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Council

Wednesday, 20th February,
2019
at 2.00 pm

MEMBERS' ROOM DOCUMENTS

This meeting is open to the public

Members

Contacts

Senior Democratic Support Officer
Judy Cordell

Tel: 023 8083 2766

Email: judy.cordell@southampton.gov.uk

MEMBERS' ROOM DOCUMENTS

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4 THE REVISED MEDIUM TERM FINANCIAL STRATEGY AND BUDGET 2019/20 TO 2022/23 (Pages 1 - 304)

Report details the Medium Term Financial Strategy (MTFS) for the period 2019/20 to 2022/23 and provides the budget position for 2019/20 and later years for the General Fund and the Housing Revenue Account (HRA).

Tuesday, 12 February 2019

SERVICE DIRECTOR, LEGAL AND
GOVERNANCE



Equality and Safety Impact Assessment CYP1

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

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| Name or Brief Description of Proposal | Review and redesign early help and outreach preventative services, to deliver a more focussed locality based model which prevents children becoming looked after by the council. |
| Brief Service Profile (including number of customers) | |
| <p>There are approximately 63,000 children and young people aged 0-19 living in Southampton. The council and the NHS provide a number of services for children and families and, since 2013, have increasingly worked together to offer more joined up prevention and early help services.</p> <p>In 2017, a Locality Based 0-19 Early Help and Prevention service was introduced that included a mix of universal services (meaning they are open to everyone who wants to use them), and more targeted, intensive support for children and young people with additional needs, or whose home life makes them vulnerable to poor outcomes. This element supports approximately 950 children.</p> <p>Services include Sure Start Children’s Centres, health visiting, school nursing, Families Matter and the Family Nurse Partnership. There are also links to other services such as maternity services, pre-schools, schools, colleges, GPs, children’s social care, services for children with special educational needs and/or disabilities (SEND), child and adolescent mental health services (CAMHS), and local community and voluntary sector organisations who support these communities.</p> <p>The service has been successful in offering advice and support to children and families, and we want to extend it to include more targeted support that can address issues such as complex parenting, challenging behaviours, supporting disabilities, welfare advice, mental health advice, domestic abuse and exploitation. The proposal is therefore to extend the model by bringing in more specialist and targeted health and social care, such as Educational Welfare, Inclusion and Targeted teams, Youth Offending and others which can provide early help and outreach preventative services.</p> <p>These specialist and targeted services are currently available, but have to be accessed separately. By delivering more services locally for families, we aim to</p> | |

make them part of a community resource that is practical and easy to access. We also want to increase our partnership working with local community and voluntary services.

This will enable us to engage families at an early stage when they are facing challenges or need advice. It will also help to enhance the Families Matter service which focuses on strengthening and turning around families who are experiencing issues. Providing the right help early can stop problems getting worse or avoid issues altogether. Evidence shows that this can deliver better outcomes for children and families as well as saving money in the longer term as it avoids the need for more intensive, long term support. Therefore, it should ultimately reduce the number of children coming into statutory services with escalated needs, requiring the intervention of the council.

Summary of Impact and Issues

The enhanced Locality Based Support Service will extend the current model by bringing in additional health and social care services. It aims to ensure every child gets a good start in life and help children thrive in healthy and caring family settings, supported by their local communities.

The proposal is to deliver more services in a community based setting where people can access the local help they need as early as possible with the least amount of 'hand offs' or referrals, find their own lasting solutions to the challenges they face, and gain support quickly at point of crisis. Providing more early help and preventative services will:

- reduce the number of children requiring specialist input
- prevent children becoming looked after by the council
- reduce pressure on core teams
- reduce the number of young people excluded from school or put on part time timetables
- increase the percentage of families "turned around" through Families Matter
- reduce the rate of first time entrants into the youth justice system
- keep children and young people in the city, in permanent placements and where possible with their families
- increase opportunities for early intervention in domestic violence and abuse and extend restorative practice.

Delivering this model will require reviewing the services currently available in each locality, as well as the needs of children and families in those areas. We want to make sure that services are targeted where they are needed most, so the redesigned Locality Based Model will be based on local requirements and the services available may be different in each area. This means that some service users may not be able to access all services in their local area, and there may be a reduced offer in parts of the city, but all families will continue to be able to access universal services.

Potential Positive Impacts

The proposed service will have a number of positive impacts on children and families in Southampton:

- There will be a clearer offer for children and families and more services will be

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| <p>based locally.</p> <ul style="list-style-type: none"> • There will be less reliance on assessment or strict criteria of access and greater focus on targeted need and intervention. • Children and families will be able to access support and help with any challenges or issues more quickly. • Services will be more joined up and focused on the key issues that are challenging family stability and resilience. • There will be closer working relationships across the professional networks. • There will be greater opportunities to develop links with community and voluntary sector organisations. | |
| Responsible Service Manager | Phil Bullingham, Service Lead: Safeguarding, Improvement, Governance and Quality Assurance |
| Date | 8 February 2019 |
| Approved by Senior Manager | Hilary Brooks, Service Director: Children & Families |
| Date | 8 February 2019 |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| Age | <p>63,091 children and young people (aged 0-19) live in the city, and this is expected to grow by 4.5% by 2024 to 65,912 (2,821 children and young people).</p> <p>This proposal's principal direct impacts will be on children, young people and their parents and carers.</p> <p>Overall it is anticipated that the extension of the Locality Based model will have positive impacts on children and families. Some localities may experience a change in the specialist and targeted services available locally and so some children and families may not be able to access all services in their local area. This is because services will be based on local need and targeted where they are needed most. Therefore, there may</p> | <p>All families will receive the universal offer. Specialist services will also be accessible to those who need them, although in some cases children and families may have to travel out of their local area to access them. Where need is identified families will not be excluded on the grounds of their location, and transport options will be considered to enable those individuals to access services.</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| | be a reduced offer in parts of the city. | |
| Disability | <p>There are some users of this service that have special educational needs and/or disabilities (SEND). The overall impact of extending this model should be positive in terms of its impact.</p> <p>Some localities may experience a change in the specialist and targeted services available locally and so some children and families may not be able to access all services in their local area. This is because services will be based on local need and targeted where they are needed most. Therefore, there may be a reduced offer in parts of the city.</p> <p>If specific specialist services are not available in a particular locality, some disabled children or parents may need to travel further to access services that might have previously been available in their locality.</p> | <p>The intention is to increase local availability of more specialist support. Where need is identified families will not be excluded on the grounds of their location, and transport options will be considered to enable those individuals to access services.</p> |
| Gender Reassignment | No identified impacts. | |
| Marriage and Civil Partnership | No identified impacts. | |
| Pregnancy and Maternity | Pregnant woman will be included as part of this model and so may receive more targeted support to help them prepare for parenthood. | |
| Race | 22.3% of the city's population are non-White British, including 14% who are residents from Black or Minority Ethnic backgrounds. | All families will receive the universal offer. Specialist services will also be accessible to those who need them, although in some cases children and families may have to travel out of their local area to access them. Where need |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| | | is identified families will not be excluded on the grounds of their location, and transport options will be considered to enable those individuals to access services. |
| Religion or Belief | No identified impacts. | |
| Sex | No identified impacts. | |
| Sexual Orientation | No identified impacts. | |
| Community Safety | No identified impacts. | |
| Poverty | The majority of looked after children in Southampton originally come from the 20% most deprived communities – 6.3 x higher than the 20% least deprived. | The council will continue to target resources to areas of greatest need. |
| Health & Wellbeing | If services reduce in some areas, this could have an impact on the socialisation of children and their parents/carers, and their health and wellbeing. | All families will receive the universal offer. Specialist services will also be accessible to those who need them, although in some cases children and families may have to travel out of their local area to access them. Where need is identified families will not be excluded on the grounds of their location, and transport options will be considered to enable those individuals to access services. |
| Other Significant Impacts | The impacts are likely to be positive for children and families as an enhanced locality offer will promote family stability. Early interventions and wrap around support should reduce the number of children needing to be looked after by the Local Authority and manage risk at an early stage. | |

Equality and Safety Impact Assessment CYP2

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

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| Name or Brief Description of Proposal | Review the council run play offer and seek community and voluntary sector partners to take over the direct running of the service. |
| Brief Service Profile (including number of customers) | |
| <p>The council’s Children and Families Service provides a range of services and support to help children and young people get a good start in life.</p> <p>One of those services is the ‘play offer’ which runs out of the council’s Sure Start Children’s Centres and allows children and families to access play sessions in a safe and contained space. These provide support for children and their parents/carers, helps develop community cohesion, provides parent and child socialisation and assists in school readiness.</p> <p>The council currently sets up, runs and facilitates play sessions in 7 centres across the city and these are staffed by council employees (approximately 20 staff). The number of children who are supported through the play offer varies. There are multiple play type sessions including some drop in sessions where the attendance can vary week to week. However, in October 2018, the average play session attendance was 15, and the current offer extends to an estimated 140 children.</p> <p>The council recognises the importance of these play sessions to children and their parents/carers. However, it is also important that council resources are targeted where they are needed most, and that we work with other public sector, private sector, voluntary and community organisations to deliver the best value and most joined up services.</p> <p>The proposal is, therefore, to explore opportunities for some play services to be run or co-run by local community volunteers and/or parent volunteers rather than council staff. The council and its partners will continue to coordinate and support the running of these groups, though will seek to handover some facilitation to capable and trained members of the community. Council staff will continue to run some targeted sessions if there are areas where it is not viable to deliver a community led play offer; in that case, these will be targeted to those areas with the greatest need. The council will also support work to develop the availability of play opportunities across the city.</p> | |

Summary of Impact and Issues

Under this proposal, the council will seek to encourage community groups and individuals to take over the delivery and facilitation of play sessions in Sure Start Centres. There may be some areas where it is not viable to deliver a community led play offer because of the level/complexity of need or because community leaders cannot be sourced. In that case, council staff will continue to run some targeted sessions, in those areas where there are the greatest needs.

There are no planned closures amongst the seven Sure Start Centres, which currently deliver a play offer. However, as some services move to a community based delivery model, there will be a reduction in access to professional support during play sessions. Targeted services will still be in place via other routes for those parents/carers who need more support. It is also possible that some areas may see a reduced play offer (in terms of less hours, or potentially some services ceasing) if community leaders cannot be sourced, and council staff need to focus on other areas with a greater level of need.

We will train and support community volunteers over a period of time and will not hand over programmes to volunteers till such assurance is achieved. We will work in partnership with a voluntary network and will continue to support, train and coach the network.

This work will help address our objectives as it will target need and we will extend our resources by partnering with the community and the voluntary sector and ensure safeguarding matters are addressed.

Potential Positive Impacts

The delivery of a play offer through communities will strengthen and build partnerships between the council and communities.

Exploring innovative community led delivery models will enable the council to maintain services in parts of the city which potentially could otherwise see a significant reduction or ceasing of the play offer.

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| Responsible Service Manager | Phil Bullingham, Service Lead: Safeguarding, Improvement, Governance and Quality Assurance |
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| Date | 8 February 2019 |
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| Approved by Senior Manager | Hilary Brooks, Service Director: Children & Families |
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| Date | 8 February 2019 |
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Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| Age | <p>There are 140 children currently using the Sure Start Children's Centre play offer.</p> <p>63,091 children and young people (aged 0-19) live in the city, and this is expected to grow by 4.5% by 2024 to 65,912 (2,821 children and young people).</p> <p>The successful development of a community led model would ensure that the play offer is maintained for children in the city. However, it is possible that services could reduce in some areas, which could have a negative impact on some children.</p> | <p>The council will work with individuals and community groups to explore opportunities for community groups and individuals to take over delivery and facilitation of play sessions.</p> <p>The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas.</p> <p>The council will also support work to develop the availability of play opportunities across the city.</p> |
| Disability | <p>There will be a reduction in access to professional support during play sessions, which could have a greater impact on children with SEND and their parents/carers.</p> | <p>The council will continue to target its resources to areas of greatest need and this will require a specific focus on presenting demand around children's additional needs, including SEND. The offer across the City will be agile so as to respond to need across localities – bring a level of focus to high demand areas.</p> |
| Gender Reassignment | <p>No identified impacts.</p> | |
| Marriage and Civil Partnership | <p>No identified impacts.</p> | |
| Pregnancy and Maternity | <p>It is possible that some services may reduce in some areas, which could have an impact on the socialisation of children and their parents/carers, and have a greater impact on those with more than one younger child.</p> | <p>The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas. It will still be possible to access professional support via other routes.</p> |
| Race | <p>No identified impacts.</p> | |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| Religion or Belief | No identified impacts. | |
| Sex | No identified impacts. | |
| Sexual Orientation | No identified impacts. | |
| Community Safety | No identified impacts. | |
| Poverty | The majority of looked after children in Southampton originally come from the 20% most deprived communities – 6.3 x higher than the 20% least deprived. | The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas. It will still be possible to access professional support via other routes. |
| Health & Wellbeing | If services reduce in some areas, this could have an impact on the socialisation of children and their parents/carers, and their health and wellbeing. | The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas. It will still be possible to access professional support via other routes. |
| Other Significant Impacts | None identified. | |

Equality and Safety Impact Assessment CYP3

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

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| Name or Brief Description of Proposal | Review the Contact Service which facilitates contact for Looked After Children with their birth families, with a view to this being delivered by a partner organisation |
| Brief Service Profile (including number of customers) | |
| <p>Southampton City Council runs a Contact Service which facilitates contact for our Looked After Children (LAC) with their birth families. The service supervises contact between approximately 300 Looked After Children and their families across varying time frames: some contacts are 3 or 4 times per week and some are once every 6 months. Demand for the service is high due to the numbers of cases being referred.</p> <p>The current service is costly in terms of staffing, time and physical resource. It employs 16 contact practitioners and requires complex coordination. It is also not flexible enough for our Looked After Children their families, as it only operates in core hours and is not able to meet urgent contacts or to facilitate out of area contact.</p> <p>The proposal is to review, scope and assess the benefits of the current Contact Service, with a view to it being delivered by a partner organisation. In doing so, the service has the potential to become more flexible, with a 7 day a week service across extended hours. Following the review, any changes that are anticipated to have an impact on service users will be subject to further consultation and/or engagement.</p> | |
| Summary of Impact and Issues | |
| <p>A full review will be undertaken to understand the options for delivering the Contact Service through another organisation, and the impacts of doing this. The detailed impacts would not be known until a delivery model is agreed with any organisation that might be interested in taking over this service. Once the review is complete, any changes that are anticipated to have an impact on service users will be subject to further consultation and/or engagement, including an updated Impact Assessment if required.</p> <p>At this stage, it is anticipated that another provider would be able to provide more flexibility in the locations that the Contact Service is delivered. A more flexible model would reduce logistical pressures for the service and make contact easier for</p> | |

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| families. However, this would be subject to the delivery model of the provider and any contract/Service Level Agreements. This would be taken into account in the scoping and review, to ensure that the best balance of outcomes are achieved through the service being contracted out. | |
| Potential Positive Impacts | |
| <ul style="list-style-type: none"> • Clearer offer for families which are locality based. • Extended hours offer • Potential for 7 day service • Flexible use of buildings • Quicker response for families • More cost efficient. • Extended service could be used to assist in rehabilitation work and so reduce the numbers of LAC and the time they spend in care. | |
| Responsible Service Manager | Phil Bullingham, Service Lead: Safeguarding, Improvement, Governance and Quality Assurance |
| Date | 8 February 2019 |
| Approved by Senior Manager | Hilary Brooks, Service Director: Children & Families |
| Date | 8 February 2019 |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| Age | Around 300 children are supported by the Contact Service. These children could be impacted by any changes to the service. | Following a review, proposals affecting service users will be subject to further consultation and engagement as appropriate. January 2019 - The current position of the Contact Service, on the back of recent review activity, shows that the service should be retained as a council led offer and that further review focus should be to improve the offer by aligning it closer to locality resources; so as to improve contact service experiences uniformly for all children, including those with SEND. |
| Disability | Some children or parents being supported may have disabilities. These individuals could be impacted by any changes to the service. There is a potential positive impact if the service moves location, as this may improve ease of access. | |
| Gender Reassignment | No identified impact to date. | |
| Marriage and Civil Partnership | No identified impact to date. | |
| Pregnancy and Maternity | No identified impact to date. | |
| Race | No identified impact to date. | |
| Religion or Belief | No identified impact to date. | |
| Sex | No identified impact to date. | |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| Sexual Orientation | No identified impact to date. | |
| Community Safety | No identified impact to date. | |
| Poverty | No identified impact to date. | |
| Health & Wellbeing | No identified impact to date. | |
| Other Significant Impacts | No identified to date. | |

Equality and Safety Impact Assessment CYP 4

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

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| Name or Brief Description of Proposal | Reduce the funding provided to Compass School Pupil Referral Unit from 160 to 100, in line with actual demand. |
| Brief Service Profile (including number of customers) | |
| <p>Compass School is a Pupil Referral Unit (PRU), providing transitional, full time education and support for up to 160 pupils aged 5 - 16 who are not accessing mainstream schools. Permanently excluded pupils are referred directly to Compass School by the council’s Vulnerable Pupils Manager. Requests for dual registration places (where pupils are registered at another school as well) are made by mainstream schools via Southampton’s ‘In Year Fair Access’ or ‘Primary Heads Inclusion Group’.</p> <p>Since 2015, the number of PRU places to be funded has been determined by local authorities, taking into account any Alternative Provision (AP) required by their maintained schools and academies. Southampton City Council currently provides funding to Compass School for 160 pupils. Regardless of number who actually attend, in September 2018, there were only 67 pupils on the school roll. Although this number is likely to rise as the academic year progresses, the school has never reached its capacity of 160 full-time equivalent places.</p> <p>Therefore, the current funding for 160 full-time pupils is not required, both due to lower numbers using the provision than funded places and the fact that the majority of pupils are not receiving full time education and are on reduced timetables.</p> <p>There has been a national increase in referrals to PRUs. However, the number of pupils who reintegrate to mainstream education in Southampton, following a placement at Compass, is significantly lower than that of other similar sized local authorities. Therefore, Southampton City Council is working with mainstream schools to reverse this trend and support more pupils to stay in or reintegrate to mainstream placements.</p> | |

We are therefore proposing to reduce the number of funded places in Compass School from 160 to 100 full-time equivalent from September 2019, to reflect actual numbers and demand.

Summary of Impact and Issues

The proposal is to reduce the number of full-time funded places in Compass School from September 2019, in line with actual pupil numbers.

To achieve this, and keep demand for PRU places low, there will be a greater focus on supporting pupils to stay in mainstream schools and reintegrating those who have been excluded. This will have an impact on mainstream schools and there will be increased expectations for schools to work restoratively in managing pupils with challenging behaviour. Restorative Practice training is being rolled out across the city, with some schools being ambassadors for this. As such, schools will be encouraged and supported to be more creative in delivering personalised curricula to pupils who would benefit from a less traditional style of teaching.

By remaining in mainstream schools, rather than being placed in Compass School, some pupils may experience a lesser availability of specialist resources than those which may have been available to them had they been placed in Compass School.

However, ensuring schools are able to address issues of concern sooner rather than later is better for pupils and better value for money. It is preferable to keep pupils in mainstream school if at all possible as permanent exclusion is strongly linked with negative outcomes. There is a wealth of data linking exclusion from school with academic underachievement, offending behaviour, limited ambition, homelessness and mental ill health.

Potential Positive Impacts

- Long term places in Compass School will be made available to those most in need of specialist support.
- There will be an increased focus on preventing exclusion and reintegration into mainstream schooling which will have positive impacts on the outcomes of children and young people.
- The proposal will include the development of preventative outreach programmes (particularly at secondary level).
- Increased numbers of pupils will be supported locally and within the mainstream through flexible provision.
- Specialist resources will be targeted to the most complex cases.

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| Responsible Service Manager | Derek Wiles, Service Lead: Education |
| Date | 8 February 2019 |
| Approved by Senior Manager | Hilary Brooks, Service Director: Children & Families |
| Date | 8 February 2019 |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| Age | <p>In September 2018 there were 67 pupils aged 5-16 attending Compass School.</p> <p>The reduction in funding may have an impact on the level of service experienced by children attending the school.</p> | <p>Funding is being reduced in line with actual pupil numbers based on full-time equivalent places.</p> <p>Schools are increasingly developing a curriculum which meets the needs of a broader range of students, which will enable learners to access provision within mainstream education and reduce the need for places at Compass School.</p> <p>Pupil numbers will be kept under review with regular dialogue with the school. This will be carried out to ensure funding matches' needs based on full-time equivalent places.</p> |
| Disability | <p>100% of pupils in Compass School have special educational needs and/or disabilities (SEND) compared to a national average of 22%.</p> | <p>Frequent periods of change can have a detrimental effect on outcomes for young people with SEND. Therefore, the short-term nature of the placements at Compass may not be beneficial to this cohort. Sustaining placements in mainstream schools through early intervention will see pupils with SEND fully included in mainstream education.</p> <p>Having a needs-led, child centred approach to learning within mainstream schools will engage young people with SEND.</p> <p>Tailoring the curriculum within mainstream schools to meet the needs of these pupils will have a positive impact on outcomes.</p> |
| Gender Reassignment | No identified impact. | |
| Marriage and Civil Partnership | No identified impact. | |
| Pregnancy and Maternity | No identified impact. | |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| Race | No identified impact. | |
| Religion or Belief | No identified impact. | |
| Sex | No identified impact. | |
| Sexual Orientation | No identified impact. | |
| Community Safety | No identified impact. | |
| Poverty | No identified impact. | |
| Health & Wellbeing | No identified impact. | |
| Other Significant Impacts | No identified impact. | |

Equality and Safety Impact Assessment CYP6

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

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| Name or Brief Description of Proposal | Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision |
| Brief Service Profile (including number of customers) | |
| <p>The Early Intervention Fund supports early years and childcare providers to expand or set up new provision. In 2017/18, £166,100 was allocated for this purpose, and in 2018/19 £116,000 has been allocated. In 2017/18 1,400 new early education places across the city were secured with the support of the early intervention funding.</p> <p>Southampton City Council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places for 2, 3 and 4 year olds, and sufficient childcare places for working parents. The introduction of the 2 year old offer, the 30 hour offer and tax free childcare has led to a significant demand for more early education and childcare places. Currently, 96% of our 3 and 4 year olds (4,540 children) and 67% of eligible 2 year olds (around 1,400 children) access funded early education. There are 101 registered group early years’ providers in the city, across a range of private, voluntary, independent and maintained settings, plus around 200 childminders.</p> <p>Using the childcare sufficiency assessment, which takes into account population figures, housing and business developments and vacancy levels with current providers, providers are encouraged and supported to expand and set up new provision in areas of the city where there are insufficient places. This expansion and development is supported by the Early Intervention Fund.</p> | |
| Summary of Impact and Issues | |
| <p>The proposal is to reduce the funding allocated to the Early Intervention Fund to £15,000 per annum in 2019/20 and beyond.</p> <p>Providers will be encouraged to seek funding from other sources. The impact of the reduction in the funding may be that some early years and childcare providers will find it more challenging to expand or set up new provision. This may in turn</p> | |

impact the number of places available across the city.

There are 15,826 children aged 0-4 in the city, and by 2024 this predicted to fall by 0.2% (30 children). However, demand for early education and childcare places has increased in recent years. This may continue, as only 67% of eligible 2 year olds are accessing funded early education, and there are currently insufficient places available in some areas of the city. A reduction in funding available from the council could have an impact on the number of places available in the city if providers are unable to attract funding from other sources to support expansion.

Potential Positive Impacts

Providers will be encouraged to seek funding from other sources, which may lead to sustainable future funding arrangements.

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| Responsible Service Manager | Derek Wiles, Service Lead: Education |
| Date | 8 February 2019 |
| Approved by Senior Manager | Hilary Brooks, Service Director: Children & Families |
| Date | 8 February 2019 |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|--------------------------|---|---|
| Age | <p>49,513 children and young people (aged 0-17) live in the city, and this is expected to grow by 5.5% by 2024 to 52,246.</p> <p>There are 15,826 children aged 0-4 in the city, and by 2024 this predicted to fall by 0.2% (30 children).</p> <p>Demand for early education and childcare places has increased in recent years. A reduction in funding available from the council could have an impact on the number of places available in the city if providers are unable to attract funding from other sources to support expansion.</p> | <p>Southampton has always had a mixed model of early year's provision. With most national grants only being available to schools, the council will work with schools to encourage more of them to deliver early education. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.</p> |
| Disability | This proposal may mean that some | The council will work on |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------------------|---|---|
| | <p>groups are unable to expand, therefore potentially meaning less places for children with special educational needs and/or disabilities (SEND).</p> <p>The costs of supporting a child with high-end additional needs in an Early Years setting is not completely covered by the early years funding formula, therefore providers may choose, if they have limited places, to prioritise taking children who do not need dedicated support. This could have a negative impact on SEND children and their families.</p> | <p>a case by case basis to identify suitable provision for 2, 3 and 4 year olds with special educational needs and/or disabilities (SEND).</p> |
| Gender Reassignment | No identified impact. | |
| Marriage and Civil Partnership | No identified impact. | |
| Pregnancy and Maternity | <p>Southampton has a birth rate of 53.2 births per 1,000 females aged 15 to 44 years. This is lower than the England average of 62.5 per 1,000 females.</p> <p>The number of children aged 0-4 in Southampton is due to fall by 0.2% (30 children) by 2027.</p> <p>However, demand for early education and childcare places has increased in recent years. A reduction in funding available from the council could have an impact on the number of places available in the city if providers are unable to attract funding from other sources to support expansion.</p> | <p>Southampton has always had a mixed model of early year's provision. With most national grants only being available to schools, the council will work with schools to encourage more of them to deliver early education. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.</p> |
| Race | No identified impact. | |
| Religion or Belief | No identified impact. | |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|----------------------------------|---|--|
| Sex | No identified impact. | |
| Sexual Orientation | No identified impact. | |
| Community Safety | No identified impact. | |
| Poverty | <p>23.4% of children in Southampton live in poverty. Local data shows that only 37% of children living in the 10% most deprived areas of the city who do not attend early years provision reach the expected level in the Early Years Foundation Stage at age 5, compared with 59% who have attended for over 540 hours.</p> <p>Reducing the early intervention grant may result in fewer new places being made available to under 2s, as it is more costly to staff places for younger children.</p> | <p>The council will signpost providers who are considering expanding to national grants, and work with schools to encourage more schools to deliver early intervention. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.</p> |
| Health & Wellbeing | <p>If sufficient childcare places are not available, this may have an impact on the health and wellbeing of children and their parents.</p> | <p>The council will signpost providers who are considering expanding to national grants, and work with schools to encourage more schools to deliver early intervention. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.</p> |
| Other Significant Impacts | None identified. | |

Equality and Safety Impact Assessment SHIL1

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

| | |
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| Name or Brief Description of Proposal | Revise the Adult Social Care Charging Policy |
| Brief Service Profile (including number of customers) | |
| <p>Under the Care Act 2014, the council has discretion whether to charge for services to meet both eligible and non-eligible needs, except where it is required to arrange care and support free of charge.</p> <p>Southampton City Council has an Adult Social Care Charging Policy which sets out the charges that apply for non-residential care and support. Under this policy, the council charges for some services provided (care and support) where it is permitted to do so under the Care Act 2014 and carries a financial assessment (means test) to determine the amount an individual has to contribute towards the cost of their care and support.</p> <p>The council has, to date, exercised its discretion to not charge at all for some services and for other services has not charged the full amount to cover the actual service being delivered. The Care Act 2014 and associated relevant regulations set out the services that a local authority can and cannot charge for.</p> <p>The proposed policy aims to deliver a fairer and more equitable service, whilst ensuring that the services can remain sustainable in order to meet the needs of local people, now and in the future.</p> <p>The council has considered its duties and responsibilities under the Care Act 2014, the statutory guidance and regulations prior to putting forward this proposal. The council considers these changes are affordable and reasonably practicable for customers to pay and all charges will be clear and transparent.</p> <p>In cases of financial hardship the council always has the discretion to waive all or part of any charges on a case by case basis.</p> <p>The council proposes to make the following changes to its Adult Social Care</p> | |

Charging Policy, which will affect approximately 700 people currently using services as well as future clients:

- 1) To introduce a new Arrangement Fee of £250 for people whose assets are over the capital threshold, currently £23,250, (and who therefore must pay the full cost of their care) but who request Southampton City Council to make the arrangements for their non-residential care (as is permitted under the Care Act 2014).
- 2) To take account of the higher rate Attendance Allowance and disability benefits (Personal Independence Payment and the care component of Disability Living Allowance) when assessing for financial contributions for non-residential care. This is in line with other local authorities. The difference between the higher and lower rate payments is currently £28.30 per week. This would now be taken into account when calculating an individual's income.
- 3) To make it clear that Southampton City Council will begin charging the assessed contribution from the first day that chargeable services are provided.
- 4) To increase charges for deferred payment scheme loans to reflect the actual costs of administering the scheme, and introduce an interest charge in line with the Care Act 2014.
- 5) To apply the charging policy to clients receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011 (although during the consultation period it has become clear that these individuals will not be impacted by the proposal because of their complex health needs and their circumstances).

Summary of Impact and Issues

Southampton City Council currently supports approximately 2,600 people with care and support needs. The proposed Charging Policy will not impact on all of the existing clients but is likely to impact on approximately 700 clients.

The majority of the councils social care clients are older adults and would be considered to fall within the definition of having a disability.

Evidence shows that disabled people and older people have proportionately lower levels of income and could therefore experience a greater level of financial impact. The nature of the impact of the proposals will vary according to the specific proposal and will be mitigated by offsetting Disability Related Expenditure (DRE) against the assessed client contribution, where appropriate.

1. Arrangement Fee for non-residential care:

The proposal is to introduce an Arrangement Fee of £250 for people whose assets are over the capital threshold (currently £23,250 or more) and who ask the council to make arrangements for non-residential care on their behalf. A further charge of £250 would be made on each occasion the customer asks the council to arrange a new care package. Minor changes to existing arrangements will not be subject to a further charge, and the charge would only apply to major changes such as a change

in provider of care and support or a significant change in need requiring new arrangements.

This proposal is expected to have low impact and considered to be reasonably affordable for existing and future full-cost clients. Charges will not be applied before an individual has had every opportunity of being financially assessed to ensure their income and savings are above the capital threshold, (currently £23,250). All of these customers will have more than the higher capital threshold.

The key risk is that people, especially families and carers may be disinclined to request support for making arrangements from the council due to the arrangement fee.

A fee of up to £250 is considered affordable and reflects the administrative costs of making these arrangements, and will be payable each occasion that a customer makes a request to the council for a new care package (excluding minor changes to existing packages).

2. Take account of higher rate Attendance Allowance and disability benefits:

The proposed change is to include all forms of benefit payments (unless explicitly disregarded under the Care Act 2014, such as the mobility component of disability related payments) in the in the assessment of an individual's income. Historically, Southampton City Council has disregarded the higher rate of Disability Living Allowance or Attendance Allowance, equating to £28.30 (2018/19 rates). The mobility component of Attendance Allowance and disability related benefits will continue to be disregarded in line with legislation and guidance, and following consultation the proposal is to disregard all disability related benefits for individuals who are terminally ill and have been issued with a DS 1500 form.

Allowance will be made for Disability Related Expenditure (DRE) for care and support at home, and the equivalent amount of these costs will be disregarded when calculating an individual's income. DRE, which would take into account all additional disability related costs, including where relevant, any night time care costs that the council is not meeting will not be included as income in the financial assessment. Each individual's disability related expenditure will be assessed on a case by case basis.

There were just over 700 clients in receipt of higher rate disability related benefits at the time of the consultation which, subject to financial assessment, may be affected by the change. Approximately 400 were aged over 65, the majority being female in receipt of the higher rate care component of Attendance Allowance. The remaining 300 were adults aged 18 to 64 receiving higher rate disability benefits and of mixed gender.

It was not possible to determine the exact number of people impacted by this proposal during the consultation period. This is because individual's income and disability related expenditure will differ and only through an assessment under the new policy would it be possible to confirm who and how many people it will affect.

There is a risk that clients choose to reduce or cancel care and support as a result of

the proposal being implemented. This could have an adverse impact on health and wellbeing on the individual and on their carer(s), family members and/or friends who may have to give additional care and support.

The overall assessment of Southampton City Council is that the impact will be minimised through the financial and disability related expenditure assessments so that people are not disadvantaged, especially where they have additional needs and costs directly related to their disability.

3. Charges start from the date the service commences:

Under the current policy, people are not charged for services they are getting prior to completing a financial assessment. This proposal will enable the council to align charges and payments with services provided, from the point at which they start being provided. This will mean that recipients of support may have to commence payment earlier than at present, and therefore pay more overall. This proposal will not impact on existing clients and only affect new clients when the policy is implemented.

The impact analysis shows that an average of 294 new clients a year will require a chargeable non-residential care services. The average weekly contribution for a new client receiving non-residential services at the time of the consultation was £83.47 but with an average 7 weeks each client has services before completing a financial assessment, it is estimated that the new policy would result in new clients paying on average, £581 more towards the cost of their care services.

The main concern from the consultation feedback was that the proposed policy would put people at risk of getting into debt, especially when there is a significant length of time between starting a service and completing the financial assessment.

Following consideration of the representations made in the consultation, the proposal is to amend the draft policy to confirm that in cases of lengthy financial assessments, charges will not apply to a period any longer than 8 weeks prior to the notification date of the completed financial assessment.

4. Deferred payment scheme loans:

The Deferred Payment Scheme (DPS) is designed to prevent people from being forced to sell their homes in their lifetime to meet the costs of their residential care. Deferred Payment Arrangements are effectively loans which enable adult social care clients to use the value of their homes to help pay residential care home costs. The council supports an average of 15 customers a year through the DPS scheme.

The proposal is to increase the charges that council makes to cover the cost of the service. Southampton City Council currently charges a one of administration fee of £250 which does not align to the actual costs of the service.

Local authorities must set their administration charge at a reasonable level and this must not be greater than the actual costs incurred by the local authority. Therefore Southampton City Council is proposing to increase the one off set up fee for people using the Deferred Payment Scheme, to cover administrative costs, to £730.

Following consideration of the representations made in the consultation, Southampton City Council is no longer proposing to introduce an annual administration fee.

The council is also proposing to start charging interest on the deferred amount for the whole period that the agreement is in place. The interest will form part of the total overall amount owed to the council. The council is proposing to charge interest at the maximum level amount allowed under the Care Act 2014.

This proposal will affect new DPS arrangements only and will not affect people with existing loans.

5. To apply the charging policy for clients receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011:

The consultation proposed that the council would apply the new charging policy to everyone receiving chargeable social care and support services. This may have affected up to 25 people who, until 2011, lived at the Locally Based Hospital Unit (LBHU), at which time the responsibility transferred from the NHS to the council.

This proposal may have impacted up to 25 clients who were previously residents of the LBHU. All 25 clients affected by the proposal were supported by independent advocacy as well as Deputies for Property and Financial Affairs for those who had them to engage in the consultation process as much as they were able. Assessments were carried out for each individual to understand the impact of the proposal.

These assessments have shown that by virtue of their significant and complex health care needs, these individuals would not in any case be affected by this proposal and, on the basis of their current circumstances, they would not be assessed as requiring to make any contribution towards the cost of their care.

These individuals will continue to receive regular individual assessments to ensure that the arrangements for funding their care and support are made in accordance with the Adult Social Care charging policy, arrangements for Continuing Healthcare and other relevant policies.

It has not been necessary to make any changes to the draft policy, as these individuals will not be impacted by the proposal.

Potential Positive Impacts

For all groups, these changes help to ensure that the council can continue to help as many people with care and support needs as possible within the limited resources available. To this extent there should be a positive impact overall, as resources will be distributed more equitably.

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| Responsible Service Manager | Lee Fermandel, Service Lead: Adult Social Care Improvement |
| Date | 8 February 2019 |
| Approved by | Paul Juan, Service Director: Adults, Housing & Communities. |

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|-----------------------|-----------------|
| Senior Manager | |
| Date | 8 February 2019 |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|--|---|---|
| Age | <p>Older people are disproportionately highly represented in the adult social care customer group and therefore older people will be impacted by these proposals.</p> <p>Within the customer group it is the older customers that are more likely to have the type of capital assets that these proposals take in to account.</p> <p>Within the client group itself the proposed changes will apply equally regardless of age, and these proposals could therefore impact customers of any age.</p> <p>Older people impacted are likely to experience a negative financial impact as a result of the proposals.</p> | <p>A full review of all charges, and the risks associated with the each proposal impacting on older people has been undertaken which includes mitigating actions, where appropriate, under each proposal.</p> <p>All representations made during the consultation have been taken into account and used to inform the final version of the draft policy and recommendations to council.</p> <p>Customers and their families will be provided with advice and information including details of local advice agencies which will provide financial advice where relevant.</p> |
| Disability | | |
| To introduce a new Arrangement Fee of £250 | <p>All of those individuals affected by this proposal will have a disability.</p> <p>The key risk is that people, especially families and carers may be disinclined to request support for making arrangements from the council due to the arrangement fee.</p> | <p>Those with income and savings below £23,250 will not be subject to the charge.</p> <p>In exceptional circumstances, the council will consider options to defer, suspend or waive the charge.</p> |
| To take account of the higher rate Attendance Allowance and disability benefits | <p>Up to 700 people may be impacted by the proposal.</p> <p>Clients could choose to reduce or cancel care and support as a result of the proposal being implemented.</p> | <p>Everyone directly affected by this proposal will be financially reviewed. This will include a benefits check and an offer of a Disability related Expenditure (DRE)</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| | <p>This could have an adverse impact on health and wellbeing on the individual and on their carer(s), family members and/or friends who may have to give additional care and support.</p> | <p>assessment/ re-assessment so that all of their allowable disability related expenditure is taken into account, including where relevant, night-time care costs that are not met by the council.</p> <p>In cases where a client chooses not to undergo a DRE assessment, the council will make every effort to take into account the person's disability related costs within their financial assessment. In doing so, the council may use relevant information such as the person's care needs assessment, care plan and/or review to inform the amount of money, if any, the council will include as DRE within the financial assessment.</p> <p>The council will continue to disregard the mobility component of disability related benefits in line with legislation.</p> <p>If an individual does not intend to continue using a service as a result of the changes then they will be offered a strengths-based assessment.</p> <p>The council will disregard disability related benefits for people who are terminally ill and have been issued with form DS 1500.</p> <p>In exceptional</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| | | <p>circumstances, the council will consider options to defer, suspend or remove charges where the charges might create financial hardship.</p> <p>A review and appeals procedure is in place in cases where people disagree with their financial assessment.</p> |
| Charges start from the date the service commences: | <p>There is a risk that some individuals face financial hardship if they are required to pay backdated contributions following lengthy financial assessment period.</p> | <p>Southampton City Council will undertake financial assessments as swiftly as possible to avoid any undue delay</p> <p>In cases of lengthy financial assessments, charges will not apply to a period any longer than 8 weeks prior to the notification date of the completed financial assessment.</p> <p>The council will ensure people are offered a light-touch financial assessment to minimise delay and offer appropriate support to engage in the assessment.</p> <p>In exceptional circumstances, the council will consider options to defer, suspend or remove charges where the charges might create financial hardship.</p> |
| To increase charges for deferred payment scheme loans to reflect the | <p>For some people, the set-up charge and introduction of an interest charge may deter them from utilising the scheme.</p> | <p>The recommendation to apply administration charge of £305 is not being taken forward following consideration of the consultation representation.</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| <p>actual costs of administering the scheme, and introduce an interest charge in line with the Care Act 2014.</p> | | <p>In exceptional circumstances, the council will consider options to defer, suspend or remove charges.</p> |
| <p>To apply the charging policy for clients receiving social care support who were previously supported by the Local Hospital Base Unit (LHBU) prior to its closure in 2011</p> | <p>This proposal would impact 25 clients who were previously residents of the LHBU. This proposal could have negative financial impacts on these clients.</p> | <p>All 25 clients affected by the proposal were supported by independent advocacy as well as Deputies for Property and Financial Affairs for those who had them to engage in the consultation process as much as they were able. Assessments were carried out for each individual to understand the impact of the proposal.</p> <p>These assessments have shown that by virtue of their significant and complex health care needs, these individuals would not in any case be affected by this proposal and, on the basis of their current circumstances, they would not be assessed as requiring to make any contribution towards the cost of their care.</p> <p>These individuals will continue to receive regular individual assessments to ensure that the arrangements for funding their care and support are made in accordance with the Adult Social Care charging policy, arrangements for Continuing Healthcare and</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------------------|---|---|
| | | other relevant policies. |
| Gender Reassignment | No identified impacts. | |
| Marriage and Civil Partnership | No identified impacts. | |
| Pregnancy and Maternity | No identified impacts. | |
| Race | No identified impacts. | |
| Religion or Belief | No identified impacts. | |
| Sex | <p>There is a higher proportion of female clients who are currently receiving social care support from Southampton City Council.</p> <p>Women are more likely to be carers, and more women could feel compelled to provide unpaid care if deterred from seeking help from the council due to charges.</p> | <p>The council will comply with its duties under the Care Act 2014 which confirms that any charge should be reasonable and affordable, and sex is not a contributing factor to the assessment of charges.</p> <p>Carers will be signposted to support where appropriate.</p> <p>The council will use its discretion to waive all or part of any charge if it is likely to cause undue hardship on a case by case basis.</p> |
| Sexual Orientation | No identified impacts. | |
| Community Safety | No identified impacts. | |
| Poverty | There could potentially be an impact as increasing charges and making new changes have an adverse financial effect on some clients. | Everyone directly affected by this proposal will be financially reviewed. This will include a benefits check and an offer of a Disability related Expenditure (DRE) assessment/ re-assessment so that all of their allowable disability related expenditure is taken into account, including where relevant, night-time care costs that are not met by |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
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| | | <p>the council.</p> <p>The council will use its discretion to waive all or part of any charge if is likely to cause undue hardship on a case by case basis.</p> |
| Health & Wellbeing | <p>In cases where a client is deterred from seeking support from the council due to charges, their health and wellbeing could be detrimentally impacted.</p> | <p>Customers and their families will be provided with advice and information including details of local advice agencies which will provide financial advice where relevant.</p> <p>The council will use its discretion to waive all or part of any charge if is likely to cause undue hardship on a case by case basis.</p> |
| Other Significant Impacts | <p>No identified impacts.</p> | |

Equality and Safety Impact Assessment SHIL2

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

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| Name or Brief Description of Proposal | Future of two council owned residential care homes |
| Brief Service Profile (including number of customers) | |
| <p>Southampton City Council runs two residential homes, Holcroft House and Glen Lee. Holcroft House is a 34 bedded unit and Glen Lee is a 33 bedded unit. Both are Care Quality Commission (CQC) registered residential units providing short and long term care for adults living with a dementia. Both homes are rated as “good” by CQC. In Glen Lee, the accommodation is provided over two floors accessed by a passenger lift. In Holcroft House, accommodation is provided on one floor.</p> <p>There are currently 36 residential homes that are CQC registered to provide dementia care in or near the boundary of the city. There is an over provision of residential homes in the area, with 70 vacancies available to the council for residential care placements across these homes as of October 2018 (including the two homes run by the council).</p> <p>Although demand for Adult Social Care is increasing, the demand for residential care has decreased as more people are supported to live independently in their own homes. National research has found that older people would prefer to continue living at home for as long as possible. Research also tells us that the demand for residential care is likely to continue to decrease as alternatives such as housing with care become the preferred option.</p> <p>The local care market is better placed to provide care and support where residential care is needed, leaving the council to focus on the development of housing with care and community-based services. The proposal is therefore to close both council owned residential care units: Glen Lee and Holcroft House.</p> <p>The proposal is that, subject to consultation and careful consideration of all representations before any final decision is made, to close one or both of the homes over the period of a year. The proposed closure will be carefully managed and will</p> | |

include an individual transition plan for all residents. Care staff will be supported throughout to ensure a safe and excellent quality of care is provided throughout the closure process.

Thorough, person-centred assessments will be undertaken of each individual resident of the homes to determine their needs and how they can best be met in future before any final decisions are taken. These will take into account the views and preferences of the person as well as their families, carers and, where appropriate, their independent advocates. This assessment will also measure the impact of the phased closure on individual residents and will seek support from other professionals and agencies to minimise impact, particularly to their health and well-being.

Residents, relatives, carers and stakeholders have been involved in ongoing discussions, assessment processes and planning for the future. Strict regard has been made to both the framework provided by the law and statutory and good practice guidance. The needs and welfare of residents and families are paramount when considering transfer to alternative provision.

Summary of Impact and Issues

The impact of any decision to close the one or both of the care homes will be a direct impact on those currently using these facilities. Current residents will have their needs reviewed and will be supported to move to alternative provision which could be a new care home.

Financially, no resident will be worse off as a result of this proposal as the council will freeze the rate so that the new care home fee will not be higher than it was prior to the move.

The closure of the current provision has the potential to affect services provided to adults with care and support needs including:

- Adults with dementia
- Adults with physical disabilities
- Adults with sensory support needs
- Short term provision
- Family and Carers
- Local residents

Potential impacts identified so far include:

- Some residents that are currently in the residential homes that are proposed to be closed may find it upsetting to move as they may have been living in the area and care home for a while. If the proposals go ahead, following the consultation period, a full assessment will be carried out for each resident before they move. These assessments will be based on good practice guidelines on closing care homes and settling people into new accommodation. Residents will also have access to independent advocacy support.
- The proposed closures, if approved, will require the council to support some

existing residents to move to a different care home whilst we will work sensitively to minimise the impact their vulnerability may mean they find it a challenging experience. It will mean a change of environment and staff team and it will take time to manage the transition.

- Residents' concerns and levels of anxiety could impact their emotional and physical wellbeing, particularly just before and move, or immediately afterwards. Relatives of residents may also have concerns relating to finding suitable alternate care and support which could impact their health and wellbeing.

Carers and residents will be involved in on-going discussions, assessment processes and planning for the future. It should be noted that, if a decision was taken to close one or both homes, implementation would not take place until 2020 to allow for careful planning and implementation.

If the proposal is approved the council will review in conjunction with the NHS (if appropriate) all resident's needs individually.

Although there is a presumption that all individuals have mental capacity until there is evidence to the contrary it is likely that some of the residents may lack the capacity to make decisions or complex decisions about their residence and their care and support. If after the mental capacity assessment there is evidence that the individual lacks capacity to make relevant decisions the council will need to arrange a best interest decision meeting. In some cases an application to the Court of Protection may be required. The council have a duty to provide independent advocacy services to anyone who would have difficulty in engaging. If the proposal to close one or both of the homes is approved the council will provide advocacy services to residents and relatives where necessary, particularly during any review of the individual's needs for care and support and during care planning to an alternative provider.

Each individuals' rights under relevant legislation, including the Care Act 2014, Mental Capacity Act 2005, Equality Act 2010, and Human Rights Act 1998 would be ensured and best practice and Care Quality Commission Managing Care Home Closures Guidance (2016) will be followed.

Potential Positive Impacts

In the longer term there is evidence that supporting people living with dementia to live independently in their own homes, drawing where appropriate on the support of others in their community, leads to the best outcomes for those people.

Re-providing residential care and support in homes run by charities and the private sector is more cost effective, supporting a more sustainable social care system locally, ensuring that the needs of people in Southampton can continue to be met in full. The proposal for change is in line with the council's strategy to develop more housing with care schemes at different sites as an alternative to residential care. This is a positive impact on people who live in Southampton, as this will enable people to live independently within a scheme in a self-contained flat which will have the benefit of an on-site care team.

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| Responsible Service Manager | Sharon Stewart, Service Lead: Adult Social Care |
| Date | 8 February 2019 |
| Approved by Senior Manager | Paul Juan, Service Director: Adults, Housing & Communities |
| Date | 8 February 2019 |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|--------------------------|--|---|
| Age | <p>The greatest impact of the proposal is likely to be on those older residents who have been using Glen Lee and Holcroft services for many years and for whom any change in provision will be difficult.</p> <p>All of the residents are over 65 years.</p> <p>There is potential for decline in residents' emotional and physical health during and immediately after any move following closure of a care home.</p> | <p>An initial review of needs has been undertaken for all residents, taking the following factors into consideration:</p> <ul style="list-style-type: none"> • People who lack mental capacity • Very frail vulnerable people, with complex medical needs • People who need specialist equipment • People who have special dietary needs, • People who have sensory loss/deficit e.g. blind, deaf • People who have been resident for long periods and developed close friendship with staff/off residents. <p>Further and more detailed reviews will be undertaken prior to any changes to an individual's accommodation taking place. Through this process information on alternatives will be made available. A gradual approach will be taken to support those who will be most affected.</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|-------------------|---|---|
| | | <p>Individual transition plans will be produced and updated. This plan will include analysing the impact and where necessary other professionals and agencies will be called upon to support the individual to minimise any impact.</p> <p>Advocacy services are in place to help support the individual's and their families throughout the proposed process. Any proposed move will be considered carefully taking into account the persons best interest's and their and their families' wishes and feelings. Any move will need to meet the individuals assessed eligible needs for care and support are met.</p> <p>A project team will be set up, subject to decision, to deliver the decision. There is adequate residential and non-residential provision in or near the boundary of the city to accommodate current residents and any needs associated with their age.</p> |
| Disability | <p>All residents have a cognitive impairment and a significant number also have a physical impairment.</p> <p>The proposal may have either a positive or negative impact depending on the individual and the extent to which they prefer current models of service.</p> | <p>As above, any proposed move will be considered carefully taking into account the persons best interest's and their and their families' wishes and feelings. Any move will ensure that the individual's assessed eligible needs for care and support are met,</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------------------|---|--|
| | <p>Those with physical disabilities may experience a larger impact due to some of the alternative options not having the equipment to be able to support appropriately and being able to accommodate in private sector, however, this will be no different to our internal homes.</p> <p>Due to the fact that all impacted individuals have dementia, those individuals affected may need additional support to transition and settle in a new residential setting.</p> | <p>including ensuring they have appropriate equipment.</p> <p>Residents and their carers will be supported to identify the most appropriate residential option which meets their needs.</p> |
| Gender Reassignment | No identified impact. | |
| Marriage and Civil Partnership | <p>Some residents within the care homes are married or in partnerships. There currently are no couples living together as residents in the homes.</p> <p>The impacts of the proposals could mean that for some couples, travel arrangements will need to change to their respective visit their respective partner in any new setting.</p> | <p>For future placements, provision across city includes a range of options for accommodating couples.</p> <p>For existing residents, visiting and travel arrangements of their partner will be taken into account when considering alternative care settings.</p> |
| Pregnancy and Maternity | No identified impact. | |
| Race | The impact of this proposal is predominantly linked to the health, disability and age needs of the individuals affected. Race is a consideration but not a factor deemed to influence the impact of the proposal. | <p>All residents will have an assessment prior to any service change which will include any cultural considerations linked to race, when looking at appropriate placements within communities.</p> <p>Residents and carers will be able to choose, to some extent, from a range of alternative provision and arrange services that are</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------|--|--|
| | | culturally appropriate. |
| Religion or Belief | The impact of this proposal is predominantly linked to the health, disability and age needs of the individuals affected. Religion or belief is a consideration but not a factor deemed to influence the impact of the proposal. | <p>All residents will have an assessment prior to any service change which will address matters of religion and belief and ensure that future provision is in line with their requirements.</p> <p>Residents and carers will be able to choose, to some extent, from a range of alternative provision and arrange services that are appropriate to their individual need including religion and belief.</p> |
| Sex | <p>There is likely to be a greater adverse effect on women as a significant majority of residents are currently female.</p> <p>There will be a potential impact on staff as more females are employed at both homes (see other significant impacts).</p> | <p>All residents will have an assessment prior to any service change which will also address matters relating to sex.</p> <p>Residents and carers will be able to choose, to some extent, from a range of alternative provision and arrange services that are tailored to their needs including single gender services.</p> <p>A full statutory consultation will be undertaken in relation to all staff, subject to the decision outcome.</p> <p>The consultation process will include one to one meetings to discuss and address any particular needs or concerns.</p> |
| Sexual Orientation | No identified impact. | |
| Community Safety | No identified impact. | |
| Poverty | Some alternative provision may | There is a varied market |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|----------------------------------|---|--|
| | <p>cost more than the existing provision.</p> | <p>provision across Southampton and near to the city, including a range of alternative residential settings available at comparable costs.</p> <p>Placements will be based on assessed level of need rather than affordability, although this will be taken into account.</p> |
| Health & Wellbeing | <p>Residents' concerns and levels of anxiety could impact their emotional and physical wellbeing particularly just before a move or immediately afterwards.</p> <p>Relatives of residents may also have concerns relating to finding suitable alternate care and support which could impact their health and wellbeing.</p> | <p>Registered managers are monitoring the health and wellbeing of current residents on a daily basis, and any significant changes are being escalated.</p> <p>Residents will be fully assessed prior to any change in service.</p> <p>Throughout this process information on alternatives will be made available.</p> |
| Other Significant Impacts | <p>The proposals will have a significant impact on staff who are employed at Glen Lee and Holcroft House.</p> | <p>A full statutory consultation will be undertaken in relation to all staff, subject to the decision outcome.</p> <p>The consultation process will include one to one meetings to discuss and address any particular needs or concerns.</p> <p>Full assessment of protected characteristics in relation to staff will be undertaken during this consultation.</p> <p>The outcome of the staff consultation will inform a further Cabinet decision regarding how the</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|-------------------|-------------------|---|
| | | proposals are taken forward to meet the budget requirement. In the event that further budget decisions are required, these will be taken forward in due course. |

Equality and Safety Impact Assessment SHIL3

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

| | | | | | | | | | | | |
|--|--|--------------|------|-------------|------|--------------|-----|-------------|-----|--------------|-------------|
| Name or Brief Description of Proposal | Reclassify some council properties currently only available to those aged 60 and over, making them available to people over 50 | | | | | | | | | | |
| Brief Service Profile (including number of customers) | | | | | | | | | | | |
| <p>There is a significant demand for affordable social rented homes in Southampton and there are currently 8,000 people on the Housing Register.</p> <p>The council has to make best use of the resources available to it in order to be able to house the maximum number of people from the Housing Register. This means there are strict rules about the type of property which applicants can apply for. In deciding on the type of property and degree of priority required, the council has to bear in mind the type of housing available and the demand for that housing.</p> <p>However, there are a number of properties that are currently ‘hard to let’. These are typically properties which are restricted to residents aged 60+, which are on the first floor or above in walk up blocks (without lifts). This proposal is to reclassify some properties which are currently restricted to residents aged 60+ (60+ properties) to make them available to those to aged 50+ or 55+.</p> <p>The table below shows the current breakdown of 60+ properties:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Ground Floor</td> <td style="text-align: right;">1420</td> </tr> <tr> <td>First Floor</td> <td style="text-align: right;">1446</td> </tr> <tr> <td>Second Floor</td> <td style="text-align: right;">207</td> </tr> <tr> <td>Third Floor</td> <td style="text-align: right;">160</td> </tr> <tr> <td>Total</td> <td style="text-align: right;">3233</td> </tr> </table> <p>There are currently 1,118 over 60+ people on the waiting list for accommodation. However, due to health and/or mobility issues a significant proportion do not bid for properties on the 1st floor and above. Despite direct marketing of properties of 60+ flats to eligible applicants, there has been low demand for some properties, with some remaining unlet for significant periods of time.</p> | | Ground Floor | 1420 | First Floor | 1446 | Second Floor | 207 | Third Floor | 160 | Total | 3233 |
| Ground Floor | 1420 | | | | | | | | | | |
| First Floor | 1446 | | | | | | | | | | |
| Second Floor | 207 | | | | | | | | | | |
| Third Floor | 160 | | | | | | | | | | |
| Total | 3233 | | | | | | | | | | |

There are costs associated with keeping empty properties both in terms of lost rent and payment of Council Tax, which becomes due on properties which are void for a period longer than one month. In 2017/18, over 680 days were lost on hard to let properties, at a cost of £66,764. This was typically on properties on the first floor and above and this does not include blocks with lifts.

