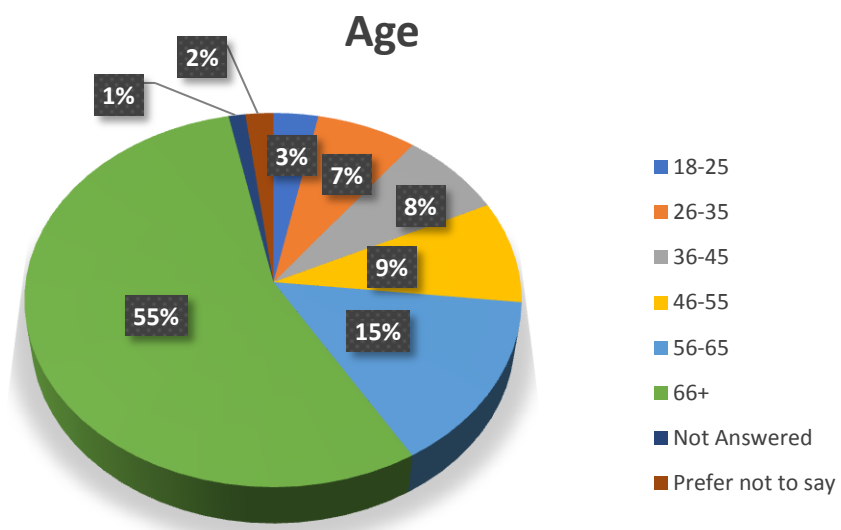
The online returns (9%) were from a combination of people receiving care (51), carers (31), organisations who support vulnerable adults (6) and 'other' (7). There were three online responses from people who identified as a combination of the responder types mentioned.



40 respondents (3.9%) chose to not answer this question.

Respondents were first asked to provide some information about themselves and how they interact with Adult Social Care – 65.3% of answers to this question were people who receive help and support from Leicester City Council. Several respondents (3.8%) identified as more than one of the options available, for example, where a respondent received services themselves but also cared for someone who receives care.

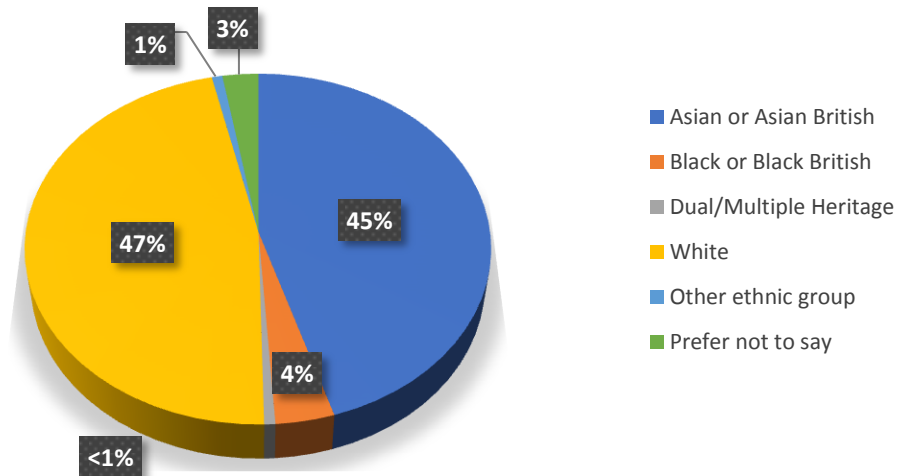
32.7% of the responders identified as carers, 1.8% of the responders were people working for organisations who work with vulnerable adults and 50 identified as 'other'. In the 'other' category there were 15 relatives, 8 from support services such as housing and 4 who identified as 'member or the public' or 'local resident'. The remaining 23 did not disclose any further information.



22 respondents chose to not answer this question.

The age of the respondents varied. Over half of all who completed the survey identified as over 66 years.