Alongside low demand for some types of properties amongst people 60+, there is a high level of demand from 50+ applicants. In October 2017, there were 1021 applicants waiting for 50+ housing on the housing register. In addition, applicants for 50+ housing wait longer than those waiting for 60+ housing:

| Rehoused in last 5 years | Average Waiting Time Years | No of Applications |
|---------------------------------|-----------------------------------|---------------------------|
| Over 50s Floating | 4 | 372 |
| Over 60s Floating | 1 | 178 |
| Over 60s Supported Complex | 1 | 115 |

The blocks currently identified as a potential option for reclassification are:

- | | |
|--|---|
| <ul style="list-style-type: none"> • Malin Close • Rockall Close • Lundy Close • Curzon Court • Sarina Court • Manston Court • Maybush Court • Vellan Court • Penrith Court | <ul style="list-style-type: none"> • Mansel Court • Jessamine Road • Edward Road • Avington Court • Basset Green Court • Bowman Court • Meon Court • Dewsbury Court |
|--|---|

Summary of Impact and Issues

Widening the classification and increasing the numbers of people who can apply will potentially increase the likelihood of finding a suitable and sustainable match for hard to let properties. This should decrease void times and improve waiting times for 50+ applicants in housing need.

Reclassification has been successfully implemented at Orphen Road. The 1st floor flats are now 55+. This has resulted in a decrease in void turnaround times and there have been no complaints from existing residents.

Our proposal is to review and potentially reclassify accommodation in phases, block by block. As part of this, further work would be required to review the sign up process and the proposed age reclassification against each address, either 55+ or 50+. Some properties may be more suitable for reclassification than others, such as properties that have a greater number of first floor flats that are void.

We will undertake detailed consultation with affected tenants on a block by block basis as proposals are developed, and before any decisions are taken about each block. As part of that process we will also review and consider what measures we might need to take to address equality impacts or other impacts for individuals and

properties.

If a tenant applies for the right to buy in one of the flats that have been reclassified then there will be a loss of rental income to the housing revenue account, and there is the potential that the property could be sold on at a later date to someone who is not over 50 years of age. To date, our experience of where reclassification has taken place is that no one has applied for the right to buy. Any sale will mean that the property is a leasehold flat and the occupant will have to pay their share for repairs and for any major work to the block.

Potential Positive Impacts

- Improved void turnaround times.
- Increase in rental income.
- Improved rehousing for those aged 50-60 who are on the housing register.

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|------------------------------------|--|
| Responsible Service Manager | Steve Smith, Service Lead: Council Housing & Neighbourhoods. |
| Date | 8 February 2019 |
| Approved by Senior Manager | Paul Juan, Service Director: Adults, Housing & Communities. |
| Date | 8 February 2019 |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|--------------------------|--|--|
| Age | <p>Reclassification would introduce people aged 50-60 in to what is currently designated over 60s accommodation.</p> <p>This would have a positive impact on residents in this age bracket currently on the Housing Register, by making more properties available to them.</p> <p>This would only apply to properties that are currently vacant, and therefore not have an impact on people over 60 on the Housing Register.</p> <p>Some tenants aged 60+ may have concerns about the reclassification of neighbouring properties, as it would mean that the block has a wider mix of tenants including those who are 50+ rather than 60+.</p> | <p>We will undertake detailed consultation with affected tenants on a block by block basis as proposals are developed, and before any decisions are taken about each block.</p> <p>As part of that consultation tenants will receive clear information including clear signage about the rights and responsibilities of tenants. As part of that process we will also review and consider what measures we might need to take to address equality impacts or other impacts for individuals and properties.</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------------------|---|--|
| | as well as potentially younger partners and families. | |
| Disability | This proposal will seek to reclassify harder to let properties, such as those on 1 st floor or above. People with disabilities, in particular disabilities which affect their mobility, are more likely to require ground floor or specialist properties and would therefore not be impacted by this proposal. | |
| Gender Reassignment | No identified impact. | |
| Marriage and Civil Partnership | No identified impact. | |
| Pregnancy and Maternity | No identified impact. | |
| Race | No identified impact. | |
| Religion or Belief | No identified impact. | |
| Sex | No identified impact. | |
| Sexual Orientation | No identified impact. | |
| Community Safety | No identified impact. | |
| Poverty | No identified impact. | |
| Health & Wellbeing | Some tenants aged 60+ may have concerns about the reclassification of neighbouring properties, as it would mean that the block has a wider mix of tenants including those who are 50+ rather than 60+, as well as potentially younger partners and families. | <p>Tenants will continue to have access to wellbeing and prevention staff and Local Housing Management staff.</p> <p>We will undertake detailed consultation with affected tenants on a block by block basis as proposals are developed, and before any decisions are taken about each block.</p> <p>As part of that consultation tenants will receive clear information including signage about the rights and responsibilities of tenants.</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|----------------------------------|--------------------------|--|
| | | As part of that process we would also review and consider what measures we might need to take to address equality impacts or other impacts for individuals and properties. |
| Other Significant Impacts | None identified. | |



Equality and Safety Impact Assessment SHIL4

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

| | |
|--|---|
| Name or Brief Description of Proposal | Review service charges to tenants in council owned properties, increasing the existing charges and introducing four new ones. |
| Brief Service Profile (including number of customers) | |
| <p>Southampton City Council is a major landlord with around 18,000 council properties. Of these properties, over 16,000 are rented by tenants and the rest are occupied by leaseholders. As a landlord, the council provides a range of services to tenants and leaseholders. These include block cleaning, concierge, heating, grounds and garden maintenance and other services. The council has legal powers to charge for these additional services so long as the charges are clear and transparent and represent the actual cost of the service.</p> <p>Rents are generally taken to include all charges associated with the occupation of a property, such as maintenance and general housing management services. Service charges usually reflect additional services which may not be provided to every tenant, or which may be connected with communal facilities rather than being particular to the occupation of the dwelling.</p> <p>There are different processes for setting the charges for tenants and leaseholders, and this proposal relates to the charges that tenants pay. The proposal is to increase current service charges to tenants, and to introduce four new service charges to tenants as detailed in the table below.</p> <p>The council’s current charges are lower than the actual costs and, in some cases, the council has not previously charged for services, but has been providing a service to tenants. The council needs to have a viable and sustainable Housing Revenue Account (HRA) that enables the council to deliver effective services, invest in its properties to ensure homes are of a modern standard, and to provide new social housing to rent. If the council does not recover its actual costs for these services it has a detrimental effect on the HRA overall.</p> <p>The table below reflects different charges for tenants of walk-up blocks and tower</p> | |

blocks. The charges reflect different levels of services and costs. The management and maintenance of tower blocks is significantly higher than walk-up blocks, which is reflected in the higher service charges. The tower blocks include a concierge charge which has been reviewed and increased, and this covers some of the charges listed separately for walk-up blocks such as cleaning. We are proposing that increases to the concierge charge will be phased to mitigate the impact in year 1.

Neighbourhood Wardens were not previously included in walk-up block service charges despite these tenants benefiting from these services. We are proposing phasing the increase for this service for tenants in walk up blocks to mitigate the impact in year 1.

| Service (all charges are weekly) | Walk-up block | | | Tower block | | |
|-------------------------------------|----------------|-------------------------|-------------------------|----------------|-------------------------|-------------------------|
| | Current Charge | Proposed Charge 2019/20 | Proposed Charge 2020/21 | Current Charge | Proposed Charge 2019/20 | Proposed Charge 2020/21 |
| Existing Charge | | | | | | |
| Cleaning | 65p | 72p | 72p | - | - | - |
| Concierge | - | - | - | £1.24 | £2.18 | £2.73 |
| Neighbour-hood Wardens | | | | £5.12 | £5.12 | £5.12 |
| TV Aerial (communal) | 43p | 43p | 43p | 43p | 43p | 43p |
| New Service Charge | | | | | | |
| Neighbour-hood Wardens | - | 54p | £1.45 | | | |
| Test/Repair Emergency Lighting | - | 27p | 27p | - | 27p | 27p |
| Garden/ Grounds Maintenance | - | 22p | 22p | - | 22p | 22p |
| Door Entry | - | 22p | 22p | - | - | - |
| TOTAL | £1.08 | £2.40 | £3.31 | £6.79 | £8.22 | £8.77 |

Summary of Impact and Issues

This proposal will increase the costs to tenants living in the council's walk-up blocks and tower blocks across the city.

Approximately 10,000 tenants (out of a total of approximately 16,000 total) are currently in receipt of Housing Benefit or Universal Credit, and therefore all or some of their rent and services charges are met by benefit payments.

Some service charges are eligible to be paid by Housing Benefit/Universal Credit, so tenants on these benefits are likely to have some or all of the costs included as part of their benefit payments. Those not on either benefit, or where service charges are not considered eligible, will have to pay some or all of the additional charges to the council.

Tenants of walk-up blocks will see a proportionately greater increase in service charges than tenants of tower blocks. However, the total amount remains considerably lower for tenants in walk-up blocks. Neighbourhood Wardens were not previously

included in walk-up block service charges despite these tenants benefiting from these services. We are proposing phasing the increase for this service for tenants in walk up blocks to mitigate the impact in year 1. The management and maintenance of tower blocks is significantly higher than walk-up blocks, which is reflected in the higher service charges.

The charges proposed in the table above are fixed rates that will be payable by all tenants regardless of any protected characteristics. Southampton City Council has not identified any specific impacts related to protected characteristics, either negative or positive, beyond the overall impacts on all tenants of potential increased living costs.

The council intends to set up a discretionary relief fund if these proposals are approved to help those in most need to pay for all or part of the additional charges. The proposal is that the discretionary fund will meet some of or all of the additional changes for up to 6 months for those most in need. This fund will be managed through the Discretionary Housing Payments process that exists already. This fund will assist the people and families in most need, and will enable them to transition to being able to pay for the additional charges, if the charges are not covered by Housing Benefit/Universal Credit or they are not entitled to these benefits.

As this proposal would have a direct impact on existing tenants, a separate and more detailed S.105 consultation will be carried out in addition to the overarching budget consultation to ensure all tenants have an opportunity to engage and provide feedback before a final decision is taken.

Potential Positive Impacts

The council’s current charges are lower than the actual costs of providing the service, and in some cases the council has not previously made a charge but has been providing a service to tenants. The council needs to have a viable and sustainable HRA that enables the council to deliver effective services, invest in its properties to ensure homes are of a modern standard and to provide new social housing to rent. If the council does not recover its actual charges for these services it has a detrimental effect on the HRA overall.

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| Responsible Service Manager | Steve Smith Service Lead: Council Housing & Neighbourhoods |
| Date | 8 February 2019 |
| Approved by Senior Manager | Paul Juan Service Director: Adults, Housing & Communities |
| Date | 8 February 2019 |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------------------|---|--|
| Age | No identified impacts. | |
| Disability | No identified impacts. | |
| Gender Reassignment | No identified impacts. | |
| Marriage and Civil Partnership | No identified impacts. | |
| Pregnancy and Maternity | No identified impacts. | |
| Race | No identified impacts. | |
| Religion or Belief | No identified impacts. | |
| Sex | No identified impacts. | |
| Sexual Orientation | No identified impacts. | |
| Community Safety | No identified impacts. | |
| Poverty | <p>Council tenants are more likely to be on lower incomes and eligible for qualifying benefits than other groups.</p> <p>Approximately 10,000 tenants are currently in receipt of Housing Benefit/Universal Credit.</p> <p>Those on lower incomes are more likely to experience a proportionally higher impacts of a service charge increase than others.</p> | <p>Tenants will be given information as to how to gain advice from local agencies such as the council's Homeless Prevention Team, Citizen Advice, Money Advice Service, StepChange, Money Matters, Age UK, and local relevant charitable/voluntary sector organisations.</p> <p>Some service charges may be covered by Housing Benefit/Universal Credit.</p> <p>The council intends to set up a discretionary relief fund if these proposals are approved to help those in most need to pay for all or part of the additional charges.</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|----------------------------------|---|--|
| Health & Wellbeing | Tenants may experience increased financial strain due to increased living costs, which may have negative impacts on health and wellbeing. | <p>Tenants will be given information as to how to gain advice from local agencies such as the council's Homeless Prevention Team, Citizen Advice, Money Advice Service, StepChange, Money Matters, Age UK, and local relevant charitable/voluntary sector organisations.</p> <p>The council intends to set up a discretionary relief fund if these proposals are approved to help those in most need to pay for all or part of the additional charges.</p> |
| Other Significant Impacts | None identified. | |

Equality and Safety Impact Assessment SSEG1

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

| | |
|---|---|
| Name or Brief Description of Proposal | Introduce charging for Blue Badge holders for parking in council owned off-street car parks |
| Brief Service Profile (including number of customers) | |
| <p>Southampton City Council manages over 5,000 off street public parking spaces and 1,500 on street parking spaces across the city. The income generated from this is used to invest in infrastructure and other initiatives within Southampton.</p> <p>The Disabled Person’s Parking Badge Scheme, also known as the Blue Badge Scheme, provides a national arrangement of parking concessions for people with severe mobility difficulties, who travel either as drivers or passengers. A Blue Badge is designed to help disabled people park close to their destination, either as a passenger or driver. There are 7,781 Blue Badge holders in the city and over 50% of those are people with walking difficulties.</p> <p>Blue Badges are specifically intended for on-street parking. The Blue Badge allows holders to park for free:</p> <ul style="list-style-type: none"> • on street pay and display bays, limited waiting bays and permit parking bays for as long as required. • in disabled parking bays on streets for as long as required (unless additional time restrictions are in place). • on single or double yellow lines for up to 3 hours (unless there is a ‘no loading’ or no stopping sign). <p>Southampton City Council currently allows Blue Badge holders to park in some off-street car parks for free, and for as long as required, in addition to the provisions for on-street parking through the Blue Badge Scheme.</p> | |
| Summary of Impact and Issues | |
| <p>The proposal is to withdraw free parking in off-street car parks for Blue Badge holders, meaning that Blue Badge holders who choose to park in off-street car parks will be subject to a charge and the same terms and conditions as other users. Other local authorities already charge Blue Badge holders for parking in off-street car</p> | |

parks.

The introduction of charges for Blue Badge holders apply to all council owned surface car parks and to the West Park Road Multi-story Car Park (MSCP). All other MSCPs in the city already have barrier systems in place, meaning that those with Blue Badges pay for parking in these car parks.

Blue Badge holders will still have designated spaces within off-street car parks, however, they will be expected to pay parking charges in common with all users of that car park and be subject to any time restrictions in place in that car park. Blue Badge holders will continue have the option to make use of on-street parking for free, and these changes will apply to off-street car parks only.

The council have mapped out the available on street disabled bays close to essential services and are satisfied that adequate provision has been made through dedicated bays for current demand. There are also a number of locations, either on the highway, or through free use of the normal street parking bays to assist when demand for spaces is particularly high. These facilities are generally located closer to essential services than the off street car parks covered by these proposals.

Off street car parks are provided over and above the assessed need to provide further choice for members of the public, including disabled drivers, who may prefer that type of car parking facility. It is not unreasonable to charge for such additional, wholly discretionary services provided to increase choice rather than meet assessed need. Southampton City Council will continue to monitor demand and will consider further mitigations if a need for additional concessions can be demonstrated.

The withdrawal of free, unlimited parking in off-street car parks for Blue Badge holders will allow the council to better manage turnover in high demand car parks.

Potential Positive Impacts

The introduction of charging for Blue Badge holders in surface car parks will reconcile car parking charges for all users of surface car parks and increase the turnover of car parking spaces in high demand car parks, generating capacity for further investment in car parking infrastructure. Whilst still meeting the assessed need for free on street disabled parking close to essential services.

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| Responsible Service Manager | Rosie Zambra, Service Lead: Environment Street Scene & Health. |
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| Date | 8 February 2019 |
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| Approved by Senior Manager | Mitch Sanders, Service Director: Transactions & Universal Services. |
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|-------------|-----------------|
| Date | 8 February 2019 |
|-------------|-----------------|

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|--------------------------|--|---|
| <p>Age</p> | <p>This proposal will have an impact on Blue Badge holders aged over 17 years who drive and all ages who are passengers in cars. Higher numbers of older people are likely to be Blue Badge holders.</p> <p>The impact will require Blue Badge holders to pay for parking which was previously free if they choose to park in off-street car park, and mean that they are subject to any terms and conditions of the car park such as time restrictions.</p> | <p>Charges only apply to off-street car parks. There is a statutory requirement to provide free on street car parking, which is located having regard to proximity to essential services. Signing in car parks and communications will draw attention to this change.</p> <p>The council have undertaken an assessment which demonstrates that there is sufficient alternative on street parking and/or dedicated on street disabled bays that is either within the immediate vicinity of the car park or would likely facilitate parking for essential services closer than the off-street provision affected.</p> <p>Provision of on street disabled parking bays is reviewed regularly and every effort is made to replace those that are lost due to changes to the highway or other reasons.</p> |
| <p>Disability</p> | <p>All Blue Badge holders are people who have a disability or health condition that affects their mobility.</p> <p>The proposal to introduce charges in off-street car parks will have a financial impact on this group if an individual chooses to park in an off-street car park.</p> <p>Blue Badge holders will be subject to the terms and conditions of the car park, which may include time</p> | <p>Charges only apply to off-street car parks. There is a statutory requirement to provide free on street car parking which is provided in proximity to essential services. Signing in car parks and communications will draw attention to this change.</p> <p>The council have undertaken an assessment</p> |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------------------|--|---|
| | restrictions, including a two hour parking limit in car parks including the Civic Centre Forecourt and Albion Place (Castle Way). People with a disability that affects their mobility may be more affected by time limitations than those who do not have a disability. | which demonstrates that there is sufficient alternative on street parking and/or dedicated on street disabled bays that is either within the immediate vicinity of the car park or would likely facilitate parking for essential services closer than the off-street provision affected. |
| Gender Reassignment | No identified impact. | |
| Marriage and Civil Partnership | No identified impact. | |
| Pregnancy and Maternity | No identified impact. | |
| Race | No identified impact. | |
| Religion or Belief | No identified impact. | |
| Sex | No identified impact. | |
| Sexual Orientation | No identified impact. | |
| Community Safety | Blue Badge Holders using on street parking, such as double yellow lines, as a result of off-street parking no longer being free, could increase the risk of an accident occurring for either themselves when exiting their vehicle or other motorists/ pedestrians passing by. | The council will encourage the use of on-street parking in designated on-street disabled bays where possible. It is recommended that drivers take reasonable precautions when exiting the vehicle as would be normal when parking in an on-street location. The Blue Badge Handbook recommends that drivers only park on double yellow lines where it is safe to do so. |
| Poverty | Blue Badge holders using on street parking, such as double yellow lines, as a result of off street parking no longer being free, may experience difficulties when exiting their vehicle and/or cause problems for other motorists/ pedestrians passing by. | Free on-street car parking is available for anyone who is a Blue Badge holder. The council have undertaken an assessment which demonstrates that there is sufficient alternative |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|----------------------------------|-----------------------|--|
| | | on street parking and/or dedicated on street disabled bays that is either within the immediate vicinity of the car park or closer to essential services. |
| Health & Wellbeing | No identified impact. | |
| Other Significant Impacts | No identified impact. | |

Equality and Safety Impact Assessment SSEG2

The **Public Sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with Section 17 of the Crime and Disorder Act and will enable the Council to better understand the potential impact of proposals and consider mitigating action.

| | | | | | |
|--|---|----------------------------|------------------------------|--------------------------------|-----------------------------------|
| Name or Brief Description of Proposal | Increase Itchen Bridge fees for non-residents | | | | |
| Brief Service Profile (including number of customers) | | | | | |
| <p>The Itchen Bridge first opened in 1977 to reduce the congestion from traffic leaving and entering the city. The bridge is operated and maintained by Southampton City Council and uses a variable toll, which is based on the height of the vehicle at the front axle.</p> <p>The Itchen Bridge serves as a major link between the east and west of the city, with a flow of around 20,000 vehicles per day. Crossing the bridge has always been subject to a toll payment, as introduced by the Hampshire Act upon opening of the bridge.</p> <p>Some regular users of the bridge make payments by using a SmartCities card, whilst other users currently pay by cash, including people passing through the city on business or for leisure, and non-regular users. Concessions are available to local residents and local commercial businesses when paying using a Smartcities card.</p> <p>Residents with a Blue Badge and who receive SmartCities eligible mobility related benefit payments are entitled to free travel across the Itchen Toll Bridge with a SmartCities card. Owners of fully electric vehicles can cross the Itchen Bridge free of charge with a SmartCities card by applying for an Electric Vehicle concession.</p> <p>The toll charges were last amended in 2013, with the change of prices and the introduction of split charges between peak and off peak for some vehicle classes.</p> <p>Below is a table which shows the current charge for crossing the Itchen Bridge:</p> | | | | | |
| | Non-Smart Card users | Non-resident (Smart | Local Resident (Smart | Local Commercial (Smart | Disabled person / Electric |

| | | Card) | Card) | Card) | Vehicle (Smart Card) |
|---|-------|-------|-------|-------|----------------------|
| Class 1 – motorcycles and three-wheeled vehicles | Free | Free | Free | Free | Free |
| Class 2 – cars, small vans and small 4x4s OFF PEAK | 50p | 50p | 30p | 30p | Free |
| Class 2 – cars, small vans and small 4x4s PEAK | 60p | 60p | 40p | 40p | Free |
| Class 3 large vans (e.g. transit) and large 4x4s | £1.20 | N/A | 60p | 60p | N/A |
| Class 4 HGVs | £25 | £25 | N/A | £2 | N/A |

Summary of Impact and Issues

The proposal is to increase the Itchen Bridge Toll charges by 20p to vehicles in classes 2 and 3 and above crossing the bridge, who are not eligible for a concession. This will impact on non-residents, whether using a SmartCities card or paying in cash, who are driving cars, small vans, small 4x4 and large vans, which include large transit and 4x4 vans.

The increase in the toll would not apply to residents that receive a concessionary toll through use of a SmartCities. Residents who do not currently have a SmartCities card would need to apply for one in order to avoid paying the increased charges.

Those that currently qualify for free use of the bridge would continue to do so, which includes motorcycles, electric vehicles and blue badge holders who receive SmartCities eligible mobility related benefit payments.

The following pricing structure demonstrates the proposed charges for 2019 and beyond:

| Class | 18/19 | | 19/20 | |
|---|-------|----------|-------|----------|
| | Peak | Off-peak | Peak | Off-peak |
| Class 1 – motorcycles and three-wheeled vehicles | Free | Free | Free | Free |
| Class 2 – cars, small vans and small 4x4s | 60p | 50p | 80p | 70p |
| Class 3 – large vans (e.g. transit) and large 4x4s | £1.20 | £1.20 | £1.40 | £1.40 |
| Class 4 – HGVs | £25 | £25 | £25 | £25 |

This increased charge will support the running costs of the bridge, including maintenance and management.

There could be a potential negative impact on air quality on the A3024 if regular users of the bridge were to divert as a result of the increase in toll. However residents of the city with a smart city card will not pay the increased toll. In addition an analysis of motoring costs also indicates that even with a small increase in the toll there would be no financial reason to divert along the A3024 due to the additional mileage and associated fuel costs, not to mention the additional journey time. There is not likely therefore to be any significant or lasting diversion of traffic onto the A3024 or adverse impact on air quality.

Potential Positive Impacts

Increasing toll charges may encourage more people to seek alternative methods of transport (public transport, car shares, cycling etc.), or car sharing leading to air quality and health improvements.

| | |
|------------------------------------|---|
| Responsible Service Manager | Rosie Zambra, Service Lead: Environment Street Scene & Health. |
| Date | 8 February 2019 |
| Approved by Senior Manager | Mitch Sanders, Service Director: Transactions & Universal Services. |
| Date | 8 February 2019 |

Potential Impact

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|-------------------|--|--|
| Age | The increased charges will impact on drivers of all ages who are non-residents visiting the city for education, business or leisure and fall into the class 2 or 3 bracket, as well as residents who do not use a SmartCities. | Residents of the city can apply for a concession via a SmartCities card and would therefore not have to pay for the increased amount. Alternative routes are available for non-residents and these routes are more suitable for non-local traffic. |

| Impact Assessment | Details of Impact | Possible Solutions & Mitigating Actions |
|---------------------------------------|---|---|
| Disability | No identified impact. | |
| Gender Reassignment | No identified impact. | |
| Marriage and Civil Partnership | No identified impact. | |
| Pregnancy and Maternity | No identified impact. | |
| Race | No identified impact. | |
| Religion or Belief | No identified impact. | |
| Sex | No identified impact. | |
| Sexual Orientation | No identified impact. | |
| Community Safety | No identified impact. | |
| Poverty | This proposal may have a negative impact on some users who are non-residents or non-smart card users, who are low income earners and need to travel to Southampton to work. | The price increase is to meet the running costs of the bridge, including maintenance and management. This charge would not apply to residents that receive a concessionary toll and this discount would be protected. |
| Health & Wellbeing | No identified impact. | |
| Other Significant Impacts | None identified. | |

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Budget Proposals 2019/20 and 2020/21

Equality and Safety Cumulative Impact Assessment

February 2019

Equality and Safety Cumulative Impact Assessment

Introduction

1. Southampton City Council, in line with its statutory responsibilities, undertakes Equality and Safety Impact Assessments (ESIAs). ESIAs provide a systematic way of assessing the impact of policies, strategies, programmes, projects, services or functions on different equality groups - and on community safety, poverty and health and wellbeing and other significant impacts. During the council's annual budget cycle, ESIAs are completed for all proposals identified as requiring them to inform decision making.
2. This document draws into one place a summary of all the ESIAs for the 2019/20 and 2020/21 budget proposals. This assessment focuses on service based proposals identified as having a direct impact on customers/residents. In addition, there are a range of budget proposals which are efficiencies and do not have a disproportionate impact for people within the equalities legislation.
3. It is important to fully understand the impact of the budget proposals on equality groups (identified in paragraph 11) and on community safety, health and wellbeing and poverty. The council, working with others, will need to take action to mitigate the collective impact of any such proposals. Mitigating actions could include re-shaping services to target more efficiently and introducing measures to reduce any potential disproportionate impacts on equalities groups, community safety, poverty and health and wellbeing.
4. The budget proposals were subject to public consultation, with the questionnaire on the overall budget consultation open from 24 October 2018 until 2 January 2019 and written or verbal comments accepted until 16 January 2019. Three additional consultations were open for feedback from 24 October 2018 until 16 January 2019 on:
 - Future of two residential care homes
 - Adult Social Care charging policy review
 - Revising service charges for tenants
5. Analysis on consultation feedback will be considered by the Cabinet before they finalise their budget proposals that will be recommended to Full Council in February 2019 when it will set the budget. Feedback has been incorporated into the relevant individual Equality and Safety Impact Assessments and is reflected in this updated version of the Cumulative Impact Assessment.

Context

6. Local government has had to change significantly in response to ongoing changes in the city's profile, trends in customer behaviour, national and local policies and the austerity challenges. This is accompanied by ongoing challenges in the shape of rising demand in adults and children's social care.
7. This Cumulative Impact Assessment is also being carried out against the backdrop of the welfare reforms, a number of which have been implemented since 2011 and the programme continues. The government's programme of welfare reform is

‘intended to reduce benefit dependency for households, and to make the system more affordable for government. The reforms are therefore predicated on those affected being able to respond positively to reforms – by increasing their income through work; and/or by reducing their outgoings, in particular through housing choices.’¹

8. The most recent major change locally, has been the introduction of Universal Credit Full Service. Southampton was in an early tranche of the roll-out, becoming a Universal Credit Full Service area in February 2017. The national roll-out of Universal Credit Full Service was completed in December 2018. The main differences for claimants are; their claim is made and managed online, they are paid a single monthly payment in arrears (this includes housing costs). If they are in a couple, the payment is made to the main claimant.
9. In general, welfare reforms affect households with working age people on benefits - including people in work on low incomes. There are data limitations around claimant information. This means analysis of the cumulative impact of the reforms on households with particular characteristics is not possible at a local level. But available evidence indicates that young people, those who are homeless or vulnerably housed, lone parents, larger families, households with a disabled person and women are some of the ‘hardest hit’.

Legal Framework – Equalities

10. The Public Sector Equality Duty, section 149 of the Equality Act, came into effect on 5th April 2011 and places a duty on all public bodies and others carrying out public functions.
11. The Public Sector Equality Duty (the Equality Duty) replaced three previous public sector equality duties – for race, disability and gender, and broadened the breadth of protected characteristics to include:
 - Age
 - Disability
 - Gender reassignment
 - Marriage and civil partnership, but only in respect of the requirements to have due regard to the need to eliminate discrimination.
 - Pregnancy and maternity
 - Race – ethnic or national origins, colour or nationality
 - Religion or Belief – including lack of belief
 - Sex (Gender)
 - Sexual orientation.
12. The Act was designed to ensure public bodies consider the needs of all individuals in their day to day work, including: shaping policy, delivering services and employment of employees. It requires public bodies, such as local councils not to discriminate against any person on the basis of a protected characteristic such as disability. The legislation strengthened existing provisions about discrimination to

¹ Wilson, T., Foster, S. (October 2017). *'The Local Impacts of Welfare Reform: A Review of the impact of welfare changes on people, communities and services.'* Learning and Work Institute.
<https://www.local.gov.uk/sites/default/files/documents/FINAL%20Review%20of%20impacts%20of%20welfare%20reform%20report%20to%20LGA%20Oct%2017-1.pdf>

also include associative and perceptive discrimination as well as direct and indirect discrimination.

13. Direct discrimination occurs when a rule, policy or practice offers less favourable treatment to a group and indirect discrimination occurs by introducing a rule, policy or practice that applies to everyone but particularly disadvantages people who have a protected characteristic. Direct discrimination will always be unlawful. Indirect discrimination will not be unlawful if it can be justified, for instance it can be shown that the rule, policy or practice was intended to meet a legitimate objective in a fair, balanced and reasonable way.
14. In considering whether or not any indirect discrimination is justified, the council must consider whether or not there is any other way to meet their objective that is not discriminatory or is less likely to disadvantage those with protected characteristics. This may well mean setting out clearly whether or not consideration has been given to other ways of achieving these objectives.
15. The Public Sector Equality Duty does not impose a legal requirement to conduct an Equality and Safety Impact Assessment, rather it requires public bodies to demonstrate their consideration of the Equality Duty and the conscious thought of the Equality Duty as part of the process of decision-making. This entails an understanding of the potential effect the organisation's activities could have on different people and a record of how decisions were reached. Producing an Equality Impact Assessment post decision making is non-compliant with the Public Sector Equality Duty. For this reason the council requires adherence to the existing impact assessment framework.

Legal Framework - Community Safety

16. Community Safety is a broad term. It refers to the protection of local communities from the threat and consequence of criminal and anti-social behaviour by achieving reductions in relation to both crime and the fear of crime.
17. Section 17 of the Crime and Disorder Act 1998, as amended by the Police and Justice Act 2006, requires responsible authorities to consider crime and disorder, including antisocial behaviour and other behaviour adversely affecting the local environment; and the misuse of drugs, alcohol and other substances in the exercise of all their duties, activities and decision-making. This means consideration must be given to the likely impact on crime and disorder in the development of any policies, strategies and service delivery. This responsibility affects all employees of the council.
18. This responsibility is summed up by guidance issued by the Home Office. This guidance describes the legal responsibility as: *'a general duty on each local authority to take account of the community safety dimension in all of its work. All policies, strategies, plans and budgets will need to be considered from the standpoint of their potential contribution to the reduction of crime and disorder'*.

Scope and our approach

19. This assessment identifies areas where there is a risk that changes resulting from individual budget proposals for 2019/20 and 2020/21, may have, when considered together, negative impacts on particular groups.

20. It is important to note this is an ongoing process. As individual budget proposals are developed and implemented, they will be subject to further assessment. This assessment also describes mitigating actions that will need to be considered.
21. The council's approach on assessing the impact of its policies, proposals and decisions, is designed to demonstrate that it has acted over and above its statutory duties. This is reflected in including poverty in the ESIA, as the council is committed to addressing the impact on poverty for people in work and unemployed and for other low income households.
22. In order to inform decision-making on the budget proposals, the council has taken the following steps:
 - Managers identified proposals which in their view require an Equality and Safety Impact Assessment (ESIA).
 - All budget proposals have been screened independently by a group of officers to check whether or not an ESIA was required. This was based on an assessment of whether or not they were likely to have a disproportionate equalities impact on particular groups of residents, or have implications for community safety, health and wellbeing or increasing poverty.
 - This resulted in a list of proposals for which an ESIA was clearly required and those for which further detail was needed to be gathered before making a decision.
 - As a result of the screening, ESIA's have been produced for every proposal assessed as requiring one. These primarily focus on the impact of proposals on residents and service users.
23. This Cumulative Impact Assessment has been updated and developed based on the final proposals and detail of individual ESIA's. It has also been informed by the feedback from residents and stakeholders as part of the public budget consultation.

City Profile

24. The most recent data available for the population of Southampton is from the Office of National Statistics mid-year estimate 2017. This puts the total figure at 252,359. There are 123,610 females and 128,749 males. However, the 2011 Census provides a more detailed population profile for the city relating to protected characteristics. According to this, in 2011 the city's population profile comprised 236,900 residents and:
 - There were 122,368 females and 127,168 males, a 49% to 51% split.
 - 77.7% of residents were white British (compared to 88.7% in 2001).
 - The 'Other white' population, which includes migrants from Europe, increased by over 200% (from 5,519 to 17,461) compared to Census 2001.
 - The largest percentage increase is in our 'other Asian' population, which increased from 833 to 5,281 people compared to Census 2001.
 - It is estimated that there are 26,929 residents whose main language is not English; of these 717 cannot speak English at all and a further 4,587 do not speak it well.
 - 4,672 residents in Southampton are aged 85 or over, of whom 834 are in bad or very bad health and have a long term illness or disability.

25. The Index of Multiple Deprivation (IMD) provides another range of data about the city. It focuses on the geographical profile of poverty but there is also a link between equality strands and risk factors for poverty. The most recent IMD was published in 2015, and covers the period between 2008/9 and 2012/13. It indicates that, during this period, Southampton became relatively more deprived compared to other places in the country. Of the 326 local authorities in England, Southampton is now ranked 54th most deprived, compared to 72nd in IMD 2010. Within the city, almost 70% of Lower Super Output Areas (LSOAs) are judged to be more deprived in both absolute and relative terms compared with IMD (2010).

Public Consultation

26. The Budget Consultation Report is available on the council's website and as an appendix to the Cabinet and Council reports, alongside detailed reports on each of the three additional consultations.
27. In response to the consultation feedback, The following draft proposals have been revised:

| | |
|--------------|--|
| SHIL1 | <p>Revise the Adult Social Care Charging Policy</p> <ul style="list-style-type: none"> • It is proposed to amend the policy to state that individuals with a terminal illness who have been issued with a DS 1500 form by a medical practitioner will not have disability related benefits taken into account in their income assessment. • Where the charges will apply from the date the service commences, it is proposed to amend the policy to state that charges will not apply for a period any longer than 8 weeks prior to the completion of financial assessment. • The one-off initial set-up charge amount for the deferred payment scheme has been reviewed and revised to £730 in line with actual costs. It is proposed that the annual administration charge of £305 (£505 if revaluation is required) is not introduced. • A further review of the individual circumstances of clients receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011 has shown that, on the basis of their current circumstances, they would not be assessed as requiring to make any contribution towards the cost of their care. |
| SHIL2 | <p>Future of two council owned care homes</p> <ul style="list-style-type: none"> • The proposal is to approve in principle the proposal for the closure of Glen Lee Residential Care Home, subject to formal staff consultation and a further report to Cabinet to make a final decision. |

Table1: Budget Proposals: Negative Impact By Protected Characteristics, Community Safety and Poverty.

| Code | Description of Proposal | Age | Disability | Gender Reassignment | Marriage & Civil Partnership | Pregnancy & Maternity | Race | Religion & Belief | Sex | Sexual Orientation | Community Safety | Poverty | Health & Wellbeing | Other |
|--|---|-----|------------|---------------------|------------------------------|-----------------------|------|-------------------|-----|--------------------|------------------|---------|--------------------|-------|
| Children and young people get a good start in life | | | | | | | | | | | | | | |
| CYP1 | Review and redesign early help and outreach preventative services, to deliver a new focussed locality based model which prevents children becoming looked after by the council. | * | * | | | | | | | | | * | * | |
| CYP2 | Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service. | * | * | | | * | | | | | | * | * | |
| CYP3 | Review the Contact Service which facilitates contact for Looked After Children with their birth families, with a view to this being delivered by a partner organisation. | * | * | | | | | | | | | | | |
| CYP4 | Reduce the funding provided to Compass School Pupil Referral Unit from 160 to 100, in line with actual demand. | * | * | | | | | | | | | | | |
| CYP6 | Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision. | * | * | | | * | | | | | | * | * | |
| People in Southampton live safe, healthy, independent lives | | | | | | | | | | | | | | |
| SHIL 1 | Revise the Adult Social Care Charging Policy. | * | * | | | | | | * | | | * | * | |
| SHIL 2 | Future of two council owned residential care homes. | * | * | | * | | * | * | * | | | * | * | * |
| SHIL 3 | Reclassify some council properties currently only available to those aged 60 and over, making them available to people over 50. | * | | | | | | | | | | | * | |

| Code | Description of Proposal | Age | Disability | Gender Reassignment | Marriage & Civil Partnership | Pregnancy & Maternity | Race | Religion & Belief | Sex | Sexual Orientation | Community Safety | Poverty | Health & Wellbeing | Other |
|--|---|-----|------------|---------------------|------------------------------|-----------------------|------|-------------------|-----|--------------------|------------------|---------|--------------------|-------|
| SHIL 4 | Review service charges to tenants in council owned properties, increasing the existing charges and introducing four new ones. | | | | | | | | | | | * | * | |
| Southampton is a city with strong sustainable economic growth | | | | | | | | | | | | | | |
| SSEG1 | Introduce charges for Blue Badge holders in council owned off-street car parks. | * | * | | | | | | | | * | * | | |
| SSEG2 | Increase Itchen Bridge fees for non-residents. | * | | | | | | | | | | * | | |

Age – Older people

28. **SHIL1: Revise the Adult Social Care Charging Policy.** Under the Care Act 2014, the council has discretion whether to charge for services to meet both eligible and non-eligible needs, except where it is required to arrange care and support free of charge. The council has, to date, exercised its discretion to not charge at all for some services and for other services has not charged the full amount to cover the actual service being delivered. The Care Act 2014 and associated relevant regulations set out the services that a local authority can and cannot charge for. The proposed policy aims to deliver a fairer and more equitable service, whilst ensuring that the services can remain sustainable in order to meet the needs of local people, now and in the future.
29. The council proposes to make the following changes to its Adult Social Care Charging Policy, which will affect approximately 700 people currently using services as well as future clients.
- To introduce a new Arrangement Fee of £250 for people whose assets are over the capital threshold, currently £23,250, (and who therefore must pay the full cost of their care) but who request Southampton City Council to make the arrangements for their non-residential care (as is permitted under the Care Act 2014).
 - To take account of the higher rate Attendance Allowance and disability benefits (Personal Independence Payment and the care component of Disability Living Allowance) when assessing for financial contributions for non-residential care. This is in line with other local authorities. The difference between the higher and lower rate payments is currently £28.30 per week. This would now be taken into account when calculating an individual's income.
 - To make it clear that Southampton City Council will begin charging the assessed contribution from the first day that chargeable services are provided.
 - To increase charges for deferred payment scheme loans to reflect the actual costs of administering the scheme, and introduce an interest charge in line with the Care Act 2014.
 - To apply the charging policy for clients receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011.
30. We have identified the following impacts:
- Older people are disproportionately highly represented in the adult social care customer group and therefore older people will be impacted by these proposals.
 - Within the customer group it is the older customers that are more likely to have the type of capital assets that these proposals take in to account.
 - Within the client group itself the proposed changes will apply equally regardless of age, and these proposals could therefore impact customers of any age.
 - Older people impacted are likely to experience a negative financial impact as a result of the proposals.
31. We have identified the following mitigations:
- A full review of all charges, and the risks associated with the each proposal impacting on older people has been undertaken which includes mitigating actions, where appropriate, under each proposal.

- All representations made during the consultation have been taken into account and used to inform the final version of the draft policy and recommendations to council.
 - Customers and their families will be provided with advice and information including details of local advice agencies which will provide financial advice where relevant.
32. For all groups, these changes help to ensure that the council can continue to help as many people with care and support needs as possible within the limited resources available. To this extent there should be a positive impact overall, as resources will be distributed more equitably.
33. **SHIL2: Future of two council owned residential care homes.** Southampton City Council runs two residential homes, Holcroft House and Glen Lee. Holcroft House is a 34 bedded unit and Glen Lee is a 33 bedded unit. Both are Care Quality Commission (CQC) registered residential units providing short and long term care for adults living with a dementia. Both homes are rated as “good” by CQC. In Glen Lee, the accommodation is provided over two floors accessed by a passenger lift. In Holcroft House, accommodation is provided on one floor.
34. There are currently 36 residential homes that are CQC registered to provide dementia care in or near the boundary of the city. There is an over provision of residential homes in the area, with 70 vacancies available to the council for residential care placements across these homes as of October 2018 (including the two homes run by the council).
35. Although demand for Adult Social Care is increasing, the demand for residential care has decreased as more people are supported to live independently in their own homes. National research has found that older people would prefer to continue living at home for as long as possible. Research also tells us that the demand for residential care is likely to continue to decrease as alternatives such as housing with care become the preferred option. The local care market is better placed to provide care and support where residential care is needed, leaving the council to focus on the development of housing with care and community-based services. The proposal is therefore to close one or both council owned residential care units: Glen Lee and Holcroft House.
36. The impact of any decision to close one or both care homes will be a direct impact on those currently using these facilities. Current residents will have their needs reviewed and will be supported to move to alternative provision which could be a new care home.
37. We have identified the following impacts:
- The greatest impact of the proposal is likely to be on those older residents who have been using Glen Lee and Holcroft services for many years and for whom any change in provision will be difficult.
 - All of the residents are over 65 years.
 - There is potential for decline in residents’ emotional and physical health during and immediately after any move following closure of a care home.
38. We have identified the following mitigations:

- An initial review of needs has been undertaken for all residents, taking the following factors into consideration:
 - People who lack mental capacity
 - Very frail vulnerable people, with complex medical needs
 - People who need specialist equipment
 - People who have special dietary needs,
 - People who have sensory loss/deficit e.g. blind, deaf
 - People who have been resident for long periods and developed close friendship with staff/off residents
39. Further and more detailed reviews will be undertaken prior to any changes to an individual's accommodation taking place. Through this process information on alternatives will be made available. A gradual approach will be taken to support those who will be most affected. Individual transition plans will be produced and updated. This plan will include analysing the impact and where necessary other professionals and agencies will be called upon to support the individual to minimise any impact.
40. Advocacy services are in place to help support the individual's and their families throughout the proposed process. Any proposed move will be considered carefully taking into account the persons best interest's and their and their families' wishes and feelings. Any move will need to meet the individuals assessed eligible needs for care and support are met. A project team will be set up, subject to decision, to deliver the decision. There is adequate residential and non-residential provision in or near the boundary of the city to accommodate current residents and any needs associated with their age.
41. In the longer term there is evidence that supporting people living with a dementia to live independently in their own homes drawing where appropriate on the support of others in their community leads to the best outcomes for those people.
42. Re-providing residential care and support in homes run by charities and the private sector is more cost effective, supporting a more sustainable social care system locally, ensuring that the needs of people in Southampton can continue to be met in full. The proposal for change is in line with the council's strategy to develop more housing with care schemes at different sites as an alternative to residential care. This is a positive impact on people who live in Southampton, as this will enable people to live independently within a scheme in a self-contained flat which will have the benefit of an on-site care team.
43. **SHIL3: Reclassify some council properties currently only available to those aged 60 and over, making them available to people over 50.** There is a significant demand for affordable social rented homes in Southampton and there are currently 8,000 people on the Housing Register. However, there are a number of properties that are currently 'hard to let'. These are typically properties which are restricted to residents aged 60+, which are on the first floor or above in walk up blocks (without lifts). We are proposing to reclassify some properties which are currently restricted to residents aged 60+ to make them available to those aged 50+ or 55+. The blocks currently identified as potentially suitable for reclassification include: Malin Close, Rockall Close, Lundy Close, Curzon Court, Sarina Court, Manston Court, Maybush Court, Vellan Court, Penrith Court, Mansel Court, Jessamine Road, Edward Road, Avington Court, Basset Green Court, Bowman Court, Meon Court and Dewsbury Court.

44. We have identified the following impacts:
- Reclassification would introduce people aged 50-60 in to what is currently designated over 60s accommodation.
 - This would have a positive impact on residents in this age bracket currently on the Housing Register, by making more properties available to them.
 - This would only apply to properties that are currently vacant, and therefore not have an impact on people over 60 on the Housing Register.
 - Some tenants aged 60+ may have concerns about the reclassification of neighbouring properties, as it would mean that the block has a wider mix of tenants including those who are 50+ rather than 60+, as well as potentially younger partners and families.
45. The potential impact of this proposal is positive and could result in improved void turnaround times, increase in rental income and improved rehousing for those aged 50-60 who are on the housing register.
46. The proposal is to review and potentially reclassify accommodation in phases, block by block. We will undertake detailed consultation with affected tenants as proposals are developed, and before any decisions are taken about each block. As part of that process we would also review and consider what measures we might need to take to address equality impacts for individuals and properties.
47. **SSEG1: Introduce charges for Blue Badge holders in council owned off-street car parks.** The proposal is to withdraw free parking in off-street car parks for Blue Badge holders, meaning that Blue Badge holders who choose to park in off-street car parks will be subject to a charge and the same terms and conditions as other users.
48. The Disabled Person's Parking Badge Scheme, also known as the Blue Badge Scheme, provides a national arrangement of parking concessions for people with severe mobility difficulties, who travel either as drivers or passengers. A Blue Badge is designed to help disabled people park close to their destination, either as a passenger or driver. There are 7,781 Blue Badge holders in the city and over 50% of those are people with walking difficulties.
49. The introduction of charges for Blue Badge holders apply to all council owned surface car parks and to the West Park Road Multi-story Car Park (MSCP). All other MSCPs in the city already have barrier systems in place, meaning that those with Blue Badges pay for parking in these car parks.
50. Blue Badge holders will still have designated spaces within off-street car parks, however they will be expected to pay parking charges in common with all users of that car park and be subject to any time restrictions in place in that car park. Blue Badge holders will continue have the option to make use of on-street parking for free, and these changes will apply to off-street car parks only.
51. We have identified the following impacts:
- This proposal will have an impact on Blue Badge holders aged over 17 years who drive and all ages who are passengers in cars. Higher numbers of older people are likely to be Blue Badge holders.
 - The impact will require Blue Badge holders to pay for parking which was previously free if they choose to park in off-street car park, and mean that they

are subject to any terms and conditions of the car park such as time restrictions.

52. We have identified the following mitigations:
- Charges only apply to off-street car parks. There is a statutory requirement to provide free on street car parking, which is located having regard to proximity to essential services. Signing in car parks and communications will draw attention to this change.
 - The council have undertaken an assessment which demonstrates that there is sufficient alternative on street parking and/or dedicated on street disabled bays that is either within the immediate vicinity of the car park or would likely facilitate parking for essential services closer than the off-street provision affected.
 - Provision of on street disabled parking bays is reviewed regularly and every effort is made to replace those that are lost due to changes to the highway or other reasons.
53. **SSEG2: Increase Itchen Bridge fees for non-residents.** The proposal is to increase the Itchen Bridge Toll charges by 20p to vehicles in classes 2 and 3 and above crossing the bridge, who are not eligible for a concession. This will impact on non-residents, whether using a smart card or paying in cash, who are driving cars, small vans, small 4x4 and large vans, which include large transit and 4x4 vans.
54. The increase in the toll would not apply to residents that receive a concessionary toll through use of a Smart Card. Residents who do not currently have a Smartcities card would need to apply for one in order to avoid paying the increased charges. Those that currently qualify for free use of the bridge would continue to do so, which includes motorcycles, electric vehicles and blue badge holders who receive Smartcities eligible mobility related benefit payments.
55. We have identified the following impact:
- The increased charges will impact on drivers of all ages who are non-residents visiting the city for education, business or leisure and fall into the class 2 or 3 bracket, as well as residents who do not use a smart card.
56. We have identified the following mitigation:
- Residents of the city can apply for a concession via a Smart Cities card and would therefore not have to pay for the increased amount. Alternative routes are available for non-residents and these routes are more suitable for non-local traffic.
57. Increasing toll charges may encourage more people to seek alternative methods of transport (public transport, care shares, cycling etc), leading to air quality and health improvements and reduced congestion.

Age - Children and young people

58. **CYP1: Review and redesign early help and outreach preventative services, to deliver a new focussed locality based model which prevents children becoming looked after by the council.** In 2017, a Locality Based 0-19 Early

Help and Prevention service was introduced that included a mix of universal services (meaning they are open to everyone who wants to use them), and more targeted, intensive support for children and young people with additional needs, or whose home life makes them vulnerable to poor outcomes. This element supports approximately 950 children.

59. Services include Sure Start children's centres, health visiting, school nursing, Families Matter and the Family Nurse Partnership. There are also links to other services such as maternity services, pre-schools, schools, colleges, GPs, children's social care, services for children with special educational needs and/or disabilities (SEND), child and adolescent mental health services (CAMHS), and local community and voluntary sector organisations who support these communities.
60. The service has been successful in offering advice and support to children and families, and we want to extend it to include more targeted support that can address issues such as complex parenting, challenging behaviours, supporting disabilities, welfare advice, mental health advice, domestic abuse and exploitation. The proposal is therefore to extend the model by bringing in more specialist and targeted health and social care, such as Educational Welfare, Inclusion and Targeted teams, Youth Offending and others which can provide early help and outreach preventative services.
61. These specialist and targeted services are currently available, but have to be accessed separately. By delivering more services locally for families, we aim to make them part of a community resource that is practical and easy to access. We also want to increase our partnership working with local community and voluntary services.
62. This will enable us to engage families at an early stage when they are facing challenges or need advice. It will also help to enhance the Families Matter service which focuses on strengthening and turning around families who are experiencing issues. Providing the right help early can stop problems getting worse or avoid issues altogether. Evidence shows that this can deliver better outcomes for children and families as well as saving money in the longer term as it avoids the need for more intensive, long term support. Therefore, it should ultimately reduce the number of children coming into statutory services with escalated needs, requiring the intervention of the council.
63. We have identified the following impacts:
 - 63,091 children and young people (aged 0-19) live in the city, and this is expected to grow by 4.5% by 2024 to 65,912 (2,821 children and young people).
 - This proposal's principal direct impacts will be on children, young people and their parents and carers.
 - Overall it is anticipated that the extension of the Locality Based model will have positive impacts on children and families. Some localities may experience a change in the specialist and targeted services available locally and so some children and families may not be able to access all services in their local area. This is because services will be based on local need and targeted where they are needed most. Therefore, there may be a reduced offer in parts of the city.
64. We have identified the following mitigation:

- All families will receive the universal offer. Specialist services will also be accessible to those who need them, although in some cases children and families may have to travel out of their local area to access them. Where need is identified families will not be excluded on the grounds of their location, and transport options will be considered to enable those individuals to access services.
65. The proposed service will have a number of positive impacts on children and families in Southampton:
- There will be a clearer offer for children and families and more services will be based locally.
 - There will be less reliance on assessment or strict criteria of access and greater focus on targeted need and intervention.
 - Children and families will be able to access support and help with any challenges or issues more quickly.
 - Services will be more joined up and focused on the key issues that are challenging family stability and resilience.
 - There will be closer working relationships across the professional networks. There will be greater opportunities to develop links with community and voluntary sector organisations.
66. **CYP2: Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service.** The council's Children and Families Service provides a range of services and support to help children and young people get a good start in life. One of those services is the 'play offer' which runs out of the council's Sure Start Children's Centres and allows children and families to access play sessions in a safe and contained space. These provide support for children and their parents/carers, helps develop community cohesion, provides parent and child socialisation and assists in school readiness.
67. The council currently sets up, runs and facilitates play sessions in 7 centres across the city and these are staffed by council employees (approximately 20 staff). Number of children who are supported through the play offer varies. There are multiple play type sessions including some drop in sessions where the attendance can vary week to week. However, in October 2018, the average play session attendance was 15, and the current offer extends to an estimated 140 children.
68. The council recognises the importance of these play sessions to children and their parents/carers. However, it is also important that council resources are targeted where they are needed most, and that we work with other public sector, private sector, voluntary and community organisations to deliver the best value and most joined up services.
69. The proposal is therefore to explore opportunities for some play services to be run or co-run by local community volunteers and/or parent volunteers rather than council staff. The council and its partners will continue to coordinate and support the running of these groups, though will seek to hand over some facilitation to capable and trained members of the community. Council staff will continue to run some targeted sessions if there are areas where it is not viable to deliver a community led play offer; in that case, these will be targeted to those areas with

the greatest need. The council will also support work to develop the availability of play opportunities across the city.

70. We have identified the following impacts:
- There are 140 children currently using the Sure Start Children's Centre play offer.
 - 63,091 children and young people (aged 0-19) live in the city, and this is expected to grow by 4.5% by 2024 to 65,912 (2,821 children and young people).
 - The successful development of a community led model would ensure that the play offer is maintained for children in the city. However, it is possible that services could reduce in some areas, which could have a negative impact on some children.
71. We have identified the following mitigations:
- The council will work with individuals and community groups to explore opportunities for community groups and individuals to take over delivery and facilitation of play sessions.
 - The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas.
 - The council will also support work to develop the availability of play opportunities across the city.
72. The delivery of a play offer through communities will strengthen and build partnerships between the council and communities. Exploring innovative community led delivery models will enable the council to maintain services in parts of the city which potentially could otherwise see a significant reduction or ceasing of the play offer.
73. **CYP3: Review the Contact Service which facilitates contact for looked after children with their birth families, with a view to this being delivered by a partner organisation.** Southampton City Council runs a Contact Service which facilitates contact for our Looked After Children (LAC) with their birth families. The service supervises contact between approximately 300 Looked After Children and their families across varying time frames: some contacts are 3 or 4 times per week and some are once every 6 months. Demand for the service is high due to the numbers of cases being referred.
74. The current service is costly in terms of staffing, time and physical resource. It employs 16 contact practitioners and requires complex coordination. It is also not flexible enough for our Looked After Children their families, as it only operates in core hours and is not able to meet urgent contacts or to facilitate out of area contact.
75. The proposal is to review, scope and assess the benefits of the current Contact Service, with a view to it being delivered by a partner organisation. In doing so, the service has the potential to become more flexible, with a 7 day a week service across extended hours. Following review, any changes that are anticipated to have an impact on service users will be subject to further consultation and/or engagement.
76. We have identified the following impact:

- Around 300 children are supported by the Contact Service. These children could be impacted by any changes to the service.
77. We have identified the following mitigations:
- Following a review, proposals affecting service users will be subject to further consultation and engagement as appropriate.
 - January 2019 - The current position of the Contact Service, on the back of recent review activity, shows that the service should be retained as a Council led offer and that further review focus should be to improve the offer by aligning it closer to locality resources; so as to improve contact service experiences uniformly for all children, including those with SEND.
78. The proposal may have positive impacts including; clearer offer for families which are locality based, extended hours offer, potential for 7 day service, flexible use of buildings, quicker response for families, more cost efficient, extended service could be used to assist in rehabilitation work and so reduce the numbers of LAC and the time they spend in care.
79. **CYP4: Reduce the funding provided to Compass School Pupil Referral Unit from 160 to 100, in line with actual demand.** Compass School is a Pupil Referral Unit (PRU), providing transitional, full time education and support for pupils aged 5 - 16 who are not accessing mainstream schools. The council currently provides funding to Compass School for 160 pupils but this does not reflect that actual number of pupils attending this provision. The proposal is to reduce the number of full-time funded places from September 2019, in line with actual pupil numbers.
80. We have identified the following impacts:
- In September 2018 there were 67 pupils aged 5-16 attending Compass School.
 - The reduction in funding may have an impact on the level of service experienced by children attending the school.
81. We have identified the following mitigation:
- Funding is being reduced in line with actual pupil numbers based on full-time equivalent places.
 - Schools are increasingly developing a curriculum which meets the needs of a broader range of students, which will enable learners to access provision within mainstream education and reduce the need for places at Compass School.
 - Pupil numbers will be kept under review with regular dialogue with the school. This will be carried out to ensure funding matches needs based on full-time equivalent places.
82. The proposal may have positive impacts including;
- Long term places in Compass School will be made available to those most in need of specialist support.
 - There will be an increased focus on preventing exclusion and reintegration into mainstream schooling which will have positive impacts on the outcomes of children and young people.
 - The proposal will include the development of preventative outreach programmes (particularly at secondary level).

- Increased numbers of pupils will be supported locally and within the mainstream through flexible provision.
 - Specialist resources will be targeted to the most complex cases.
83. **CYP6 Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision.** The Early Intervention Fund supports early years and childcare providers to expand or to set up new provision. In 2018/19, £116,000 was allocated to the Fund. The proposal is to reduce the funding allocated to the Early Intervention Fund to £15,000 per annum in 2019/20 and beyond. Providers will be encouraged to seek funding from other sources. The impact of the reduction in the funding may be that some early years and childcare providers will find it more challenging to expand or set up new provision. This may in turn impact the number of places available across the city.
84. We have identified the following impacts:
- 49,513 children and young people (aged 0-17) live in the city, and this is expected to grow by 5.5% by 2024 to 52,246.
 - There are 15,826 children aged 0-4 in the city, and by 2024 this predicted to fall by 0.2% (30 children).
 - Demand for early education and childcare places has increased in recent years. A reduction in funding available from the council could have an impact on the number of places available in the city if providers are unable to attract funding from other sources to support expansion.
85. We have identified the following mitigation:
- Southampton has always had a mixed model of early years provision. With most national grants only being available to schools, the council will work with schools to encourage more of them to deliver early education. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.

Disability

86. **CYP1: Review and redesign early help and outreach preventative services, to deliver a new focussed locality based model which prevents children becoming looked after by the council.** In 2017, a Locality Based 0-19 Early Help and Prevention service was introduced that included a mix of universal services (meaning they are open to everyone who wants to use them), and more targeted, intensive support for children and young people with additional needs, or whose home life makes them vulnerable to poor outcomes. This element supports approximately 950 children.
87. Services include Sure Start children's centres, health visiting, school nursing, Families Matter and the Family Nurse Partnership. There are also links to other services such as maternity services, pre-schools, schools, colleges, GPs, children's social care, services for children with special educational needs and/or disabilities (SEND), child and adolescent mental health services (CAMHS), and local community and voluntary sector organisations who support these communities.

88. The service has been successful in offering advice and support to children and families, and we want to extend it to include more targeted support that can address issues such as complex parenting, challenging behaviours, supporting disabilities, welfare advice, mental health advice, domestic abuse and exploitation. The proposal is therefore to extend the model by bringing in more specialist and targeted health and social care, such as Educational Welfare, Inclusion and Targeted teams, Youth Offending and others which can provide early help and outreach preventative services.
89. These specialist and targeted services are currently available, but have to be accessed separately. By delivering more services locally for families, we aim to make them part of a community resource that is practical and easy to access. We also want to increase our partnership working with local community and voluntary services.
90. This will enable us to engage families at an early stage when they are facing challenges or need advice. It will also help to enhance the Families Matter service which focuses on strengthening and turning around families who are experiencing issues. Providing the right help early can stop problems getting worse or avoid issues altogether. Evidence shows that this can deliver better outcomes for children and families as well as saving money in the longer term as it avoids the need for more intensive, long term support. Therefore, it should ultimately reduce the number of children coming into statutory services with escalated needs, requiring the intervention of the council.
91. We have identified the following impacts:
- There are some users of this service that have special educational needs and/or disabilities (SEND). The overall impact of extending this model should be positive in terms of its impact.
 - Some localities may experience a change in the specialist and targeted services available locally and so some children and families may not be able to access all services in their local area. This is because services will be based on local need and targeted where they are needed most. Therefore, there may be a reduced offer in parts of the city.
 - If specific specialist services are not available in a particular locality, some disabled children or parents may need to travel further to access services that might have previously been available in their locality.
92. We have identified the following mitigations:
- The intention is to increase local availability of more specialist support.
 - Where need is identified families will not be excluded on the grounds of their location, and transport options will be considered to enable those individuals to access services.
93. The proposed service will have a number of positive impacts on children and families in Southampton:
- There will be a clearer offer for children and families and more services will be based locally.
 - There will be less reliance on assessment or strict criteria of access and greater focus on targeted need and intervention.
 - Children and families will be able to access support and help with any challenges or issues more quickly.

- Services will be more joined up and focused on the key issues that are challenging family stability and resilience.
 - There will be closer working relationships across the professional networks.
 - There will be greater opportunities to develop links with community and voluntary sector organisations.
94. **CYP2: Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service.** The council's Children and Families Service provides a range of services and support to help children and young people get a good start in life. One of those services is the 'play offer' which runs out of the council's Sure Start Children's Centres and allows children and families to access play sessions in a safe and contained space. These provide support for children and their parents/carers, helps develop community cohesion, provides parent and child socialisation and assists in school readiness.
95. The council currently sets up, runs and facilitates play sessions in 7 centres across the city and these are staffed by council employees (approximately 20 staff). Number of children who are supported through the play offer varies. There are multiple play type sessions including some drop in sessions where the attendance can vary week to week. However, in October 2018, the average play session attendance was 15, and the current offer extends to an estimated 140 children.
96. The council recognises the importance of these play sessions to children and their parents/carers. However, it is also important that council resources are targeted where they are needed most, and that we work with other public sector, private sector, voluntary and community organisations to deliver the best value and most joined up services.
97. The proposal is therefore to explore opportunities for some play services to be run or co-run by local community volunteers and/or parent volunteers rather than council staff. The council and its partners will continue to coordinate and support the running of these groups, though will seek to hand over some facilitation to capable and trained members of the community. Council staff will continue to run some targeted sessions if there are areas where it is not viable to deliver a community led play offer; in that case, these will be targeted to those areas with the greatest need. The council will also support work to develop the availability of play opportunities across the city.
98. We have identified the following impacts:
- There will be a reduction in access to professional support during play sessions, which could have a greater impact on children with SEND and their parents/carers.
99. We have identified the following mitigation:
- The council will continue to target its resources to areas of greatest need and this will require a specific focus on presenting demand around children's additional needs, including SEND. The offer across the City will be agile so as to respond to need across localities – bring a level of focus to high demand areas.

100. The delivery of a play offer through communities will strengthen and build partnerships between the council and communities. Exploring innovative community led delivery models will enable the council to maintain services in parts of the city which potentially could otherwise see a significant reduction or ceasing of the play offer.
101. **CYP3: Review the Contact Service which facilitates contact for looked after children with their birth families, with a view to this being delivered by a partner organisation.** Southampton City Council runs a Contact Service which facilitates contact for our Looked After Children (LAC) with their birth families. The service supervises contact between approximately 300 Looked After Children and their families across varying time frames: some contacts are 3 or 4 times per week and some are once every 6 months. Demand for the service is high due to the numbers of cases being referred.
102. The current service is costly in terms of staffing, time and physical resource. It employs 16 contact practitioners and requires complex coordination. It is also not flexible enough for our Looked After Children their families, as it only operates in core hours and is not able to meet urgent contacts or to facilitate out of area contact.
103. The proposal is to review, scope and assess the benefits of the current Contact Service, with a view to it being delivered by a partner organisation. In doing so, the service has the potential to become more flexible, with a 7 day a week service across extended hours. Following review, any changes that are anticipated to have an impact on service users will be subject to further consultation and/or engagement.
104. We have identified the following impacts:
- Some children or parents being supported may have disabilities. These individuals could be impacted by any changes to the service. There is a potential positive impact if the service moves location, as this may improve ease of access.
105. We have identified the following mitigations:
- Following a review, proposals affecting service users will be subject to further consultation and engagement as appropriate.
 - January 2019 - The current position of the Contact Service, on the back of recent review activity, shows that the service should be retained as a Council led offer and that further review focus should be to improve the offer by aligning it closer to locality resources; so as to improve contact service experiences uniformly for all children, including those with SEND.
106. The proposal may have positive impacts including; clearer offer for families which are locality based, extended hours offer, potential for 7 day service, flexible use of buildings, quicker response for families, more cost efficient, extended service could be used to assist in rehabilitation work and so reduce the numbers of LAC and the time they spend in care.
107. **CYP4: Reduce the funding provided to Compass School Pupil Referral Unit from 160 to 100, in line with actual demand.** Compass School is a Pupil Referral Unit (PRU), providing transitional, full time education and support for pupils aged 5 - 16 who are not accessing mainstream schools. The council

currently provides funding to Compass School for 160 pupils but this does not reflect that actual number of pupils attending this provision. The proposal is to reduce the number of full-time funded places from September 2019, in line with actual pupil numbers.

108. We have identified the following impact:

- 100% of pupils in Compass School have special educational needs and/or disabilities (SEND) compared to a national average of 22%.

109. We have identified the following mitigations:

- Frequent periods of change can have a detrimental effect on outcomes for young people with SEND. Therefore, the short-term nature of the placements at Compass may not be beneficial to this cohort. Sustaining placements in mainstream schools through early intervention will see pupils with SEND fully included in mainstream education.
- Having a needs-led, child centred approach to learning within mainstream schools will engage young people with SEND.
- Tailoring the curriculum within mainstream schools to meet the needs of these pupils will have a positive impact on outcomes.

110. The proposal may have positive impacts including;

- Long term places in Compass School will be made available to those most in need of specialist support.
- There will be an increased focus on preventing exclusion and reintegration into mainstream schooling which will have positive impacts on the outcomes of children and young people.
- The proposal will include the development of preventative outreach programmes (particularly at secondary level).
- Increased numbers of pupils will be supported locally and within the mainstream through flexible provision.
- Specialist resources will be targeted to the most complex cases.

111. **CYP 6 Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision.** The Early Intervention Fund supports early years and childcare providers to expand or to set up new provision. In 2018/19, £116,000 was allocated to the Fund. The proposal is to reduce the funding allocated to the Early Intervention Fund to £15,000 per annum in 2019/20 and beyond. Providers will be encouraged to seek funding from other sources. The impact of the reduction in the funding may be that some early years and childcare providers will find it more challenging to expand or set up new provision. This may in turn impact the number of places available across the city.

112. We have identified the following impacts:

- This proposal may mean that some groups are unable to expand, therefore potentially meaning less places for children with special educational needs and/or disabilities (SEND).
- The costs of supporting a child with high-end additional needs in an Early Years setting is not completely covered by the early years funding formula, therefore providers may choose, if they have limited places, to prioritise taking children who do not need dedicated support. This could have a negative impact on SEND children and their families.

113. We have identified the following mitigation:

- The council will work on a case by case basis to identify suitable provision for 2, 3 and 4 year olds with special educational needs and/or disabilities (SEND).
114. **SHIL1: Revise the Adult Social Care Charging Policy.** Under the Care Act 2014, the council has discretion whether to charge for services to meet both eligible and non-eligible needs, except where it is required to arrange care and support free of charge. The council has, to date, exercised its discretion to not charge at all for some services and for other services has not charged the full amount to cover the actual service being delivered. The Care Act 2014 and associated relevant regulations set out the services that a local authority can and cannot charge for. The proposed policy aims to deliver a fairer and more equitable service, whilst ensuring that the services can remain sustainable in order to meet the needs of local people, now and in the future.
115. The council proposes to make the following changes to its Adult Social Care Charging Policy, which will affect approximately 700 people currently using services as well as future clients.
- To introduce a new Arrangement Fee of £250 for people whose assets are over the capital threshold, currently £23,250, (and who therefore must pay the full cost of their care) but who request Southampton City Council to make the arrangements for their non-residential care (as is permitted under the Care Act 2014).
 - To take account of the higher rate Attendance Allowance and disability benefits (Personal Independence Payment and the care component of Disability Living Allowance) when assessing for financial contributions for non-residential care. This is in line with other local authorities. The difference between the higher and lower rate payments is currently £28.30 per week. This would now be taken into account when calculating an individual's income.
 - To make it clear that Southampton City Council will begin charging the assessed contribution from the first day that chargeable services are provided.
 - To increase charges for deferred payment scheme loans to reflect the actual costs of administering the scheme, and introduce an interest charge in line with the Care Act 2014.
 - To apply the charging policy for clients receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011.
116. We have identified the following impacts:
- All those affected by the introduction of a new arrangement fee will have a disability.
 - Up to 700 people may be impacted by the proposal to take into account the higher rate of Attendance Allowance or disability benefits. Clients could choose to reduce or cancel care and support as a result of the proposal being implemented. This could have an adverse impact on health and wellbeing on the individual and on their carer(s), family members and/or friends who may have to give additional care and support.
 - There is a risk that some individuals face financial hardship if they are required to pay backdated contributions following lengthy financial assessment period.
 - For some people, the set-up charge and introduction of an interest charge for the deferred payment scheme may deter them from utilising the scheme.
 - 25 clients who were previously residents of the Locally Based Hospital Unit (LBHU) would be impacted. This proposal could have negative financial impacts on these clients.

117. We have identified the following mitigations:

- Arrangement Fee: Those with income and savings below £23,250 will not be subject to the charge. In exceptional circumstances, the council will consider options to defer, suspend or waive the charge.
- Attendance Allowance: Everyone directly affected by this proposal will be financially reviewed. This will include a benefits check and an offer of a Disability related Expenditure (DRE) assessment/ re-assessment so that all of their allowable disability related expenditure is taken into account, including where relevant, night-time care costs that are not met by the council. In cases where a client chooses not to undergo a DRE assessment, the council will make every effort to take into account the person's disability related costs within their financial assessment. In doing so, the council may use relevant information such as the person's care needs assessment, care plan and/or review to inform the amount of money, if any, the council will include as DRE within the financial assessment. The council will continue to disregard the mobility component of disability related benefits in line with legislation. If an individual does not intend to continue using a service as a result of the changes then they will be offered a strengths-based assessment. The council will disregard disability related benefits for people who are terminally ill and have been issued with form DS 1500. In exceptional circumstances, the council will consider options to defer, suspend or remove charges where the charges might create financial hardship. A review and appeals procedure is in place in cases where people disagree with their financial assessment. Potentially affected customers will have the opportunity to consider the proposals as part of a formal consultation in 2019.
- Charges: Southampton City Council will undertake financial assessments as swiftly as possible to avoid any undue delay. In cases of lengthy financial assessments, charges will not apply to a period any longer than 8 weeks prior to the notification date of the completed financial assessment. The council will ensure people are offered a light-touch financial assessment to minimise delay and offer appropriate support to engage in the assessment. In exceptional circumstances, the council will consider options to defer, suspend or remove charges where the charges might create financial hardship.
- Deferred Payment Scheme Loans: The recommendation to apply administration charge of £305 is not being taken forward following consideration of the consultation representation. In exceptional circumstances, the council will consider options to defer, suspend or remove charges.
- LBHU: All 25 clients affected by the proposal were supported by independent advocacy as well as Deputies for Property and Financial Affairs for those who had them to engage in the consultation process as much as they were able. Assessments were carried out for each individual to understand the impact of the proposal. These assessments have shown that by virtue of their significant and complex health care needs, these individuals would not in any case be affected by this proposal and, on the basis of their current circumstances, they would not be assessed as requiring to make any contribution towards the cost of their care. These individuals will continue to receive regular individual assessments to ensure that the arrangements for funding their care and support are made in accordance with the Adult Social Care charging policy, arrangements for Continuing Healthcare and other relevant policies.

118. For all groups, these changes help to ensure that the council can continue to help as many people with care and support needs as possible within the limited

resources available. To this extent there should be a positive impact overall, as resources will be distributed more equitably.

119. **SHIL2: Future of two council owned residential care homes.** Southampton City Council runs two residential homes, Holcroft House and Glen Lee. Holcroft House is a 34 bedded unit and Glen Lee is a 33 bedded unit. Both are Care Quality Commission (CQC) registered residential units providing short and long term care for adults living with a dementia. Both homes are rated as “good” by CQC. In Glen Lee, the accommodation is provided over two floors accessed by a passenger lift. In Holcroft House, accommodation is provided on one floor.
120. There are currently 36 residential homes that are CQC registered to provide dementia care in or near the boundary of the city. There is an over provision of residential homes in the area, with 70 vacancies available to the council for residential care placements across these homes as of October 2018 (including the two homes run by the council).
121. Although demand for Adult Social Care is increasing, the demand for residential care has decreased as more people are supported to live independently in their own homes. National research has found that older people would prefer to continue living at home for as long as possible. Research also tells us that the demand for residential care is likely to continue to decrease as alternatives such as housing with care become the preferred option. The local care market is better placed to provide care and support where residential care is needed, leaving the council to focus on the development of housing with care and community-based services. The proposal is therefore to close one or both council owned residential care units: Glen Lee and Holcroft House.
122. The impact of any decision to close the one or both care homes will be a direct impact on those currently using these facilities. Current residents will have their needs reviewed and will be supported to move to alternative provision which could be a new care home.
123. We have identified the following impacts:
 - All residents have a cognitive impairment and a significant number also have a physical impairment.
 - The proposal may have either a positive or negative impact depending on the individual and the extent to which they prefer current models of service.
 - Those with physical disabilities may experience a larger impact due to some of the alternative options not having the equipment to be able to support appropriately and being able to accommodate in private sector, however, this will be no different to our internal homes.
 - Due to the fact that all impacted individuals have dementia, those individuals affected may need additional support to transition and settle in a new residential setting.
124. We have identified the following mitigations:
 - An initial review of needs has been undertaken for all residents, taking the following factors into consideration:
 - People who lack mental capacity
 - Very frail vulnerable people, with complex medical needs
 - People who need specialist equipment
 - People who have special dietary needs,

- People who have sensory loss/deficit e.g. blind, deaf
 - People who have been resident for long periods and developed close friendship with staff/off residents
125. Further and more detailed reviews will be undertaken prior to any changes to an individual's accommodation taking place. Through this process information on alternatives will be made available. A gradual approach will be taken to support those who will be most affected. Individual transition plans will be produced and updated. This plan will include analysing the impact and where necessary other professionals and agencies will be called upon to support the individual to minimise any impact.
126. Advocacy services are in place to help support the individual's and their families throughout the proposed process. Any proposed move will be considered carefully taking into account the persons best interest's and their and their families' wishes and feelings. Any move will need to meet the individuals assessed eligible needs for care and support are met.
127. A project team will be set up, subject to decision, to deliver the decision. There is adequate residential and non-residential provision in or near the boundary of the city to accommodate current residents and any needs associated with their age.
128. Any move will ensure that the individual's assessed eligible needs for care and support are met, including ensuring they have appropriate equipment. Residents and their carers will be supported to identify the most appropriate residential option which meets their needs.
129. **SSEG1: Introduce charges for Blue Badge holders in council owned off-street car parks.** The proposal is to withdraw free parking in off-street car parks for Blue Badge holders, meaning that Blue Badge holders who choose to park in off-street car parks will be subject to a charge and the same terms and conditions as other users.
130. The Disabled Person's Parking Badge Scheme, also known as the Blue Badge Scheme, provides a national arrangement of parking concessions for people with severe mobility difficulties, who travel either as drivers or passengers. A Blue Badge is designed to help disabled people park close to their destination, either as a passenger or driver. There are 7,781 Blue Badge holders in the city and over 50% of those are people with walking difficulties.
131. The introduction of charges for Blue Badge holders apply to all council owned surface car parks and to the West Park Road Multi-story Car Park (MSCP). All other MSCPs in the city already have barrier systems in place, meaning that those with Blue Badges pay for parking in these car parks.
132. Blue Badge holders will still have designated spaces within off-street car parks, however they will be expected to pay parking charges in common with all users of that car park and be subject to any time restrictions in place in that car park. Blue Badge holders will continue have the option to make use of on-street parking for free, and these changes will apply to off-street car parks only.
133. We have identified the following impacts:

- All Blue Badge holders are people who have a disability or health condition that affects their mobility.
- The proposal to introduce charges in off-street car parks will have a financial impact on this group if an individual chooses to park in an off-street car park.
- Blue Badge holders will be subject to the terms and conditions of the car park, which may include time restrictions, including a two hour parking limit in car parks including the Civic Centre Forecourt and Albion Place (Castle Way). People with a disability that affects their mobility may be more affected by time limitations than those who do not have a disability.

134. We have identified the following mitigations:

- Charges only apply to off-street car parks. There is a statutory requirement to provide free on street car parking which is provided in proximity to essential services. Signing in car parks and communications will draw attention to this change.
- The council have undertaken an assessment which demonstrates that there is sufficient alternative on street parking and/or dedicated on street disabled bays that is either within the immediate vicinity of the car park or would likely facilitate parking for essential services closer than the off-street provision affected.

Marriage and Civil Partnership

135. **SHIL2: Future of two council owned residential care homes.** Southampton City Council runs two residential homes, Holcroft House and Glen Lee. Holcroft House is a 34 bedded unit and Glen Lee is a 33 bedded unit. Both are Care Quality Commission (CQC) registered residential units providing short and long term care for adults living with a dementia. Both homes are rated as “good” by CQC. In Glen Lee, the accommodation is provided over two floors accessed by a passenger lift. In Holcroft House, accommodation is provided on one floor.

136. There are currently 36 residential homes that are CQC registered to provide dementia care in or near the boundary of the city. There is an over provision of residential homes in the area, with 70 vacancies available to the council for residential care placements across these homes as of October 2018 (including the two homes run by the council).

137. Although demand for Adult Social Care is increasing, the demand for residential care has decreased as more people are supported to live independently in their own homes. National research has found that older people would prefer to continue living at home for as long as possible. Research also tells us that the demand for residential care is likely to continue to decrease as alternatives such as housing with care become the preferred option. The local care market is better placed to provide care and support where residential care is needed, leaving the council to focus on the development of housing with care and community-based services. The proposal is therefore to close one or both council owned residential care units: Glen Lee and Holcroft House.

138. The impact of any decision to close one or both of the care homes will be a direct impact on those currently using these facilities. Current residents will have their needs reviewed and will be supported to move to alternative provision which could be a new care home.

139. We have identified the following impacts:
- Some residents within the care homes are married or in partnerships. There currently are no couples living together as residents in the homes.
 - The impacts of the proposals could mean that for some couples, travel arrangements will need to change to their respective visit their respective partner in any new setting.
140. We have identified the following mitigations:
- For future placements, provision across city includes a range of options for accommodating couples.
 - For existing residents, visiting and travel arrangements of their partner will be taken into account when considering alternative care settings.

Pregnancy and Maternity

141. **CYP2: Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service.** The council's Children and Families Service provides a range of services and support to help children and young people get a good start in life. One of those services is the 'play offer' which runs out of the council's Sure Start Children's Centres and allows children and families to access play sessions in a safe and contained space. These provide support for children and their parents/carers, helps develop community cohesion, provides parent and child socialisation and assists in school readiness.
142. The council currently sets up, runs and facilitates play sessions in 7 centres across the city and these are staffed by council employees (approximately 20 staff). Number of children who are supported through the play offer varies. There are multiple play type sessions including some drop in sessions where the attendance can vary week to week. However, in October 2018, the average play session attendance was 15, and the current offer extends to an estimated 140 children.
143. The council recognises the importance of these play sessions to children and their parents/carers. However, it is also important that council resources are targeted where they are needed most, and that we work with other public sector, private sector, voluntary and community organisations to deliver the best value and most joined up services.
144. The proposal is therefore to explore opportunities for some play services to be run or co-run by local community volunteers and/or parent volunteers rather than council staff. The council and its partners will continue to coordinate and support the running of these groups, though will seek to hand over some facilitation to capable and trained members of the community. Council staff will continue to run some targeted sessions if there are areas where it is not viable to deliver a community led play offer; in that case, these will be targeted to those areas with the greatest need. The council will also support work to develop the availability of play opportunities across the city.
145. We have identified the following impact:
- It is possible that some services may reduce in some areas, which could have an impact on the socialisation of children and their parents/carers, and have a greater impact on those with more than one younger child.

146. We have identified the following mitigation:
- The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas. It will still be possible to access professional support via other routes.
147. **CYP6 Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision.** The Early Intervention Fund supports early years and childcare providers to expand or to set up new provision. In 2018/19, £116,000 was allocated to the Fund. The proposal is to reduce the funding allocated to the Early Intervention Fund to £15,000 per annum in 2019/20 and beyond. Providers will be encouraged to seek funding from other sources. The impact of the reduction in the funding may be that some early years and childcare providers will find it more challenging to expand or set up new provision. This may in turn impact the number of places available across the city.
148. We have identified the following impacts:
- Southampton has a birth rate of 53.2 births per 1,000 females aged 15 to 44 years. This is lower than the England average of 62.5 per 1,000 females.
 - The number of children aged 0-4 in Southampton is due to fall by 0.2% (30 children) by 2027.
 - However, demand for early education and childcare places has increased in recent years. A reduction in funding available from the council could have an impact on the number of places available in the city if providers are unable to attract funding from other sources to support expansion.
149. We have identified the following mitigation:
- Southampton has always had a mixed model of early year's provision. With most national grants only being available to schools, the council will work with schools to encourage more of them to deliver early education. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.

Race

150. **SHIL2: Future of two council owned residential care homes.** Southampton City Council runs two residential homes, Holcroft House and Glen Lee. Holcroft House is a 34 bedded unit and Glen Lee is a 33 bedded unit. Both are Care Quality Commission (CQC) registered residential units providing short and long term care for adults living with a dementia. Both homes are rated as "good" by CQC. In Glen Lee, the accommodation is provided over two floors accessed by a passenger lift. In Holcroft House, accommodation is provided on one floor.
151. There are currently 36 residential homes that are CQC registered to provide dementia care in or near the boundary of the city. There is an over provision of residential homes in the area, with 70 vacancies available to the council for residential care placements across these homes as of October 2018 (including the two homes run by the council).

152. Although demand for Adult Social Care is increasing, the demand for residential care has decreased as more people are supported to live independently in their own homes. National research has found that older people would prefer to continue living at home for as long as possible. Research also tells us that the demand for residential care is likely to continue to decrease as alternatives such as housing with care become the preferred option. The local care market is better placed to provide care and support where residential care is needed, leaving the council to focus on the development of housing with care and community-based services. The proposal is therefore to close one or both council owned residential care units: Glen Lee and Holcroft House.
153. The impact of any decision to close one or both care homes will be a direct impact on those currently using these facilities. Current residents will have their needs reviewed and will be supported to move to alternative provision which could be a new care home.
154. We have identified the following impact:
- The impact of this proposal is predominantly linked to the health, disability and age needs of the individuals affected. Race is a consideration but not a factor deemed to influence the impact of the proposal.
155. We have identified the following mitigations:
- All residents will have an assessment prior to any service change which will include any cultural considerations linked to race, when looking at appropriate placements within communities.
 - Residents and carers will be able to choose, to some extent, from a range of alternative provision and arrange services that are culturally appropriate.

Religion & Belief

156. **SHIL2: Future of two council owned residential care homes.** Southampton City Council runs two residential homes, Holcroft House and Glen Lee. Holcroft House is a 34 bedded unit and Glen Lee is a 33 bedded unit. Both are Care Quality Commission (CQC) registered residential units providing short and long term care for adults living with a dementia. Both homes are rated as “good” by CQC. In Glen Lee, the accommodation is provided over two floors accessed by a passenger lift. In Holcroft House, accommodation is provided on one floor.
157. There are currently 36 residential homes that are CQC registered to provide dementia care in or near the boundary of the city. There is an over provision of residential homes in the area, with 70 vacancies available to the council for residential care placements across these homes as of October 2018 (including the two homes run by the council).
158. Although demand for Adult Social Care is increasing, the demand for residential care has decreased as more people are supported to live independently in their own homes. National research has found that older people would prefer to continue living at home for as long as possible. Research also tells us that the demand for residential care is likely to continue to decrease as alternatives such as housing with care become the preferred option. The local care market is better placed to provide care and support where residential care is needed, leaving the council to focus on the development of housing with care and community-based

services. The proposal is therefore to close one or both council owned residential care units: Glen Lee and Holcroft House.

159. The impact of any decision to close one or both care homes will be a direct impact on those currently using these facilities. Current residents will have their needs reviewed and will be supported to move to alternative provision which could be a new care home.
160. We have identified the following impact:
- The impact of this proposal is predominantly linked to the health, disability and age needs of the individuals affected. Religion or belief is a consideration but not a factor deemed to influence the impact of the proposal.
161. We have identified the following mitigations:
- All residents will have an assessment prior to any service change which will address matters of religion and belief and ensure that future provision is in line with their requirements.
 - Residents and carers will be able to choose, to some extent, from a range of alternative provision and arrange services that are appropriate to their individual need including religion and belief.

Sex

162. **SHIL1: Revise the Adult Social Care Charging Policy.** Under the Care Act 2014, the council has discretion whether to charge for services to meet both eligible and non-eligible needs, except where it is required to arrange care and support free of charge. The council has, to date, exercised its discretion to not charge at all for some services and for other services has not charged the full amount to cover the actual service being delivered. The Care Act 2014 and associated relevant regulations set out the services that a local authority can and cannot charge for. The proposed policy aims to deliver a fairer and more equitable service, whilst ensuring that the services can remain sustainable in order to meet the needs of local people, now and in the future.
163. The council proposes to make the following changes to its Adult Social Care Charging Policy, which will affect approximately 700 people currently using services as well as future clients.
- To introduce a new Arrangement Fee of £250 for people whose assets are over the capital threshold, currently £23,250, (and who therefore must pay the full cost of their care) but who request Southampton City Council to make the arrangements for their non-residential care (as is permitted under the Care Act 2014).
 - To take account of the higher rate Attendance Allowance and disability benefits (Personal Independence Payment and the care component of Disability Living Allowance) when assessing for financial contributions for non-residential care. This is in line with other local authorities. The difference between the higher and lower rate payments is currently £28.30 per week. This would now be taken into account when calculating an individual's income.
 - To make it clear that Southampton City Council will begin charging the assessed contribution from the first day that chargeable services are provided.

- To increase charges for deferred payment scheme loans to reflect the actual costs of administering the scheme, and introduce an interest charge in line with the Care Act 2014.
 - To apply the charging policy for clients receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011.
164. We have identified the following impacts:
- There is a higher proportion of female clients who are currently receiving social care support from Southampton City Council.
 - Women are more likely to be carers, and more women could feel compelled to provide unpaid care if deterred from seeking help from the council due to charges.
165. We have identified the following mitigations:
- The council will comply with its duties under the Care Act 2014 which confirms that any charge should be reasonable and affordable, and sex is not a contributing factor to the assessment of charges.
 - Carers will be signposted to support where appropriate.
 - The council will use its discretion to waive all or part of any charge if it is likely to cause undue hardship on a case by case basis.
166. **SHIL2: Future of two council owned residential care homes.** Southampton City Council runs two residential homes, Holcroft House and Glen Lee. Holcroft House is a 34 bedded unit and Glen Lee is a 33 bedded unit. Both are Care Quality Commission (CQC) registered residential units providing short and long term care for adults living with a dementia. Both homes are rated as “good” by CQC. In Glen Lee, the accommodation is provided over two floors accessed by a passenger lift. In Holcroft House, accommodation is provided on one floor.
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168. Although demand for Adult Social Care is increasing, the demand for residential care has decreased as more people are supported to live independently in their own homes. National research has found that older people would prefer to continue living at home for as long as possible. Research also tells us that the demand for residential care is likely to continue to decrease as alternatives such as housing with care become the preferred option. The local care market is better placed to provide care and support where residential care is needed, leaving the council to focus on the development of housing with care and community-based services. The proposal is therefore to close one or both council owned residential care units: Glen Lee and Holcroft House.
169. The impact of any decision to close one or both care homes will be a direct impact on those currently using these facilities. Current residents will have their needs reviewed and will be supported to move to alternative provision which could be a new care home.
170. We have identified the following impact:

- There is likely to be a greater adverse effect on women as a significant majority of residents are currently female.
- There will be a potential impact on staff as more females are employed at both homes.

171. We have identified the following mitigations:

- All residents will have an assessment prior to any service change which will also address matters relating to sex.
- Residents and carers will be able to choose, to some extent, from a range of alternative provision and arrange services that are tailored to their needs including single gender services.
- A full statutory consultation will be undertaken in relation to all staff, subject to the decision outcome.
- The consultation process will include one to one meetings to discuss and address any particular needs or concerns.

Community Safety

172. **SSEG1: Introduce charges for Blue Badge holders in council owned off-street car parks.** The proposal is to withdraw free parking in off-street car parks for Blue Badge holders, meaning that Blue Badge holders who choose to park in off-street car parks will be subject to a charge and the same terms and conditions as other users.

173. The Disabled Person's Parking Badge Scheme, also known as the Blue Badge Scheme, provides a national arrangement of parking concessions for people with severe mobility difficulties, who travel either as drivers or passengers. A Blue Badge is designed to help disabled people park close to their destination, either as a passenger or driver. There are 7,781 Blue Badge holders in the city and over 50% of those are people with walking difficulties.

174. The introduction of charges for Blue Badge holders apply to all council owned surface car parks and to the West Park Road Multi-story Car Park (MSCP). All other MSCPs in the city already have barrier systems in place, meaning that those with Blue Badges pay for parking in these car parks.

175. Blue Badge holders will still have designated spaces within off-street car parks, however they will be expected to pay parking charges in common with all users of that car park and be subject to any time restrictions in place in that car park. Blue Badge holders will continue have the option to make use of on-street parking for free, and these changes will apply to off-street car parks only.

176. We have identified the following impact:

- Blue Badge holders using on street parking, such as double yellow lines, as a result of off street parking no longer being free, could increase the risk of an accident occurring for either themselves when exiting their vehicle or other motorists/ pedestrians passing by.

177. We have identified the following mitigation:

- The council will encourage the use of on street parking in designated on street disabled bays where possible and it is recommended that drivers take reasonable precautions when exiting the vehicle as would be normal when

parking in an on-street location. The Blue Badge Handbook recommends that drivers only park on double yellow lines where it is safe to do so.

Poverty

178. **CYP1: Review and redesign early help and outreach preventative services, to deliver a new focussed locality based model which prevents children becoming looked after by the council.** In 2017, a Locality Based 0-19 Early Help and Prevention service was introduced that included a mix of universal services (meaning they are open to everyone who wants to use them), and more targeted, intensive support for children and young people with additional needs, or whose home life makes them vulnerable to poor outcomes. This element supports approximately 950 children.
179. Services include Sure Start children's centres, health visiting, school nursing, Families Matter and the Family Nurse Partnership. There are also links to other services such as maternity services, pre-schools, schools, colleges, GPs, children's social care, services for children with special educational needs and/or disabilities (SEND), child and adolescent mental health services (CAMHS), and local community and voluntary sector organisations who support these communities.
180. The service has been successful in offering advice and support to children and families, and we want to extend it to include more targeted support that can address issues such as complex parenting, challenging behaviours, supporting disabilities, welfare advice, mental health advice, domestic abuse and exploitation. The proposal is therefore to extend the model by bringing in more specialist and targeted health and social care, such as Educational Welfare, Inclusion and Targeted teams, Youth Offending and others which can provide early help and outreach preventative services.
181. These specialist and targeted services are currently available, but have to be accessed separately. By delivering more services locally for families, we aim to make them part of a community resource that is practical and easy to access. We also want to increase our partnership working with local community and voluntary services.
182. This will enable us to engage families at an early stage when they are facing challenges or need advice. It will also help to enhance the Families Matter service which focuses on strengthening and turning around families who are experiencing issues. Providing the right help early can stop problems getting worse or avoid issues altogether. Evidence shows that this can deliver better outcomes for children and families as well as saving money in the longer term as it avoids the need for more intensive, long term support. Therefore, it should ultimately reduce the number of children coming into statutory services with escalated needs, requiring the intervention of the council.
183. We have identified the following impact:
 - The majority of looked after children in Southampton originally come from the 20% most deprived communities – 6.3 x higher than the 20% least deprived.
184. We have identified the following mitigation:

- The council will continue to target resources to areas of greatest need.
185. The proposed service will have a number of positive impacts on children and families in Southampton:
- There will be a clearer offer for children and families and more services will be based locally.
 - There will be less reliance on assessment or strict criteria of access and greater focus on targeted need and intervention.
 - Children and families will be able to access support and help with any challenges or issues more quickly.
 - Services will be more joined up and focused on the key issues that are challenging family stability and resilience.
 - There will be closer working relationships across the professional networks.
 - There will be greater opportunities to develop links with community and voluntary sector organisations.
186. **CYP2: Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service.** The council's Children and Families Service provides a range of services and support to help children and young people get a good start in life. One of those services is the 'play offer' which runs out of the council's Sure Start Children's Centres and allows children and families to access play sessions in a safe and contained space. These provide support for children and their parents/carers, helps develop community cohesion, provides parent and child socialisation and assists in school readiness.
187. The council currently sets up, runs and facilitates play sessions in 7 centres across the city and these are staffed by council employees (approximately 20 staff). Number of children who are supported through the play offer varies. There are multiple play type sessions including some drop in sessions where the attendance can vary week to week. However, in October 2018, the average play session attendance was 15, and the current offer extends to an estimated 140 children.
188. The council recognises the importance of these play sessions to children and their parents/carers. However, it is also important that council resources are targeted where they are needed most, and that we work with other public sector, private sector, voluntary and community organisations to deliver the best value and most joined up services.
189. The proposal is therefore to explore opportunities for some play services to be run or co-run by local community volunteers and/or parent volunteers rather than council staff. The council and its partners will continue to coordinate and support the running of these groups, though will seek to hand over some facilitation to capable and trained members of the community. Council staff will continue to run some targeted sessions if there are areas where it is not viable to deliver a community led play offer; in that case, these will be targeted to those areas with the greatest need. The council will also support work to develop the availability of play opportunities across the city.
190. We have identified the following impacts:
- The majority of looked after children in Southampton originally come from the 20% most deprived communities – 6.3 x higher than the 20% least deprived.

191. We have identified the following mitigation:
- The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas. It will still be possible to access professional support via other routes.
192. **CYP6 Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision.** The Early Intervention Fund supports early years and childcare providers to expand or to set up new provision. In 2018/19, £116,000 was allocated to the Fund. The proposal is to reduce the funding allocated to the Early Intervention Fund to £15,000 per annum in 2019/20 and beyond. Providers will be encouraged to seek funding from other sources. The impact of the reduction in the funding may be that some early years and childcare providers will find it more challenging to expand or set up new provision. This may in turn impact the number of places available across the city.
193. We have identified the following impacts:
- 23.4% of children in Southampton live in poverty. Local data shows that only 37% of children living in the 10% most deprived areas of the city who do not attend early years provision reach the expected level in the Early Years Foundation Stage at age 5, compared with 59% who have attended for over 540 hours.
 - Reducing the early intervention grant may result in fewer new places being made available to under 2s, as it is more costly to staff places for younger children.
194. We have identified the following mitigation:
- The council will signpost providers who are considering expanding to national grants, and work with schools to encourage more schools to deliver early intervention. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.
195. **SHIL 1: Revise the Adult Social Care Charging Policy.** Under the Care Act 2014, the council has discretion whether to charge for services to meet both eligible and non-eligible needs, except where it is required to arrange care and support free of charge. The council has, to date, exercised its discretion to not charge at all for some services and for other services has not charged the full amount to cover the actual service being delivered. The Care Act 2014 and associated relevant regulations set out the services that a local authority can and cannot charge for. The proposed policy aims to deliver a fairer and more equitable service, whilst ensuring that the services can remain sustainable in order to meet the needs of local people, now and in the future.
196. The council proposes to make the following changes to its Adult Social Care Charging Policy, which will affect approximately 700 people currently using services as well as future clients.
- To introduce a new Arrangement Fee of £250 for people whose assets are over the capital threshold, currently £23,250, (and who therefore must pay the full cost of their care) but who request Southampton City Council to make the

arrangements for their non-residential care (as is permitted under the Care Act 2014).

- To take account of the higher rate Attendance Allowance and disability benefits (Personal Independence Payment and the care component of Disability Living Allowance) when assessing for financial contributions for non-residential care. This is in line with other local authorities. The difference between the higher and lower rate payments is currently £28.30 per week. This would now be taken into account when calculating an individual's income.
- To make it clear that Southampton City Council will begin charging the assessed contribution from the first day that chargeable services are provided.
- To increase charges for deferred payment scheme loans to reflect the actual costs of administering the scheme, and introduce an interest charge in line with the Care Act 2014.
- To apply the charging policy for clients receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011.

197. We have identified the following impact:

- There could potentially be an impact as increasing charges and making new changes have an adverse financial effect on some clients.

198. We have identified the following mitigations:

- Everyone directly affected by this proposal will be financially reviewed. This will include a benefits check and an offer of a Disability related Expenditure (DRE) assessment/ re-assessment so that all of their allowable disability related expenditure is taken into account, including where relevant, night-time care costs that are not met by the council.
- The council will use its discretion to waive all or part of any charge if it is likely to cause undue hardship on a case by case basis.

199. **SHIL2: Future of two council owned residential care homes.** Southampton City Council runs two residential homes, Holcroft House and Glen Lee. Holcroft House is a 34 bedded unit and Glen Lee is a 33 bedded unit. Both are Care Quality Commission (CQC) registered residential units providing short and long term care for adults living with a dementia. Both homes are rated as "good" by CQC. In Glen Lee, the accommodation is provided over two floors accessed by a passenger lift. In Holcroft House, accommodation is provided on one floor.

200. There are currently 36 residential homes that are CQC registered to provide dementia care in or near the boundary of the city. There is an over provision of residential homes in the area, with 70 vacancies available to the council for residential care placements across these homes as of October 2018 (including the two homes run by the council).

201. Although demand for Adult Social Care is increasing, the demand for residential care has decreased as more people are supported to live independently in their own homes. National research has found that older people would prefer to continue living at home for as long as possible. Research also tells us that the demand for residential care is likely to continue to decrease as alternatives such as housing with care become the preferred option. The local care market is better placed to provide care and support where residential care is needed, leaving the council to focus on the development of housing with care and community-based

services. The proposal is therefore to close one or both council owned residential care units: Glen Lee and Holcroft House.

202. The impact of any decision to close one or both care homes will be a direct impact on those currently using these facilities. Current residents will have their needs reviewed and will be supported to move to alternative provision which could be a new care home.
203. We have identified the following impact:
- Some alternative provision may cost more than the existing provision.
204. We have identified the following mitigation:
- There is a varied market provision across Southampton and near to the city, including a range of alternative residential settings available at comparable costs.
 - Placements will be based on assessed level of need rather than affordability, although this will be taken into account.
205. **SHIL4: Review service charges to tenants in council owned properties, increasing the existing charges and introducing four new ones.** As a landlord, the council provides a range of services to tenants and leaseholders. Rents generally include all charges relating to the occupation of a property while service charges relate to additional services which may not be provided to every tenant, or to communal facilities. These include block cleaning, concierge, heating, grounds and garden maintenance and other services. The council has legal powers to charge for these services so long as the charges are clear and transparent and represent the actual cost of the service.
206. The council's current charges are lower than the actual costs and in some cases the council has not previously made a charge, but has been providing a service to tenants. The council needs to have a viable and sustainable Housing Revenue Account (HRA) that enables the council to deliver effective services, invest in its properties so homes are of a modern standard, and to provide new social housing to rent. If the council does not recover its actual costs for these services it has a detrimental effect on the HRA overall. The proposal is to increase the costs to tenants living in the council's walk-up blocks and tower blocks across the city.
207. We have identified the following impacts:
- Council tenants are more likely to be on lower incomes and eligible for qualifying benefits than other groups.
 - Approximately 10,000 tenants are currently in receipt of Housing Benefit/Universal Credit.
 - Those on lower incomes are more likely to experience a proportionally higher impacts of a service charge increase than others.
208. We have identified the following mitigations:
- Tenants will be given information as to how to gain advice from local agencies such as the council's Homeless Prevention Team, Citizen Advice, Money Advice Service, StepChange, Money Matters, Age UK, and local relevant charitable/voluntary sector organisations.
 - Some service charges may be covered by Housing Benefit/Universal Credit.

- The council intends to set up a discretionary relief fund if these proposals are approved to help those in most need to pay for all or part of the additional charges.
209. **SSEG1: Introduce charges for Blue Badge holders in council owned off-street car parks.** The proposal is to withdraw free parking in off-street car parks for Blue Badge holders, meaning that Blue Badge holders who choose to park in off-street car parks will be subject to a charge and the same terms and conditions as other users.
210. The Disabled Person's Parking Badge Scheme, also known as the Blue Badge Scheme, provides a national arrangement of parking concessions for people with severe mobility difficulties, who travel either as drivers or passengers. A Blue Badge is designed to help disabled people park close to their destination, either as a passenger or driver. There are 7,781 Blue Badge holders in the city and over 50% of those are people with walking difficulties.
211. The introduction of charges for Blue Badge holders apply to all council owned surface car parks and to the West Park Road Multi-story Car Park (MSCP). All other MSCPs in the city already have barrier systems in place, meaning that those with Blue Badges pay for parking in these car parks.
212. Blue Badge holders will still have designated spaces within off-street car parks, however they will be expected to pay parking charges in common with all users of that car park and be subject to any time restrictions in place in that car park. Blue Badge holders will continue have the option to make use of on-street parking for free, and these changes will apply to off-street car parks only.
213. We have identified the following impact:
- Blue Badge holders using on street parking, such as double yellow lines, as a result of off street parking no longer being free, may experience difficulties when exiting their vehicle and/or cause problems for other motorists/ pedestrians passing by.
214. We have identified the following mitigations:
- Free on-street car parking is available for anyone who is a Blue Badge holder.
 - The council have undertaken an assessment which demonstrates that there is sufficient alternative on street parking and/or dedicated on street disabled bays that is either within the immediate vicinity of the car park or closer to essential services.
215. **SSEG2: Increase Itchen Bridge fees for non-residents.** The proposal is to increase the Itchen Bridge Toll charges by 20p to vehicles in classes 2 and 3 and above crossing the bridge, who are not eligible for a concession. This will impact on non-residents, whether using a smart card or paying in cash, who are driving cars, small vans, small 4x4 and large vans, which include large transit and 4x4 vans.
216. The increase in the toll would not apply to residents that receive a concessionary toll through use of a Smart Card. Residents who do not currently have a Smartcities card would need to apply for one in order to avoid paying the increased charges. Those that currently qualify for free use of the bridge would

continue to do so, which includes motorcycles, electric vehicles and blue badge holders who receive Smartcities eligible mobility related benefit payments.