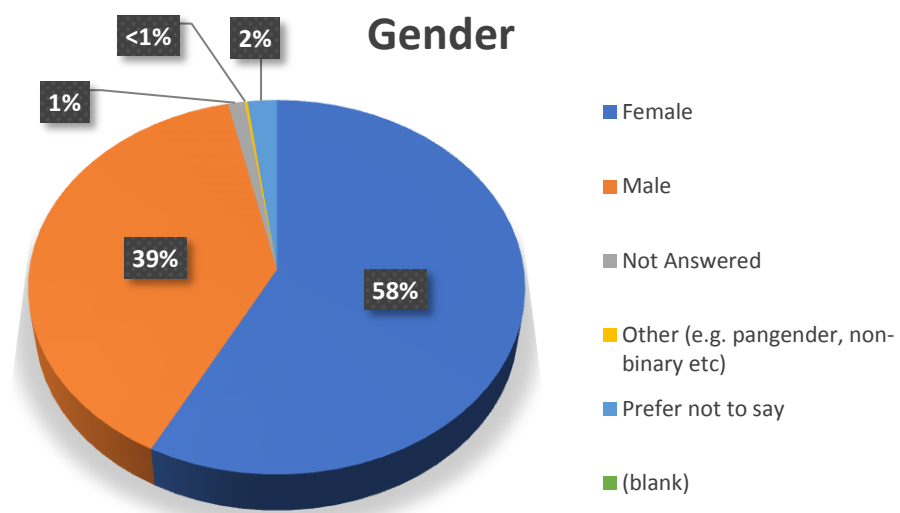
Ethnicity



14 respondents chose to not answer this question.

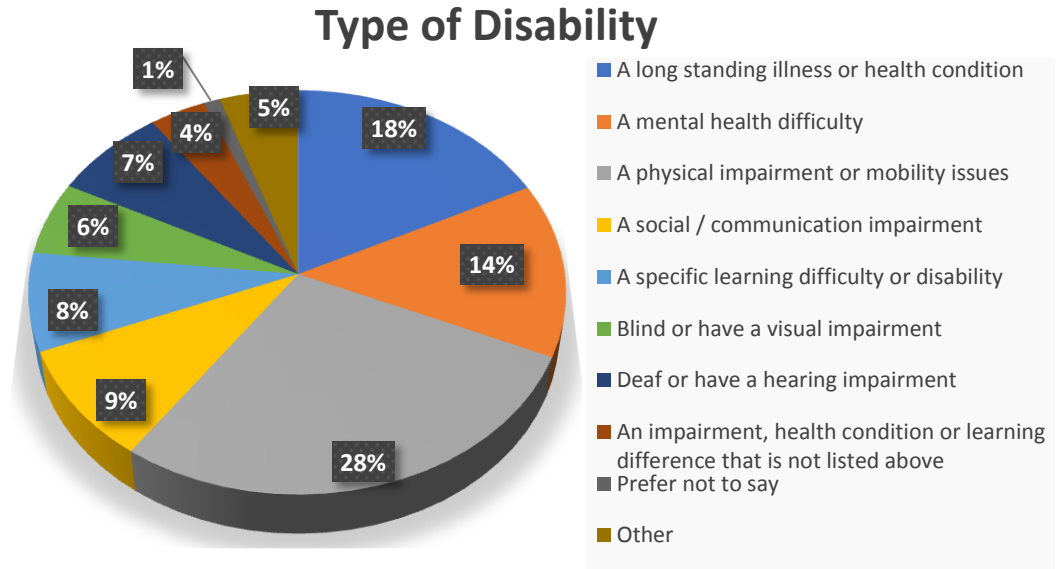
A lot like the demographic of Leicester, the ethnicities of the respondents were diverse. 47% of the respondents identified as 'White' and 45% identified as 'Asian or Asian British'.

A complete breakdown of survey responses by ethnicity can be found in Appendix Cii.



Nearly 60% of respondents identified as female.

There are more females in receipt of non-residential care (59%) and the below information correlates with the data, as more females responded to the survey.



883 respondents (88%) identified as having a disability. 28% of those who answered this question, identified as having a physical impairment, followed by 18% with a long-standing illness or health condition and 14% with a mental health difficulty.