217. We have identified the following impact:

- This proposal may have a negative impact on some users who are non-residents or non-smart card users, who are low income earners and need to travel to Southampton to work.

218. We have identified the following mitigation:

- The price increase is to meet the running costs of the bridge, including maintenance and management. This charge would not apply to residents that receive a concessionary toll and this discount would be protected.

Health and Wellbeing:

219. **CYP1: Review and redesign early help and outreach preventative services, to deliver a new focussed locality based model which prevents children becoming looked after by the council.** In 2017, a Locality Based 0-19 Early Help and Prevention service was introduced that included a mix of universal services (meaning they are open to everyone who wants to use them), and more targeted, intensive support for children and young people with additional needs, or whose home life makes them vulnerable to poor outcomes. This element supports approximately 950 children.

220. Services include Sure Start children's centres, health visiting, school nursing, Families Matter and the Family Nurse Partnership. There are also links to other services such as maternity services, pre-schools, schools, colleges, GPs, children's social care, services for children with special educational needs and/or disabilities (SEND), child and adolescent mental health services (CAMHS), and local community and voluntary sector organisations who support these communities.

221. The service has been successful in offering advice and support to children and families, and we want to extend it to include more targeted support that can address issues such as complex parenting, challenging behaviours, supporting disabilities, welfare advice, mental health advice, domestic abuse and exploitation. The proposal is therefore to extend the model by bringing in more specialist and targeted health and social care, such as Educational Welfare, Inclusion and Targeted teams, Youth Offending and others which can provide early help and outreach preventative services.

222. These specialist and targeted services are currently available, but have to be accessed separately. By delivering more services locally for families, we aim to make them part of a community resource that is practical and easy to access. We also want to increase our partnership working with local community and voluntary services.

223. This will enable us to engage families at an early stage when they are facing challenges or need advice. It will also help to enhance the Families Matter service which focuses on strengthening and turning around families who are experiencing issues. Providing the right help early can stop problems getting worse or avoid issues altogether. Evidence shows that this can deliver better outcomes for

children and families as well as saving money in the longer term as it avoids the need for more intensive, long term support. Therefore, it should ultimately reduce the number of children coming into statutory services with escalated needs, requiring the intervention of the council.

224. We have identified the following impact:

- If services reduce in some areas, this could have an impact on the socialisation of children and their parents/carers, and their health and wellbeing.

225. We have identified the following mitigation:

- All families will receive the universal offer. Specialist services will also be accessible to those who need them, although in some cases children and families may have to travel out of their local area to access them. Where need is identified families will not be excluded on the grounds of their location, and transport options will be considered to enable those individuals to access services.

226. The proposed service will have a number of positive impacts on children and families in Southampton:

- There will be a clearer offer for children and families and more services will be based locally.
- There will be less reliance on assessment or strict criteria of access and greater focus on targeted need and intervention.
- Children and families will be able to access support and help with any challenges or issues more quickly.
- Services will be more joined up and focused on the key issues that are challenging family stability and resilience.
- There will be closer working relationships across the professional networks.
- There will be greater opportunities to develop links with community and voluntary sector organisations.

227. **CYP2: Review the council run play offer and seek community and voluntary sector partners to take over the direct running of this service.** The council's Children and Families Service provides a range of services and support to help children and young people get a good start in life. One of those services is the 'play offer' which runs out of the council's Sure Start Children's Centres and allows children and families to access play sessions in a safe and contained space. These provide support for children and their parents/carers, helps develop community cohesion, provides parent and child socialisation and assists in school readiness.

228. The council currently sets up, runs and facilitates play sessions in 7 centres across the city and these are staffed by council employees (approximately 20 staff). Number of children who are supported through the play offer varies. There are multiple play type sessions including some drop in sessions where the attendance can vary week to week. However, in October 2018, the average play session attendance was 15, and the current offer extends to an estimated 140 children.

229. The council recognises the importance of these play sessions to children and their parents/carers. However, it is also important that council resources are targeted where they are needed most, and that we work with other public sector, private

sector, voluntary and community organisations to deliver the best value and most joined up services.

230. The proposal is therefore to explore opportunities for some play services to be run or co-run by local community volunteers and/or parent volunteers rather than council staff. The council and its partners will continue to coordinate and support the running of these groups, though will seek to hand over some facilitation to capable and trained members of the community. Council staff will continue to run some targeted sessions if there are areas where it is not viable to deliver a community led play offer; in that case, these will be targeted to those areas with the greatest need. The council will also support work to develop the availability of play opportunities across the city.
231. We have identified the following impact:
- If services reduce in some areas, this could have an impact on the socialisation of children and their parents/carers, and their health and wellbeing.
232. We have identified the following mitigation:
- The council will continue to target resources to areas of greatest need, if community led delivery is not possible in these areas. It will still be possible to access professional support via other routes.
233. The delivery of a play offer through communities will strengthen and build partnerships between the council and communities. Exploring innovative community led delivery models will enable the council to maintain services in parts of the city which potentially could otherwise see a significant reduction or ceasing of the play offer.
234. **CYP6 Reduce Early Intervention Fund which supports early years and childcare providers to expand or set up new provision.** The Early Intervention Fund supports early years and childcare providers to expand or to set up new provision. In 2018/19, £116,000 was allocated to the Fund. The proposal is to reduce the funding allocated to the Early Intervention Fund to £15,000 per annum in 2019/20 and beyond. Providers will be encouraged to seek funding from other sources. The impact of the reduction in the funding may be that some early years and childcare providers will find it more challenging to expand or set up new provision. This may in turn impact the number of places available across the city.
235. We have identified the following impact:
- If sufficient childcare places are not available, this may have an impact on the health and wellbeing of children and their parents.
236. We have identified the following mitigation:
- The council will signpost providers who are considering expanding to national grants, and work with schools to encourage more schools to deliver early intervention. The council has a statutory duty under the Childcare Act 2006 and subsequent revisions to ensure there are sufficient early education places, so if insufficient places are available in future, the council will take appropriate action to address that.
237. **SHIL1: Revise the Adult Social Care Charging Policy.** Under the Care Act 2014, the council has discretion whether to charge for services to meet both

eligible and non-eligible needs, except where it is required to arrange care and support free of charge. The council has, to date, exercised its discretion to not charge at all for some services and for other services has not charged the full amount to cover the actual service being delivered. The Care Act 2014 and associated relevant regulations set out the services that a local authority can and cannot charge for. The proposed policy aims to deliver a fairer and more equitable service, whilst ensuring that the services can remain sustainable in order to meet the needs of local people, now and in the future.

238. The council proposes to make the following changes to its Adult Social Care Charging Policy, which will affect approximately 700 people currently using services as well as future clients.
- To introduce a new Arrangement Fee of £250 for people whose assets are over the capital threshold, currently £23,250, (and who therefore must pay the full cost of their care) but who request Southampton City Council to make the arrangements for their non-residential care (as is permitted under the Care Act 2014).
 - To take account of the higher rate Attendance Allowance and disability benefits (Personal Independence Payment and the care component of Disability Living Allowance) when assessing for financial contributions for non-residential care. This is in line with other local authorities. The difference between the higher and lower rate payments is currently £28.30 per week. This would now be taken into account when calculating an individual's income.
 - To make it clear that Southampton City Council will begin charging the assessed contribution from the first day that chargeable services are provided.
 - To increase charges for deferred payment scheme loans to reflect the actual costs of administering the scheme, and introduce an interest charge in line with the Care Act 2014.
 - To apply the charging policy for clients receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011.
239. We have identified the following impact:
- In cases where a client is deterred from seeking support from the council due to charges, their health and wellbeing could be detrimentally impacted.
240. We identified the following mitigations:
- Customers and their families will be provided with advice and information including details of local advice agencies which will provide financial advice where relevant.
 - The council will use its discretion to waive all or part of any charge if it is likely to cause undue hardship on a case by case basis.
241. **SHIL2: Future of two council owned residential care homes.** Southampton City Council runs two residential homes, Holcroft House and Glen Lee. Holcroft House is a 34 bedded unit and Glen Lee is a 33 bedded unit. Both are Care Quality Commission (CQC) registered residential units providing short and long term care for adults living with a dementia. Both homes are rated as "good" by CQC. In Glen Lee, the accommodation is provided over two floors accessed by a passenger lift. In Holcroft House, accommodation is provided on one floor.
242. There are currently 36 residential homes that are CQC registered to provide dementia care in or near the boundary of the city. There is an over provision of

residential homes in the area, with 70 vacancies available to the council for residential care placements across these homes as of October 2018 (including the two homes run by the council).

243. Although demand for Adult Social Care is increasing, the demand for residential care has decreased as more people are supported to live independently in their own homes. National research has found that older people would prefer to continue living at home for as long as possible. Research also tells us that the demand for residential care is likely to continue to decrease as alternatives such as housing with care become the preferred option. The local care market is better placed to provide care and support where residential care is needed, leaving the council to focus on the development of housing with care and community-based services. The proposal is therefore to close one or both council owned residential care units: Glen Lee and Holcroft House.
244. The impact of any decision to close one or both care homes will be a direct impact on those currently using these facilities. Current residents will have their needs reviewed and will be supported to move to alternative provision which could be a new care home.
245. We have identified the following impacts:
- Residents' concerns and levels of anxiety could impact their emotional and physical wellbeing particularly just before a move or immediately afterwards.
 - Relatives of residents may also have concerns relating to finding suitable alternate care and support which could impact their health and wellbeing.
246. We have identified the following mitigations:
- Registered managers are monitoring the health and wellbeing of current residents on a daily basis, and any significant changes are being escalated.
 - Residents will be fully assessed prior to any change in service.
 - Throughout this process information on alternatives will be made available.
247. In the longer term there is evidence that supporting people living with a dementia to live independently in their own homes drawing where appropriate on the support of others in their community leads to the best outcomes for those people. Re-providing residential care and support in homes run by charities and the private sector is more cost effective, supporting a more sustainable social care system locally, ensuring that the needs of people in Southampton can continue to be met in full.
248. **SHIL3: Reclassify some council properties currently only available to those aged 60 and over, making them available to people over 50.** There is a significant demand for affordable social rented homes in Southampton and there are currently 8,000 people on the Housing Register. However, there are a number of properties that are currently 'hard to let'. These are typically properties which are restricted to residents aged 60+, which are on the first floor or above in walk up blocks (without lifts). We are proposing to reclassify some properties which are currently restricted to residents aged 60+ to make them available to those aged 50+ or 55+. The blocks currently identified as potentially suitable for reclassification include: Malin Close, Rockall Close, Lundy Close, Curzon Court, Sarina Court, Manston Court, Maybush Court, Vellan Court, Penrith Court, Mansel

Court, Jessamine Road, Edward Road, Avington Court, Basset Green Court, Bowman Court, Meon Court and Dewsbury Court.

249. We have identified the following impact:

- Some tenants aged 60+ may have concerns about the reclassification of neighbouring properties, as it would mean that the block has a wider mix of tenants including those who are 50+ rather than 60+, as well as potentially younger partners and families.

250. We have identified the following mitigations:

- Tenants will continue to have access to wellbeing and prevention staff and Local Housing Management staff.
- We will undertake detailed consultation with affected tenants on a block by block basis as proposals are developed, and before any decisions are taken about each block.
- As part of that consultation tenants will receive clear information including signage about the rights and responsibilities of tenants.
- As part of that process we would also review and consider what measures we might need to take to address equality impacts or other impacts for individuals and properties.

251. The potential impact of this proposal is positive and could result in, improved void turnaround times, increase in rental income and improved rehousing for those aged 50-60 who are on the housing register.

252. The proposal is to review and potentially classify accommodation in phases, block by block. We would undertake detailed consultation with affected tenants as proposals are developed, and before any decisions are taken about each block. As part of that process we would also review and consider what measures we might need to take to address equality impacts for individuals and properties.

253. **SHIL4: Review service charges to tenants in council owned properties, increasing the existing charges and introducing four new ones.** As a landlord, the council provides a range of services to tenants and leaseholders. Rents generally include all charges relating to the occupation of a property while service charges relate to additional services which may not be provided to every tenant, or to communal facilities. These include block cleaning, concierge, heating, grounds and garden maintenance and other services. The council has legal powers to charge for these services so long as the charges are clear and transparent and represent the actual cost of the service.

254. The council's current charges are lower than the actual costs and in some cases the council has not previously made a charge, but has been providing a service to tenants. The council needs to have a viable and sustainable Housing Revenue Account (HRA) that enables the council to deliver effective services, invest in its properties so homes are of a modern standard, and to provide new social housing to rent. If the council does not recover its actual costs for these services it has a detrimental effect on the HRA overall. The proposal is to increase the costs to tenants living in the council's walk-up blocks and tower blocks across the city,

255. We have identified the following impact:

- Tenants may experience increased financial strain due to increased living costs, which may have negative impacts on health and wellbeing.

256. We have identified the following mitigations:

- Tenants will be given information as to how to gain advice from local agencies such as the council's Homeless Prevention Team, Citizen Advice, Money Advice Service, StepChange, Money Matters, Age UK, and local relevant charitable/voluntary sector organisations.
- The council intends to set up a discretionary relief fund if these proposals are approved to help those in most need to pay for all or part of the additional charges.

Other Impacts:

257. **SHIL2: Future of two council owned residential care homes.** Southampton City Council runs two residential homes, Holcroft House and Glen Lee. Holcroft House is a 34 bedded unit and Glen Lee is a 33 bedded unit. Both are Care Quality Commission (CQC) registered residential units providing short and long term care for adults living with a dementia. Both homes are rated as "good" by CQC. In Glen Lee, the accommodation is provided over two floors accessed by a passenger lift. In Holcroft House, accommodation is provided on one floor.

258. There are currently 36 residential homes that are CQC registered to provide dementia care in or near the boundary of the city. There is an over provision of residential homes in the area, with 70 vacancies available to the council for residential care placements across these homes as of October 2018 (including the two homes run by the council).

259. Although demand for Adult Social Care is increasing, the demand for residential care has decreased as more people are supported to live independently in their own homes. National research has found that older people would prefer to continue living at home for as long as possible. Research also tells us that the demand for residential care is likely to continue to decrease as alternatives such as housing with care become the preferred option. The local care market is better placed to provide care and support where residential care is needed, leaving the council to focus on the development of housing with care and community-based services. The proposal is therefore to close one or both council owned residential care units: Glen Lee and Holcroft House.

260. The impact of any decision to close one or both care homes will be a direct impact on those currently using these facilities. Current residents will have their needs reviewed and will be supported to move to alternative provision which could be a new care home.

261. We have identified the following impacts:

- The proposals will have a significant impact on staff who are employed at Glen Lee and Holcroft House.

262. We have identified the following mitigations:

- A full statutory consultation will be undertaken in relation to all staff, subject to the decision outcome.
- The consultation process will include one to one meetings to discuss and address any particular needs or concerns.
- Full assessment of Protected Characteristics in relation to staff will be undertaken during this consultation.

- The outcome of the staff consultation will inform a further Cabinet decision regarding how the proposals are taken forward to meet the budget requirement. In the event that further budget decisions are required, these will be taken forward in due course.

Other Protected Characteristics

263. We have identified no direct impacts for the following:

- Gender reassignment
- Sexual orientation.

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Overall Budget Proposals – Consultation Feedback

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Introduction

1. Southampton City Council ran consultations on a range of budget proposals for 2019/20. The written consultation ran from 17 October 2018 to 2 January 2019.
2. As a result of reductions in funding from central government, Southampton City Council has made £136.4 million savings over the last seven years and we need to make another £15.05 million savings by 2020/21. Income from the Council Tax only covers 17% of our total council expenditure (excluding Housing Revenue Account expenditure and schools expenditure) and the revenue support grant funding we receive from central government will be reduced by 54% over the medium term. At the same time as we are having to make further savings, demand for our services – particularly those for vulnerable children and adults – continues to increase year-on-year.
3. Southampton City Council has adopted an outcome-based planning and budgeting approach to ensure that the council is investing its reduced resources in those services that have the greatest impact on the delivery of our priority outcomes. Those outcomes have been developed based on feedback from residents, staff and partners, and are:
 1. Strong and sustainable economic growth
 2. Children and young people get a good start in life
 3. People in Southampton live safe, healthy, independent lives
 4. Southampton is an attractive and modern city, where people are proud to live and work
4. And, to ensure the council can deliver against these in an affordable way, we aim to be a 'modern sustainable council'. By allocating resources to these priorities, considering what is being achieved from the services being provided, and what can be improved, changed or stopped, we have identified areas where we can potentially make savings. We have also included income generation proposals and 'business as usual' efficiencies.
5. This report summarises the aims, principles, methodology and results of the public consultation. It provides a summary of the consultation responses both for the consideration of decision makers and any interested individuals and stakeholders.

Aims

6. The aim of this consultation was to:
 - a. Communicate clearly to residents and stakeholders the proposals for setting a balanced budget.
 - b. Ensure any resident, business or stakeholder who wishes to comment on the proposals has the opportunity to do so, enabling them to raise any impacts the proposals may have.
 - c. Allow participants to propose alternative suggestions for consideration which they feel could achieve the objective in a different way.
 - d. Provide feedback on the results of the consultation to elected Members to enable them to make informed decisions about how to best progress.
 - e. Ensure that the results are analysed in a meaningful, timely fashion, so that feedback is taken into account when decisions are made.
7. The consultation was not a vote, it enabled participants to read about the preferred option, answer questions and make comments that will enable the final decision to be made. Decision makers need to consider the representations made during the consultation period but a majority view will not necessarily dictate the final decision. It is also important to note that the consultation is one element of the suite of reports that will feed into the final position.

Consultation principles

8. The council takes its duty to consult with residents and stakeholders on changes to services very seriously. The council's consultation principles ensure all consultation is:
 - Inclusive: so that everyone in the city has the opportunity to express their views.
 - Informative: so that people have adequate information about the proposals, what different options mean, and a balanced and fair explanation of the potential impact, particularly the equality and safety impact.
 - Understandable: by ensuring that the language used to communicate is simple and clear and that efforts are made to reach all stakeholders, for example people who are non-English speakers or disabled people.
 - Appropriate: by targeting people who are more likely to be affected and using a more tailored approach to get their feedback, complemented by a general approach to all residents, staff, businesses and partners.
 - Meaningful: by ensuring decision makers have the full consultation feedback information so that they can make informed decisions.
 - Reported: by letting consultees know what was done with their feedback.

9. Southampton City Council is committed to consultations of the highest standard, which are meaningful and comply with the following legal standards:
 - Consultation must take place when the proposal is still at a formative stage
 - Sufficient reasons must be put forward for the proposal to allow for intelligent consideration and response
 - Adequate time must be given for consideration and response
 - The product of consultation must be carefully taken into account.

10. Public sector organisations in Southampton also have a compact (or agreement) with the voluntary sector in which there is a commitment to undertake public consultations for a minimum of 12 weeks wherever possible. This aims to ensure that there is enough time for individuals and voluntary organisations to hear about, consider and respond to consultations. It was felt that a 12 week consultation period would be the best approach.

Consultation methodology

11. Deciding on the best process for gathering feedback from stakeholders when conducting a consultation requires an understanding of the audience and the focus of the consultation. It is also important to have more than one way for stakeholders to feedback on the consultation, to enable engagement with the widest range of the population. Previous best practice was also considered in the process of developing the consultation methodology.
12. The agreed approach for this consultation was to use a combination of online and paper questionnaires as the main basis. Feedback was also received through email and letter.
13. This approach of open consultation, supported by a wide range of communications ensured that as many people as possible were aware of the issues and could have their say if they chose to.

Questionnaire

14. The main vehicle for gathering feedback through the consultation was a combination of online and paper questionnaires. Questionnaires enable an appropriate amount of explanatory and supporting information to be included in a structured questionnaire, helping to ensure respondents were aware of the background and detail of the proposals. It was deemed the most suitable methodology for consulting on this complex issue alongside the information sheets which act as a summary of proposals by area.
15. Paper copies of the questionnaire were made available in Southampton Civic Centre reception, Gateway and all Southampton libraries.

Additional feedback channels

16. Any emails addressed to senior officers or Cabinet members were collated and analysed as a part of the overall consultation.
17. Respondents to the consultation could also write letters to provide feedback on the proposals.

Promotion and communication

18. Throughout the consultation, every effort was made to ensure that as many people as possible were aware of the budget proposals and had every opportunity to have their say.
19. Particular effort was made to communicate the proposals in a clear and easy to understand way. This was achieved by including key information within the questionnaire and signposting to a wide range of supporting information. This included the following which were hosted on a focused area of the council website.
 - a. Information sheets
 - b. Equality and Safety Impact Assessments
 - c. Questionnaire
 - d. Supporting information for the three parallel consultations
20. For the duration of the consultation paper versions of the consultation questionnaire were available in libraries and council offices. Paper copies of the questionnaire or alternative format versions could be obtained on request.
21. At the start of the consultation a media release was issued.
22. The budget consultations were included in 8 Southampton City Council e-alerts. The total reach of these e-alerts was in excess of 30,000. These e-alerts resulted in 810 clicks through to further information and the questionnaire.

23. With regard to social media a combination Twitter and Facebook promotion was used, there were five posts about the overall budget consultation on Facebook with an overall reach of 37,033. There were a total of 17 tweets about the overall budget which had a total reach of 32,948.
24. To support the external promotion of the consultation there were also activities to make staff of Southampton City Council aware of the consultation, internal emails and promotion on staff webpages.

Summary of Consultation Feedback

Overall respondents

25. Overall, there were 559 separate written responses to the consultation.

26. The majority of responses were received through the consultation questionnaire; 533 in total. Additional written responses were also received through emails and letters. The breakdown of all written responses is shown within table 1 below.

| Feedback route | Total number of responses |
|----------------------------------|---------------------------|
| Questionnaire (Paper and online) | 533 |
| Letters or emails | 26 |
| Total | 559 |

Table 1

27. In addition to written responses to the consultation, there were a number of public engagements and meetings in which verbal feedback was provided.

28. All written and verbal feedback received is summarised within the following sections.

Breakdown of questionnaire respondents

29. A number of questions were asked within the questionnaire to find out a bit more about the respondents to help contextualise their response.

30. The first question asked respondents what their interest in the consultation was. Figure 1 shows the breakdown of responses to this question. Please note percentages add up to more than 100% as respondents could select multiple options. A total of 405 respondents (77%) were interested in the budget consultation as a resident of Southampton. The second highest proportion of respondents were employees of Southampton City Council; a total of 112 respondents (21%) selected this option. A further 47 respondents described themselves as a member of a community group or organisation, 44 respondents selected a resident elsewhere in Hampshire, 43 respondents described themselves as an employee or self employee of a business or organisation, 15 respondents were political members and a further 8 respondents selected "other".

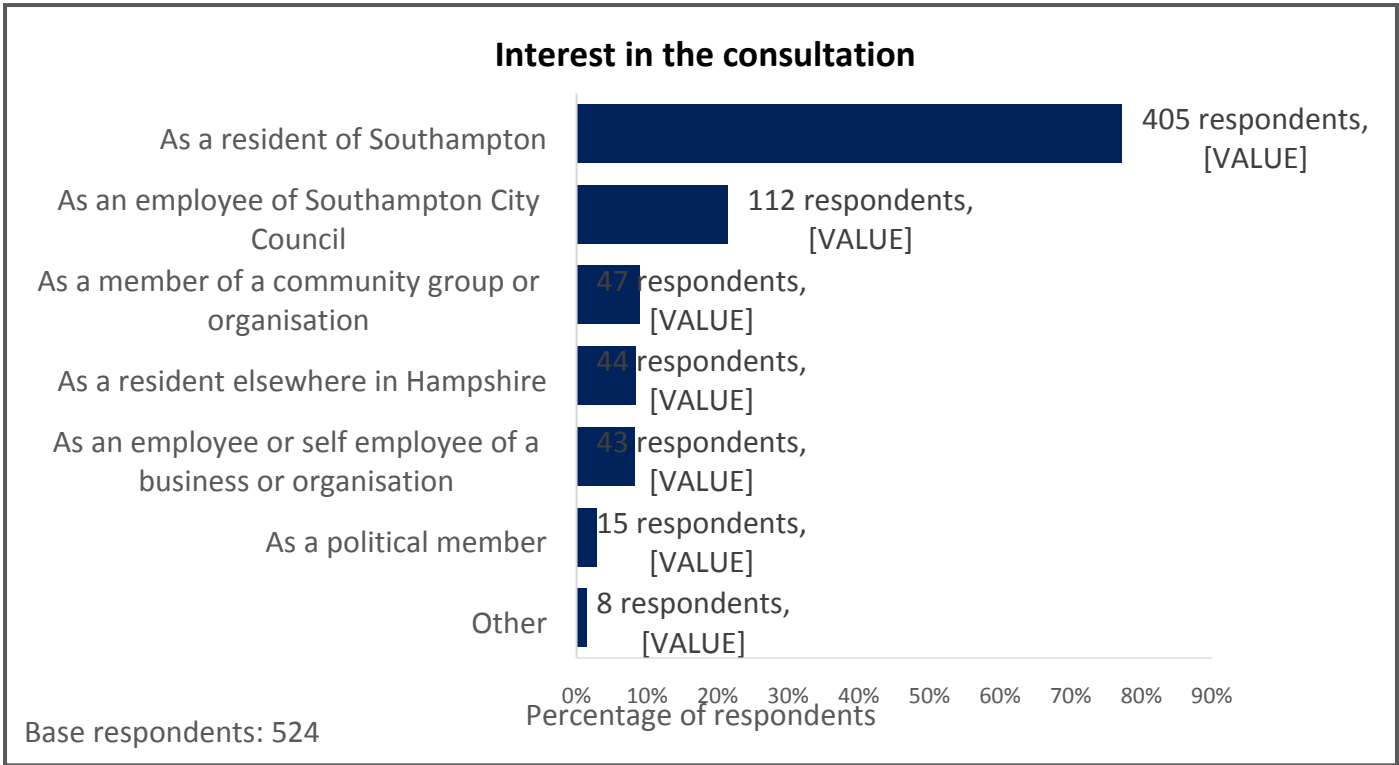


Figure 1

31. Figure 2 shows how respondents to the consultation questionnaire best described their gender. 280 respondents described themselves as Female, 205 respondents described themselves as Male and a further 5 respondents in another way.

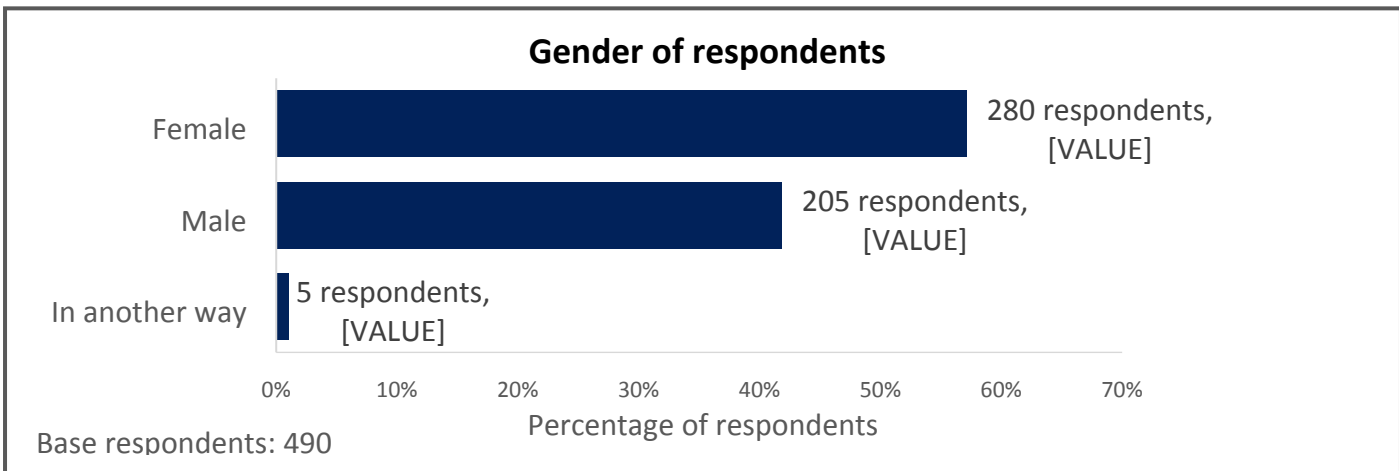


Figure 2

32. Respondents were also asked their age as shown within figure 3. The highest proportion of respondents were between the ages of 25 and 44 which comprised 43% of respondents. Categories with lower numbers of respondents were under the age of 25 and over the age of 65.

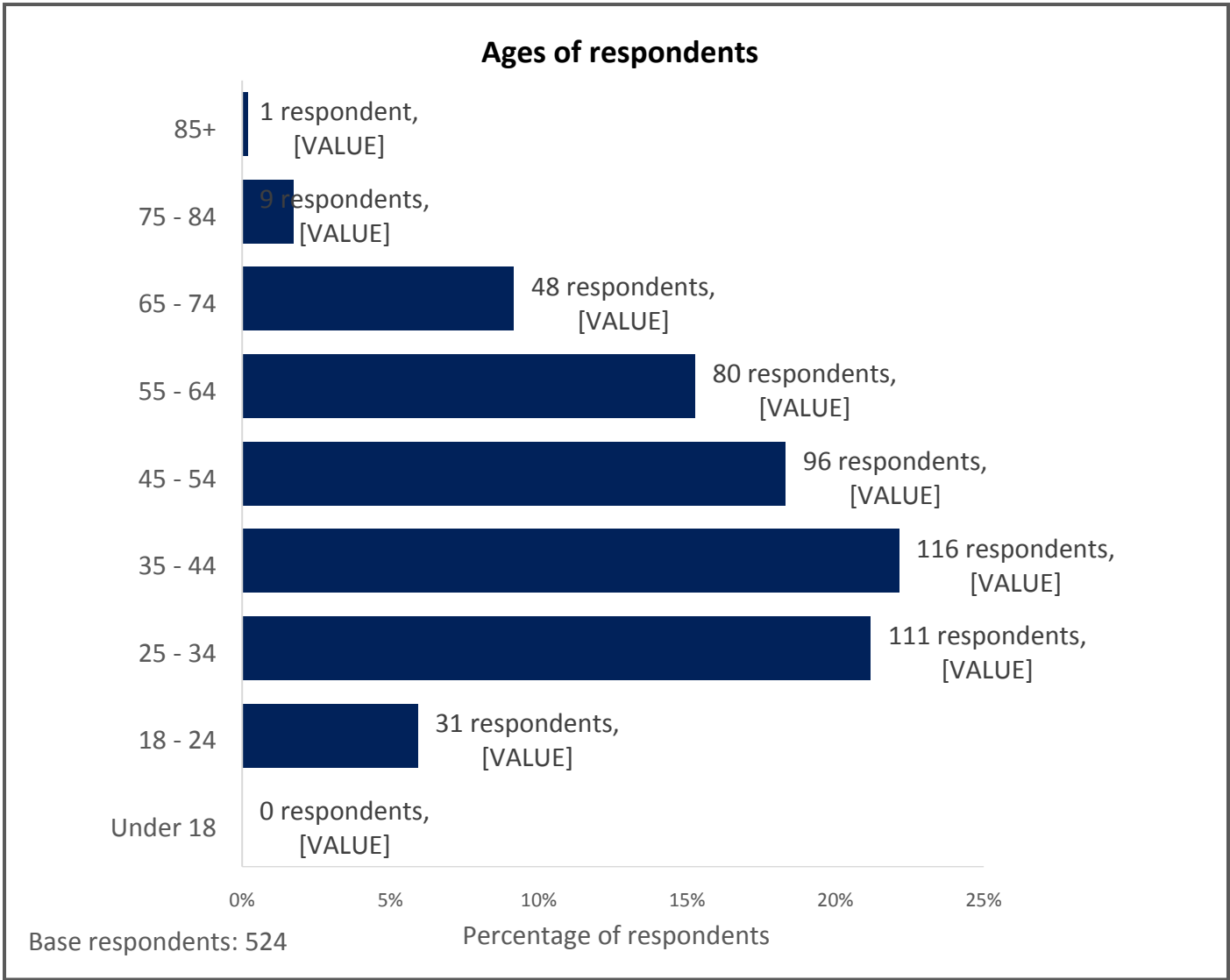


Figure 3

33. The final question asking for more information about the respondents themselves asked them their ethnicity. Figure 4 shows that the highest proportion of respondents (93%) described themselves as White. A further 2% of respondents described themselves as Asian or Asian British; 1% Black, African, Caribbean or Black British; 3% mixed or multiple ethnic groups and 1% as another ethnic group.

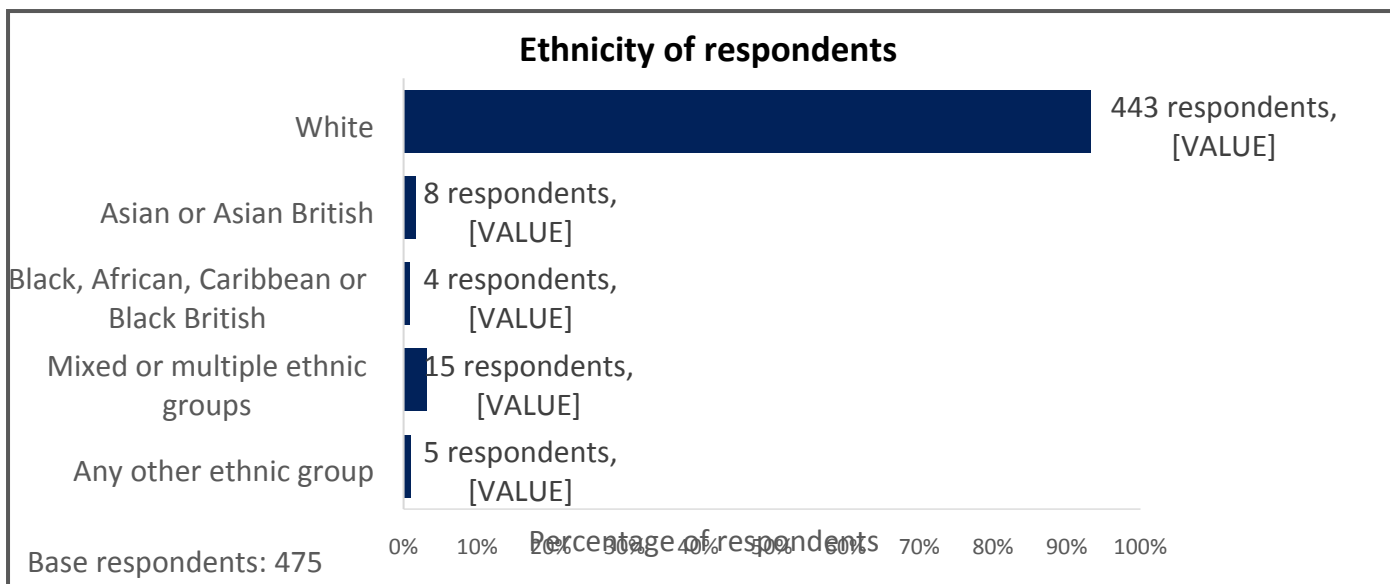


Figure 4

Themes of proposals

34. As the overall budget consultation questionnaire contained a wide range of budget proposals, respondents were given the option at the start of the questionnaire to select the themes of proposals that they would like to read and answer questions on if they did not wish to provide feedback on them all.

35. The following table shows the total numbers of respondents that answered each theme of proposals. The following sections will now summarise the results of the questions within each of the themes of proposals.

| | Count of respondents |
|---|----------------------|
| Children and Young People get a good start in life: Education and Early Years (Compass School Pupil Referral Unit Funding, Early Intervention Fund, Sugar Tax - Healthy Pupils Fund) | 301 |
| Children and Young People get a good start in life: Social Care and Early Help (Review and redesign locality based early help and prevention model, Council run Play Offer, Looked After Children Contact Service) | 253 |
| People in Southampton Lead Safe, Healthy, Independent Lives: Adult Social Care and Public Health (Increasing capacity of Shared Lives scheme, Increasing capacity of Urgent Response Service) | 200 |
| People in Southampton Lead Safe, Healthy, Independent Lives: Housing (Reclassify Accommodation from 60+ to 50+ or 55+) | 194 |
| Strong and Sustainable Economic Growth (Charges for blue badge holders in off street car parks, Itchen Bridge fees for non-residents, Transport Review, Investment Properties) | 283 |
| Attractive and modern city where people are proud to live and work (Waste collection service efficiencies, Introduction of smart compactor bins) | 258 |
| Modern Sustainable Council (Major projects, Other service delivery and redesign proposals) | 237 |
| None of them, I just want to comment on the budget consultation generally | 36 |

Children and Young People get a good start in life: Education and Early Years

36. Respondents were asked to what extent they agreed or disagreed with the individual proposals for Education and Early Years. Figure 5 shows the results of these questions.

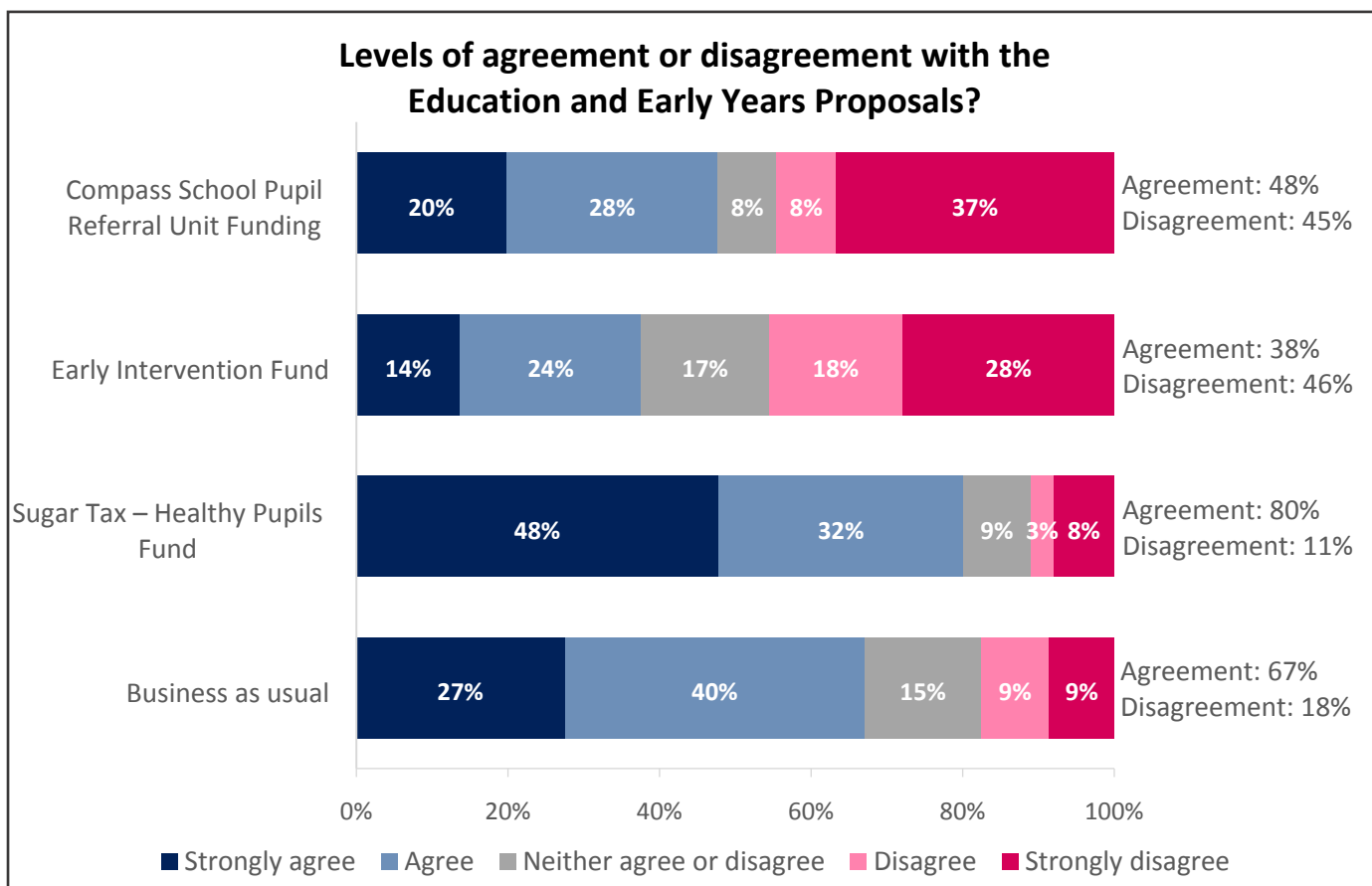


Figure 5

37. A total of 48% of respondents expressed overall agreement with the proposal regarding the Compass School Pupil Referral Unit funding. Of this, 20% strongly agreed with the proposal and 28% agreed. A further 8% of respondents neither agreed nor disagreed. Overall, 45% of respondents either disagreed or strongly disagreed with the proposal; of which 8% disagreed and 37% strongly disagreed.
38. When asked about the proposal regarding the Early Intervention Fund, a total of 38% of respondents either agreed or strongly agreed with the proposal (14% strongly agree, 24% agree). A total of 17% of respondents selected that they neither agreed nor disagreed with the proposal. The remaining 46% of respondents, strongly disagreed (28%) or disagreed (18%) with the Early Intervention Fund proposal.
39. Of the proposals for Education and Early Years, the proposal on Sugar Tax Healthy Pupils Fund received the highest level of agreement. Overall 80% of respondents either agreed or strongly agreed with the proposal. Of this 48% of respondents strongly agreed and 32% agreed. A further 9% of respondents neither agreed nor disagreed and the remaining 11% of respondents expressed disagreement. Of this, 3% disagreed and 8% strongly disagreed.
40. Respondents were also asked about business as usual proposals for Education and Early Years. These proposals included: extending the Autism Resource base at Bitterne Park Secondary School to increase capacity and reduce out of city Special School placements; reducing staffing vacancies, reviewing structures and roles; and making sure we are working as efficiently as possible. A total of 67% of respondents expressed agreement with these

proposals, of which 27% strongly agreed and 40% agreed. A total of 15% of respondents neither agreed nor disagreed with the proposals. The remaining 18% of respondents expressed disagreement with the proposals (9% disagreed and 9% strongly disagreed).

41. Respondents were then asked if the Education and Early Years Proposals were implemented, what impact this may have on them, their family or their community. Figure 6 shows that a total of 24% of respondents felt that there would be a positive impact to some degree; of this 2% felt there would be a very positive impact, 11% a fairly positive impact and 11% a slightly positive impact. A further 17% of respondents felt there would be no impact at all. Overall, 56% of respondents felt that the impact of the proposals would be negative. Of this 9% felt there would be a slightly negative impact, 8% a fairly negative impact and 39% a very negative impact. 4% of respondents did not feel they knew what the impact would be.

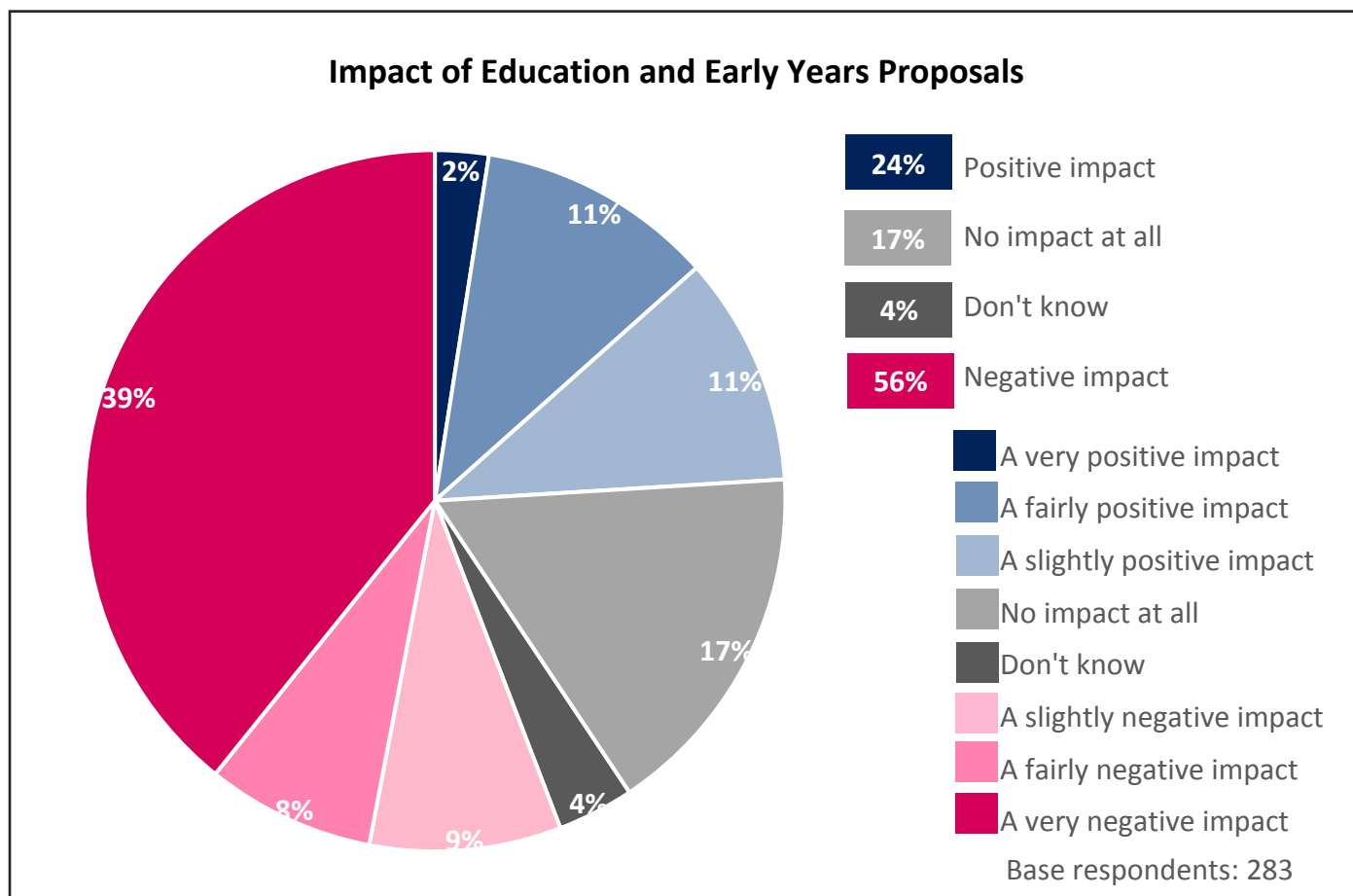
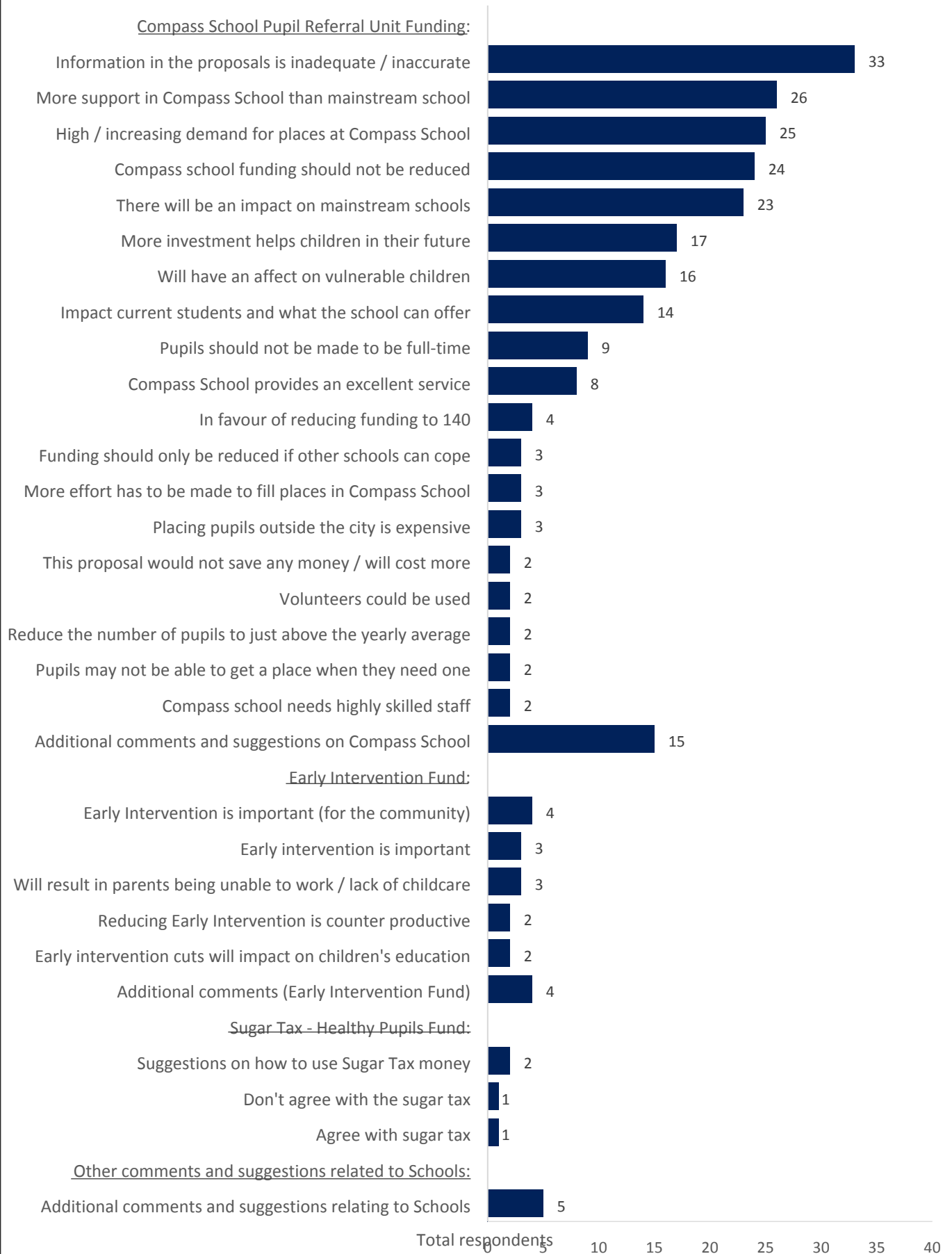


Figure 6

42. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. The following figure shows the themes of comments regarding education and early years and the number of respondents that raised this point. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides the unique comments and suggestions associated with these themes of comment.

Education and Early Years comment themes.