Ward	Count	Response Rate
Abbey	49	4.9%
Aylestone	21	2.1%
Beaumont Leys	57	5.7%
Belgrave	102	10.1%
Braunstone Park Rowley Fields	47	4.7%
Castle	26	2.6%
Evington	51	5.1%
Eyres Monsell	33	3.3%
Fosse	21	2.1%
Humberstone & Hamilton	31	3.1%
Knighton	25	2.5%
North Evington	63	6.3%
Out of area	23	2.3%
Rushey Mead	65	6.5%
Saffron	31	3.1%
Spinney Hills	34	3.4%
Stoneygate	40	4.0%
Thurncourt	38	3.8%
Tron	44	4.4%

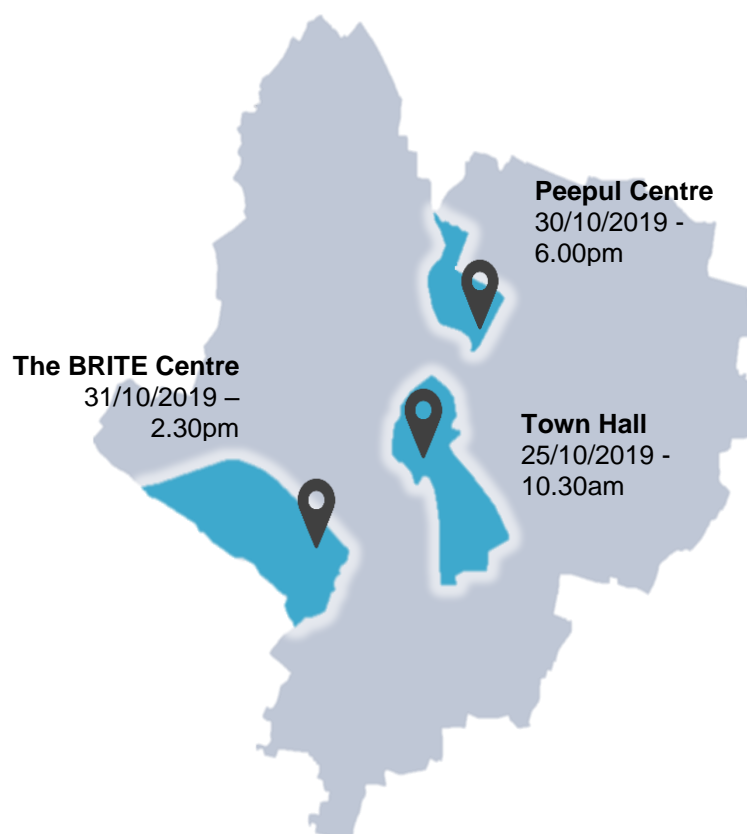
Unknown	90	8.9%
Westcotes	16	1.6%
Western	41	4.1%
Wycliffe	59	5.9%
Grand Total	1007	100.0%

89 respondents chose to not provide their postcode
23 respondents provided postcodes outside of city boundaries

Survey responses were received from all the City Council’s wards. The most responses were received from service users in Belgrave ward, the least number of responses were received from service users in Westcotes.

d. Public Meetings

Three public meetings were held at different locations around the city, to inform service users about the proposals and to seek their views or concerns. Details of the meetings were included in the letters to all service users, carers, and stakeholder organisations.



A total of 27 people attended the public meetings. Alternative language interpreters were also present for all three meetings.

These meetings began with an overview of the consultation process, an explanation of the disability benefits and details of the proposal.

The full meeting notes for all three public meetings can be found in Appendix Ciii.

e. Submissions and Other Comments

Approximately 70 calls were received on the consultation helpline, of which 5 required additional follow-up action.

A system was established to swiftly respond to people who had specific questions or required help/translation to complete the survey.

The calls were wide ranging and common themes were identified as follows:

Call Category	Count
Benefits question	1
Booking public meeting	4
Clarification - Survey	1
Clarification - Charging	2
Clarification - General	16
Make complaint	1
No longer service user	1
Other	17
Survey completion	26
Unknown (blank)	3
Grand Total	72

Of the calls received on the helpline, nobody requested for the survey to be sent in an alternative format. Where language support was required, the delivery team and admin officers provided the service.

A generic email account was also set up to receive queries about the proposal. No comments or observations were made about the proposal via e-mail. Five emails were received in total.

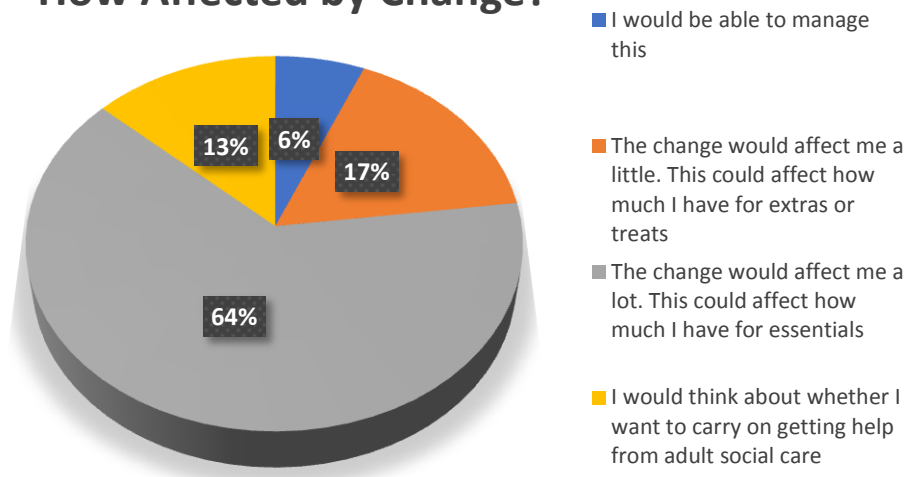
Service users were provided with a postal address to write and submit comments, if they wished to. No postal submissions were received.

3. Headline Findings

A total of 1011 surveys were completed and received.

Respondents were asked to state how an increase towards the amount they have to pay towards their care would affect their day-to-day affordability.

How Affected by Change?



81% of respondents reported that paying more towards their care would have at least some effect on their personal finances. 64% of whom believe that paying more would affect their personal finances ‘a lot’.

Respondents were given the opportunity to provide some commentary regarding their choice, 62% of respondents chose not to provide a comment.

Themes emerged from the comments provided, significantly around:

- I. Funding (not having the funds or income to absorb an increase in contribution; ability to pay for essentials; ability to pay for extras).
- II. A feeling that the proposal is either unfair, concerning or unsatisfactory.

The table below shows a breakdown of the responses by primary theme.

Q4 Comment/Concerns Raised:			
Theme Number	Primary Theme Description	Count	Percentage
1	I don't have the funds / I have low income	107	25%
2	These proposals would affect my ability to buy care related essentials	13	3.0%
3	These proposals would affect my ability to spend on extras	30	7.0%
4	I need more funding / support, not less	10	2.3%

5	I think the proposal is unfair/unsatisfactory/concerning	68	15.9%
6	Personal circumstances should be taken into consideration.	6	1.4%
7	I think the proposal will not significantly impact me	17	4.0%
8	Payments have already increased recently	9	2.1%
9	Need more info	22	5.1%
10	Impact on family/unpaid carer	10	2.3%
11	Significant worry/anxiety	20	4.7%
12	Other	76	17.8%
	TOTAL	428	90.3%*

**41 (9.3%) people stated they had 'no comments' in the comments box*

One quarter of the responders' primary theme in their comments was around the fact that they do not have the funds to absorb an increase in the amount of money they have to contribute toward their care. A further 15.9% felt the proposal was either unfair/unsatisfactory or concerning.

Theme 1: I don't have the funds / I have low income.

Responders in this category specifically cited an inability to absorb any increase in financial contribution that may be required. This theme accounted for almost a quarter of comments provided. Some example comments from this category are below.

"I find it difficult at the moment and paying more would be almost impossible without affecting my life significantly."

"I struggle already to survive on the little income I receive. Any proposed increase of charges will make it extremely hard to survive."

Theme 2: The proposals would affect my ability to buy care essentials.

Responders in this category specifically cited concern around funding essentials if their contribution was to increase. Approximately 7% of all responders are in this category. Example comment below.

"Due to all the things that have gone up and already finding it difficult to manage as it is. If I have to pay more money per week towards my care, I wont be able to manage for essential things."

Theme 3: These proposals would affect my ability to spend on 'extras'.

Responders in this category specifically cited concern around funding extras if their contribution was to increase. Approximately 7% of all responders are in this category. Example comments below.

"This would affect days out, gardening, budget, petrol for family...shopping, appointment cleaning, clothing. Replacing things due to mum's needs."

"Will not be able to go anywhere for holidays – or will not be able to do anything as whatever you do leisure sports etc have to pay everything..."

Theme 4: I need more funding/support, not less

Responders in this category felt they needed more funding and/or support and not less. Approximately 2.3% of all responders are in this category. Example comment below.