43. Unique comments and suggestions related to the Compass School Pupil Referral Unit Funding:

| | |
|--|--|
| <p>The information used for the Compass School proposals is inadequate / inaccurate</p> | <p><i>Concern over the inaccuracy of information regarding Compass School within consultation documents, including the ESIA.</i></p> |
| | <p>The numbers are incorrect for: the total numbers of pupils now; the total numbers of pupils over the past 5 years; the numbers of pupils on personalised timetables.</p> |
| | <p>There is confusion regarding: how the number were calculated; the figure quoted in the ESIA "100% of pupils in Compass School have special educational needs and/or disabilities (SEND) compared to a national average of 22%"; the statement that the number of pupils reintegrating into mainstream education is lower than other authorities; contradiction between the potential positive impacts section of CY04 referring to trying to reduce the numbers of pupils accessing the Compass School through new preventative outreach programmes compared to other parts of the proposal referring to the Compass School being overfunded and the proposal is to reduce it to meet actual demand. If so, why the need to increase the number of pupils being supported within mainstream schools.</p> |
| | <p>There is no information on: the actual number of children referred; the impact on pupils and staff; the impact on the wider community;</p> |
| | <p><i>The information missing or incorrect is essential to respondents to be able to make an informed response to the consultation which makes the consultation worthless as it hides the controversial nature of the proposal.</i></p> |
| | <p><i>The information missing or incorrect and secrecy of the proposals will limit the numbers of responses to the consultation</i></p> |
| <p>Children get more support from the Compass School than in mainstream school</p> | <p><i>Compass is so valuable for those children, who for very specific reasons cannot cope with the demands and constraints a mainstream curriculum has.</i></p> |
| | <p><i>Get more individual support at Compass School and pupils achieve greater progress and success</i></p> |
| | <p><i>The outreach support and intervention programs run by Compass are invaluable</i></p> |
| | <p><i>The smaller class sizes make it possible for the teachers to really get to know their students and tailor the Curriculum to their specific needs</i></p> |
| | <p><i>It provides a safe place for them to regain their confidence in learning and for many is the last chance of making it as a productive part of society.</i></p> |
| | <p><i>Compass puts pupils back in to the "education" frame of mind.</i></p> |
| | <p><i>Compass School supports their needs allowing them to be productive, for them and other students.</i></p> |
| | <p><i>These pupils need care and attention to meet their needs as these are the most vulnerable pupils in the city.</i></p> |
| <p>High and increasing demand for places in the Compass School</p> | <p><i>The numbers of children attending Compass rises to over 100 every year</i></p> |
| | <p><i>The demand is greater than capacity</i></p> |
| | <p><i>There are ever increasing numbers of SEND pupils and pupils with behavioural difficulties</i></p> |
| | <p><i>Special school/unit places are in high demand and reducing these will only require an increase again in the future</i></p> |
| | <p><i>Generally an influx of pupils will be admitted in the new year due to mainstream schools exhausting their strategies to keep pupils in school for the first term</i></p> |

| | |
|---|---|
| | <p><i>It would mean, according to historical data that Compass could be full as soon as half term in the Autumn term and certainly no later than Christmas.</i></p> <p><i>Compass School is the only Pupil Referral Unit in Southampton and only available to Southampton students</i></p> <p><i>Already a significant waiting time for places</i></p> <p><i>Access to Compass school is made difficult with criteria seemingly changing on a regular basis</i></p> <p><i>Mainstream schools are struggling with the amount of pupils</i></p> <p><i>The number of pupils entering mainstream education with complex needs is increasing at a rate which is not sustainable without there being support from places such as Compass</i></p> <p><i>There are already too many disruptive children in mainstream schools</i></p> <p><i>There are many pupils in mainstream schools at risk of permanent exclusion or in need of intervention packages such as those offered at The Compass</i></p> <p><i>Children are coming into mainstream schools and nurseries with increasingly complex needs and staff are not able to cater for their needs effectively</i></p> |
| Compass school funding should not be reduced | <p><i>The Compass needs to be well funded and cutting could reduce the quality and staff retention</i></p> <p><i>You cannot and must not reduce the valuable resource that Compass School provided</i></p> <p><i>Challenge the government to provide enough money</i></p> <p><i>Special school provision is underfunded, it should be increased not reduced.</i></p> <p><i>Concern that the provision of the service would fail without sufficient funding.</i></p> <p><i>Reduction in funded places will only make the situation worse.</i></p> <p><i>Concern there would not be enough funded places available for all the pupils who require education at Compass School if numbers keep on rising.</i></p> <p><i>Compass school should be given more funding so that early intervention is possible</i></p> <p><i>Reconsider the proposals and fully fund the educational needs of students in the city.</i></p> |
| There will be an impact on mainstream schools | <p><i>Exam results will drop as they will have to include students who would otherwise be at the alternative provision</i></p> <p><i>Attendance figures at mainstreams would drop as inevitably these vulnerable students would not attend a huge mainstream school</i></p> <p><i>The children who struggle in mainstream school will become worse which will have a knock on effect on others</i></p> <p><i>Greater number of schools failing their OFSTED inspections</i></p> <p><i>Creating strain on staff and students within the mainstream system</i></p> |
| More investment in these schools / children now will mean saving costs when children become adults | <p><i>If the pupils fail there then alternative provision costs much more</i></p> <p><i>Invest to save</i></p> <p><i>It will cost the council more in the long run if it is not available as more families will end up needing more intense support and intervention</i></p> <p><i>If you cut budget in special schools you are making it twice as expensive when they leave school</i></p> <p><i>The reduction in early intervention is, and will have life- time, impacts for many of our more vulnerable children</i></p> |

| | |
|--|---|
| | <p><i>Focusing on short term cost savings in this area will lead to future higher costs in policing, healthcare, social care, foster care, courts, youth offending service.</i></p> <p><i>The money saved will need to go straight to the police in order to manage the extra young people causing trouble around the city</i></p> |
| <p>Compass School proposals will have an effect on vulnerable children</p> | <p><i>This would be catastrophic for development of the highest risk individuals and most vulnerable pupils in the city</i></p> <p><i>They need to take the vulnerable pupils from mainstream schools and support them effectively</i></p> <p><i>How are you honestly going to accommodate this city's most challenging and vulnerable young people when you remove the most nurturing, supportive and inclusive school environment the city has to offer?</i></p> <p><i>This will leave some of the most vulnerable and challenging children in the community even more vulnerable than they are now</i></p> <p><i>The COMPASS school provides much needed support for some of our most vulnerable young people who are struggling to access a suitable education in their mainstream setting</i></p> <p><i>All pupils at Compass have extreme challenges, some being behavioural and others having such poor mental health that they are unable to leave their homes</i></p> |
| <p>Proposals will impact current students and what the school can offer</p> | <p><i>This proposal will affect all the young people at Compass who receive excellent care and attention</i></p> <p><i>There will be an adverse impact upon pupils emotional well being</i></p> <p><i>Compass is the only PRU in Southampton and is much needed for many students who for whatever reason are unable to access mainstream education</i></p> <p><i>Reducing funding at the compass school would leave a lot of students without the specialist provision they need</i></p> <p><i>Concern over what would happen and where they would go if a pupil no longer has a place there.</i></p> <p><i>The impact on pupils and the community and reduced levels of service due to teacher reductions is significantly detrimental</i></p> <p><i>This is the best place for them to attend</i></p> <p><i>Reducing the number of funded places would impact on what Compass school can offer</i></p> |
| <p>Pupils should not be made to be full-time</p> | <p><i>While fulltime attendance is always the aim, a more important and immediate aim is to tailor the school's educational offer to the carefully assessed needs of each individual pupil. If the result of this policy which is driven by pupil needs does not create a result that is in line with a policy driven by statistical needs, then so be it.</i></p> <p><i>The individual timetables are tailored around kids who cannot cope with full-time education, that's why they are not there.</i></p> <p><i>You mention part-time timetables as a reason for reducing funding. This is a recognised strategy to help disengaged pupils to re-engage with education and would be part of a learning plan to support a student. They cannot cope with a full day in school and this supports their needs allowing them to be productive in their time here, for them and other students; Pupils on part time timetables would be supported in increasing back up to a full time timetable in line with their needs</i></p> |

| | |
|---|---|
| Compass School provides an excellent service | <i>The Compass School provides vital education and a safe environment for school children in Southampton</i> |
| | <i>This is a strongly performing school which serves the whole city and provides help across the age groups</i> |
| | <i>Compass school provides a safe and nurturing environment, smaller classes, post 16 support and supportive staff.</i> |
| | <i>Compass school has recently been inspected by OFSTED and found to be a good school. All teaching is either good or outstanding</i> |
| Compass School funding should only be reduced if other schools can cope themselves | <i>Only reduce funding if certain that schools have appropriate policies in place to remove disruptive pupils from mainstream schooling.</i> |
| | <i>By reducing the places at Compass you are putting more pressure on already stretched school</i> |
| | <i>It sounds as though a money save could be made with Compass if the funded places aren't being used and other early help provision could help to support children to remain in mainstream schools which could reduce the need for PRU intervention</i> |
| More effort has to be made to fill places in Compass School | <i>Compass needs to 'evolve' and fill its places so that it can meet a diverse range of needs of the children in Southampton</i> |
| | <i>The compass school should be used more, not enough schools use this resource as an intervention</i> |
| | <i>The places at Compass need to be kept, but need to be filled, they have been overfunded for some years and now need to take the vulnerable pupils from mainstream schools and support them effectively</i> |
| This proposal would not save any money / will cost more | <i>If funding is reduced and staff lost, when the rise in pupils happens, very expensive and frequently poorly skilled staff will need to be recruited from supply agencies.</i> |
| | <i>There is no cost saving to be made</i> |
| | <i>Placing pupils outside of the authority instead is very costly</i> |
| | <i>Reducing numbers based on such inaccurate information is short sighted and will end up costing much more money in the long run</i> |
| Pupils may not be able to get a place when they need one | <i>Do not want a situation where there are not enough places at Compass School to make sure no pupil is excluded from all forms of education.</i> |
| Compass school needs highly skilled staff | <i>This is the only PRU in the city that requires dedicated and highly trained staff to ensure the young people achieve and are able to transition back to a mainstream school</i> |
| Additional unique comments and suggestions regarding Compass School Proposals | <i>Would like to find out more about the work Southampton City Council is doing to support more pupils to stay or reintegrate to mainstream placements.</i> |
| | <i>Query regarding the funding for pupils attending as part of a three day a week intervention programme. Is Compass School receiving double funding for these pupils (once from the LA and once from mainstream schools that pay for a place there)?</i> |
| | <i>Compass School should look at provision for KS1 pupils and increase the number of KS2 places.</i> |

However, the 3/2 split model is not generally well planned, with a lack of support and advice to implement Compass School strategies within school, nor any of the support of the kind offered by the Springwell team for "virtual" pupils. This up-skilling of classroom staff, and assurance of continuity is surely crucial in ensuring a successful return to mainstream education. Whilst there are many skilled individual staff at the school, I am concerned that the amount of money spent on a placement is not value for money, and the methodology does not enable the majority of pupils to gain the skills that they need to reintegrate successfully.

Compass School should offer more bespoke vocational pathways for older pupils to provide them with motivating and engaging specialist areas of learning

Schools will need extra funding to be able to "be more creative in delivering personalised curricula to pupils". Concern over where this additional funding will come from.

Work with key stakeholders in an open and transparent way so the decisions made are in the best interests of the pupils and the city as a whole

The number of pupils in a Pupil Referral Unit always rises throughout the year. This is a trend in all Pupil Referral Units nationally.

The compass school is well known for its failure to provide an appropriate, safe and specialist education for kids who are supposed to attend the school

There needs to be greater accountability in relation to how the impact of PRU support is measured

If the PRU receives funding for 10 pupils it should be linked in to full time attendance and excessive persistent absence and excessive part time timetables should both result in possible withholding of further funding

Only reduce provision if it is increased should the number of pupils rise

The school could actively recruited to from without the LEA which would bring additional funding in and allow the Council to fund on its own pupil places

Additional funding should be put towards charity organisations that will help these groups

Will have an impact on the staff of Schools

Increasing the unit at Bitterne Park secondary school does nothing to support children in primary school who need additional support & there is no longer funding for teaching assistant support in many primary schools

Year 11 pupils should stay in mainstream education to help them integrate into community

In the information sheets it mentions providers will be encouraged to find alternatives for funding but I am acutely aware that all avenues for funding are investigated to the best of a setting's ability. Since these alternative funding sources already exist how do you propose providers fill this funding gap created by this defunding?

Where are the alternative sources of funding if not to raise charges, not viable when parents have a right to free child care

44. Unique comments and suggestions related to the Early intervention Fund proposals:

| | |
|--|--|
| Early Intervention is important (specifically for the community) | <i>Targeted early intervention should reduce: antisocial behaviour; school absence; families in debt; crime levels etc.</i> |
| | <i>When children are young, parents and carers need all the support they can get.</i> |
| | <i>The city is desperate for more early intervention, not less.</i> |
| Early Intervention cuts will result in parents being unable to work / lack of childcare | <i>Reducing the amount from the Early Intervention Funding will cause many child care places to close, putting a strain on families who are trying their best to work and support themselves.</i> |
| | <i>We need more childcare providers and this funds probably helps them</i> |
| | <i>A huge reduction in Early Intervention funding would have a massive impact on local childcare providers</i> |
| Impact on children's education | <i>A reduction in early intervention funding is likely to impact in the longer term on educational outcomes for young people</i> |
| Additional comments (Early Intervention Fund) | <i>Early years funding is already inadequate, with the average hourly cost of providing childcare at £5+ whilst NEF is significantly lower</i> |
| | <i>Early intervention cuts will mean finding resources from elsewhere</i> |
| | <i>Early intervention cuts will result in failing to meet your objectives</i> |
| | <i>Support the idea to encourage schools to increase the number of early years spaces</i> |
| | <i>If you do want the EWS to continue to trade this has to be made clear to schools but also why not consider the option of trading other professionals such as social workers, family engagement workers, school nurses. This helps promote early intervention and protection</i> |

45. Unique comments and suggestions related to the Sugar Tax – Healthy Pupils Fund Proposals

| | |
|--|---|
| Suggestions on how to use Sugar Tax money | <i>Please can any sugar tax revenue be put into early years as prevention and foundation for lifestyle trends</i> |
| | <i>Additional funding from the sugar tax levy should be directed to those already doing work in this area so it's not just an expensive new scheme replicating good work that is already going on</i> |
| Don't agree with the sugar tax | <i>Disagree with this national policy as the sugar tax is a regressive tax on the cost of living.</i> |

46. The following table highlights the additional unique comments and suggestions related to schools generally.

| | |
|---|---|
| Additional unique comments and suggestions relating to Schools | <i>Need more education of real world issues</i> |
| | <i>Not enough staff in schools</i> |
| | <i>The Academies have not been successful across the city, with their unqualified teachers & poor way of teaching, except for having too many in senior leadership roles who are paid far too much for what they do. Therefore funding cuts should be made in this area</i> |
| | <i>Reconsider the viability of running nurseries at Startpoint Northam and Sholing if the third sector market can pickup</i> |
| | <i>Children are required to attend schools for many years and shouldn't be institutionalised at such an early and important time in their lives</i> |

Children and Young People get a good start in life: Social Care and Early Help

47. Respondents were asked to what extent they agreed or disagreed with the individual proposals for Social Care and Early Help. Figure 7 shows the results of these questions.

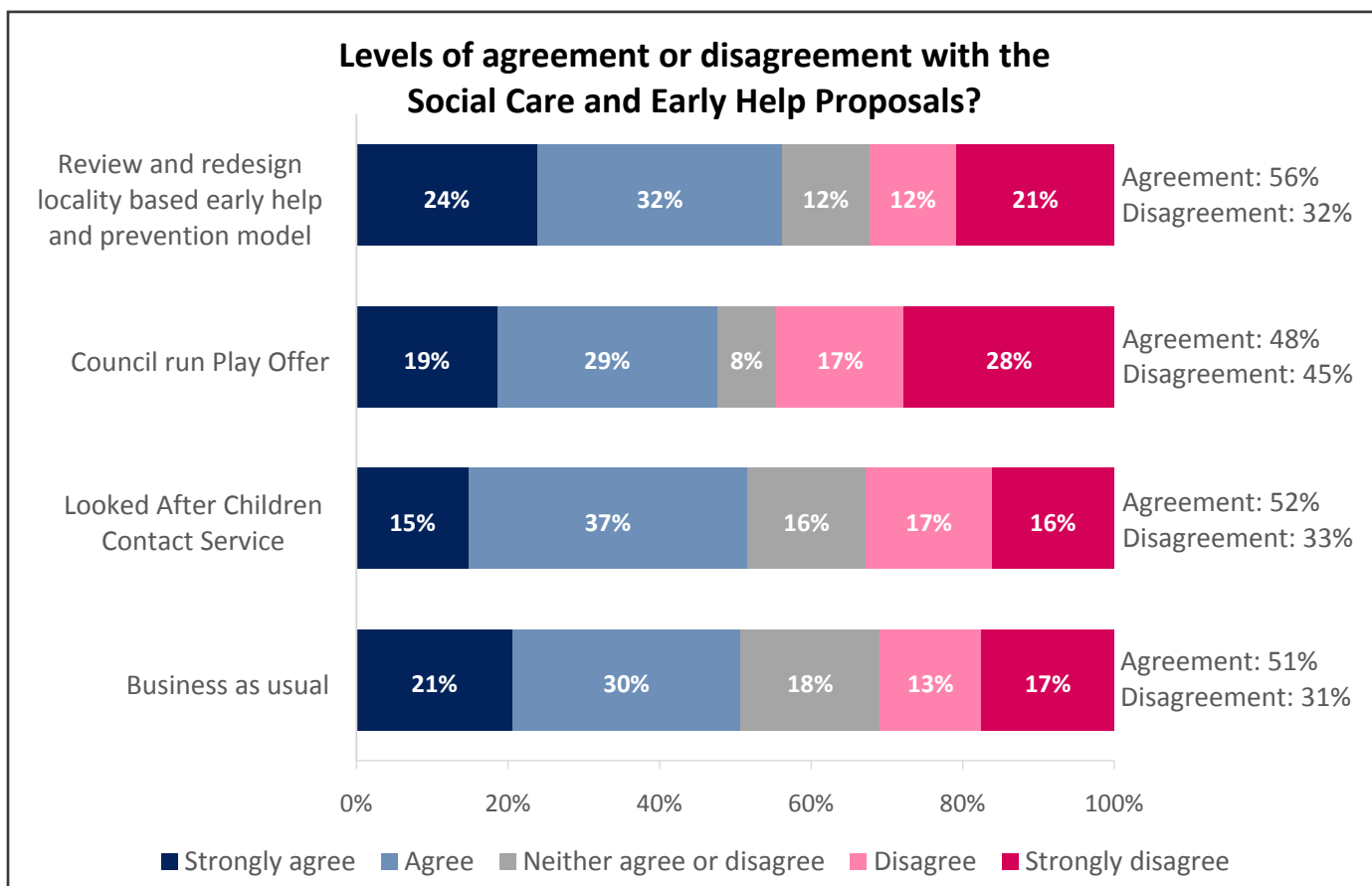


Figure 7

48. When asked about the proposal to review and redesign the locality based early help and prevention model, a total of 56% of respondents expressed agreement with the proposal. Of this, 24% of respondents strongly agreed and 32% agreed. There were 12% of respondents that neither agreed nor disagreed with the proposal. The remaining 32% of respondents expressed disagreement with the proposals (12% disagreed, 21% strongly disagreed).

49. A total of 48% of respondents either agreed or strongly agreed with the proposal for the Council run Play Offer (19% strongly agreed, 29% agreed). A further 8% of respondents neither agreed nor disagreed with the proposal. Overall, 45% of respondents expressed disagreement with the proposal, of which 17% disagreed and 28% strongly disagreed. This was the highest level of disagreement expressed within the Social Care and Early Help proposals.

50. A total of 52% of respondents either agreed (37%) or strongly agreed (15%) with the proposal for the Looked After Children Contact Service. 16% of respondents neither agreed nor disagreed with the proposal and the remaining 33% of respondents expressed disagreement with the proposal (17% disagreed, 16% strongly disagreed).

51. Respondents were also asked about Business as usual proposals for Social Care and Early Help. These proposals included: reducing staffing vacancies, reviewing structures and roles; and making sure we are working as efficiently as possible. Overall, 51% of respondents expressed agreement with the proposals and 31% expressed

disagreement. Of this 21% strongly agreed, 30% agreed, 13% disagreed and 17% strongly disagreed. The remaining 18% of respondents neither agreed nor disagreed.

52. Respondents were then asked if the Social Care and Early Help proposals were implemented, what impact they felt this may have on them, their family or community. Figure 8 shows that 26% of respondents felt that the implementation of the Social Care and Early Help proposals would have a positive impact. Of this 4% felt the impact would be very positive, 11% fairly positive, and 11% slightly positive. In comparison, 50% of respondents felt that the impact of the proposals would be negative. 8% of respondents felt the impact would be slightly negative, 15% fairly negative and 27% very negative. The remaining respondents felt that there would be no impact at all (21%) or they did not know what the impact would be (4%).

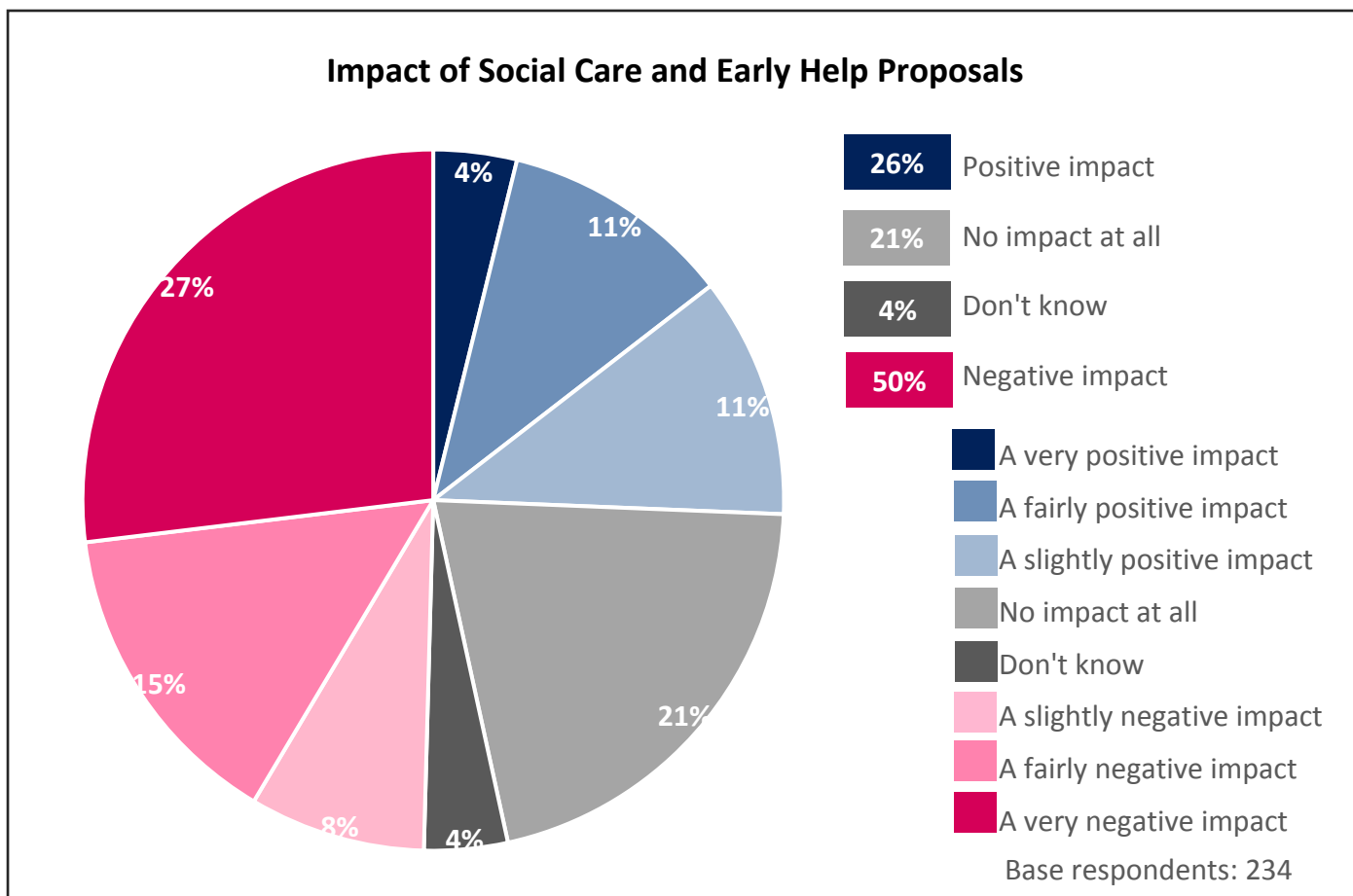


Figure 8

53. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. The following figure (9) shows the themes of comments regarding the social care and early help proposals and the number of respondents that raised this point. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides the unique comments and suggestions associated with these themes of comment.

Social Care and Early Help comment themes

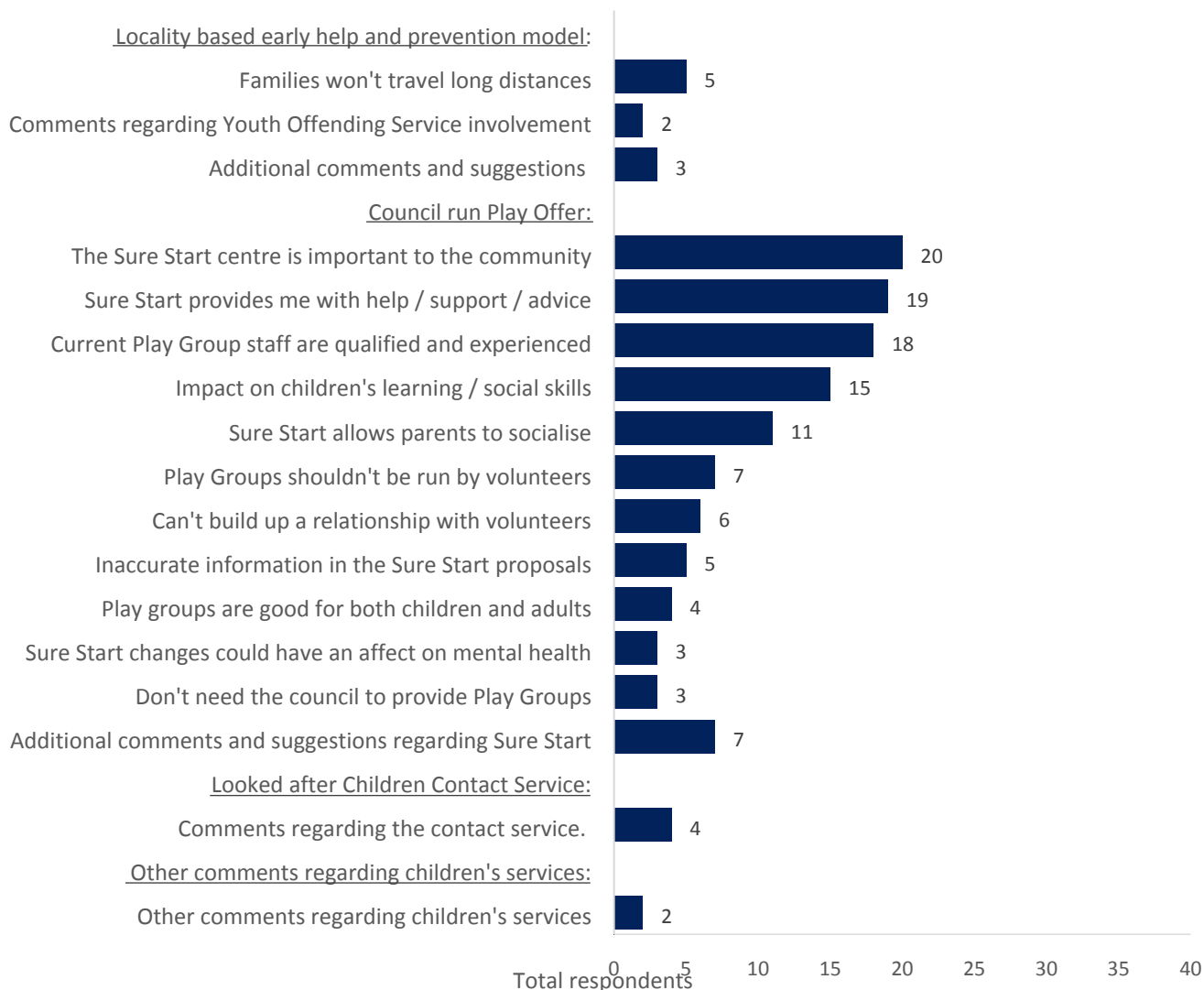


Figure 9

54. Unique comments and suggestions related to the review and redesign of the locality based early help and prevention model:

| | |
|---|--|
| Families won't use early intervention if they are asked to travel long distances | <i>Health services are not delivered with family's needs in mind and expect parents to come to them</i> |
| | <i>Many of those who use the Early Help have more than one child and struggle to get their children on public transport (in particular those with disabilities)</i> |
| | <i>Many families simply wouldn't have the bus fair and then you are effectively blocking those who are the poorest from services</i> |
| | <i>Asking vulnerable families to travel to access support, in my experience support they often do not wish to engage with in the first place, is also highly likely to fail our young people</i> |
| | <i>Concerns that people will have to travel and facilities will not be available</i> |
| Comments regarding Youth Offending Service involvement | <i>Youth Offending Service has had resources cut</i> |
| | <i>The Youth Offending Service needs to be aligned more closely with services such as the MET Hub and have capacity to work cross locality</i> |

| | |
|---|---|
| | <p><i>Portsmouth CC tried to align the YOT there with locality teams 2 years ago but this failed and as a consequence they have reverted back to a standalone team</i></p> <p><i>Could have a negative impact on YOS which has to meet national standards</i></p> |
| <p>Additional unique comments and suggestions regarding the locality based early help and prevention model</p> | <p><i>There is no evidence base of success that supports further integration</i></p> <p><i>Families Matter approach should be included in the proposal</i></p> <p><i>The issue for LAC are legacy issues - high cost cases that early help cannot impact and never will, but where costs endure until a child is 18 and leaves the service</i></p> <p><i>There are commissioner led statements that commissioned services are effective and save SCC money, but there is little evidence to support this</i></p> <p><i>How will the current traded activity be maintained in the absence of infrastructure to support this function?</i></p> <p><i>Is there recognition that traded services rely on officers being in role to trade (supply and demand) – this is incongruent with the expected reductions in services or a proposed move to place staff in localities, which limits the reach of staff where city wide schools may have a preference for a named officer or team</i></p> <p><i>The pressures experienced, by managers who do trade, where others do not who do not, also demonstrates a lack of equity</i></p> <p><i>Concern if integrated partners withdrew their support and leave staff scrabbling to make arrangements work</i></p> <p><i>The synergies of the CSE/MET Hub, YOS and EWS with a local offer, that is more specialist are strong – however, their statutory functions in managing compliance and overseeing court ordered activity need to be understood – this is not Early Help. Their relationship with operational Policing also needs to be understood, which is different to the strategic. Demand is high for this.</i></p> <p><i>CAMH's or a GP frequently approve a child's absence for example, at a stroke undermining a high cost case in court we have taken to court due to non-attendance at school. Early Help's role should be to prevent and reduce demand on these services which within the current models has yet to manifest as reality</i></p> <p><i>The increasing poor attendance and increasing first time entrants is a result of the current arrangements as neither service generates the outcomes that require their intervention on a statutory basis, set against recent reductions in youth services that have eliminated a prevention offer</i></p> <p><i>By piloting discrete, but targeted activity in these areas, such as use of Inclusion and Diversion FEW's evidence is emerging of the benefit of an established targeted approach, reducing recourse to complex referral pathways and developing responses that are collaborative with schools and police</i></p> <p><i>Arguably resources within the integrated model need to be moved the other way – upwards and outwards into these approaches to support their activity</i></p> <p><i>Historically extended families who were unable to maintain the care arrangements have drawn on the Early Help Teams who have quickly escalated into safeguarding. The value of a preventative approach, building family peer support, family engagement events and a long and enduring programme of support, alongside Inclusion and Diversion, have been dismissed variously as confusing and difficult to navigate by integrated partners; however those partners to whom the resources are targeted report high levels of confidence and express a preference to access these services directly, rather than the alternatives that can often be eligibility heavy and then struggle to engage families</i></p> <p><i>Cost more</i></p> <p><i>Support proposals</i></p> |

55. Unique comments and suggestions related to the proposals regarding the Council run play offer:

| | |
|---|--|
| The Sure Start centre is important to the community | <i>It is extremely difficult to get parents to work with the local authority on issues such as domestic violence education, parenting classes, nutrition etc. Sure Start centres and their experienced and dedicated staff allow families to be reached who are unlikely to engage with more "traditional" support such as social workers.</i> |
| | <i>Sure Start centres operate a preventative model and therefore help reduce the number of potential looked after LAC children numbers.</i> |
| | <i>Reducing funding to schemes like sure start will have a really negative effect on local communities, lots of people from all types of backgrounds access the groups</i> |
| | <i>Sure Start has saved many lives even at an open access point</i> |
| | <i>We are very often the first people to work with families and have direct contact to be able to help change and help families realise there are problems</i> |
| | <i>Do not take Sure Start Centres away, there have been enough cuts already</i> |
| | <i>The groups support families in areas such as Weston where these groups really help to support parents and their babies/children</i> |
| | <i>I do not agree that a co-op or family led model will give the children what they need on the scheme</i> |
| | <i>Sure start centres are the core heart of many communities; particularly where there is poverty</i> |
| Sure Start provides me with help / support / advice | <i>Sure Start supports and welcomes parents needing support</i> |
| | <i>The council will be sorry in a few years' time when their stats for children in care, people suffering mental health issues, DV cases and children not school ready will all rise if these proposed changes take place</i> |
| | <i>Sure Start help families realise there are problems that can be dealt with early on to stop them escalating to need a higher level of intervention;</i> |
| | <i>I need sure start as it's my go to for support and advice</i> |
| | <i>They help me as a mother as we cannot afford other baby groups and the staff are very helpful whilst at group and also at giving practical advice for at home as well</i> |
| | <i>Sure start has been a vital part of my life since becoming a parent. The play sessions I attended with the support of workers were what kept me going for another day. A sufferer of severe depression I could take my children to sure start and know I would be supported</i> |
| | <i>Use the Sure Start to get sign posted for extra support and help</i> |
| Current Play Group staff are qualified and experienced whereas volunteers aren't | <i>The consultation documents gives no information on how it expects to run an OFSTED rated crèche with no qualified staff.</i> |
| | <i>The council has failed to consider or publish how much recruiting volunteers will cost for training and even DBS checks.</i> |
| | <i>Had experience with parent volunteers and most are not reliable and often have other commitments</i> |
| | <i>The staff are currently training professionals who may have qualifications in the area- to remove them and replace with another "model" is unacceptable and will damage the outcomes for these children</i> |
| | <i>Using volunteers is likely to require more and better management to secure good relationships between staff, clients and volunteers well as securing sustained high quality experiences and outcomes</i> |

| | |
|---|--|
| | <p><i>The staff were always friendly, experienced and approachable and through the trust I built up with them I then grew in confidence to leave both children in the creche provision to attend training and parenting courses</i></p> <p><i>Volunteers are not professionals. Our vulnerable youngsters deserve quality interventions not volunteers</i></p> |
| <p>Removing Sure Start groups will impact on children's learning / social skills</p> | <p><i>This further cut to services may well further impact on 2 year old take-up, which will in turn lead to reduced educational outcomes.</i></p> |
| | <p><i>Socialising children at a young age is greatly important and without groups like Sure Start parents have a greater hurdle to overcome trying to find decent places to take children</i></p> |
| | <p><i>Sure start groups really help children develop socially & academically</i></p> |
| | <p><i>The sure start groups have been very helpful in regards to helping my children grow and develop they have learnt how to play with others and to share</i></p> |
| | <p><i>The play offer is a safe environment for children to learn</i></p> |
| <p>Sure Start allows parents to socialise</p> | <p><i>The sure start centres are a lifeline for some people the only chance they get to get out and meet people</i></p> |
| | <p><i>Many parents find it valuable and are able to socialise their children and themselves meeting other parents and making new friends</i></p> |
| | <p><i>I feel sure start groups help to encourage me to get out of the house and find out about other services within the area. It helps be to build more confidence</i></p> |
| | <p><i>Attending the universal play sessions kept me from feeling isolated and allowed me to meet new people in the local area</i></p> |
| <p>Play Groups shouldn't be run by volunteers</p> | <p><i>In Sure Start – the piolet for the parent programme that was volunteer lead had to be cancelled several times as it couldn't be facilitated due to volunteers pulling out at the last minute. Staff had to deliver this training and step in, taking them away from their duties.</i></p> |
| | <p><i>Some volunteers are vulnerable and will come with their own issues.</i></p> |
| | <p><i>Southampton City Council Volunteer Policy clearly states that you cannot replace paid staff with volunteers and goes against the council's commitment to proper employment for individuals- not workfare.</i></p> |
| | <p><i>This concern is increased when you add in potential confidentiality issues with volunteers and the potential for lack of professional boundaries. Our employees do not have friendships of relationships with parents they work with and this is again subject to potential sanctions- the council cannot put the same restrictions on volunteers.</i></p> |
| | <p><i>Do not believe that volunteers will provide the consistency of service which will result in more sessions cancelled- therefore reducing the faith in the service from parents. This is also evidenced in other areas that use volunteers more regularly such as Arts and Heritage.</i></p> |
| | <p><i>Using volunteers doesn't work, there is no commitment from them, their life situations change so much that they are not sustainable</i></p> |
| | <p><i>I have been to play groups where the group has been led by other parents or volunteers and those groups seem to be very cliquy.</i></p> |
| | <p><i>A lack of volunteers could cause the service to disband</i></p> |
| <p>Can't build up a relationship with volunteers like you can with full time staff</p> | <p><i>Families may not feel as welcome and there could be tension between the families and the volunteers working. I think staff have made a huge effort in the past to keep the sessions professional and approachable for families and replacing staff for volunteers could affect this.</i></p> |

| | |
|--|---|
| | <i>Although professionals play workers are seen as a non threatening face and non judgemental therefore parents are more inclined to open up and admit their struggles</i> |
| The information in the Sure Start groups proposal is inaccurate | <i>The sure start play offer reaches far more than 140 children across the whole city a week. This is not a true statistic to put out to the public</i> |
| | <i>I do not agree each session only meets 15 families the one I attend has 50 plus people come through the door each week</i> |
| Play groups are good for both children and adults | <i>Sure start centres offer viable potential employment opportunities in communities. Many staff came to Sure Start as parents, became volunteers and now are paid employees of Southampton City Council.</i> |
| | <i>Good quality sessions can help model this for parents and really help families bond and support child development</i> |
| | <i>We need these groups to communicate with other parents with similar issues</i> |
| Sure Start changes could have an effect on mental health | <i>The council will be sorry in a few years time when their stats for children in care, people suffering mental health issues</i> |
| | <i>I fear many parents mental health could suffer as more will be forced to stay indoors and will miss out on much needed company from other parents</i> |
| Don't need the council to provide Play Groups | <i>There are lots of free or very very cheap playgroups around the city, we don't need to pay for the council to provide them</i> |
| | <i>Council run Play Offer should more effectively/cost efficiently be run by the voluntary sector</i> |
| | <i>Most of the play offer in the city is run by the community or voluntary organisations, so the proposals make sense</i> |
| Additional unique comments and suggestions regarding Sure Start | <i>This may not be in the physical closing or the complete outsourcing of the service, but by having the service run by volunteers, the council is closing Sure Starts by stealth.</i> |
| | <i>Should be investing more in paid staff to support those families who need a targeted approach.</i> |
| | <i>The likelihood of low level problems then escalating into families suffering with multiple and complex needs will rise which will then in turn put even more pressure on social care and other council services.</i> |
| | <i>Ask for donations / charge for sessions</i> |
| | <i>Conduct research with Southampton University into effectiveness of Sure Start</i> |
| | <i>There are already schools that would take on 'sure start' type activities and lead them.</i> |
| | <i>The service is available after hours and at weekends, so I do not see any evidence that it isn't flexible</i> |
| | <i>Current Sure Start staff have children's interests at heart and are not motivated by money</i> |
| <i>Proposals will result in more children being taken into care</i> | |

56. Unique comments and suggestions related to the proposals for the Looked After Children Contact Service.

| | |
|---|---|
| Unique comments and suggestions regarding the looked after children service. | <i>Looked After Children service needs to be retained</i> |
| | <i>The contact centre need to widen the service they offer or the skills, knowledge and relationship will be lost within the team</i> |

| | |
|--|--|
| | <p><i>At the moment a 7 day a week service is not needed. Foster carers don't want to be bringing children out to contact on Sundays</i></p> |
| | <p><i>The council have cut the contact team in half over the last 5 years yet they still expect the same level of service</i></p> |
| | <p><i>The contact scheme also work very closely with the assessment team and social workers this is also something that would not happen if another organisation took over</i></p> |

57. Additional unique comments and suggestions related to children's services:

| | |
|---|--|
| <p>Other unique comments and suggestions regarding children's services</p> | <p><i>The Avenue Centre is saving the Council a considerable amount of money. For the small amount of £23,000, and an ongoing contract, the Council could continue to save money, and still protect vulnerable children and adults. The Avenue Centre would be helping the young adults live safe, healthy, independent lives, and their children would thrive with their parents in their own homes. Without the Council's funding, The Avenue Centre would have to eventually close, and the burden on the Council, in fulfilling its statutory support for these families, would be considerably increased.</i></p> |
| | <p><i>KPIs for social work have not been right</i></p> |
| | <p><i>Outputs do little to evidence that an intervention made a difference for a family</i></p> |
| | <p><i>Let the changes already delivered like Edge of Care, Safe Families and Family Partnership Team embed as they have yielded positive results</i></p> |

People in Southampton Lead Safe, Healthy, Independent Lives: Adult Social Care and Public Health

58. Respondents were asked to what extent they agreed or disagreed with the individual proposals for Adult Social Care and Public Health. Figure 10 shows the results of these questions.

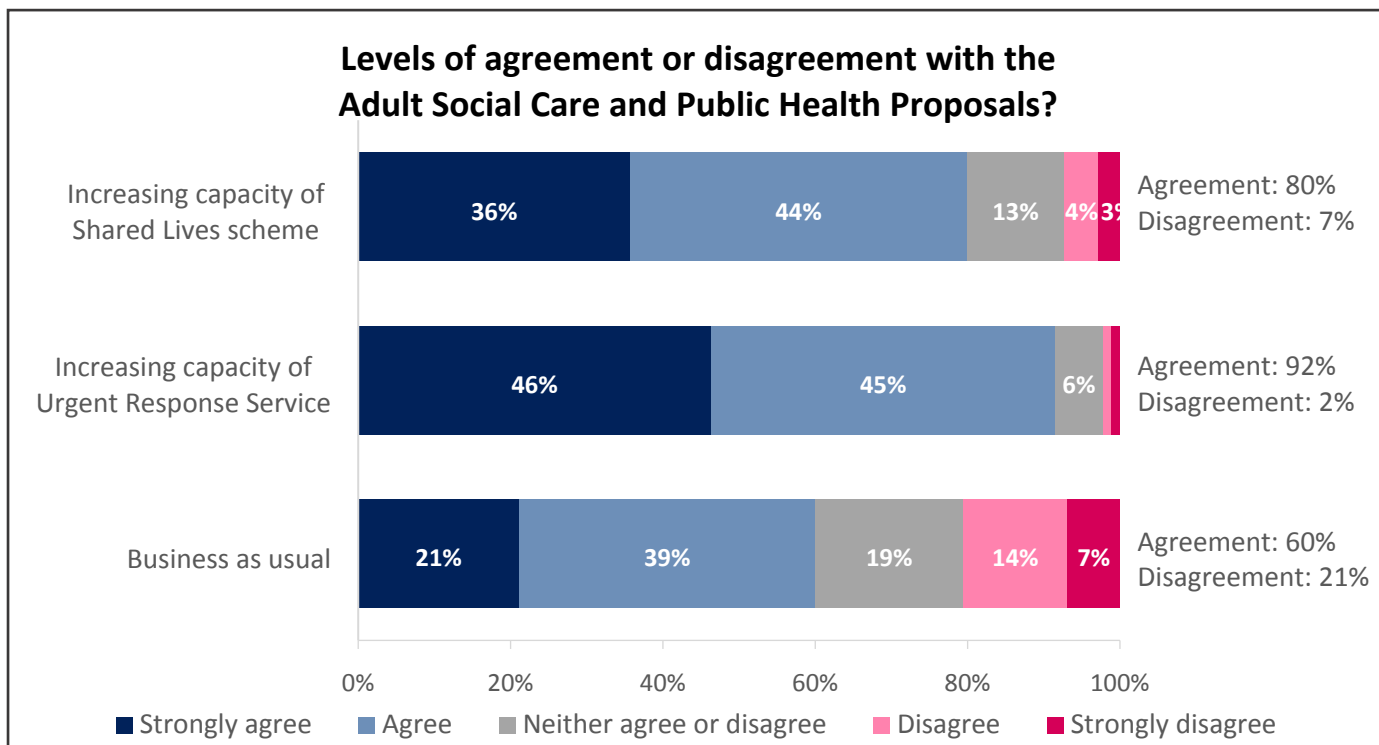


Figure 10

59. When asked about the proposal regarding increasing capacity of the Shared Lives Scheme, 80% of respondents agreed overall with the proposal. Of these respondents, 36% strongly agreed and 44% agreed. There were 13% of respondents that neither agreed nor disagreed with the proposal. The remaining 7% of respondents expressed disagreement (4% disagree, 3% strongly disagree).
60. A total of 92% of respondents agreed or strongly agreed with the proposal to increase capacity of the Urgent Response Service. This was broken down into 46% that strongly agreed and 45% that agreed. This was the highest level of agreement in the Adult Social Care and Public Health proposals. A further 6% of respondents neither agreed nor disagreed and the final 2% of respondents expressed disagreement with the proposal (1% disagree, 1% strongly disagree).
61. Respondents were asked for their feedback on a number of business as usual proposals which included: reducing staffing vacancies, reviewing structures and roles; reducing budgets for things like administration support, equipment, refreshments and parking; ensuring we are working as efficiently and effectively as possible, in line with our policies and procedures; reviewing our contracts with external providers; transferring responsibility for funding some health services to the NHS. Overall, 21% of respondents strongly agreed and 39% agreed with the proposals which totalled 60% of respondents overall. A further 19% of respondents neither agreed nor disagreed. The remaining 21% of respondents expressed disagreement with the proposals (14% disagree, 7% strongly disagree).
62. The next question asked respondents what impact they felt the implementation of the proposals might have on them, their family or community (Figure 11). Overall, 51% of respondents felt that there would be a positive impact if the proposals were implemented. Of this, 8% felt the impact would be very positive, 19% fairly positive,

and 24% slightly positive. Nearly one third of respondents (30%) felt that there would be no impact at all and 3% felt they did not know what the impact might be. A total of 17% of respondents felt there would be a negative impact as a result of the proposals of which 6% felt the impact would be slightly negative, 7% fairly negative and 4% very negative.

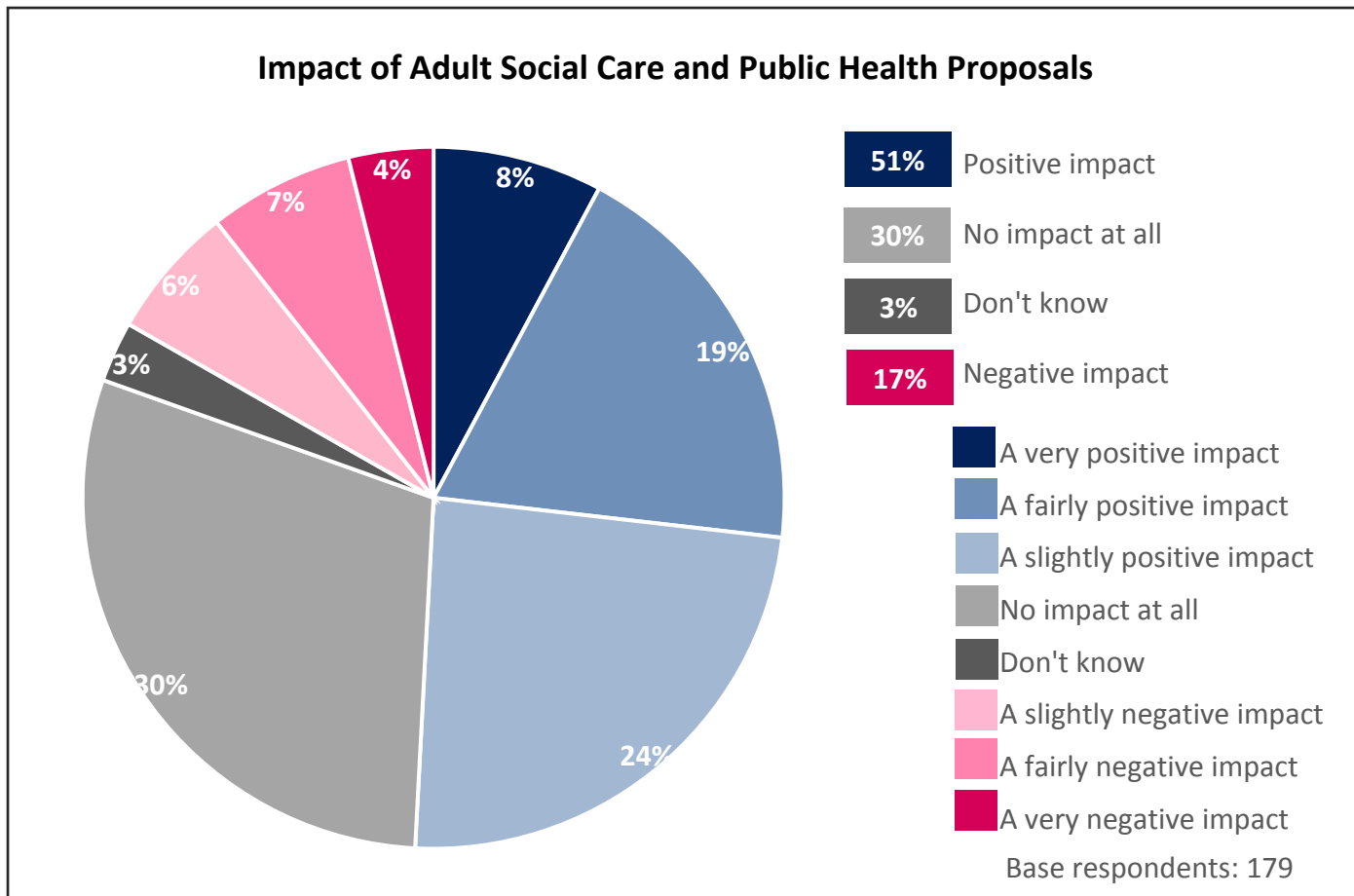


Figure 11

63. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. Figure 12 shows the themes of comments regarding the adult social care and public health proposals and the number of respondents that raised this point. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides the unique comments and suggestions associated with these themes of comment.

Adult Social Care and Public Health comment themes

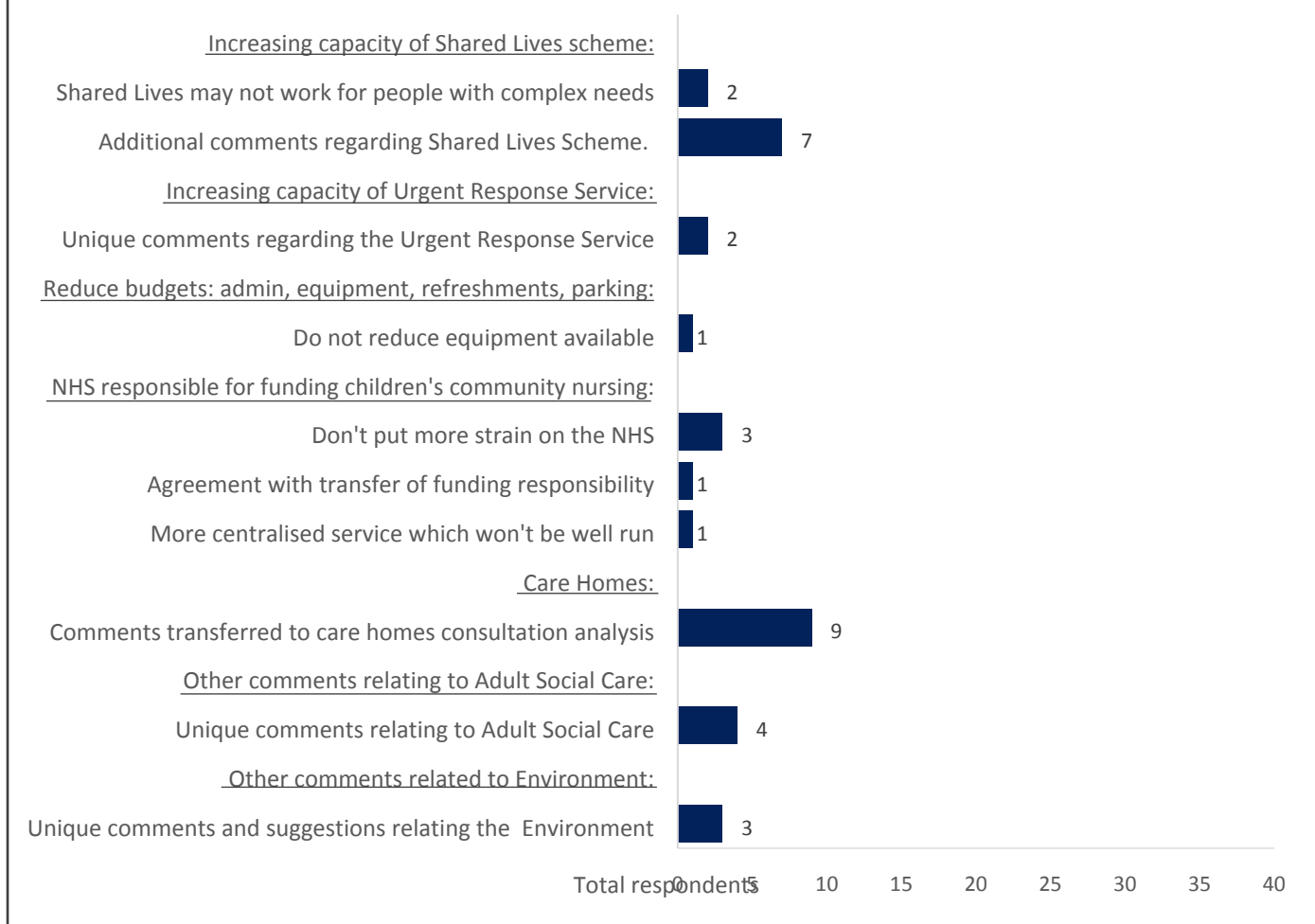


Figure 12

64. Unique comments and suggestions regarding the proposals for increasing the capacity of the Shared Lives Scheme:

| | |
|--|---|
| Shared Lives may not work for people with complex needs | <i>Regarding shared lives, what is the scope for older people with dementia or those with complex needs such as hoisting?</i> |
| | <i>There are many who require long term care in a safe and secure unit, with professional and well trained staff.</i> |
| Additional unique comments and suggestions regarding Shared Lives Scheme. | <i>There are not enough Shared Lives carers</i> |
| | <i>Investing in home care, urgent response, and rehabilitation services is incredibly important long-term as ensuring that people remain healthy and independent for as long as possible is not only what people want, but it is cheaper!</i> |
| | <i>Concern that increasing the capacity of Shared Lives will results in less monitoring of these homes on a regular basis and the individual concerned are vulnerable and could be more able to be exploited.</i> |
| | <i>Carers spend little quality time in people's home, leaving those people isolated and lonely.</i> |
| | <i>The 'Shared Lives' scheme seems an attractive idea but it would need to be extremely well resourced to ensure that all parties accessed proper support and a 'safe' service.</i> |

| | |
|--|--|
| | <i>Concern that this cost-saving measure will result in clients receiving poorer quality care.</i> |
| | <i>Support the proposals</i> |

65. Unique comments and suggestions regarding the proposals for increase the capacity of the Urgent Response Service:

| | |
|--|--|
| Unique comments and suggestions regarding the Urgent Response Service | <i>Fast Response is not effective enough to warrant an increase in funds</i> |
| | <i>Support the proposals</i> |

66. Unique comments and suggestions on transferring responsibility for funding health services such as children's community nursing to the NHS:

| | |
|--|--|
| Don't put more strain on the NHS | <i>The NHS is under horrendous financial strain, so placing further strain on an already burdened public resource will result in a negative impact on the community you supposedly service</i> |
| Moving health services to the NHS puts funding over to a more centralised service which won't be well run | <i>Moving some health services to the NHS just puts the funding over to a more centralised service that is given inordinate amounts of money by national politicians.</i> |

67. Other unique comments and suggestions relating to Adult Social Care generally:

| | |
|--|--|
| Unique comments and suggestions relating to Adult Social Care | <i>Pressure needs to be put on central government to put a vote to public about increase taxes for beneficial funding for social care</i> |
| | <i>I request ICU to check calculations and market feasibility of outsourcing</i> |
| | <i>Greater focus on face to face actions would be a beneficial improvement</i> |
| | <i>Good timely access to Occupational Therapists and other professionals would be very helpful.</i> |
| | <i>There is far too little advice and guidance to enable families to do longer term planning to prevent rather than mitigate risk (e.g. preventing falls, home adjustments for safety and functionality)</i> |

68. Other unique comments and suggestions regarding health and the environment generally:

| | |
|---|---|
| Unique comments and suggestions relating the Environment | <i>The council should be making use of their roof space to fit solar panels which would save the council money and help the environment</i> |
| | <i>Tackle pollution caused by ships</i> |
| | <i>More tree planting is needed in the city</i> |

People in Southampton Lead Safe, Healthy, Independent Lives: Housing

69. Respondents were asked to what extent they agreed or disagreed with the individual proposals for Housing. The results of this are shown within figure 13 below.