"I have to pay extra for my care as they are not getting enough paid from Adult Social Care as I need more support as my condition is deteriorating."

Theme 5: I think the proposal is unfair/unsatisfactory/concerning

Responders in this category state their dissatisfaction with the proposal if it were to be implemented. This was the primary theme in 15.9% of responses.

"Shocking proposal. The point of AA & DLA etc to pay for essentials in respect of disability or mental health so it is not there for food/utilities so should not be counted as 'income' as this is already needed for care etc it should be disregarded in full."

"The proposal is evil. Do you seriously think the benefit we are forced to claim gives us a life of splendour? The council is a disgrace."

Theme 6: Personal circumstances should be taken into consideration.

A small number of responders (1.4%) cited the need for personal circumstances to be taken into consideration with clear and transparent guidance to be provided to staff. Example comment below.

"All cases need to be assessed on an individual basis - even with financial constraints to be taken into consideration. With the cost of living increasing, people over 75 are disproportionately affected. People with mental health problems need support and assessments regularly - to prevent onset of acute conditions which can result in higher costs to the LA."

Theme 7: I think the proposal will not significantly impact me/I think the proposal is fair.

Responders in this category felt the proposal, if implemented, would not significantly impact upon them, 7% of responders are in this category. Example comment below.

"I think that the change will be fairer as it currently appears that people on higher rate PIP/DLA are paying the same rate in contributions as those on lower and middle rates."

Theme 8: Payments have already increased this year

Some responders noted how the amount of money they must contribute has already increased recently. 2.1% of responders stated this. Example comments below.

"I think it is ridiculous how much it has gone up, already we paid £15.17 a month then £30 a month, now £70.04 which we struggle with now."

"...I used to pay £55 to £57. In April council increase and I have to pay £61.81. After 2019 June Council increase my contributions now I have to pay £77.17 per week..."

Theme 9: Need more information.

Some responders felt they needed more information on how the proposal would impact them. Approximately 5% of people mentioned this. Example comments below.

"It depends how much the charges increased whether it would affect me."

"This depends on how much it would be expected to contribute if I was expected to contribute towards the care and support. As elderly - we need to ensure the essentials are affordable as this can have a huge impact on our health and well-being."

Theme 10: Impact on family/unofficial carer

Some responders highlighted the potential impact on unofficial carers.

"New changes would be a disadvantage to carers. When a service user goes to a day centre for a few hours this allows a carer a break, which benefits in their mental health wellbeing. If the service user cannot afford the additional charges and stays home the service user and carer will not benefit from this."

Theme 11: The proposals could cause significant anxiety and/or worry

Almost 5% of responders mentioned the impact the proposals would have on their mental health. Example below.

“All this Stress will effect on my mental health. I won't be able to pay anymore contribution. things have gone expensive day to day thing. I am worried.”

“Concerns of how I will pay for my care without going into my savings which I have for an emergency. This would increase my anxiety which I am currently taking medication for.

Theme 12: Other.

Comments in this category cover a variety of angles that do not easily fit into any other category

“There are many demands on these benefits that are not always considered. Those on low incomes or relying on other benefits who are caught in the middle of having too much income to get free services and having enough disposable income are going to be very impacted by this if it goes ahead”

“The consultation should make sure that the staff (face to face) salaries are increased (this is underlined) to reflect the actual contribution to Adult Social Care. With the growing population of elderly, vulnerable ad ill people we need a quality workforce with good pay and working conditions to do this work and be appreciated.

Public Meetings

A question and answer session with members of the public formed the public consultation meetings. The following themes emerged from the meeting discussions:

The Consultation Process

- When the consultation will be shared with the public
- Whether a 1-1 appointments could be made to discuss consultations in future

The Equalities Impact Assessment

- Whether an Equalities Impact Assessment will be completed

The Proposal

- Whether only people on a higher rate or enhanced rate will be impacted
- Night time care definition
- Whether the council must apply these changes
- Clarification on whether only the financial contribution is being affected
- Whether the council has explored other options for cost savings

- Statements on proposed increases being difficult to manage
- Would people have to be reassessed.

The Financial Assessment

- Whether disability benefits or income support will be taken into consideration
- Whether discretion can be applied
- Whether personal circumstances will be considered

Off Topic/ Non-Related

- Personal enquiries on how the proposals would impact them.