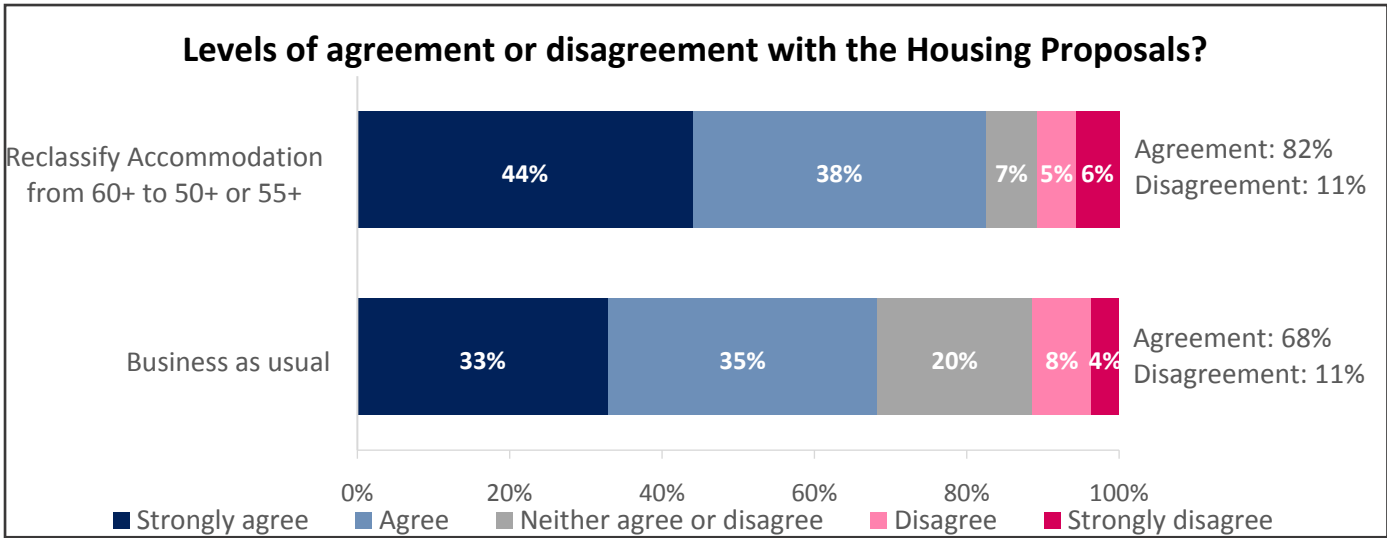


Figure 13

70. When asked what respondents thought about the proposal to reclassify accommodation from 60+ to 50+ or 55+, a total of 82% of respondents expressed agreement. This comprised 44% of respondents that strongly agreed and 38% of respondents that agreed. A further 7% of respondents neither agreed nor disagreed. There were 11% of respondents that expressed disagreement with the proposal (5% disagree, 6% strongly disagree).
71. Respondents were then asked their thoughts on a couple of Business as usual proposals. These included: reviewing internal recharges and making sure we are working as efficiently as possible. Overall, 68% of respondents expressed agreement and 11% of respondents expressed disagreement. Of this 33% strongly agreed, 35% agreed, 8% disagreed and 4% strongly disagreed. The remaining 20% of respondents neither agreed nor disagreed with the proposals.
72. Figure 14 shows what impact respondents thought that the housing proposals may have on them, their family or community if they were implemented. A total of 55% of respondents felt that there would be a positive impact as a result of the proposals. Of this, 14% felt there would be a very positive impact, 19% a fairly positive impact and 22% a slightly positive impact. A further 33% of respondents felt there would be no impact at all and 2% were unsure and did not know what the impact would be. The remaining 10% of respondents felt that the impact would be negative. Of this 4% felt the impact would be slightly negative, 4% fairly negative, and 2% very negative.

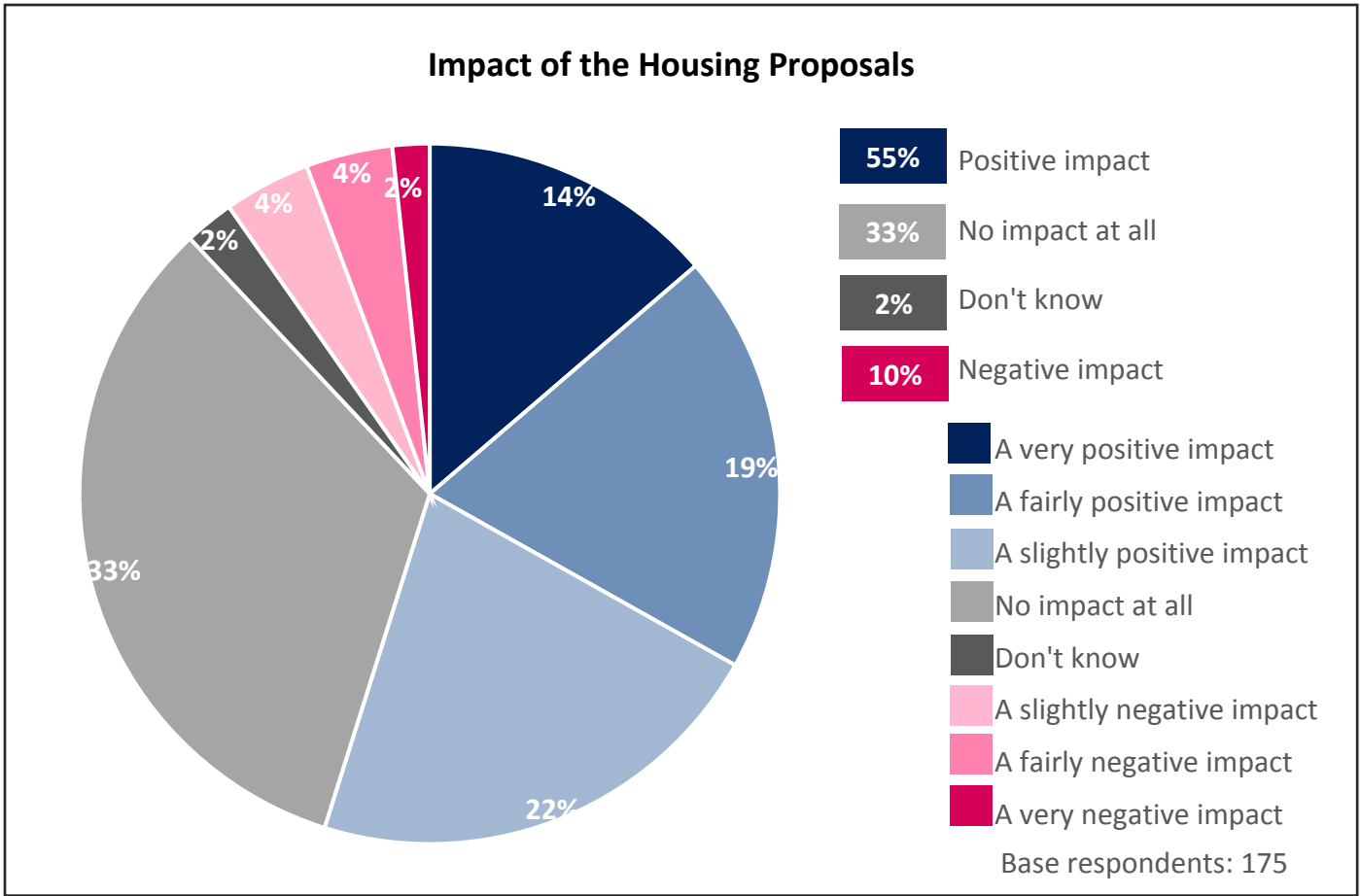


Figure 14

73. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. The following figure (15) shows the themes of comments regarding the housing proposals and the number of respondents that raised this point. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides the unique comments and suggestions associated with these themes of comment.

Housing comment themes

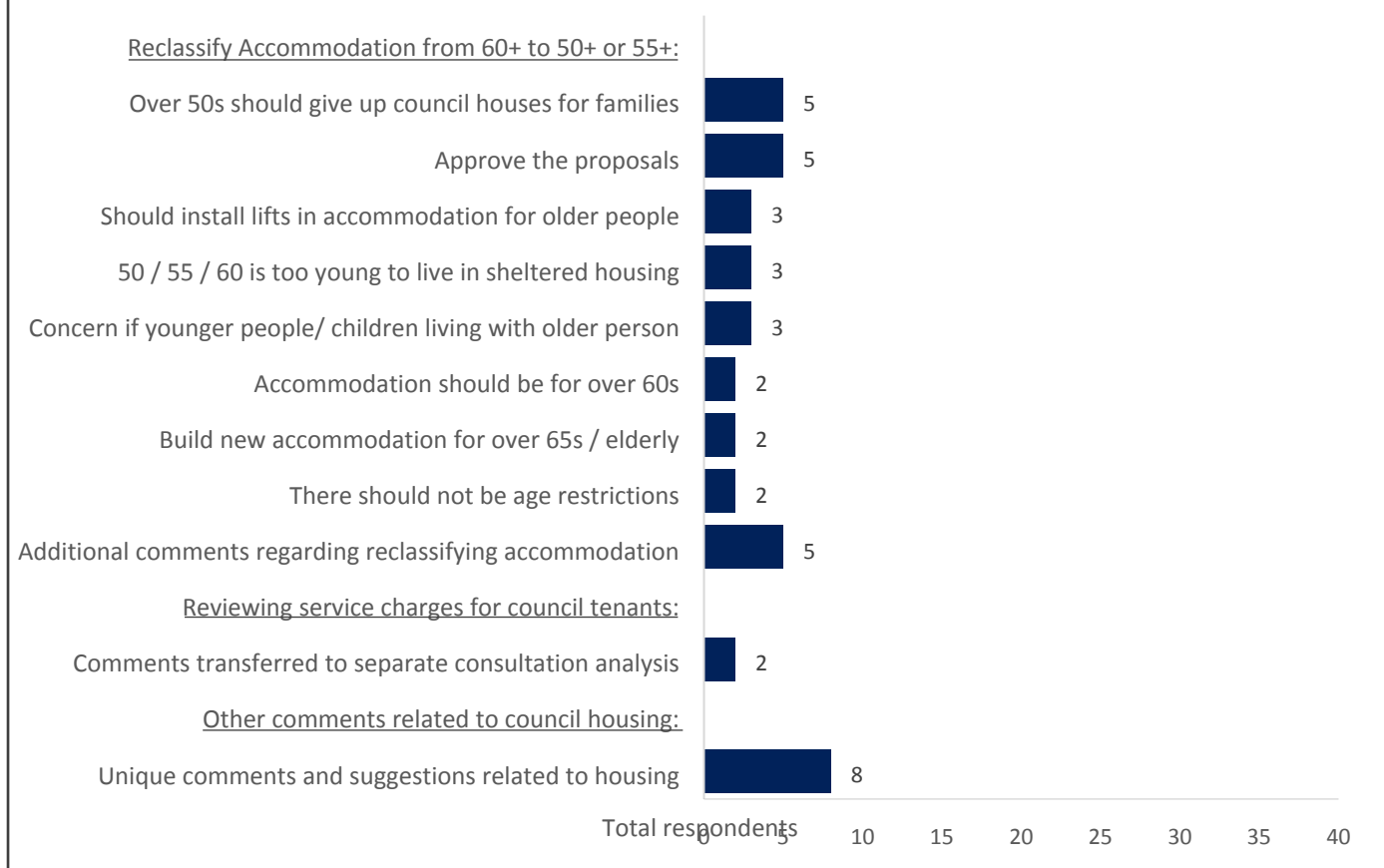


Figure 15

74. Unique comments and suggestions regarding the proposals to reclassify accommodation from 60+ to 50+ or 55+:

| | |
|---|--|
| Over 50s in council property should give up houses for families | <i>Encourage elderly council residents who live in properties with additional bedrooms to downsize to free up houses for families who need them</i> |
| | <i>The young families with an additional bedroom are penalised with the "bedroom tax" so should the elderly</i> |
| | <i>Should be given incentives to give up houses for families</i> |
| Approve the proposals | <i>Reclassification is a sensible idea</i> |
| | <i>I would prefer to live in a city that addressed its housing shortage</i> |
| | <i>If it was changed to 50+ or 55+ as long as there were no children it should be fine</i> |
| | <i>Accommodation should be for over 55s</i> |
| 50 / 55 / 60 is too young to live in sheltered housing | <i>50 year olds lifestyles are very different from say 75 - 80</i> |
| | <i>Unless there is an illness or disability, 50/55/60 year olds do not need this benefit.</i> |
| | <i>These groups should stay as close as possible i.e. 65 years</i> |
| Concern over process if younger people or children also living with older person | <i>Younger people living with elderly relatives would be asked to move out</i> |
| | <i>There may be children living in the elderly accommodation</i> |
| Build new accommodation for over 65s / elderly | <i>If the accommodation above the ground floor is not suitable for over 60s, can it be sold off and more suitable accommodation built for over 65s</i> |

| | |
|---|---|
| | <i>There is a need for appropriate supported housing for our elderly to ensure they do not end stuck in hospital beds</i> |
| Additional unique comments and suggestions regarding reclassifying accommodation | <i>The city needs more flats</i> |
| | <i>Families should be consulted as to plans to close / move elderly accommodation</i> |
| | <i>The proposal may result in sheltered flats being suitable for Right to Buy scheme</i> |
| | <i>Sheltered housing is often more expensive than other council accommodation</i> |
| | <i>Any reduction in restrictions on class of use for homes in council control is a move towards a more liberalised market which is a good thing</i> |
| | <i>Housing should be available to meet peoples changing needs</i> |

75. Additional comments and suggestions related to council housing:

| | |
|---|---|
| Other unique comments and suggestions related to council housing | <i>People shouldn't be able to stay in council property when their circumstances change</i> |
| | <i>Rent for single tenants is expensive</i> |
| | <i>Disabled people should have access to ground floor flats</i> |
| | <i>Recover the money owed in unpaid rent to support social housing needs</i> |
| | <i>Any social importance of selling council owned premises that trade at low rent?</i> |
| | <i>Remove the exemption for additional bedroom from Housing benefit claims for those of pension age</i> |
| | <i>Make sure CCTVs and sprinklers that can work for a whole building are installed</i> |

Strong and Sustainable Economic Growth

76. Respondents were asked to what extent they agreed or disagreed with the individual proposals for strong and sustainable economic growth. The results of this are shown within figure 16 below.

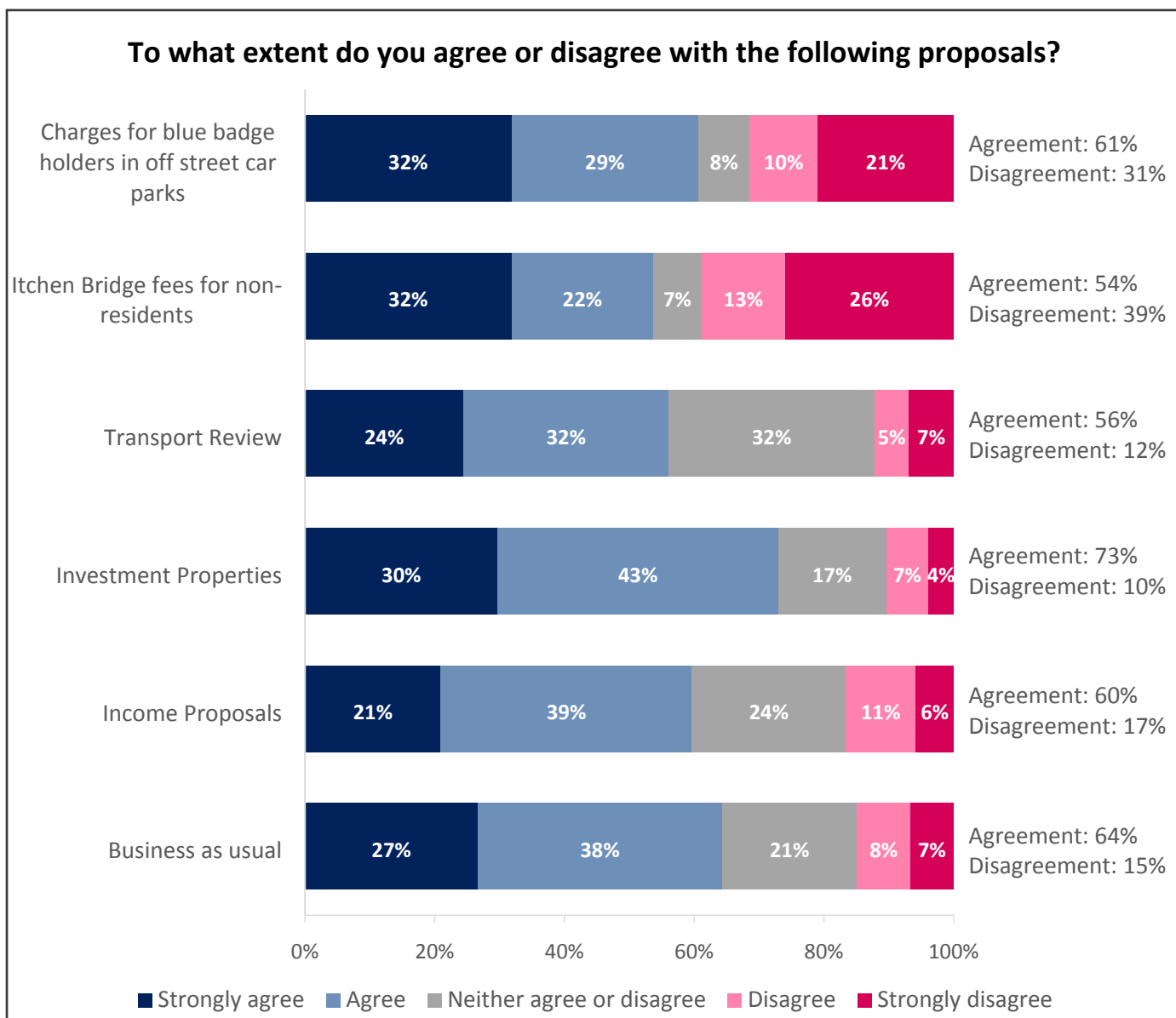


Figure 16

77. Respondents were first asked about the proposed charges for blue badge holders in off street car parks. Overall, 61% of respondents either agreed or strongly agreed with the proposal. Of this, 32% strongly agreed and 29% agreed. There were a further 8% of respondents that neither agreed nor disagreed. The remaining 31% of respondents expressed disagreement with the proposed charges of which 10% disagreed and 21% strongly disagreed.

78. Secondly respondents were asked about Itchen Bridge fees for non-residents. A total of 54% of respondents expressed agreement with the proposal and 39% expressed disagreement with the proposal. Of this, 32% strongly agreed, 22% agreed, 13% disagreed and 26% strongly disagreed. This was the highest level of disagreement of the strong and sustainable economic growth proposals. The remaining 7% of respondents neither agreed nor disagreed with the proposals.

79. Respondents were asked about a proposals to undertake a strategic view of transport the council provides or subsidises across the city. A total of 24% of respondents strongly agreed with the proposal and 32% agreed which totalled 56% of respondents expressing a level of agreement. Nearly a third (32%) of respondents neither agreed nor disagreed with undertaking a transport review. Overall, 12% of respondents expressed disagreement with the proposal of which 5% disagreed and 7% strongly disagreed.
80. When asked about the proposals for investment properties, a total of 73% of respondents either agreed (43%) or strongly agreed (30%) with the proposals. This was the highest level of agreement for all the strong and sustainable economic growth proposals. A further 17% of respondents neither agreed nor disagreed with the proposals and the remaining 10% expressed disagreement (7% disagree, 4% strongly disagree).
81. As part of the strong and sustainable economic growth proposals, a couple of income generating activities were proposed. These included increasing the amount that is charged for pre-planning application advice and investigating opportunities to join up property services with other local authorities. A total 21% of respondents strongly agreed and 39% agreed which represented a total of 60% of respondents that expressed agreement with the proposals. Overall, 17% of respondents expressed disagreement with the proposals of which 11% disagreed and 6% strongly disagreed. The remaining 24% of respondents neither agreed nor disagreed.
82. Lastly respondents were asked about a collection of business as usual proposals for strong and sustainable economic growth. These included: investing in parking enforcement activity to increase compliance, which may increase income generated; reviewing contracts to ensure they are value for money; reviewing the council's offices and service properties to ensure they are being used in the most efficient way and joining up some teams to remove duplication and make sure the council is working as efficiently as possible. Overall, 64% of respondents expressed agreement with these proposals. Of this, 27% strongly agreed and 38% agreed. A further 21% of respondents neither agreed nor disagreed and then the remaining 15% of respondents expressed disagreement (8% disagreed, 7% strongly disagreed).
83. Figure 17 shows the impact that respondents felt that the proposals for strong and sustainable economic growth would have on them, their family or community. A total of 34% of respondents felt that the impact would be positive. Of this, 5% felt the impact would be very positive, 13% fairly positive and 16% slightly positive. A total of 47% of respondents felt that the implementation of the proposals would have an overall negative impact. 15% of respondents felt this impact would be slightly negative, 15% fairly negative and 17% very negative. A further 16% of respondents felt there would be no impact at all and the remaining 3% of respondents did not know what the impact would be.

Impact of the Strong and Sustainable Economic Growth Proposals

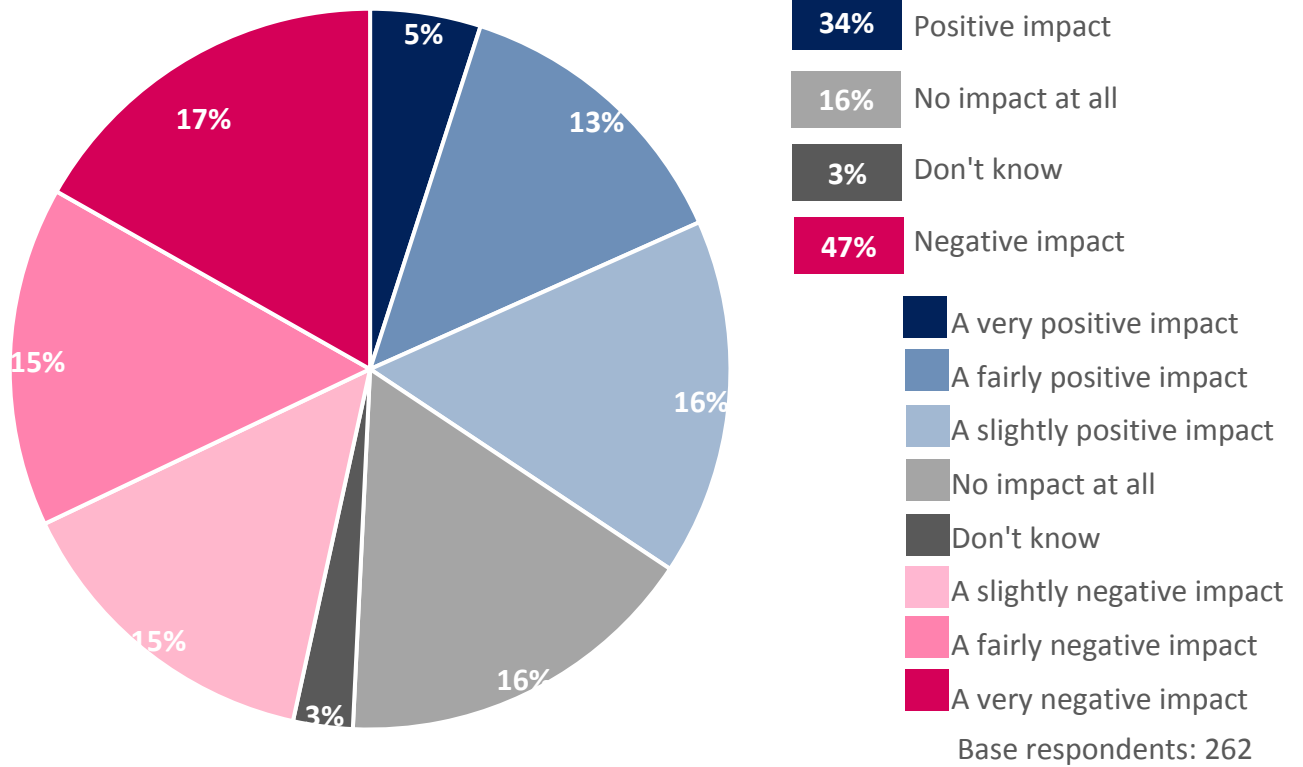
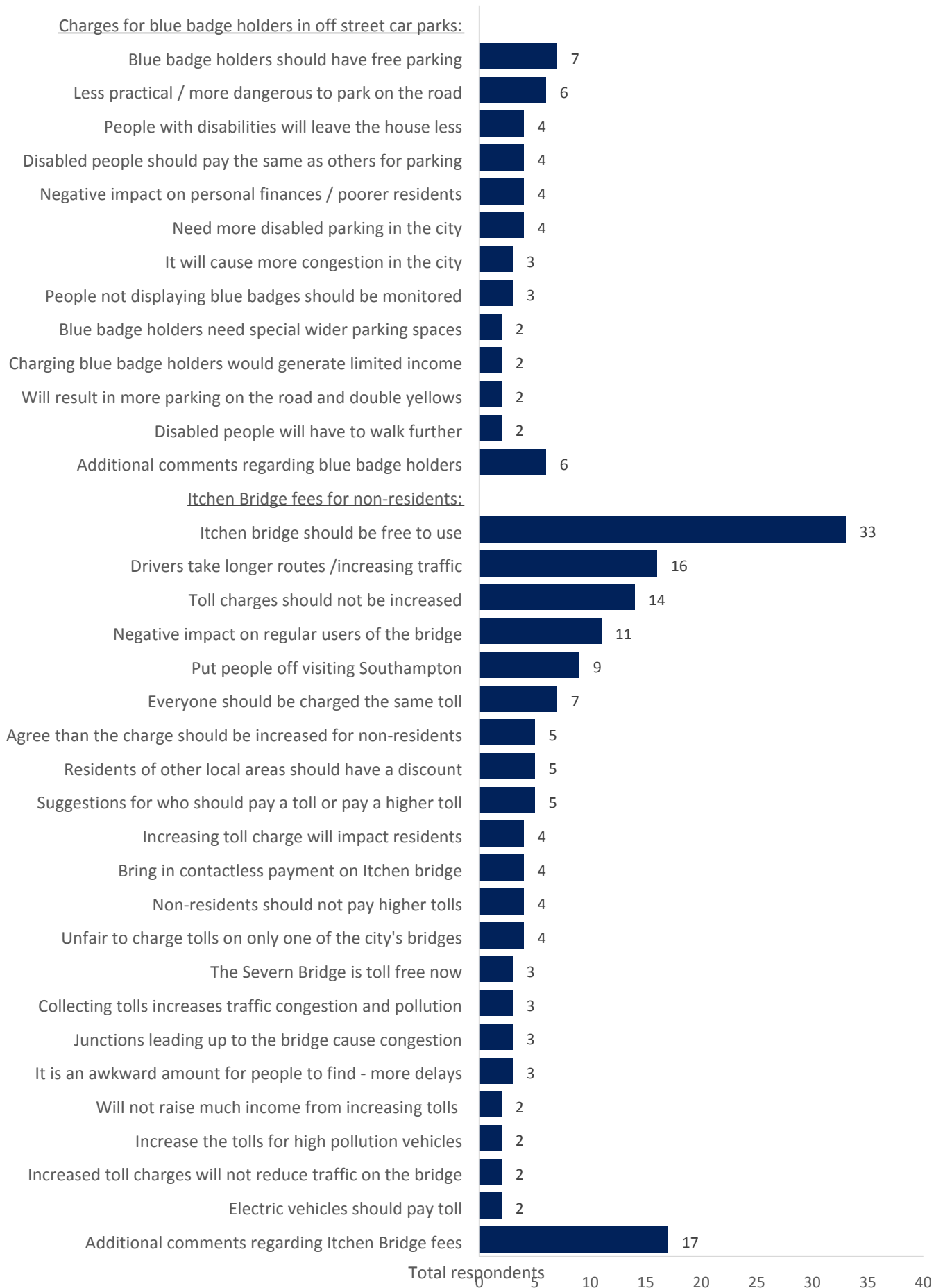


Figure 17

84. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. Figure 18, which is displayed across two pages, shows the themes of comments regarding the strong and sustainable economic growth proposals and the number of respondents that raised this point. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides the unique comments and suggestions associated with these themes of comment.

Strong and sustainable economic growth themes



Strong and sustainable economic growth themes continued.

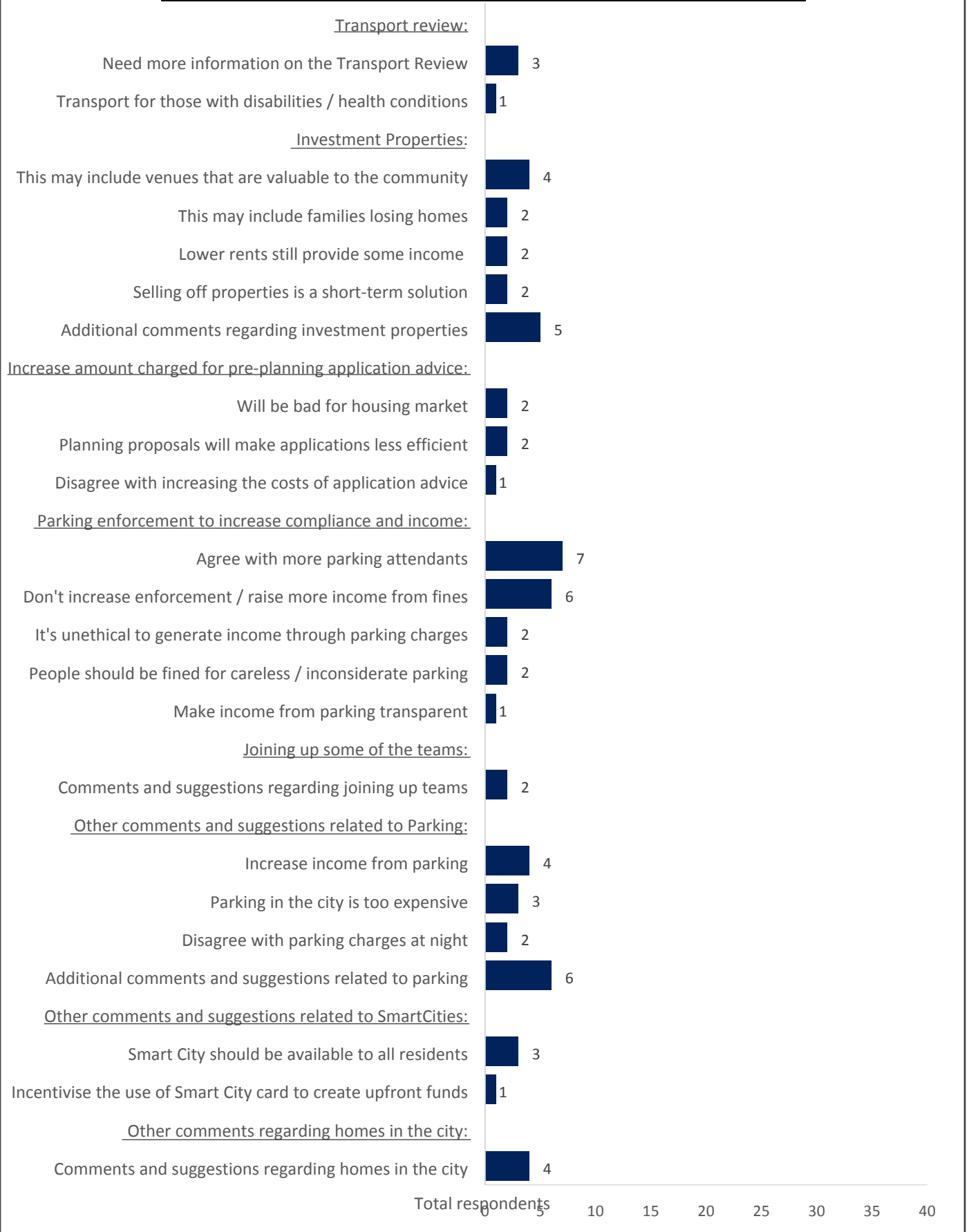


Figure 18

85. Unique comments and suggestions regarding charges for blue badge holders in off street car parks:

| | |
|--|---|
| Blue badge holders should have free parking | <i>Strongly disagree with charging blue badge holders. Don't 'tax' disability</i> |
| | <i>Charges for blue badge holders in off street car parks is abhorrent and the idea of it should not even be considered</i> |
| | <i>Charging disabled people, who already have several complications in their life would be unfair and disgraceful. Providing free parking makes it look like our community cares</i> |
| Less practical / more dangerous for blue badge holder to park on the road | <i>Wary of displacing blue badge vehicles from car parks to highway</i> |
| | <i>Blue badge holders can often not park in other areas as they need to have spaces where they can get a wheelchair out and safely transfer across and off street parking has the space for this</i> |
| People with disabilities will leave the house less | <i>It will increase the risk of isolation as they won't be able to pay parking fees</i> |
| | <i>It will reduce their desire to go out and live normal lives</i> |
| | <i>Will put some off going out to places</i> |
| Disabled people should pay the same as others for parking | <i>I agree with charging for parking for blue badges as these people get additional funding from the government that can be put towards parking even on the roads</i> |
| | <i>I agree disabled people should be able to park closer but should also have to pay parking the same as everyone else</i> |
| Negative impact on personal finances and penalise poorer residents | <i>Removing free parking for those who have a blue badge is a very bad idea, those who are already having reductions to their PIP and other benefits so are on a limited income you are trying to make it harder for them to access community and support by charging</i> |
| | <i>Disabled people also tend to be near the poverty line and an essential tax on using disabled spaces in car parks is overall unfair</i> |
| | <i>Charging blue badge holders will affect their financial status</i> |
| Changing blue badge parking will cause more congestion in the city | <i>You will increase the amount of cars with blue badge holders that will start to park on the road and then this will cause road traffic problems</i> |
| | <i>Blue badge free parking removal we mean more parking on yellow lines causing more congestion</i> |
| People not displaying blue badges should be monitored more closely | <i>Lots of non-badge holders always park in the bays reserved for disabled people</i> |
| | <i>Drivers not displaying a blue badge should be heavily fined and this should be monitored more closely</i> |
| Will result in more parking on the road and double yellows | <i>Will push more to park on street and not necessarily in designated bays, therefore increasing the likelihood of dangerous parking situations.</i> |
| | <i>Charging disabled users in car parks will mean less on road spaces and more people parking in double yellows</i> |
| Disabled people will have to walk further as a result of the changes | <i>I can only walk very short distances and have to move my car around the city to access the various shops</i> |
| Additional unique comments and suggestions regarding charges for blue badge holders | <i>It will cause more challenges and therefore more work for the parking team.</i> |
| | <i>But we don't believe that charging Disabled People (Blue Badge holders) and non-Disabled People the same is "equal".</i> |

| | |
|--|---|
| | <i>To charge Disabled People (Blue Badge holders) the same as non Disabled People is discriminatory because many Blue Badge holders usually take a lot longer to do their shopping and this includes unloading / loading their wheelchairs from their vehicles and therefore end up paying more to park. If Councillors vote in introducing these charges, the city council could face legal action taken against them under the Equality Act 2010.</i> |
| | <i>Blue badge holders taking up spaces for free will reduce the amount of potential income</i> |
| | <i>Number of blue badge holders is set to increase in 2019</i> |
| | <i>It will be too expensive for disabled people to visit the city (so they will go elsewhere)</i> |
| | <i>Disabled parking spaces are mis-used</i> |

86. Unique comments and suggestions regarding Itchen Bridge fees for non-residents:

| | |
|---|---|
| Itchen bridge should be free to use | <i>The itchen bridge was supposed to be free after it had paid for itself</i> |
| | <i>The people of Southampton were told that the fees would be stopped after one year - and that was in 1978</i> |
| | <i>Spend this income on improving the bridge and making it safer, or do not charge at all</i> |
| | <i>I assume maintenance for the Northam Bridge and Cobden Bridge are recovered through the rates. Why cannot the maintenance costs for the Itchen Bridge be treated likewise?</i> |
| | <i>Make the itchen bridge free for residents</i> |
| | <i>Make the itchen bridge free for residents of Woolston</i> |
| | <i>Removing toll charges will reduce pollution as people will not need to drive out of their way to avoid a charge</i> |
| Itchen bridge toll increases traffic / pollution as drivers take longer routes | <i>This will increase traffic using Northam Bridge</i> |
| | <i>Increasing the Itchen Bridge toll charge will encourage people to use already heavily alternative congested routes</i> |
| Toll charges should not be increased | <i>Please do not increase the Itchen bridge charges.</i> |
| | <i>Residents are paying more for the bridge but the bridge and its safety has not been improved since it opened</i> |
| Negative impact on those working in the city and regular users of the bridge | <i>It doesn't seem fair for frequent travellers across the bridge</i> |
| | <i>As a resident of Netley Abbey, I am being penalised for travelling into Southampton to work</i> |
| | <i>Increased fees for regular commuters will cause hardship for many</i> |
| | <i>Do not penalise me for having a business in the city by taxing extra for my commercial van</i> |
| | <i>Increasing Itchen Bridge tolls for residents of Eastleigh borough will cause hardship to many commuters, especially those who work in the public sector</i> |
| Put people off visiting Southampton | <i>Travel elsewhere instead.</i> |
| Everyone should be charged the same toll | <i>Residents of the Hamble peninsula should be charged the same as Southampton City residents to use the bridge</i> |
| | <i>Maybe charging every vehicle that uses the Itchen bridge would be a fairer system</i> |

| | |
|--|--|
| | <i>It should be a fair increase across the board, if any at all.</i> |
| | <i>I think that the toll should be a standard 30p regardless of time of day and obviously a reasonable amount for larger vehicles.</i> |
| Agree than the charge should be increased for non-residents | <i>Increase non resident charges to higher than 20p (50p or £1)</i> |
| | <i>Great idea for non-residents to pay more</i> |
| | <i>Toll idea is good as it will deter people who use the city as a shortcut</i> |
| Additional suggestions for who should pay a toll or pay a higher toll | <i>Increase the charging amounts for lorries instead</i> |
| | <i>Bus companies, coach companies and other vehicles that can use the slip road should have to pay to use the bridge if the residents and others are made to pay</i> |
| | <i>nominal charge for bikes and cyclists would also help</i> |
| | <i>Residents should pay higher tolls than non-residents as they have more options for getting into the city</i> |
| | <i>Blue Badge holders should pay a toll to use the Itchen Bridge</i> |
| Increasing toll charge will impact residents | <i>Increasing the bridge toll will impact thousands of families who have already been paying the toll for several years</i> |
| | <i>Itchen Bridge toll is expensive already, to raise it again is a betrayal of residents</i> |
| Bring in contactless payment on Itchen bridge | <i>The fact you can't pay with contactless is an embarrassment</i> |
| | <i>It would be better to provide contactless payments, that would stop issues with lack of change or coins not being recognised</i> |
| Non-residents should not pay higher tolls | <i>Insulting to the people who travel in to work in the local Southampton economy.</i> |
| | <i>Absolute joke that non-residents pay extra for the bridge.</i> |
| Unfair to charge tolls on only one of the city's bridges | <i>Charging Itchen and Northam bridges would mean that one rate of 50p could be charged</i> |
| | <i>Other bridges in Southampton do not cost to cross</i> |
| Junctions leading up to the bridge cause congestion | <i>Since the change of traffic light sequences and the roundabout removed from central bridge side of the Itchen bridge, traffic is built up and congested every day during rush hour times</i> |
| | <i>If you changed the traffic lights at the western end for roundabouts you would alleviate congestion and encourage business on both sides</i> |
| | <i>Users of the bridge already experience significant delays</i> |
| Will not raise much income from increasing tolls | <i>Costs may outweigh new income</i> |
| Increase the tolls for high pollution vehicles | <i>Charges could be on a sliding scale depending on the emissions of the vehicle</i> |
| | <i>Increasing fees further on the itchen bridge for higher polluting vehicles and introducing a hybrid discount</i> |
| Electric vehicles should pay toll | <i>They increase wear and tear on the bridge</i> |
| Additional unique comments and suggestions regarding Itchen Bridge fees | <i>In announcing the proposed increases it might have helped if the value of the £ in 1977 and its equivalent value 40 years later ie £5.49 was mentioned. The toll in real terms has been reducing.</i> |
| | <i>The council introduced toll payment machines that do not give change and already profit vastly from when people don't have correct change.</i> |
| | <i>Wasted millions on the lights going over the bridge.</i> |
| | <i>Offer a discount rate between midnight and six am for smartcard owners</i> |

| | |
|--|--|
| | <i>If this money was used in the immediate areas surrounding the bridge which would be most users of the bridge then it could be worthwhile.</i> |
| | <i>Many people claim back toll bridge toll so it's counter productive</i> |
| | <i>Put toll prices up to match the cost of public transport</i> |
| | <i>Not enough staff on toll bridge</i> |
| | <i>Repair and maintenance of Itchen bridge should be paid for by the road fund license</i> |
| | <i>The car-park next to the toll booths should be re-opened</i> |
| | <i>Not clear whether income generated from tolls covers maintenance costs</i> |
| | <i>Bridge should be made safer (eg higher barriers to stop people jumping)</i> |
| | <i>Should not increase tolls for commercial vehicles</i> |
| | <i>Tolls should be fair (eg lower fees for regular users)</i> |
| | <i>Number-plate recognition would help reduce delays on the bridge</i> |
| | <i>It is incorrect to say that there have been no toll increases</i> |

87. Unique comments and suggestions regarding the Transport Review:

| | |
|--|--|
| Need more information on the Transport Review before commenting | <i>Greatly interested in the transport review but unable to comment on this further until we are able to view a more detailed proposal</i> |
| | <i>To ask what we think of 'Transport Review' with no detail whatsoever is verging on the ridiculous</i> |

88. Unique comments and suggestions regarding the Investment Properties proposals:

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|---|--|
| This may include venues that are valuable to the community | <i>Southampton is a better place because it isn't all chains and there are still independent places to go</i> |
| | <i>Some of the investment properties which may not generate much income are valuable community spaces</i> |
| | <i>Monty's Community Hub occupies one of these units, in Montague Avenue in Sholing. It provides invaluable support to its community, and is a real focal point for community cohesion</i> |
| This may include families losing homes | <i>This is wrong! You will be putting small businesses out of business. This could lead to entire family's being on the street</i> |
| | <i>The inevitable rent hikes a commercial landlord would make on these units would likely lead to evictions</i> |
| Lower rents still provide some income | <i>This is a short term solution, I would look to repurpose the units/building even at a low income.</i> |
| | <i>Giving them a lower rent means they can afford to stay open some revenue is better than none</i> |
| Selling off properties is a short-term solution | <i>I disagree with the selling off - this is a short term solution</i> |
| | <i>While these properties may make less that is required it is important to not be short-sighted in their disposal as has been the case in previous national governments</i> |
| Additional unique comments and suggestions regarding investment properties | <i>Generating income from buildings is a good idea</i> |
| | <i>The city's heritage should not be sold off</i> |
| | <i>This may include small businesses going out of business</i> |

| | |
|--|--|
| | <i>The Council should look in detail at reasons why property was originally acquired before disposing of it</i> |
| | <i>Perhaps some properties should be offered to community groups under Community Asset Transfer and Community Right to Bid if they meet the relevant criteria.</i> |
| | <i>Keep as many investment properties as possible</i> |

89. Unique comments and suggestions regarding the proposal to increase the amount charged for pre-planning application advice:

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|---|--|
| Increasing fees for pre-planning application advice will be bad for housing market | <i>Do not increase fees for planning permission advice. We have a national housing market problem, so we need to liberalise the market and get things moving again, not increase costs for small developers and extensions</i> |
| | <i>Increasing planning application costs would discourage new developments and housing which will increase the housing shortage and discourage private sector investment in making the city a nice place to live.</i> |
| Planning proposals will make applications less efficient | <i>I disagree with the pre-Planning proposal, as access to this service can improve the quality of applications and reduce contention, hence making the Planning process more efficient</i> |
| | <i>Free up planning rules to promote housing redevelopment and regeneration.</i> |

90. Unique comments and suggestions regarding investing in parking enforcement activity to increase compliance, which may increase income generated:

| | |
|---|---|
| Agree with more parking attendants | <i>I strongly agree with introducing more parking enforcement</i> |
| | <i>Enforce misuse of disabled parking spaces</i> |
| | <i>With the amount of bad parking around the city, there's certainly money to be made in enforcement</i> |
| | <i>Increase the number of traffic wardens in the city ensuring that all areas of the city are covered by wardens</i> |
| Don't increase parking enforcement / seek to raise more income through fines | <i>I'm certain a slight increase of council tax and losing the salaries of parking attendants could achieve net gains with a generally more cheerful public</i> |
| | <i>Generating income by paying more traffic wardens so you can generate more fines seems like a pretty desperate state of affairs</i> |
| | <i>Extra parking officers will be a waste of money</i> |
| | <i>Not needed in City Centre where wardens are always spotted being industrious</i> |
| It's unethical to generate income through parking charges | <i>Be careful about the "reasons" when talking about "income" from car parking charges. The RTRA 1984 is very clear about what a Council can and cannot do in terms of generating a surplus.</i> |
| People should be fined for careless / inconsiderate parking | <i>In the residential areas please consider introducing traffic warden enforcement of cars and vans parking on pavements, in front of schools and generally causing a danger and nuisance to others</i> |
| | <i>We should be looking at people parking their cars that overhang the pavement a fine</i> |

| | |
|---|---|
| Make income from parking transparent | <i>Make any profits on speed traps / meter parking/ and parking tickets easily accessed</i> |
|---|---|

91. Unique comments and suggestions regarding joining up some teams to remove duplication and make sure we are working as efficiently as possible:

| | |
|--|---|
| Comments and suggestions regarding joining up teams | <i>Teams should not be joined up</i> |
| | <i>Joining up teams should have already been done</i> |

92. Additional comments and suggestions related to parking generally:

| | |
|--|--|
| Increase income from parking | <i>Could raise income by re-opening the Toys R Us car park</i> |
| | <i>Introduce electric vehicle parking / charging spaces (for a higher fee)</i> |
| | <i>Charge more for parking</i> |
| | <i>Increase parking charges for owners of houses in multiple occupation / businesses</i> |
| Parking in the city is too expensive | <i>Cheaper parking will bring in more visitors to the city</i> |
| Additional unique comments and suggestions related to parking | <i>More parking should be available in the city centre</i> |
| | <i>Increased on-road parking will cause more pollution as people look for spaces</i> |
| | <i>There is no investment in city centre parking</i> |
| | <i>Offer electric car owners free parking</i> |
| | <i>Money can be saved by limiting parking restrictions</i> |
| | <i>Car users who are exempt from road tax should continue to have free parking</i> |

93. Additional comments and suggestions related to SmartCities generally:

| | |
|--|---|
| Smart City should be available to all residents | <i>Smart cities cards aren't available to all postcodes in Southampton only particular ones which is unfair</i> |
|--|---|

94. Additional comments and suggestions regarding homes in the city generally:

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|---|--|
| Other comments and suggestions regarding homes in the city | <i>Less spend on student housing</i> |
| | <i>Replace council estates with better quality accommodation</i> |
| | <i>Turn the non-profitable shops into homes</i> |
| | <i>This may raise house prices</i> |

Attractive and modern city where people are proud to live and work

95. Respondents were asked to what extent they agreed or disagreed with the individual proposals for an attractive and modern city where people are proud to live and work. The results of this are shown within figure 19 below.

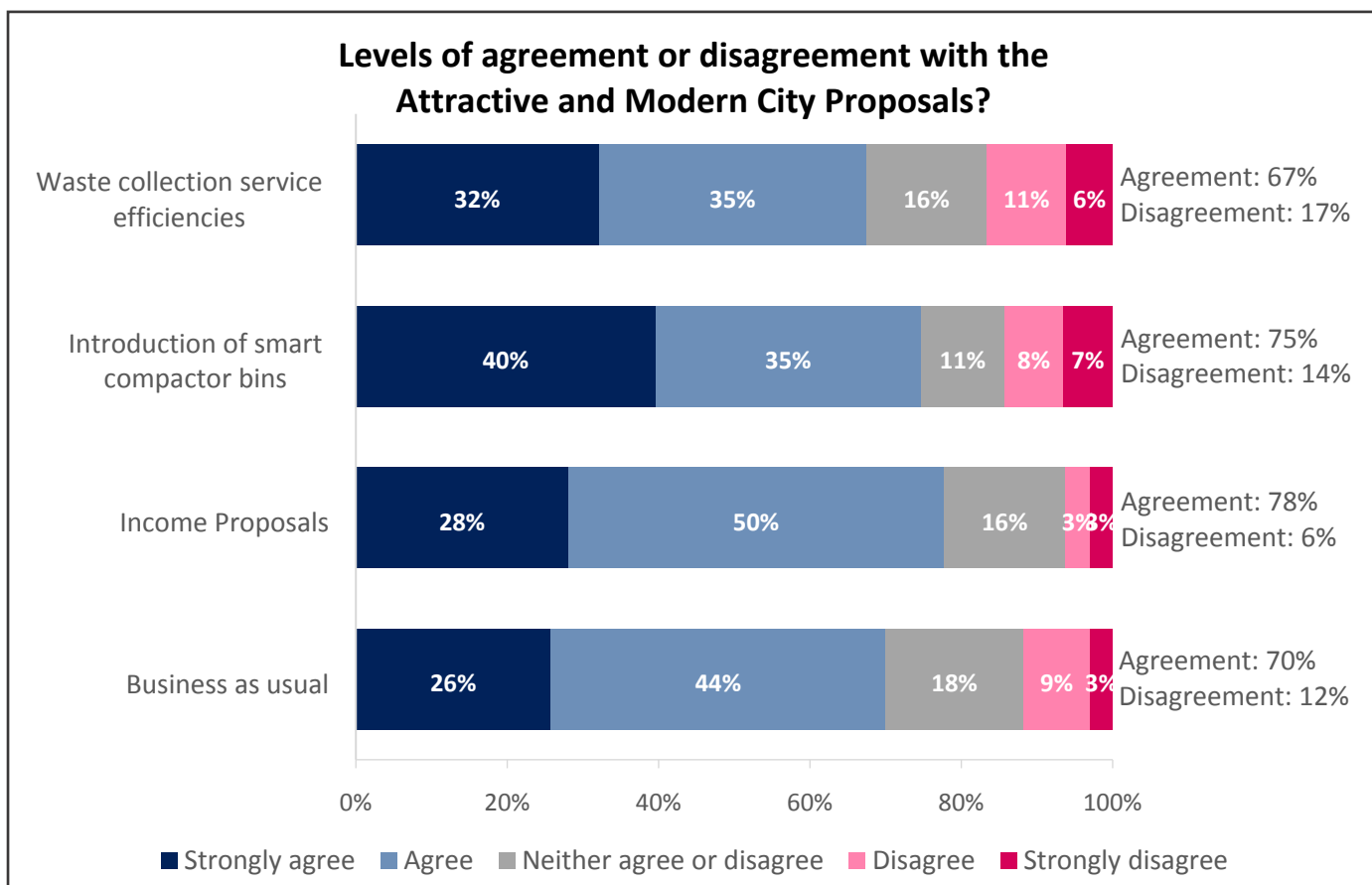


Figure 19

96. Firstly respondents were asked for their thoughts on the proposal for waste collection service efficiencies. A total of 32% of respondents strongly agreed with the proposal and 35% agreed which meant 67% of respondents expressed a level of agreement. 16% of respondents neither agreed nor disagreed with the proposal. The remaining 17% of respondents expressed a level of disagreement with the proposal of which 11% disagreed and 6% strongly disagreed.

97. The second proposal was to introduce smart compactor bins. Three quarters (75%) of respondents either agreed or strongly agreed with this proposal with 35% of respondents selecting agree and 40% selecting strongly agree. A further 11% of respondents selected neither agree or disagree. The remaining 14% of respondents expressed disagreement with the proposals of which 8% disagreed and 7% strongly disagreed.

98. There were three income proposals as part of the attractive and modern city proposals. These were: increasing the number of ceremonies carried out at Westgate Hall and re-opening the Mayor's Parlour in the Civic Centre as a marriage venue; increasing income from regional national trading standards work; and reviewing and increasing fees and charges. Overall, 78% of respondents agreed or strongly agreed with these proposals which was the highest level of agreement in this section. Of this 28% strongly agreed and 50% agreed. There were 6% of respondents that expressed disagreement with the proposals of which 3% disagreed and 3% strongly disagreed. A further 16% of respondents neither agreed nor disagreed with the proposals.

99. Lastly respondents were asked about a number of business as usual proposals for the attractive and modern city proposals. These included: identifying more suitable and cheaper sites for bin storage and heritage collections; further developing Emergency Planning and Business Continuity offer for partners; introducing meadow grass verges on major highways to reduce maintenance costs; and reviewing service standards and internal charges. A total of 70% of respondents either agreed or strongly agreed with the proposals with 26% of respondents strongly agreeing and 44% agreeing. There were 12% of respondents that expressed disagreement with the proposals of which 9% disagreed and 3% strongly disagreed. 18% of respondents neither agreed nor disagreed.

100. Respondents were then asked what the impact of the attractive and modern city proposals would have on them, their family or community. Figure 20 shows that over half (55%) of respondents felt that the impact would be positive. Of this, 9% said the impact would be very positive, 20% fairly positive and 26% slightly positive. Around a quarter of respondents (24%) felt that the impact of the proposals would be negative of which 14% felt the impact would be slightly negative, 5% fairly negative and 5% very negative. Of the remaining 21% of respondents, 16% felt there would be no impact if the proposals were implemented and 5% did not know what the impact would be.

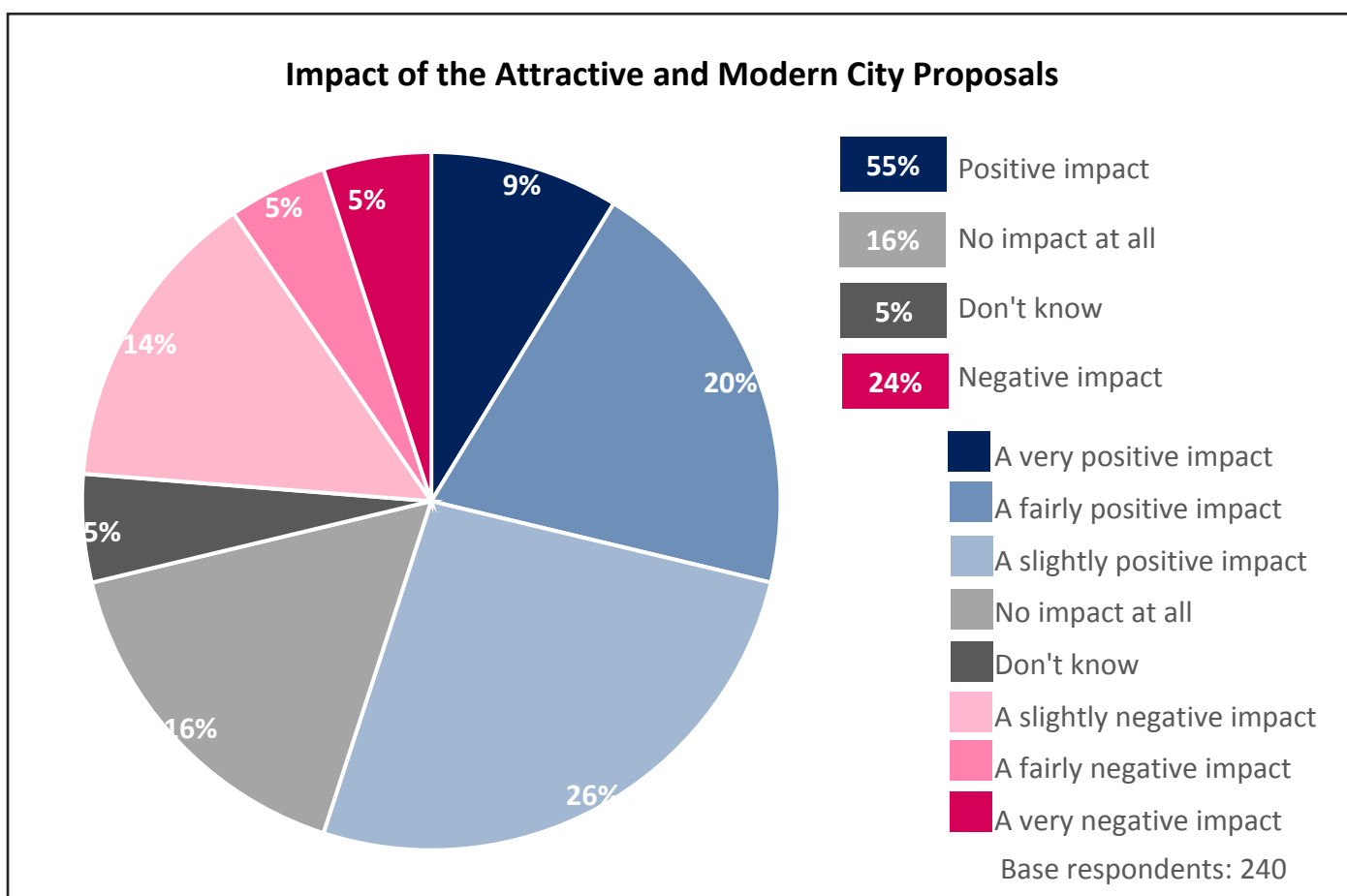
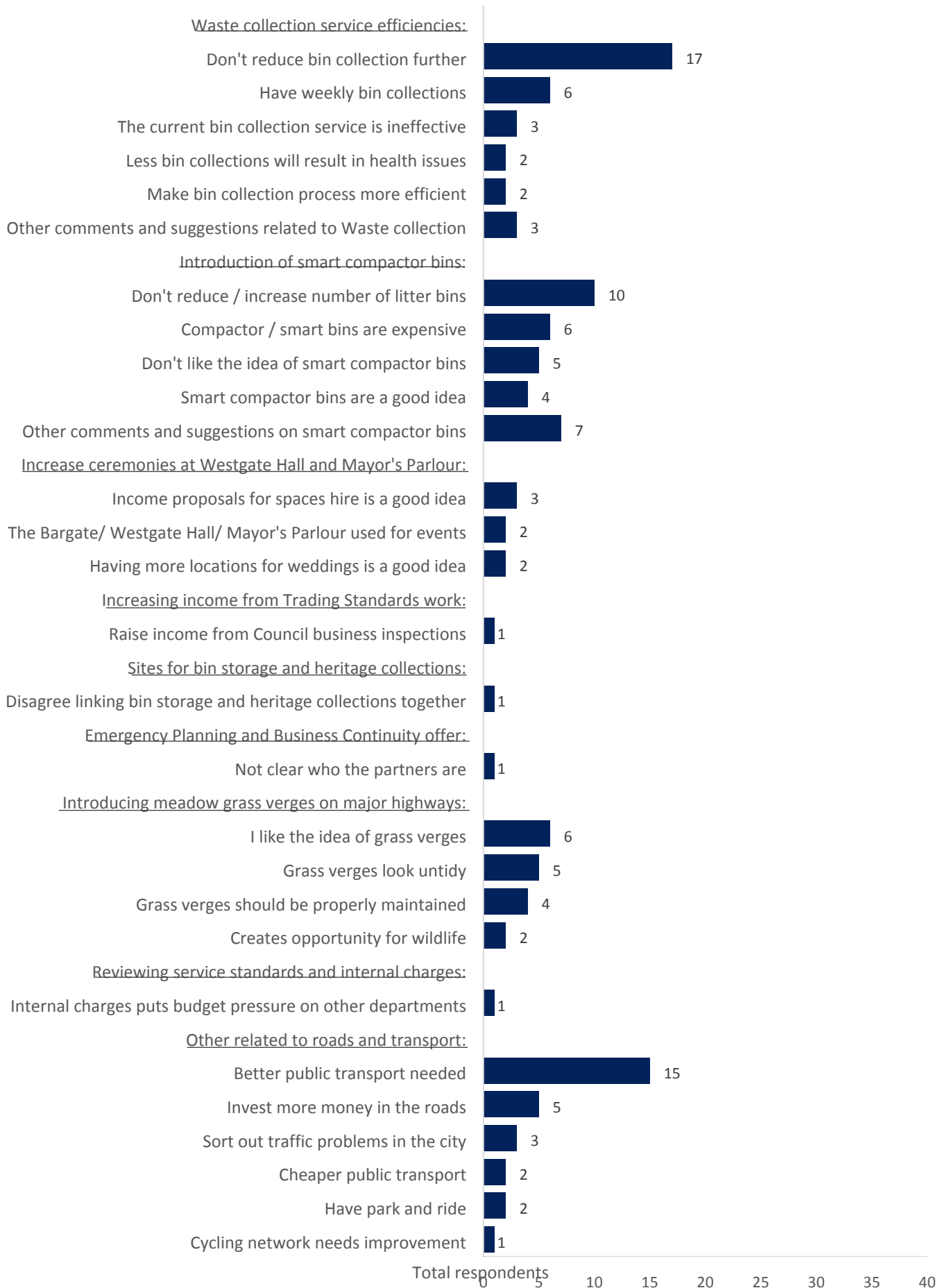


Figure 20

101. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. The following figure (20)) shows the themes of comments regarding the attractive and modern city proposals and the number of respondents that raised this point. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides the unique comments and suggestions associated with these themes of comment.

Attracted and Modern City comment themes



Attracted and Modern City comment themes continued.

Other related to Waste and Recycling:

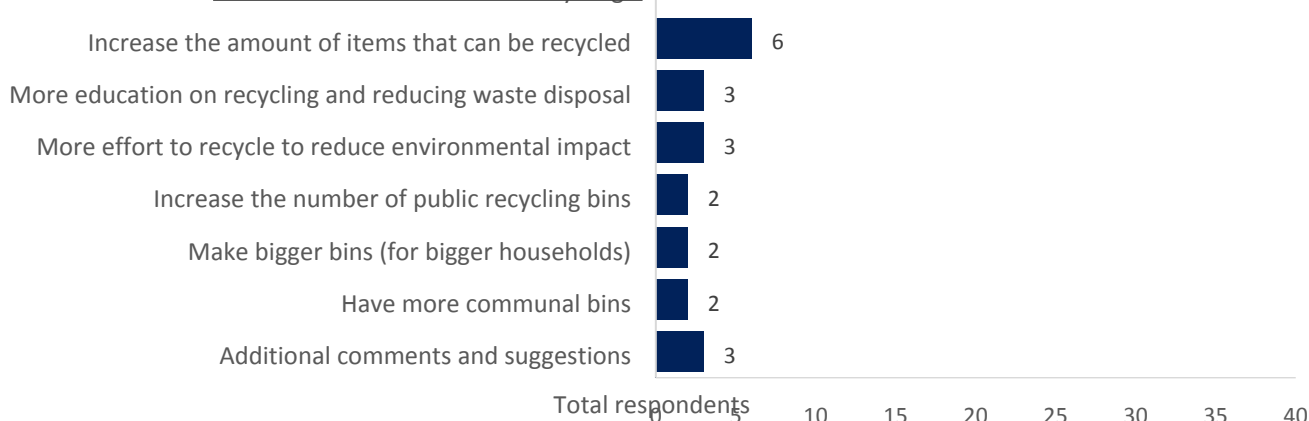


Figure 21

102. Unique comments and suggestions regarding the proposals for waste collection service efficiencies:

| | |
|---|--|
| Don't reduce bin collection further | <i>The waste collection service was revised and stripped back last summer, it can't be stripped back any further</i> |
| | <i>If the bins are not collected as often will they not become disgusting and possibly spread disease</i> |
| | <i>Any reduction in bin collection will increase the risk of fly tipping</i> |
| | <i>Do not reduce any litter cleaning or bin provisions in total</i> |
| | <i>I feel I've struggled since it changed from every week to only now every other week on the general waste bins, so I'd struggle if it was any longer</i> |
| | <i>Improving refuse collection should be a priority</i> |
| | <i>Address the lack of control over unemptied waste bins</i> |
| Have weekly bin collections | <i>Currently fortnight collections is a struggle seeing as you take hardly any plastic in the recycling</i> |
| | <i>Bin collections should be weekly</i> |
| | <i>Every two weeks in the summer already causes increase risk to public health with maggots etc</i> |
| | <i>Go back to weekly and blue bin every other week</i> |
| The current bin collection service is ineffective | <i>Reduced bin pick-ups have increased the general dirtiness in the city.</i> |
| | <i>When collections happen sometimes they do not do a proper job, especially in the areas in the city centre</i> |
| | <i>Waste collection services are currently terrible</i> |
| Make bin collection process more efficient | <i>At times there are 3 lorries in the same street</i> |
| | <i>I have seen on a number of occasions the 3 persons go and empty bins, this isn't cost effective, too much waste.</i> |
| Additional unique comments and suggestions related to Waste collection | <i>Review the amount of missed bin collections</i> |
| | <i>Empty street litter bins more frequently</i> |
| | <i>Have monthly pick ups for bins</i> |

103. Unique comments and suggestions related to the introduction of smart compactor bins:

| | |
|--|---|
| Don't reduce the number of litter bins / increase number of litter bins | <i>Many areas of the city are overflowing with rubbish</i> |
| | <i>Please don't take away litter bins as this would make littering worse</i> |
| | <i>More litter bins not less. Get shops to sponsor them</i> |
| | <i>I would prefer to see reduction in street waste by encouraging citizens to bring their waste home with them and live more responsible lives</i> |
| Compactor / smart bins are expensive | <i>The large upfront costs of waste compactors compared to the much more long term impact of a campaign to reduce litter and increase recycling is my reason for disagreeing with this proposal</i> |
| | <i>The compactor bin thing sounds like it'd just cost more money than it would actually save</i> |
| | <i>I am cautious regarding long term ownership costs</i> |
| Don't like the idea of smart compactor bins | <i>I disagree with the introduction of smart compactor bins</i> |
| | <i>What benefit are the smart bins?</i> |
| Smart compactor bins are a good idea | <i>As an engineer, compact bins appeal to me</i> |
| | <i>The smart compactor bins appear to be a brilliant idea reducing monetary outlay</i> |
| Additional unique comments and suggestions regarding smart compactor bins | <i>Compactor bins will be misused / vandalised</i> |
| | <i>Have a phone number to call when communal bin needs emptying</i> |
| | <i>Communal recycling bins will be misused</i> |
| | <i>Design of a bin that will cope with non-compressible materials may be challenge to both designers and miscreants</i> |
| | <i>I agree there are too many bins, creating an eyesore and often abandoned by the collectors and not returned to the appropriate position after emptying</i> |
| | <i>Compactor bins may not be safe</i> |
| | <i>The private sector should be used to deliver innovative solutions such as compactor bins</i> |
| | <i>Mayfield Park has overflowing bins and should be part of the compactor bin trial</i> |

104. Unique comments and suggestions related to the proposal to increase the number of ceremonies carried out at Westgate Hall and re-opening the Mayor's Parlour in the Civic Centre as a marriage venue:

| | |
|---|---|
| The Bargate / Westgate Hall / Mayor's Parlour could be used for events | <i>Definitely open up areas for hire</i> |
| | <i>Income proposals are a good idea</i> |
| | <i>Seems like a good idea to use existing facilities like the Mayor's Parlour and Westgate to generate income</i> |
| Having more locations for weddings is a good idea | <i>The increase in the number of ceremonies carried out at Westgate Hall and re-opening the Mayor's Parlour in the Civic Centre as a marriage venue is another excellent proposal</i> |
| | <i>Having more locations for weddings etc is a good idea especially as we are so close to the water</i> |

105. Unique comments and suggestions related to introducing meadow grass verges on major highways to reduce maintenance costs:

| | |
|---|---|
| Like the idea of grass verges | <i>Introducing meadow grass verges on major highways to reduce maintenance costs be more environmentally sound</i> |
| | <i>I love the wild grass verges</i> |
| | <i>Meadow grass verges are an amazing idea</i> |
| Grass verges look untidy | <i>The grass verges on major highways already look a mess when not cut</i> |
| | <i>The meadow verges will be left and make entrances to city look run down and less appealing</i> |
| | <i>In reality major roads will end up like Tebourba Way and Stoneham Way, where the grass verges are hardly ever cut and contain huge amounts of litter</i> |
| Grass verges should be properly maintained | <i>I think there should be maintained to a high standard.</i> |
| | <i>Meadow grass verges would need to be managed correctly and ensure that they do not reduce visibility and safety for motorists and pedestrians</i> |
| Creates opportunity for wildlife | <i>Grass verges help establish a healthy environment for many animals</i> |

106. Additional unique comments and suggestions related to roads and transport generally:

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|--|--|
| Better public transport needed | <i>Better public transport links, especially between Woolston and Bitterne</i> |
| | <i>Alternative transport options need to be provided. If trains were more frequent or if buses ran the routes I needed or if there was any useable alternative then I would use it</i> |
| | <i>Netley is so badly serviced with trains running just once an hour</i> |
| | <i>Transport routes and timetables seem to be changing all the time</i> |
| | <i>Provide better transport. Trams and trains are highly popular to get people from outside of the city to visit</i> |
| | <i>We are interested in commenting on transport issues such Uni Link buses and rail links</i> |
| | <i>Better public transport would reduce traffic in the city</i> |
| | <i>Cutting public transport will reduce visitors to the city</i> |
| | <i>Bus ticket that can be used on all bus companies</i> |
| Invest more money in the roads | <i>Doing a better job of replacing potholes first time round would save money</i> |
| | <i>The city appears neglected with potholes everywhere</i> |
| | <i>I urge the council to invest more in the roads of the city, which are crumbling</i> |
| | <i>Improve road surface quality by speeding up any resurfacing works for minimal disruption and repairing surfaces on link roads</i> |
| Sort out traffic problems in the city | <i>Traffic problems in the city need addressing</i> |
| | <i>Introduce a congestion charge for non residents</i> |
| | <i>Traffic would flow better if some traffic lights were turned off</i> |
| Cheaper public transport | <i>Buses are overpriced</i> |
| | <i>Free buses for locals to take local cars off the road will increase capacity for visitors</i> |
| Have park and ride | <i>Maybe have a park and ride for some big office companies that operate in city centre like they do in Portsmouth for lakeside offices</i> |
| | <i>Get a park and ride system in place ASAP</i> |

107. Additional unique comments and suggestions related to waste and recycling generally:

| | |
|--|--|
| Increase the amount of items that can be recycled | <i>Expand the items which can be recycled</i> |
| | <i>Increase recycling facilities or abilities to recycle plastics</i> |
| | <i>Please add more plastic recycling bins so as a city we can reduce our pollution footprint and plastic pollution</i> |
| More education on recycling and reducing waste disposal | <i>They should educate the people of Southampton about waste disposal</i> |
| | <i>I think the council should focus on helping people to reduce their waste</i> |
| | <i>There is a need for discipline by residents, to optimize utilization of the currently very capable service</i> |
| More effort to recycle to reduce environmental impact | <i>Increased recycling efforts are also necessary to protect our environment</i> |
| | <i>Please add more plastic recycling bins so as a city we can reduce our pollution footprint and plastic pollution</i> |
| Increase the number of public recycling bins | <i>We need to introduce more public recycling bins as well as general waste bins</i> |
| | <i>There should be recycling compactor bins alongside normal waste compactor bins</i> |
| Additional comments and suggestions regarding waste and recycling | <i>Collecting waste food separately would be beneficial to the environment and decrease landfill waste</i> |
| | <i>Waste disposal should be outsourced to private contractors</i> |
| | <i>Get household bins off pavements</i> |

Modern Sustainable Council

108. Respondents were asked to what extent they agreed or disagreed with the individual proposals for a modern sustainable council. The results of this are shown within figure 22 below.

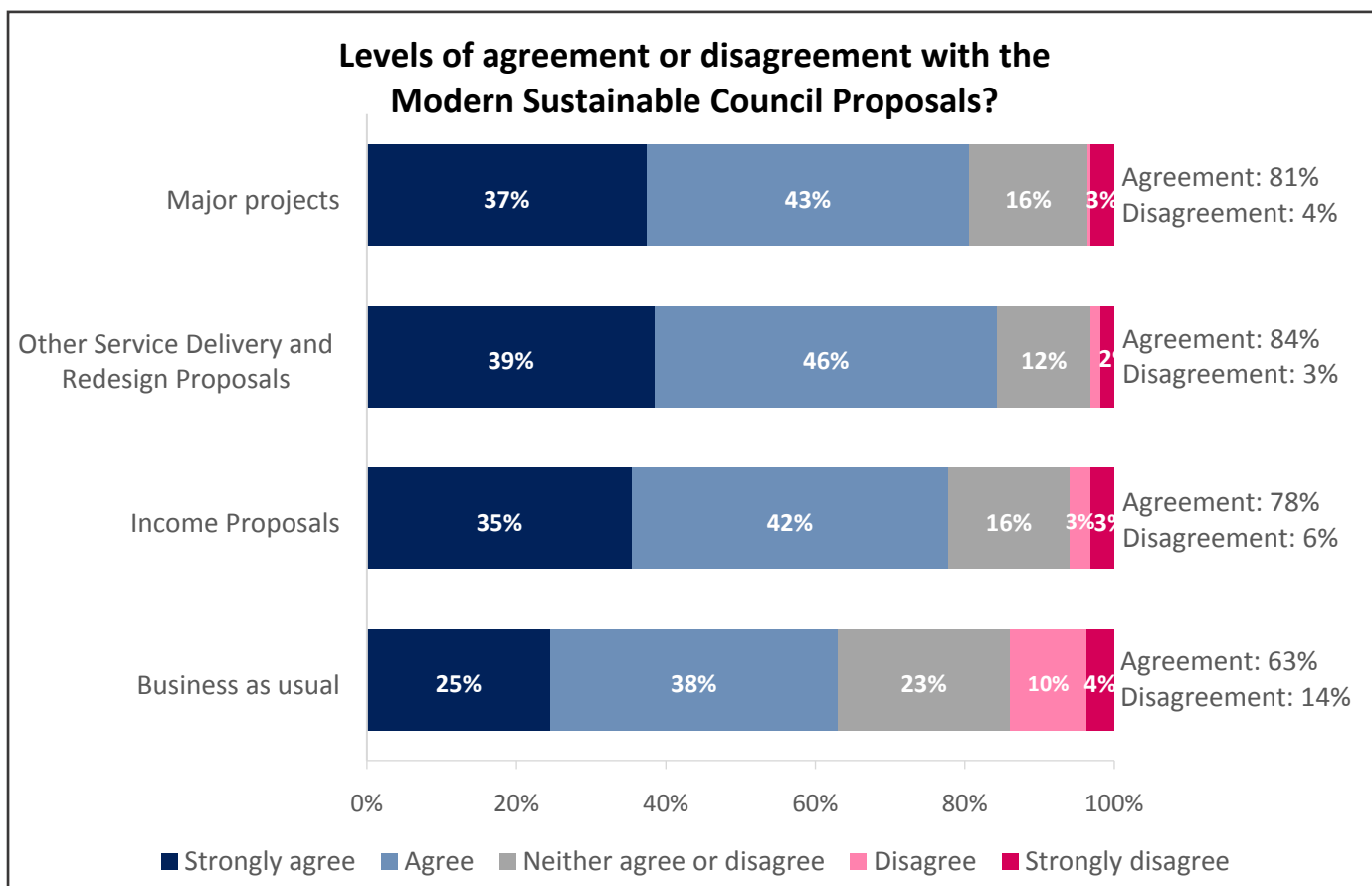


Figure 22

109. Respondents were first asked for their opinion on the major projects proposed under the modern sustainable council outcome proposals. A total of 81% of respondents expressed agreement with the proposals of which 37% strongly agreed and 43% agreed. A further 16% of respondents neither agreed nor disagreed and the remaining 4% of respondents expressed disagreement with the proposal.

110. The second question under the modern sustainable council outcome, was regarding other service delivery and redesign proposals. These included: reviewing contracts to identify efficiency savings; saving commission charges by using council staff rather than external organisations to undertake investigations and process backdated claims to HM Revenues and Customs (HMRC); reviewing how capital projects are funded and using other sources of funding rather than loans; and reducing the expenses budget for Councillors. A total of 84% of respondents expressed agreement with these proposals of which 39% of respondents strongly agreed and 46% agreed. A further 12% neither agreed nor disagreed and the remaining 3% of respondents expressed disagreement (1% disagree, 2% strongly disagree).

111. Respondents were asked about a few income generating proposals under the modern sustainable council outcome including: charging interest after 60 days on commercial debt; providing services or training for partners; and increasing income received from selling advertising space in the city. A total of 78% of respondents strongly agreed and 42% agreed with the proposals representing a total of 78% in agreement. A further 16% of respondents neither agreed nor disagreed. The remaining 6% of respondents expressed disagreement with the proposals (3% disagreed, 3% strongly disagreed).

112. Respondents were also asked for their opinion on a range of business as usual proposals for the modern sustainable council outcome. These included: reducing staffing vacancies, reviewing structures and roles; reducing budgets for things like stationery, training, print and subscriptions; and developing innovative ways to deliver services digitally. A total of 63% of respondents expressed agreement with these proposals and 14% expressed disagreement. This was the lowest level of agreement and highest level of disagreement of the modern and sustainable council proposals. Broken down further, 25% of respondents strongly agreed, 38% agreed, 10% disagreed and 4% strongly disagreed. The remaining 23% of respondents neither agreed nor disagreed.

113. The following question within this section asked the impact that the modern sustainable council proposals may have on the respondent, their family or community. Figure 23 shows that over half (55%) of respondents felt that the impact of the proposals would be positive with 30% saying the impact would be slightly positive, 19% saying it would be fairly positive and 6% a very positive impact. A quarter of respondents (25%) felt that there would be no impact as a result of the implementation of the proposals. A further 7% did not know what the impact would be. The remaining 17% of respondents felt that the impact would be negative with 6% of respondents saying it would be slightly negative, 4% fairly negative and 3% very negative.

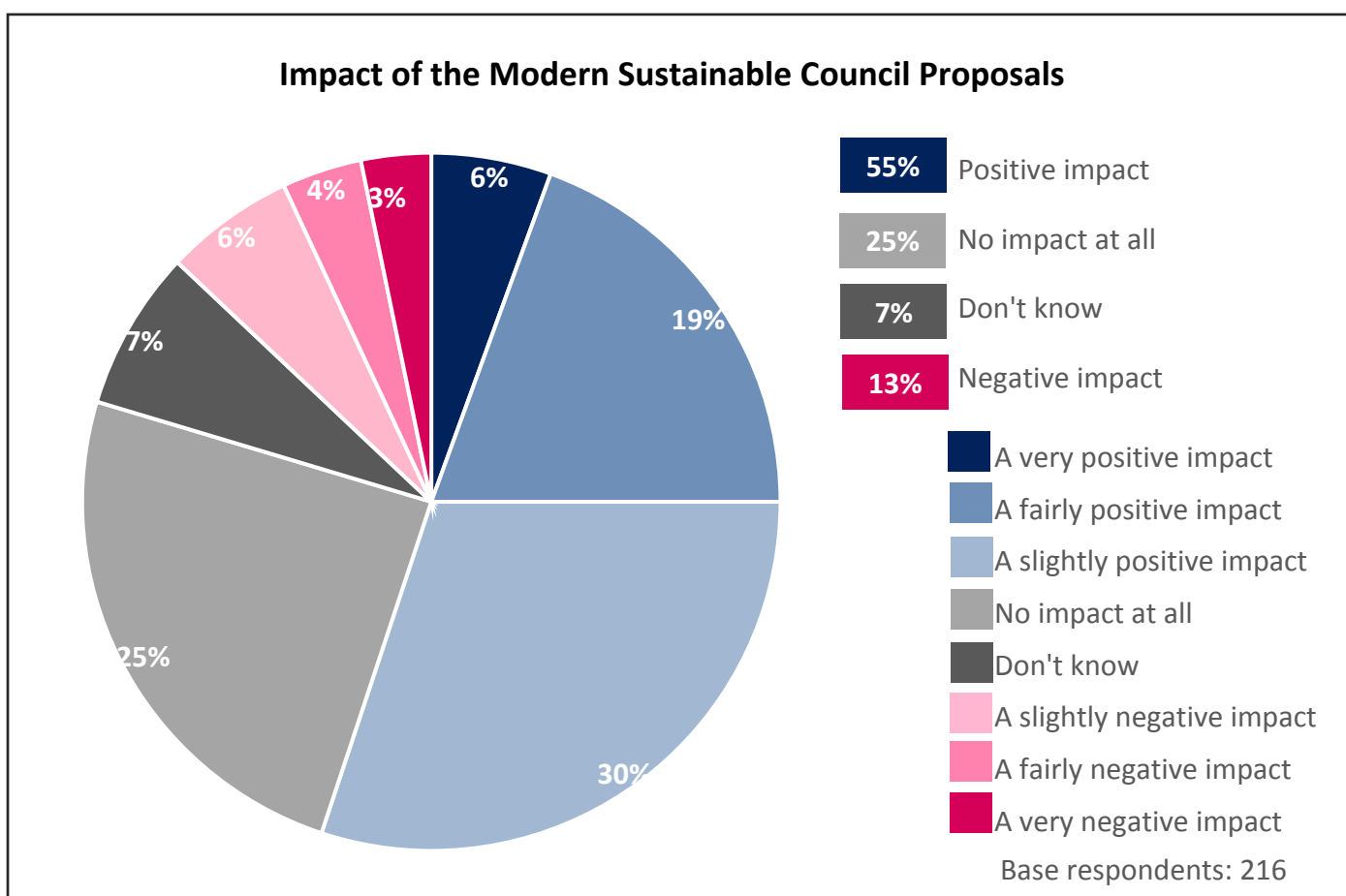
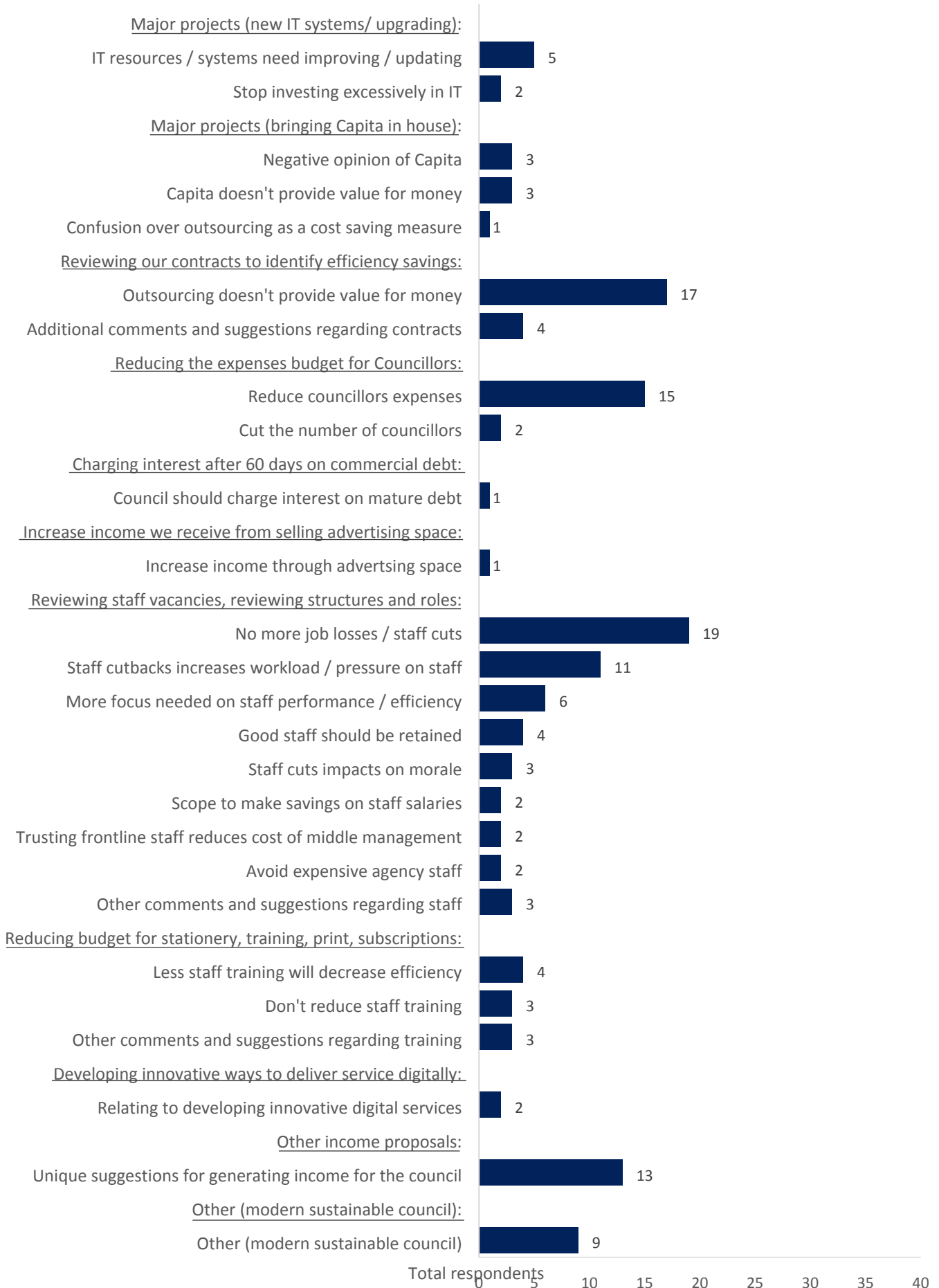


Figure 23

114. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. The following figure shows the themes of comments regarding the modern sustainable council proposals and the number of respondents that raised this point the subsequent tables after provides the unique comments and suggestions associated with these themes of comment.

Modern Sustainable Council comment themes



115. Unique comments and suggestions related to introducing and upgrading new IT systems:

| | |
|---|---|
| IT resources / systems need improving / updating | <i>If tools are required to do the work why would you reduce them? There is a lack of staff engagement on new equipment (i.e. expensive, unnecessary high-end equipment), leaving non-senior staff with under-powered machines.</i> |
| | <i>Investing in a sound IT structure is essential to deliver these proposals</i> |
| | <i>IT systems need updating and this will be positive and help efficiency and management of services</i> |
| | <i>The online service by the city council is surprisingly good for local government, and shutting down old systems is sensible</i> |
| Stop investing excessively in IT | <i>Stop the continual funding of extortionate systems manufacturers and simplify systems</i> |
| | <i>Care must be taken not to waste money on IT systems that turn out to be inefficient as happened with the NHS.</i> |

116. Unique comments and suggestions related to bringing Capita in house:

| | |
|---|--|
| Negative opinion of Capita | <i>Capita has been incompetent from the start.</i> |
| | <i>There is a correlation between the decline in SCC's provision of all kinds of things, especially retaining staff, and Capita's involvement in running so much of this city's administration</i> |
| Capita doesn't provide value for money | <i>Capita is a very large company whose services do not always give good value for the money</i> |
| | <i>Should look at whether Capita is more effective and better value for money for another company to provide these services</i> |
| Confusion over the claim that outsourcing is a cost saving measure | <i>The transfer to capita was 'sold' as a cost saving / efficiency measure. Now the insourcing is sold as the same. What is the truth?</i> |

117. Unique comments and suggestions related to the proposals to review contracts to identify efficiency savings:

| | |
|---|---|
| Outsourcing doesn't provide value for money / better service | <i>Contracting out does not normally result in a better service</i> |
| | <i>How much of the reviews will result in expensive external consultancy fees?</i> |
| | <i>The council needs to own their responsibilities and not look to private and volunteer organisations</i> |
| | <i>Not sure how an external party can offer extended service hours for the LACCS at a lower cost than current provision without sacrificing quality</i> |
| | <i>The contact scheme have outsourced in the past and have received complaints because reports are not up to standard or in some cases they are never received</i> |
| | <i>The council has just brought back in everything that was out sources to Capita because surprise surprise it didn't work so why look at outsourcing again?</i> |
| | <i>Returning to a grant funding model rather than contracting of services would save a large amount of money and time</i> |
| | <i>Charges should be compared against the costs of employing council staff to do this and only process if the latter were cheaper than using external organisations</i> |

| | |
|--|--|
| | <i>The council are still paying over the odds for 'consultants', expensive feasibility studies and evaluations/ external agencies</i> |
| | <i>Bring road repair back in-house</i> |
| Additional comments and suggestions regarding contracts | <i>Where contracts are reviewed this needs to be done carefully and it needs to be accepted that suppliers cannot always give more for the less</i> |
| | <i>There is also the issue with data protection, would an outside company have access to all the details? if not this may put staff and children at risk</i> |
| | <i>Performance and contract management of services is not configured correctly</i> |
| | <i>Contracts with third parties should be transparent</i> |

118. Unique comments and suggestions regarding reducing the expenses budget for Councillors:

| | |
|--|---|
| No pay rises for councillors / councillors to take a pay cut / councillors expenses | <i>If you want to save money then make the councillors take a pay cut</i> |
| | <i>Cut salary of all the senior managers by 10% across the board to raise funds</i> |
| | <i>Typical council cuts don't see you taking pay cuts</i> |
| | <i>Take a hard look at all council employees expenses including councillors</i> |
| | <i>It should be a given to reduce Councillors expenses rather than cut services for the less well off</i> |
| Cut the number of councillors | <i>Reduce the number of councillors. Does each ward need three?</i> |
| | <i>Cut numbers of councillors by a third to 32 and switch to a 4 year all seats election cycle</i> |

119. Unique comments and suggestions related to reviewing staff vacancies, structures and role:

| | |
|--|---|
| No more job losses / staff cuts | <i>Reducing jobs will have a negative impact due to people then needing to claim benefits if they are not working, there will be fewer people contributing to council tax, and more people rely on the council to house them.</i> |
| | <i>Reducing staff vacancies is not the answer moving forward</i> |
| | <i>SCC periodically have very long, very drawn out staffing reviews which normally result in short term job losses and then a recruitment drive as staffing levels are reduced too far.</i> |
| | <i>Structural changes and redundancies are expensive</i> |
| | <i>There has been very little communication and I am concerned about losing job after transfer.</i> |
| | <i>Staff cuttings always have an impact on the morale of an organisation</i> |
| | <i>Cutting staff does not make something more efficient</i> |
| | <i>The council barely is able to meet its statutory functions with the current staffing structure</i> |
| | <i>Staffing cuts are never the answer! Unless it's higher up the food chain where salaries are higher but the work is less</i> |
| | <i>Negative impact on those who leave and those who remain putting extra pressure on workloads and therefore mental health or mental health issues for those who no longer have a job and income to support their family</i> |

| | |
|---|---|
| | <i>Would it not be more in the Council's interest not to get rid of staff that have been in post for several years and know how their department runs efficiently and replace, in time, with staff that have no idea how to make the systems work efficiently</i> |
| Staff cutbacks increases workload / pressure on staff | <i>Staff and leaders in schools face an incredible amount of pressure and mental health/long term sickness is growing</i> |
| | <i>It will have a negative impact on those who leave and those who remain putting extra pressure on work loads</i> |
| | <i>Local government is at a wider risk of becoming a largely 'voluntary organisation', with a skeletal, underpaid, overworked staff</i> |
| | <i>The council have halved the team over the last 5 years but expect the same level of service from the workers</i> |
| | <i>Reducing staffing vacancies does not mean there will be any less work, just more work done by fewer people.</i> |
| | <i>There is only a finite reduction you can do before it is impossible to do our jobs</i> |
| | <i>If jobs are lost, already over-worked staff will suffer</i> |
| More focus needed on staff performance / efficiency | <i>The Council needs to address systemic failings in delivery and performance across a number of services</i> |
| | <i>I think efficiencies in terms of reduced administration and greater focus on face to face actions would be a better first alternative</i> |
| | <i>A focus should be on addressing under-performing staff</i> |
| | <i>More focus on staff performance, managing budgets and cost efficiency</i> |
| | <i>Train staff to have customer service skills.</i> |
| | <i>Review of administrative systems to minimise the number of separate actions</i> |
| Good staff should be retained | <i>If the pupil numbers are reduced at Compass School staffing cuts will need to be made meaning high quality, experienced and hugely skilled staff will be lost</i> |
| | <i>If management are scratching around trying to get the funding then quality drops, as does good staff retention</i> |
| | <i>Keeping people who don't do their job well is a waste of resources.</i> |
| Staff cuts impacts on morale | <i>If staff are cut back too far, workers may feel demoralised and under valued</i> |
| Scope to make savings on staff salaries | <i>One of the proposals should also be to review the Council staff salaries and if they are too high compared to the average UK salaries they need to be curtailed too to cover up the financial target</i> |
| | <i>Too many higher up staff paid high salaries</i> |
| Additional unique comments and suggestions regarding staff | <i>Poor management / leadership at the council</i> |
| | <i>Council is recruiting in wrong areas</i> |
| | <i>Reducing the number of teams may help stability for children and families and stability within social work teams</i> |
| | <i>Can we look at social workers being able to do 'social work' getting in early and using some of the resource for this</i> |

120. Unique comments and suggestions related to reducing budgets for stationery, training, print and subscriptions:

| | |
|--|--|
| Less staff training will decrease | <i>Training is important for staff development</i> |
|--|--|

| | |
|--|---|
| efficiency | <i>Reducing the budget for staff training will prevent staff from working more efficiently</i> |
| | <i>Reducing training means that staff will not be able to make best use of the technologies implemented</i> |
| Don't reduce staff training | <i>Reducing the training budget is never a good idea.</i> |
| | <i>Reducing core training could lead to a number of problems</i> |
| Additional unique comments and suggestions regarding training | <i>Staff training will help retain staff</i> |
| | <i>How the training needs of the workforce is mapped out and therefore resourced will impact on who is recruited and with the required skill set</i> |
| | <i>How training is resourced is critical given the budgets here have been withdrawn and critical areas no longer have specialist training to support statutory work or specialist responses</i> |
| | <i>By cutting budgets for stationary, training and counsellors expenses, staff may be out of pocket and end up subsidising the council which is not fair to them</i> |

121. Unique comments and suggestions related to developing innovative ways to deliver services digitally:

| | |
|---|---|
| Unique comments and suggestions relating to developing innovative ways to deliver service digitally. | <i>Developing innovative ideas is a hope not a plan</i> |
| | <i>New digital services must have a method of supporting people who find these new ways of doing things complicated</i> |

122. Additional suggestions for how the council can generate income:

| | |
|---|---|
| Unique suggestions for generating income for the council | <i>Are we getting all the income we should from the port, e.g. Border Inspection?</i> |
| | <i>Promote expansion of the Port of Southampton across the shore of the Test River, to improve economic growth</i> |
| | <i>Other discretionary charged services need to be increased (such as green bins, commercial waste)</i> |
| | <i>Find ways to make money through alternative fuels e.g.solar power</i> |
| | <i>The Council should focus on raising income from those who can afford to pay rather than cutting services for the poorest</i> |
| | <i>The Council should already receive income from University housing schemes</i> |
| | <i>Not clear what happened to the Council's plans to raise income through the Trading Company</i> |
| | <i>LATCO could provide sustainable income generation for the council</i> |
| | <i>Raise funds with a cafe in the Library / Art Gallery</i> |
| | <i>Increase fines in the library</i> |
| | <i>You should have looked at the duplication of teams and services before you tried to get money out of everyone else</i> |
| | <i>Funds could be made by adopting private healthcare approach</i> |
| | <i>Sell some paintings</i> |
| | <i>Income proposals shouldn't restrict current volunteer organisations who provide a social and community benefit</i> |

123. Additional comments and suggestions related to modern sustainable council proposals generally:

| | |
|---|---|
| Other comments and suggestions related to modern sustainable council | <i>Joint services / partnerships are a good idea but difficult to implement</i> |
| | <i>There should be more focus on a business approach</i> |
| | <i>Further review of in-house business model including current transport arrangements, staffing structure, terms & conditions, contact policy/procedure</i> |
| | <i>SCC has a chronic lack of oversight on projects resulting in systems being purchased with approval or awareness of what the actual need is</i> |
| | <i>What does efficiently mean? How is that measured?</i> |
| | <i>Staff work in silos / are not integrated</i> |
| | <i>Perhaps the links to our service need to be communicated wider - we have never not been available to all</i> |

Overall views of the budget proposals

124. The last section of the questionnaire asked respondents about their overall views on the budget proposals. Respondents were first asked how favourable or unfavourable they were of the budget proposals overall. Figure 24 shows that in total 35% of respondents were in favour of the budget proposals. Of this, 6% selected very favourable, 16% fairly favourable and 14% slightly favourable. A further 13% of respondents felt the proposals were neither favourable nor unfavourable. Just over half (52%) of respondents were not on favour of the proposals of which, 9% selected slightly unfavourable, 11% fairly unfavourable and 32% very unfavourable.

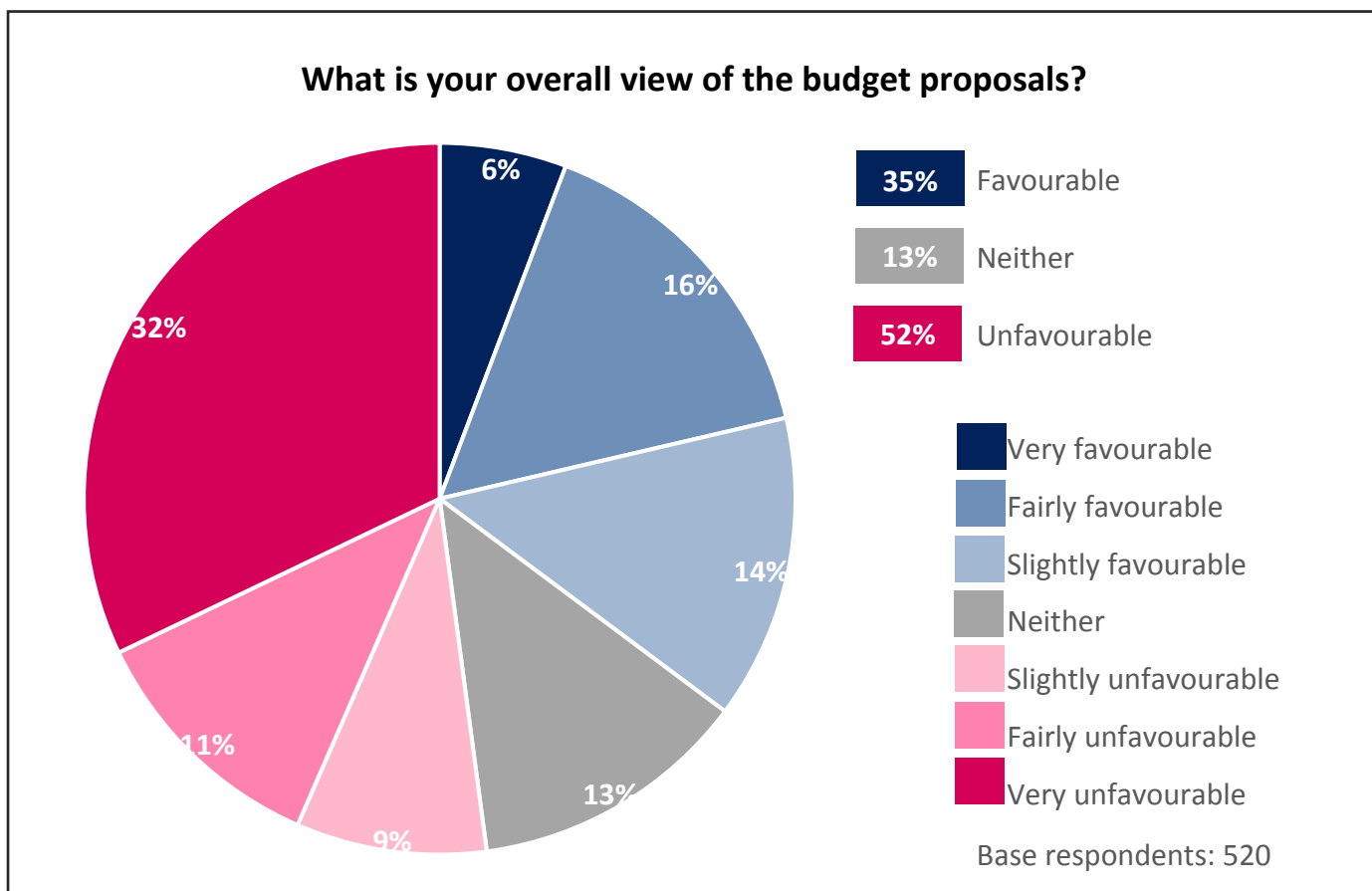
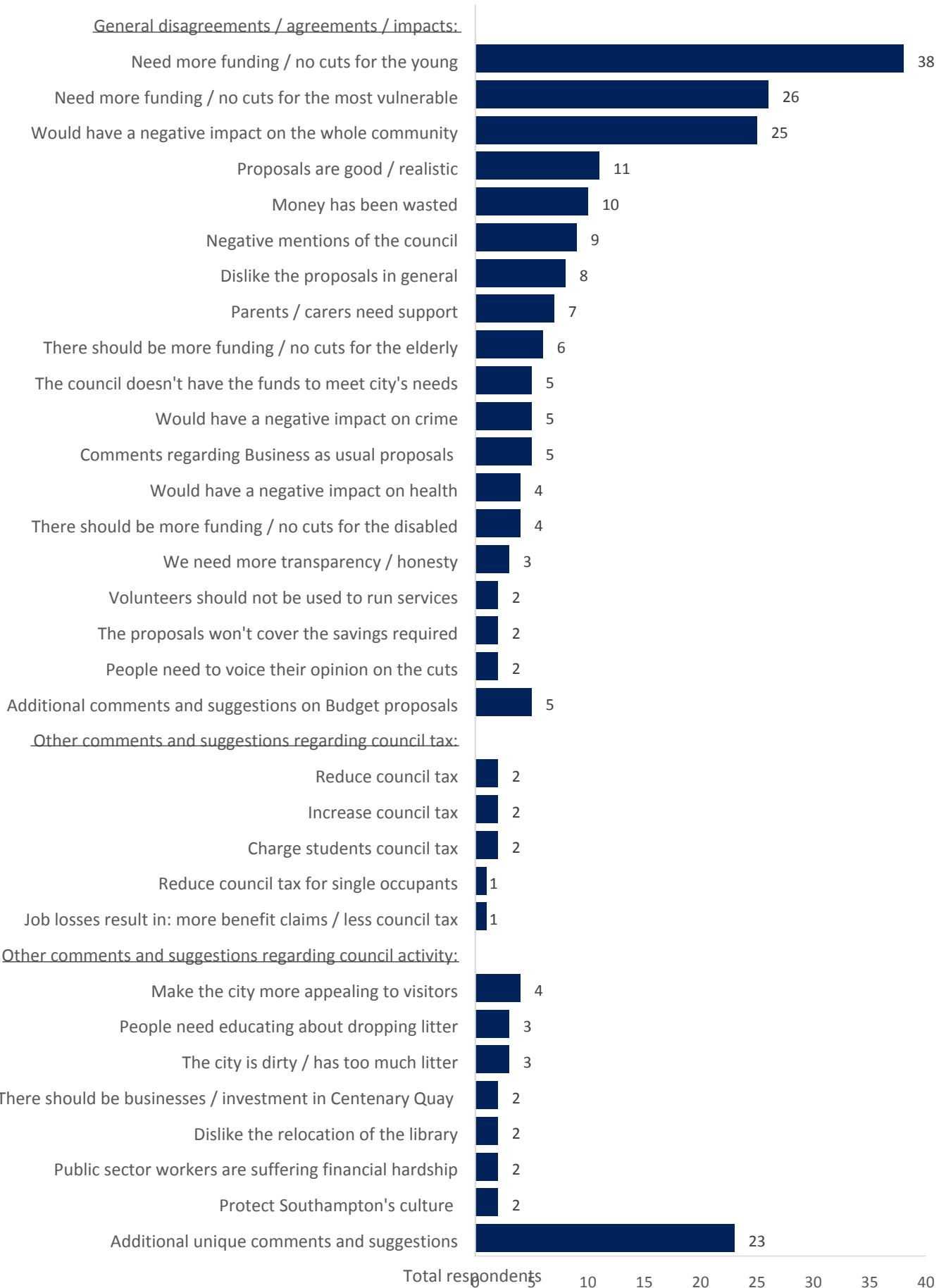


Figure 24

125. Respondents were also given the opportunity to provide any further comments, impacts, suggestions or alternatives that they felt should be considered. Written feedback on specific proposals has been included and summarised in the previous sections of this report, however there were a number of themes of comments that referred to the budget proposals more generally and provided suggestions as to other things the council should consider. These themes of comments are highlighted within the following figure and then the unique suggestions and comments provided in the subsequent tables.

Further comments and suggestions on the budget proposals.



126. Unique comments and suggestions regarding general comments, impacts and suggestions provided on the overall budget proposals:

| | |
|---|---|
| There should be more funding / no cuts for the young | <i>The second item in your main statement is about giving children in Southampton a good start in life but these proposals will produce the direct opposite effect</i> |
| | <i>We in Southampton are not putting sufficient support in early years for our children who many have a very poor start in life</i> |
| | <i>This would then have a negative impact on children, for whom early intervention is of critical importance</i> |
| | <i>It is unfair to cut funding for children they are our future and need all the help they can get</i> |
| | <i>I think more support should be available to families that have children with needs. The support is disgraceful</i> |
| | <i>Cutbacks at the school are detrimental to pupils across the City, when in fact we should be supporting these young people</i> |
| | <i>How can you justify a £100,000 cut in early years support when the needs of children in the city are so high</i> |
| | <i>There isn't enough supervised contact placements I'm Southampton so you're not considering the needs of the children you currently have</i> |
| | <i>I disagree with this proposals as since I have been taking my daughter to groups she has really calmed down and I have meet other parents that I can talk to</i> |
| | <i>It is an absolute disgrace that one third of the budget is being remove of from children's services after years of cuts but the council can still afford to recruit a digital experiences officer and senior communication officer</i> |
| | <i>These are key service and help keep children safe and out of care</i> |
| | <i>The price may be cheaper but you get what you pay for and we are talking about children here. We should be thinking about the children and not the budget</i> |
| | <i>It seems the council are putting cars in front of children</i> |
| | <i>Every one of the budget-saving, cost saving activities the council has engaged in, all in the name of improving the service, have had a negative effect on my disabled child's life.</i> |
| | <i>Really don't feel that the long term impact on the children of Southampton has been fully considered</i> |
| <i>The impact on children in the city will be immense and it calls itself a children's city!</i> | |
| <i>The reduction in early intervention will have life- time impacts for many of our more vulnerable children.</i> | |
| There should be more funding / no cuts for the most vulnerable | <i>The most vulnerable people must be protected above all else. Even if this requires a budget deficit</i> |
| | <i>Many of the young people at Compass school are already severely disadvantaged due to their home life or early experiences resulting in them having very complex social and emotional needs</i> |
| | <i>Not until there is an agreement at a societal level, will vulnerable children really get the support they require</i> |
| | <i>Will there be a fund available for lower income families who may therefore need to travel further in order to access the services they need</i> |

| | |
|--|--|
| | <i>You really need to put yourselves in the shoes of the poorest and most in need families in the city</i> |
| | <i>These are by definition the most vulnerable children in the city and they deserve the very best care</i> |
| | <i>I am concerned that locality based early help will ignore certain parts of the Southampton community</i> |
| | <i>After already decimating adult services, this council really needs to see vulnerable people as important and not just a spreadsheet figure</i> |
| | <i>Housing needs to be a priority for all sectors, including the increasing numbers of aging persons with a variety of support needs, e.g. mental health, risk of vulnerability to offend, physical disabilities, etc</i> |
| | <i>Blue badge holders need the facility of extra wide spaces, why should those vulnerable people be targetted?</i> |
| | <i>Is there any provision for those that cannot afford these payments?</i> |
| | <i>Don't cut services for the most disadvantaged in education. It is short sighted and only transfers expenditure into social care, YOS and the police</i> |
| | <i>This will impact on the most vulnerable families who need the support the most</i> |
| | <i>It is worrying that some of the changes might adversely affect more vulnerable people if they are not well implemented and managed</i> |
| Would have a negative impact on the whole community | <i>Reduction of the PRU will lead to pressures elsewhere in the community- especially in the health service, criminal and justice system etc</i> |
| | <i>The reduction in Compass school's ability to help the hard to reach children with special needs would be detrimental for the community</i> |
| | <i>A reduction in funding would have a huge impact on the community</i> |
| | <i>This is going to create more problems in the long run for them as individuals, their family, other pupils at the school, the community and in turn the economy of the city</i> |
| | <i>This must be a fully funded provision without which means you risk negative outcomes for large numbers of students which the City will pay a high price for</i> |
| | <i>Impact not only on local families but also the staff who are from the local community!</i> |
| | <i>Sometimes the small things (e.g. parking, administration, refreshments) actually offer much greater benefits than may be immediately apparent, and cutting this type of thing shows just how much the council are trying to save money almost as an ideology.</i> |
| | <i>The cuts that are probably indicated in the BaU proposal will almost certainly have a negative impact on the city's communities</i> |
| | <i>Proposals will cause a reduction in social cohesion and general quality of life for the community</i> |
| | <i>These changes will impact on staff, but will have no positive impact on the community as it will all be lost to savings</i> |
| | <i>The impact of these proposals can only be detrimental to southampton residents</i> |
| | <i>They're all predominantly cutbacks which will gradually impact those in the city either directly or indirectly</i> |
| Proposals are good / realistic | <i>The impacts of these changes on my family are better than the alternatives</i> |
| | <i>The reduction in funding from SCC for the Compass referral scheme is common sense as this is a discretionary service</i> |

| | |
|---|--|
| | <i>Proposals seem broadly sensible but thorough consideration of the details is necessary to ensure that measures work in practice, namely the 'Shared Lives', and the moving of health services to the NHS</i> |
| | <i>The proposal to increase service charges to meet costs is a good idea as they represent a small charge increase to prevent losses</i> |
| | <i>The reclassification of properties is a good proposal if these properties are not in demand</i> |
| | <i>We support the council in making improvements to its budget, to the city and its neighbourhoods</i> |
| | <i>Overall the budget appears to be well thought out and effective at dealing with the scathing budget cuts from central government</i> |
| | <i>The proposals mostly seem to address the savings needed in a realistic way</i> |
| | <i>The proposals provided in this consultation seem reasonable</i> |
| Money has been wasted | <i>How much time and money will be wasted on implementing this</i> |
| | <i>8 Million spend on a roundabout would have benefited the above services a lot more</i> |
| | <i>The amount of money the council waste on consultations and transformations is ridiculous; you are throwing away so much time and money</i> |
| | <i>I do feel that overall the council need to look at where they are wasting money</i> |
| | <i>Stop wasting money on stupid schemes like the feather statues and a titanic centre that no one uses</i> |
| | <i>Addressing wasted resources is critical to the Council being back on track</i> |
| | <i>Reduce or cut expenditure of luxury items such as festivals, fireworks shows, Christmas trees and subsidising museums and galleries</i> |
| Negative mentions of the council | <i>The council will do what it wants</i> |
| | <i>You always have consultations, the parents always say the move is a disaster, and you always do it anyway. You are determined to push through Shared Living, regardless of whether it suits people or not.</i> |
| | <i>This to me is a Labour council run vision, your core beliefs are long gone, and you are losing votes.</i> |
| | <i>Face the fact that the council is not well served at present</i> |
| | <i>These proposals do nothing to make me feel that Southampton City Council would be a good place to work or that it cares about the community</i> |
| | <i>Not having a budget slashing conservative government and councilors would be a good start</i> |
| Dislike the proposals in general | <i>I don't see how the proposals will plug the gap you've identified. A case of really poor, short-sighted policy and funding from central government</i> |
| | <i>There should be no more cuts to public services but increased funding</i> |
| | <i>I dislike the number of cuts and reductions being proposed in this budget</i> |
| | <i>These proposals look distinctly lacklustre in terms of improving the city while reducing spending</i> |
| Parents / carers need support | <i>Parents and carers need all the support they can get</i> |
| | <i>Parents are under pressure to work, in order to achieve a basic standard of living and avoid being capped or penalised, but are now expected to also resource their own local facilities</i> |
| | <i>Better information and guidance perhaps in conjunction with local charities would help carers. There is a lot of work to do around managing expectations as to what elders themselves as well as carers and the community can and should do to keep well-being.</i> |

| | |
|--|---|
| | <i>Think about the impact on the parents and guardians of the very vulnerable pupils we engage with</i> |
| There should be more funding / no cuts for the elderly | <i>There needs to be better services for the aging population of the City</i> |
| | <i>With all the cutbacks to Council run services older people feel very vulnerable</i> |
| | <i>Care for the elderly is important</i> |
| | <i>Social care is so very important to people who feel they have paid their dues in but do not receive any respect to their care as they get older</i> |
| | <i>The cuts in CYP and Adult care at the expense of meeting financial target is not good enough</i> |
| The council doesn't have the funds to meet the needs of the city | <i>Maybe you should go back to getting funding from the central government</i> |
| | <i>I am concerned that SCC does not have enough money to meet the increasing needs of Southampton residents</i> |
| Would have a negative impact on crime | <i>"People in Southampton live safe, healthy, independent lives" this is your SCC objective, a vision I support. But with these proposals you are taking that away;</i> |
| | <i>Reduction of the Pupil referral unit RU will lead to pressures elsewhere in the community- especially in the health service, criminal and justice system etc</i> |
| | <i>Focusing on short term cost savings in this area will lead to future higher costs in policing, healthcare and social care</i> |
| Comments regarding Business as usual proposals | <i>A business as usual approach is not good enough for Southampton</i> |
| | <i>Business as usual is inadequate</i> |
| | <i>The business as usual proposals ignore that demand is already great after 6 years of cuts to prevention services in the city</i> |
| | <i>These proposals under business as usual should be already be undertaken as normal business practice and not seen as a special project</i> |
| Would have a negative impact on health | <i>People in Southampton live safe, healthy, independent lives this is your SCC objective, a vision I support. But with these proposals you are taking that away</i> |
| | <i>Reduction of the Pupil Referral Unit will lead to pressures elsewhere in the community- especially in the health service, criminal and justice system etc</i> |
| | <i>Focusing on short term cost savings in this area will lead to future higher costs in policing, healthcare and social care</i> |
| There should be more funding / no cuts for the disabled | <i>Cuts to the disabled is a disgrace</i> |
| | <i>Disabled people struggle enough under the changes implemented by this government don't make it harder for this community</i> |
| | <i>Investigate employment and living income of disabled residents before enforcing these charges</i> |
| We need more transparency / honesty | <i>Greater transparency related to the complex sources of income available to adult social care.</i> |
| | <i>There needs to be greater transparency as to how the money is spent</i> |
| | <i>In light of these proposals, total transparency is more important than ever. Open the books</i> |
| Additional unique comments and suggestions relating to Budget proposals | <i>I encourage the council to open the books so that residents can make an informed assessment of where cuts should be made</i> |
| | <i>Agree with proposals providing training and support is given</i> |
| | <i>Make the cuts in places where people will see them and vote against this government</i> |
| | <i>I would like to see the monitoring by the council on the effectiveness of these measures</i> |

The approach to developing budget is focussed on a financial view searching for savings rather than a value based planning approach driven by the evidence of growing need, quality improvement and best use of available resources. Evidence suggests budgets for children and young people's social care, for public health and for adult social care should increase in response to need.

127. Unique comments and suggestions specifically regarding council tax:

| | |
|--|--|
| Reduce council tax | <i>Put more funding into care for the elderly and reduce the council tax; Anything that reduces spending and reduces council tax is a good thing</i> |
| Increase council tax | <i>I'd like to see some emphasis on income generation, particularly via council tax being raised on the value of properties in a more tiered mannner than it is at present</i> |
| | <i>Council tax must increase if it only funds 17% of the income then it has to increase by the maximum of 3.99% p/a</i> |
| Charge students council tax | <i>Landlords should pay students' council tax</i> |
| | <i>Start charging student as they use the same services as everyone else.</i> |
| Job losses result in more benefit claims / less people paying council tax | <i>I feel that reducing jobs will have a negative impact due to people then needing to claim benefits if they are not working which will impact on the city not having as many people contributing to council taxes etc to give back to the city</i> |

128. Other comments and suggestions regarding council activity:

| | |
|--|---|
| Make the city more appealing to visitors | <i>High parking charges, multiple rates for different times (evening and daytime for example), parking fines all contribute negatively to a visitor experience and the City needs visitor revenue</i> |
| | <i>Friends visiting in Bitterne commented on the amount of litter which it is not good to see</i> |
| | <i>Revenue can be increased by making it more desirable to visit</i> |
| | <i>Encouraging people into the city would boost the local economy / high street and tax revenue</i> |
| People need educating about dropping litter | <i>Bring in a new 'Don't Litter' campaign. Sick of standing on bus stops that have to rely on community litter pickers.</i> |
| | <i>Please could you consider using some of the money saved on the bins for education work with children about not dropping litter</i> |
| | <i>Encourage citizens to bring their waste home with them and live more responsible lives</i> |
| The city is dirty / has too much litter | <i>Reduced bin pick-ups have increased the general dirtiness in the city</i> |
| | <i>I walked over the bridge a fortnight ago and couldn't believe the amount of litter</i> |
| Dislike the relocation of the library | <i>Concerning the relocation of the School Library Service. Will there be free, convenient parking where visitors can drop-off and pick-up books?</i> |
| | <i>The current library location is convenient, easy to get to, not too busy and very friendly and inviting.</i> |
| Additional unique comments and suggestions | <i>Hope that these proposals will lead to more innovative ways of working</i> |
| | <i>Encourage further partnership working with the CCG (Further pooling of budgets and joint planning, further senior joint appointments, co-location.)</i> |
| | <i>Council spends too much time competing with private businesses</i> |

| |
|---|
| <i>Lower business rates to encourage shops (and therefore visitors) into the city</i> |
| <i>Introduce electric scooter hire (for shorter journeys)</i> |
| <i>People should be fined for failing to cut back trees / hedges which encroach onto pavements</i> |
| <i>The city benefits from its independent venues / shops</i> |
| <i>Too many shops closing on the high street</i> |
| <i>Unemployed should have to pay charges</i> |
| <i>No additional charges for residents</i> |
| <i>More police presence</i> |
| <i>I oppose any "External Investment", as this is just another word for Privatisation. This will change a dedicated service into a profit making venture.</i> |
| <i>SGO has only just started and we are finding this really helpful</i> |
| <i>Establish night schools and adult learning centres to ensure social mobility of adults which will thus lead them to higher income employment thus fed into city through tax</i> |
| <i>The Council has to set a budget or be replaced by commissioners with no further control as I understand it. It undertakes consultation but in the last resort it has to make decisions, not any pressure group or other organisation</i> |
| <i>Older people are always overlooked and don't get the support they need just because they don't meet the criteria</i> |
| <i>We need to make a concerted effort to encourage active collaborative citizenship in all our interests</i> |
| <i>If a department overspends another sections budget is reduced to fund that section</i> |
| <i>Retain graduates into the city through having more graduate schemes to ensure high income revenue is fed into the city</i> |
| <i>There are existing volunteer run community organisations which would flourish with council support</i> |
| <i>Tax people with dogs for cleaning up and environmental impact</i> |
| <i>Better to pay more in Council tax where we can track the expenditure, rather than contributing to the government central pot</i> |
| <i>Reduce wages of staff and pensions</i> |
| <i>Improve CCTV in Saint Marys and City Centre.</i> |

Feedback on the consultation process

129. Southampton City Council are committed to make the whole consultation process as transparent and fair as possible. As a part of this commitment, any feedback on the consultation process itself received during the course of the consultation is gathered together here.

130. A total of 71 respondents commented on the consultation process and questionnaire.

131. Figure 25 shows the themes of comments regarding the consultation process and the subsequent tables outline the unique points raised.

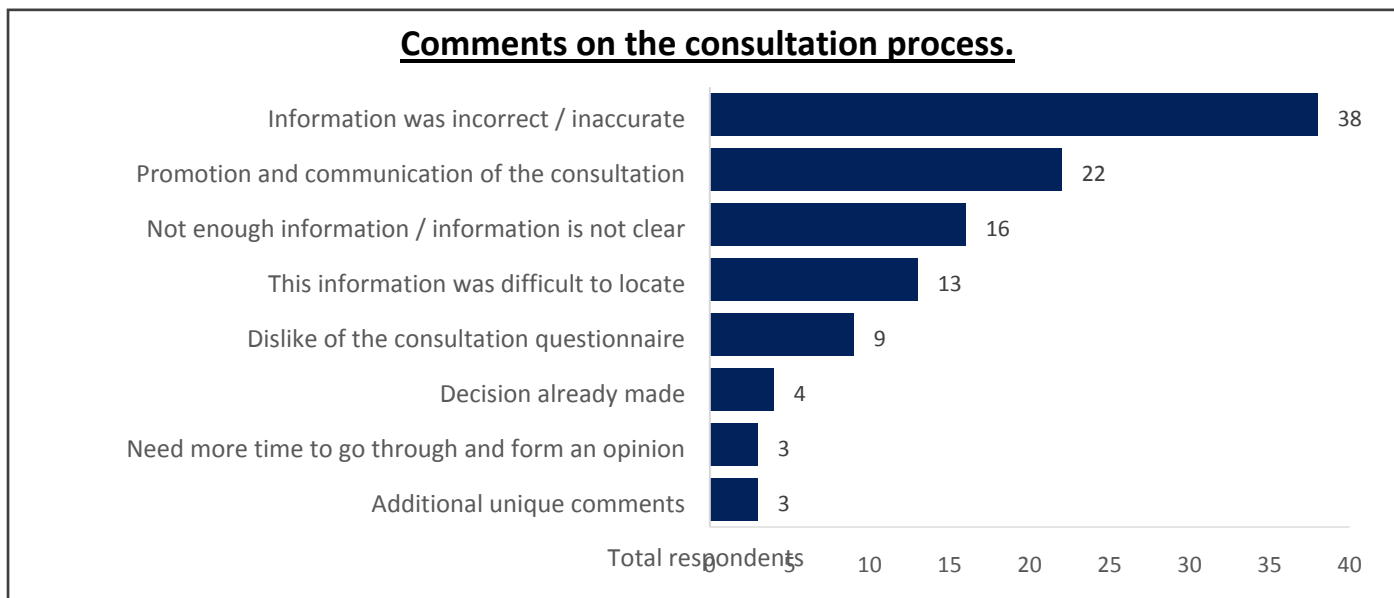


Figure 25

132. Unique comments about the consultation process:

| | |
|--|---|
| Information was incorrect / inaccurate | <i>Incorrect information in Compass School proposals (more detail found earlier in the report)</i> |
| | <i>Incorrect information in Council run play offer proposals (more detail found earlier in the report)</i> |
| Promotion and communication of the consultation | <i>(Regarding Compass School Proposals) There were no notifications about the consultation by anyone who could be impacted, including The Management Committee, staff and leadership team at Compass, as well as other stakeholders like parents, pupils and mainstream schools</i> |
| | <i>(Regarding Compass School Proposals) Parents, staff and pupils have never been told about the possible cut backs to Compass School.</i> |
| | <i>(Regarding Compass School Proposals) No secondary heads had located the consultation document before they were informed of its existence at a Heads meeting on 29th November.</i> |
| | <i>(Regarding Compass School Proposals) As key stakeholders were not made aware of the information, this is illegal and therefore should not go ahead.</i> |
| | <i>(Regarding Compass School Proposals) The email on 24 October 2018 did not specifically mention Compass School proposals which means busy head teachers unlikely to trawl through the feedback to check that there is something relevant to them.</i> |

| | |
|--|--|
| | <i>It has not been publicised properly</i> |
| | <i>There has been very little communication and I am concerned about losing my job after transfer</i> |
| | <i>Suggestion that the consultation should have been stopped and launched properly and publicly, considering all stakeholders and in line with the law.</i> |
| | <i>Concern that the overall budget consultation was promoted less than other consultations at the same time.</i> |
| | <i>Found out the information by chance, did not see any advertisements.</i> |
| | <i>(Regarding Sure Start proposals) Concern that the users of sure start have not been consulted with.</i> |
| | <i>(Regarding Sure Start proposals) Concern that staff in other parts of the council have been consulted with but staff in children's department have not.</i> |
| | <i>(Regarding Sure Start proposals) The consultation is unfair, unreasonable and inaccurate and it has not involved stakeholders. Stakeholders have not be consulted with at the appropriate time.</i> |
| Not enough information / information is not clear | <i>The proposals are extremely vague and do not give the required detail for the consultation to be meaningful.</i> |
| | <i>Disappointment with the ambiguity of the consultation process</i> |
| | More information needed on: <i>if the proposals are to make people redundant and replace or people leave with replace with volunteers; what the savings are if council removed 20 staff from Children's Services; what reviewing internal recharges means; Play offer proposals; what play opportunities are universal and which are targeted and how much resource is deployed to each; lack of clarity regarding how the locality model will work in practice; the number of vacancies in different departments; more detail on how process are made efficient and the criteria used to review contracts; what transferring funding to the NHS means to health services; whether the goal of reviewing adult social care charging policy is to reduce costs; need more detail on the likely impacts of the proposals; how identifying cheaper and more suitable sites for bin storage and heritage collections would happen; what type of households and businesses the smart bins would be placed in; who the partners would be for Emergency Planning and Business Continuity; how income would be increased from trading standards work;</i> |
| | Difficult to answer the question due to broad proposals with a lack of detail on: <i>Major projects proposals; Smart Compactor bins proposals; Play Offer proposals; Locality Based Early Help Service; Shared Lives Proposals; Transport Review</i> |
| | <i>The proposals are far too complicated for a larger number of SCC residents, so the number of people who respond will be small, thus making the survey valueless</i> |
| | |
| This information was difficult to locate | <i>(Regarding Play Offer proposals) The website shows adult social care charging review and the homes consultation, however there isn't anything for public consultation on the future of Sure Start.</i> |
| | <i>The consultation was hard to find, it almost hidden that it was dealing with a named institution not a generic consultation</i> |
| | <i>The consultation cannot be easily found and is submerged in a number of unrelated documents which makes it particularly difficult to find and respond to</i> |
| Dislike of the consultation questionnaire | <i>Disappointment with the ambiguity of the consultation process</i> |
| | <i>I find it difficult to use computers and complete online questionnaires</i> |

| | |
|--|---|
| | <i>In some cases a 'Not Sure' box for ticking would be useful until these measures are implemented</i> |
| | <i>Questionnaire is loaded and biased</i> |
| | <i>Ask more questions about quality of life as a result of the proposals</i> |
| | <i>Felt that less favourable proposals put at the start which may skew the final question regarding overall opinions on the budget</i> |
| | <i>Difficult to answer the question on impact if you think some proposals are positive and others are negative.</i> |
| | <i>The proposals cannot be considered as a whole as some are beneficial whilst others aren't.</i> |
| Decision already made | <i>Council will do what it wants regardless of the consultation being carried out.</i> |
| | <i>You always have consultations, the parents always say the move is a disaster, and you always do it anyway.</i> |
| | <i>As a council you will do what you want, set the budget you want, spend the money where you want regardless of my opinion or anybody else's</i> |
| Need more time to go through and form an opinion | <i>(Regarding Compass School proposals) Only found out about the proposals in late November and so it was too late for a detailed response to be prepared.</i> |
| | <i>I would need to review and an opportunity to speak to discuss these properly and in depth</i> |
| | <i>There is a contradiction in the paperwork regarding the deadline for the consultation which states the 2nd January rather than the 16th January. This means that the council has closed the consultation 2 weeks earlier than it should have- therefore not giving the public the opportunity to feedback.</i> |
| Additional unique comments regarding the consultation process | <i>The link on your site goes to the Care Homes and not to the toll bridge which is not very helpful</i> |
| | <i>Concern that the consultation is not meaningful and should be considered statutory under the Care Act as a significant change to the offer provided to families in the city has been proposed.</i> |
| | <i>(Regarding Play Offer Proposals) Staff were also warned not to give feedback and not to speak to parents about the proposals which is unacceptable.</i> |
| | <i>(Regarding Play Offer proposals) Vulnerable families are likely to need more assistance with identifying the consultation and will need support.</i> |

Conclusion

133. Southampton City Council sought views on draft budget proposals for 2019/20 and 2020/21. The consultation ran for 10 weeks from 17 October 2018 to 2 January 2019.
134. In total, there were 559 responses to the consultation of which 533 responded via the consultation questionnaire and a further 26 responded via letters and emails.
135. All questionnaire results have been analysed and presented in graphs within the report. In addition all written feedback has been read and assigned to categories based upon similar sentiment or theme and descriptions have been provided of each category within the report.
136. In conclusion, this consultation allows Cabinet to understand the views of residents and stakeholders on the proposals that have been consulted on. It represents the best possible summary and categorisation of all the feedback received through the consultation period.

Agenda Item 4
Appendix 12

The future of Glen Lee and Holcroft House Residential Homes – Consultation feedback and response

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Introduction

1. Southampton City Council ran consultations on a range of budget proposals for 2019/20. As a part of this, the council sought views on a specific set of proposals regarding the future of Glen Lee and Holcroft House residential care homes. The consultation ran from 17 October 2018 to 16 January 2019.
2. As a result of reductions in funding from central government, Southampton City Council has made £136.4 million savings over the last seven years and needs to make another £15.05 million savings by 2020/21. Income from the Council Tax covers 17% of total council expenditure (excluding Housing Revenue Account expenditure and schools expenditure) and the revenue support grant funding the council receives from central government will be reduced by 54% over the medium term. At the same time as having to make further savings, demand for council services – particularly those for vulnerable children and adults – continues to increase year-on-year.
3. Southampton City Council residential care services for older people and older people with dementia are currently provided at Glen Lee, Wavell Road, Southampton, SO18 4SB and Holcroft House, Holcroft Road, Southampton, SO19 6HA. Although demand for adult social care is increasing, the demand for the type of care provided at Glen Lee and Holcroft House is decreasing. Many of the council's social care clients want to continue living at home for as long as possible, or to access alternatives like Housing with Care or Shared Lives schemes, rather than go into a residential care home.
4. This report summarises the aims, principles, methodology and results of the public consultation. It provides a summary of the consultation responses both for the consideration of decision makers and any interested individuals and stakeholders.

Aims

5. The aim of this consultation was to:
 - a. Communicate clearly to residents and stakeholders the proposals for the future of care homes run by the council in the city.
 - b. Ensure any resident, business or stakeholder who wishes to comment on the proposals has the opportunity to do so, enabling them to raise any impacts the proposals may have.
 - c. Allow participants to propose alternative suggestions for consideration which they feel could achieve the objective in a different way.
 - d. Provide feedback on the results of the consultation to elected Members to enable them to make informed decisions about how to best progress.
 - e. Ensure that the results are analysed in a meaningful, timely fashion, so that feedback is taken into account when decisions are made.
6. The consultation was not a vote, it enabled participants to read about the preferred option, answer questions and make comments that will enable the final decision to be made. Decision makers need to consider the representations made during the consultation period but a majority view will not necessarily dictate the final decision. It is also important to note that the consultation is one element of the suite of reports that will feed into the final position.

Consultation principles

7. The council takes its duty to consult with residents and stakeholders on changes to services very seriously. The council's consultation principles ensure all consultation is:
 - a. Inclusive: so that everyone in the city has the opportunity to express their views.

- b. Informative: so that people have adequate information about the proposals, what different options mean, and a balanced and fair explanation of the potential impact, particularly the equality and safety impact.
 - c. Understandable: by ensuring that the language used to communicate is simple and clear and that efforts are made to reach all stakeholders, for example people who are non-English speakers or disabled people.
 - d. Appropriate: by targeting people who are more likely to be affected and using a more tailored approach to get their feedback, complemented by a general approach to all residents, staff, businesses and partners.
 - e. Meaningful: by ensuring decision makers have the full consultation feedback information so that they can make informed decisions.
 - f. Reported: by letting consultees know what was done with their feedback.
8. Southampton City Council is committed to consultations of the highest standard, which are meaningful and comply with the following legal standards:
- a. Consultation must take place when the proposal is still at a formative stage
 - b. Sufficient reasons must be put forward for the proposal to allow for intelligent consideration and response
 - c. Adequate time must be given for consideration and response
 - d. The product of consultation must be carefully taken into account.
9. Public sector organisations in Southampton also have a compact (or agreement) with the voluntary sector in which there is a commitment to undertake public consultations for a minimum of 12 weeks wherever possible. This aims to ensure that there is enough time for individuals and voluntary organisations to hear about, consider and respond to consultations. It was felt that a 12 week consultation period would be the best approach.

Consultation methodology

10. Deciding on the best process for gathering feedback from stakeholders when conducting a consultation requires an understanding of the audience and the focus of the consultation. It is also important to have more than one way for stakeholders to feedback on the consultation, to enable engagement with the widest range of the population. Previous best practice was also considered in the process of developing the consultation methodology.
11. The agreed approach for this consultation was to use a combination of online and paper questionnaires as the main basis, supported by a range of meetings with those directly affected. Feedback was also received through email, letter and via advocates of the residents.
12. It was felt that due to the sensitivity of the consultation it was important to provide face to face contact with consultees to provide clarity and answer any questions. The drop-in or stakeholder sessions were designed to both increase awareness of the consultation but also to answer questions and explain some of the more technical elements to specific stakeholder groups.
13. This approach of open consultation, supported by a wide range of communications ensured that as many people as possible were aware of the issues and could have their say if they chose to.

Questionnaire

14. The main vehicle for gathering feedback through the consultation was a combination of online and paper questionnaires. Questionnaires enable an appropriate amount of explanatory and supporting information to be

included in a structured questionnaire, helping to ensure respondents were aware of the background and detail of the proposals. It was deemed the most suitable methodology for consulting on this complex issue.

15. Paper copies of the questionnaire were made available in Southampton Civic Centre reception and all Southampton libraries as well as at public consultation events and in the homes themselves.

Advocacy

16. To support the consultation activity and to ensure that the residents of the homes could share their views, the council employed Choices Advocacy an independent advocacy organisation. They met one to one with the residents of either home who wanted support to respond to the consultation. In total 29 people used this service and responded via Choices Advocacy.

Meetings

17. To allow people the opportunity to ask questions and respond face to face a total of seven public meetings, staff meetings and stakeholder meetings were organised and a total attendance of over 130 across these. The first of these meetings was a pre-consultation briefing for the families of residents so they were made aware about the proposals and how they could get involved with the consultation as early as possible.

Additional feedback channels

18. Any emails addressed to senior officers or Cabinet members were collated and analysed as a part of the overall consultation.

19. Respondents to the consultation could also write letters to provide feedback on the proposals.

Promotion and communication

20. Throughout the consultation, every effort was made to ensure that as many people as possible were aware of the budget proposals and had every opportunity to have their say.

21. Particular effort was made to communicate the proposals in a clear and easy to understand way. This was achieved by including key information within the questionnaire and signposting to a wide range of supporting information. This included the following which were hosted on a focused area of the council website.

- a. Information sheets
- b. Equality and Safety Impact Assessments
- c. Questionnaire
- d. Supporting information for the three parallel consultations

22. For the duration of the consultation paper versions of the consultation questionnaire were available in libraries and council offices. Paper copies of the questionnaire or alternative format versions could be obtained on request.

23. At the start of the consultation a media release was issued.

24. The council also wrote to all the residents or their representatives at the start of the consultation.

25. The budget consultations were included in 8 Southampton City Council e-alerts. The total reach of these e-alerts was in excess of 30,000. These e-alerts resulted in 810 clicks through to further information and the questionnaire.

26. With regard to social media a combination of Twitter and Facebook promotion was used, there were five posts about the overall budget consultation on Facebook with an overall reach of 37,033. There were a total of 17 tweets about the overall budget which had a total reach of 32,948. In addition to this there were three further tweets on the future of care home consultation with a reach of 5,101 and three specific Facebook posts with a reach of 7,284.
27. To support the external promotion of the consultation there were also activities to make staff of Southampton City Council aware of the consultation, internal emails and promotion on staff webpages.

Part 1 – Summary of Consultation Feedback

Overall respondents

28. Overall, there were 380 separate written responses to the consultation.

29. The majority of responses were received through the consultation questionnaire; 320 in total. Additional written responses were also received through emails and letters. The breakdown of all written responses is shown within table 1 below.

| Feedback route | Total number of responses |
|--|---------------------------|
| Questionnaire (Paper and online) | 320 |
| Letters or emails | 53 |
| Feedback received through the overall budget questionnaire | 7 |
| Total | 380 |

Table 1

30. In addition to written responses to the consultation, there were a number of public engagements and meetings in which verbal feedback was provided.

31. All written and verbal feedback received is summarised within the following sections.

Questionnaire quantitative feedback

Breakdown of questionnaire respondents

32. A number of questions were asked within the questionnaire to find out a bit more about the respondents to help contextualise their response.

33. Respondents were asked what their interest in the consultation was. Figure 1 shows the breakdown of responses to this question. Please note percentages add up to more than 100% as respondents could select multiple options. A total of 221 (70%) respondents expressed their interest as a resident of Southampton. The second highest proportion of respondents were family members of residents in one of the homes; a total of 48 (15%) selected this option. Respondents who were employees of a local authority were the following highest proportion of respondents; 41 (13%) selected this option. A further 21 respondents described themselves as a member of a community group or organisation, 20 were residents elsewhere in Hampshire, 18 were interested as political members; 14 said they were employees of Southampton City Council working in one of the homes, 5 were responding on behalf of a business or organisation, 2 are residents of one of the homes and a further 17 selected "other".

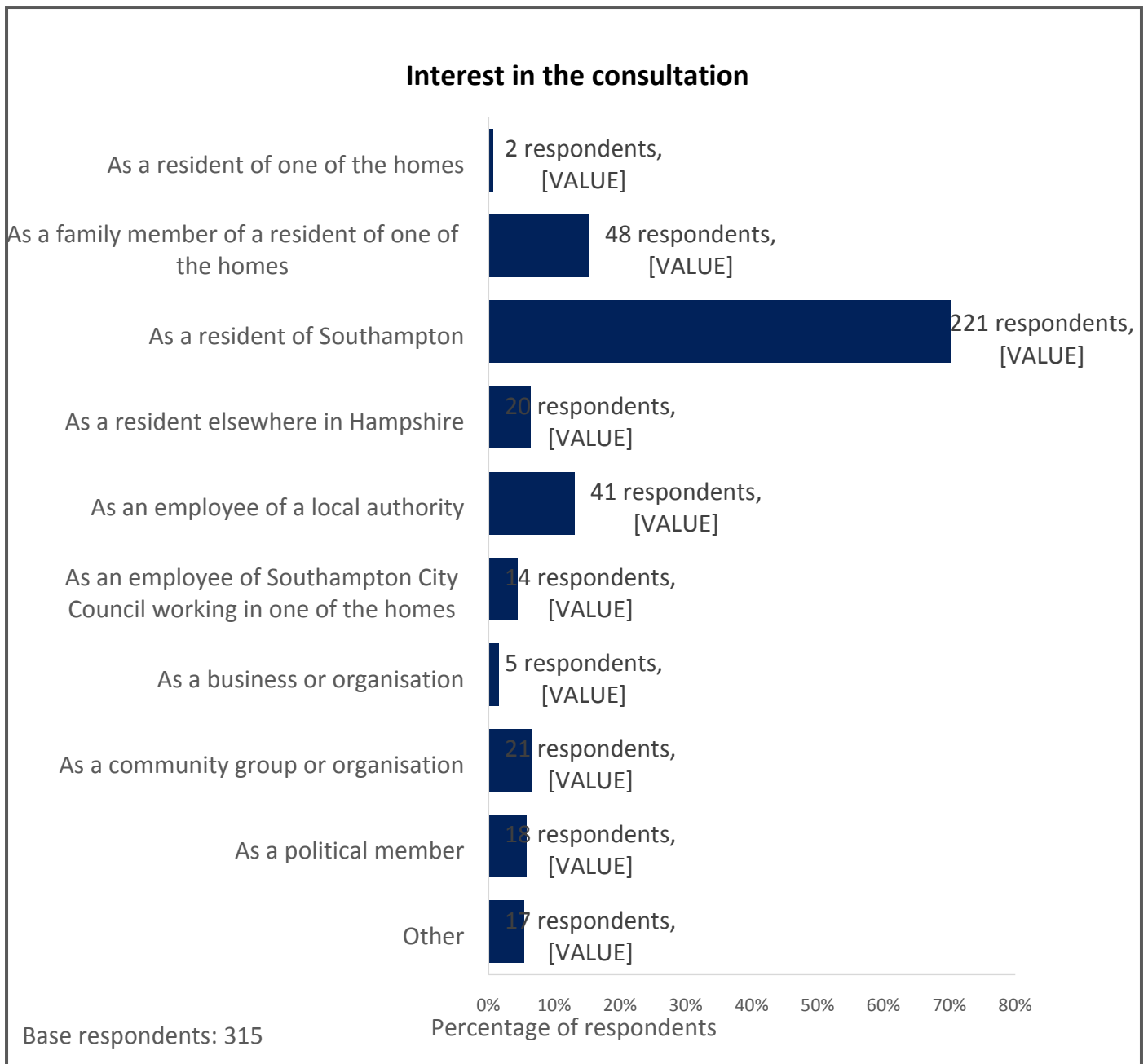


Figure 1

34. Figure 2 shows how respondents to the consultation best described their gender. 158 respondents described themselves as Female, 131 described themselves as Male and one respondent described themselves in another way.

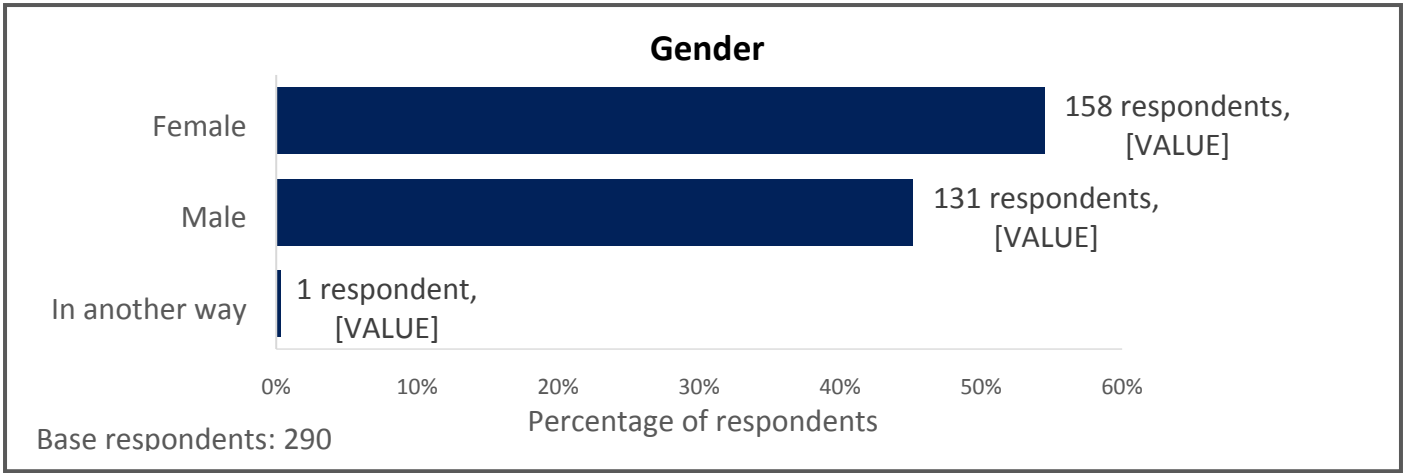


Figure 2

35. Respondents were also asked their age as shown within Figure 3. Around half (50%) of the respondents were between the ages of 55 and 74. There were a lower number of respondents for categories over the age of 75 and under the age of 25.

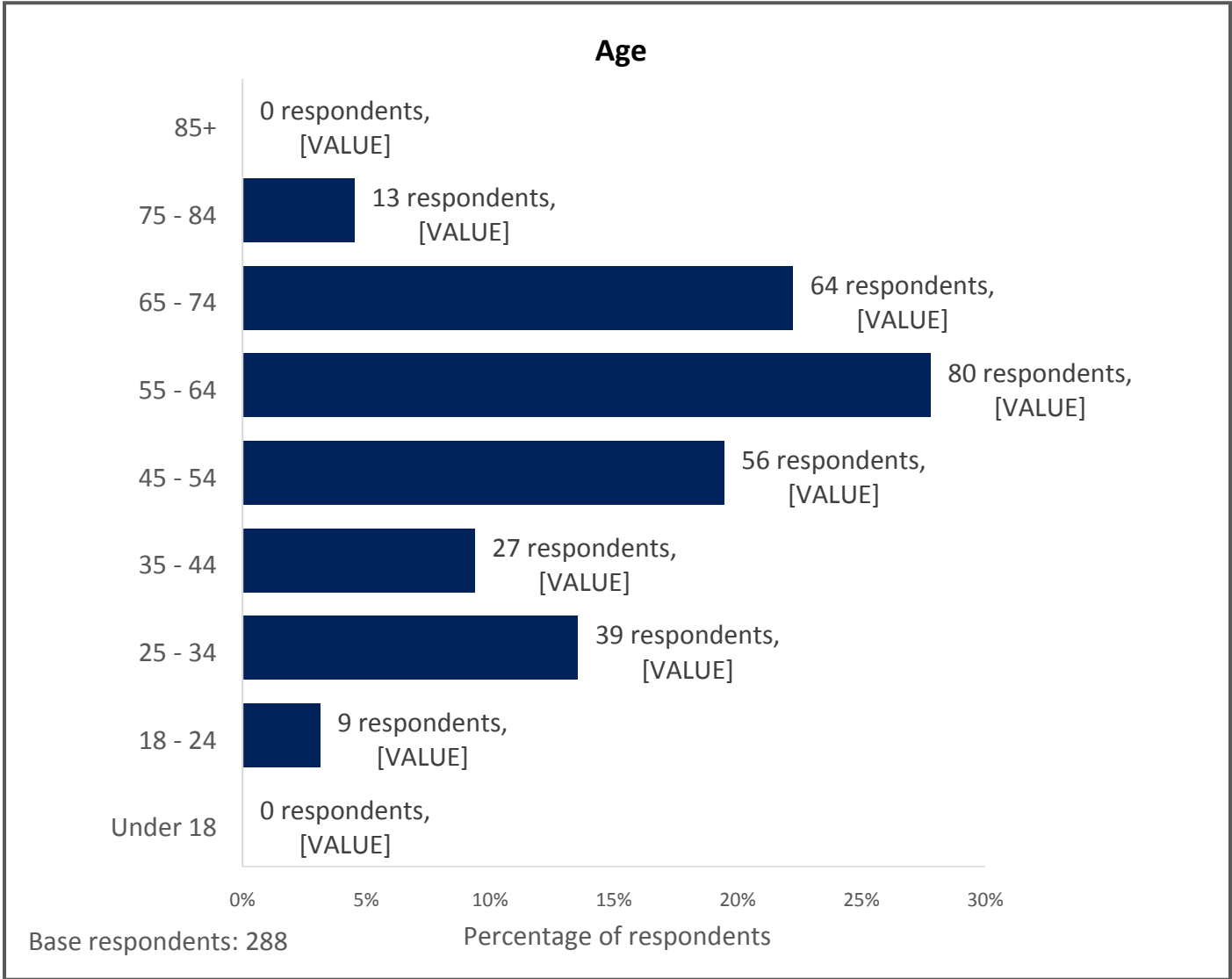


Figure 3

36. The last question gathering more information about the respondents themselves asked about their ethnicity. Figure 4 shows that the majority of respondents described themselves as White (95%). A further 1% of respondents described themselves as Asian or Asian British; 1% Black, African, Caribbean or Black British; 2% mixed or multiple ethnic groups and 1% as another ethnic group.

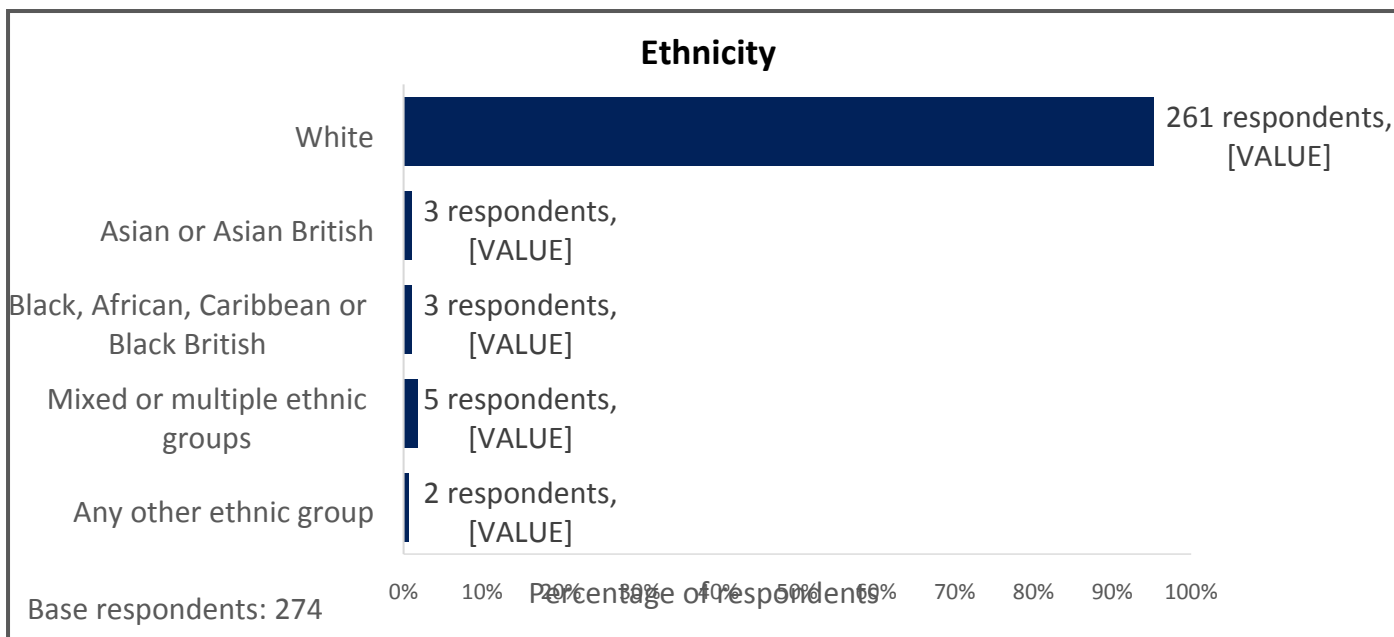


Figure 4

Agreement or disagreement with the council commitments

37. The council is committed to offering services that allow people to:

- Have the best quality of life and maintain maximum dignity and respect
- Stay healthy and recover quickly from illness
- Exercise maximum control over their own lives
- Live as independently as possible and stay safe
- Sustain a family unit and avoid family members taking on inappropriate caring roles
- Participate as active, equal citizens both economically and socially.

38. Respondents were asked to what extent they agreed or disagreed with the commitments. Figure 5 shows the results of this question.

39. A total of 55% of respondents expressed agreement with the commitments listed. Of this, 35% strongly agreed and 20% agreed with the commitments. A further 36% of respondents neither agreed nor disagreed with the commitments. The remaining 10% of respondents expressed disagreement with the commitments; of which 5% disagreed and 5% strongly disagreed.

Q1. To what extent do you agree or disagree with these commitments?

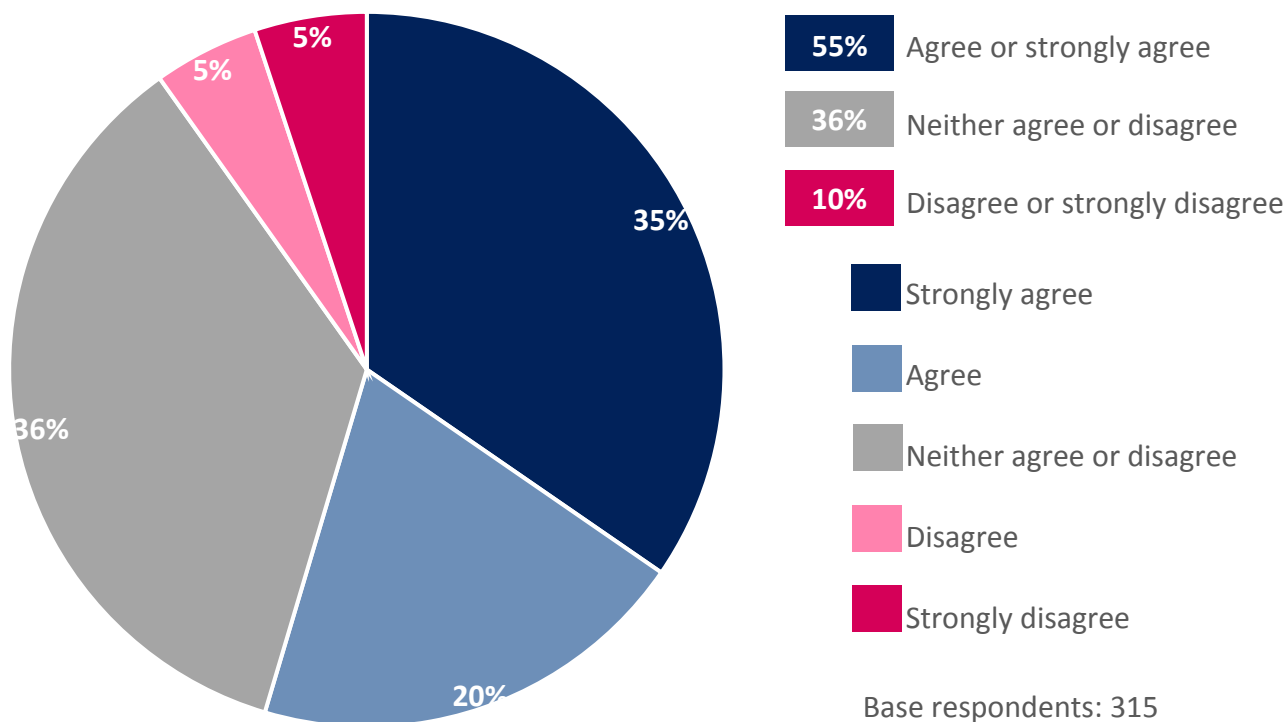


Figure 5

Agreement or disagreement with the preferred option to close both Holcroft House and Glen Lee

40. The proposed option that is preferred by the council puts forward the idea of closing two council-owned residential care homes, Holcroft House and Glen Lee, in order to make savings and respond to the changing demands within the adult social care sector.

41. Respondents were asked to what extent they agreed or disagreed with the preferred option to close both Holcroft House and Glen Lee. The results of this question can be seen in Figure 6.

42. Some 17% of respondents expressed agreement with the proposal to close both care homes; this was made up of 8% agreeing and 9% strongly agreeing. A further 3% of respondents neither agreed nor disagreed with the preferred option. The majority of respondents (80%) disagreed with the proposal to close both care homes; of which 11% disagreed and 69% strongly disagreed.

Q2. To what extent do you agree or disagree with the preferred option to close both Holcroft House and Glen Lee?

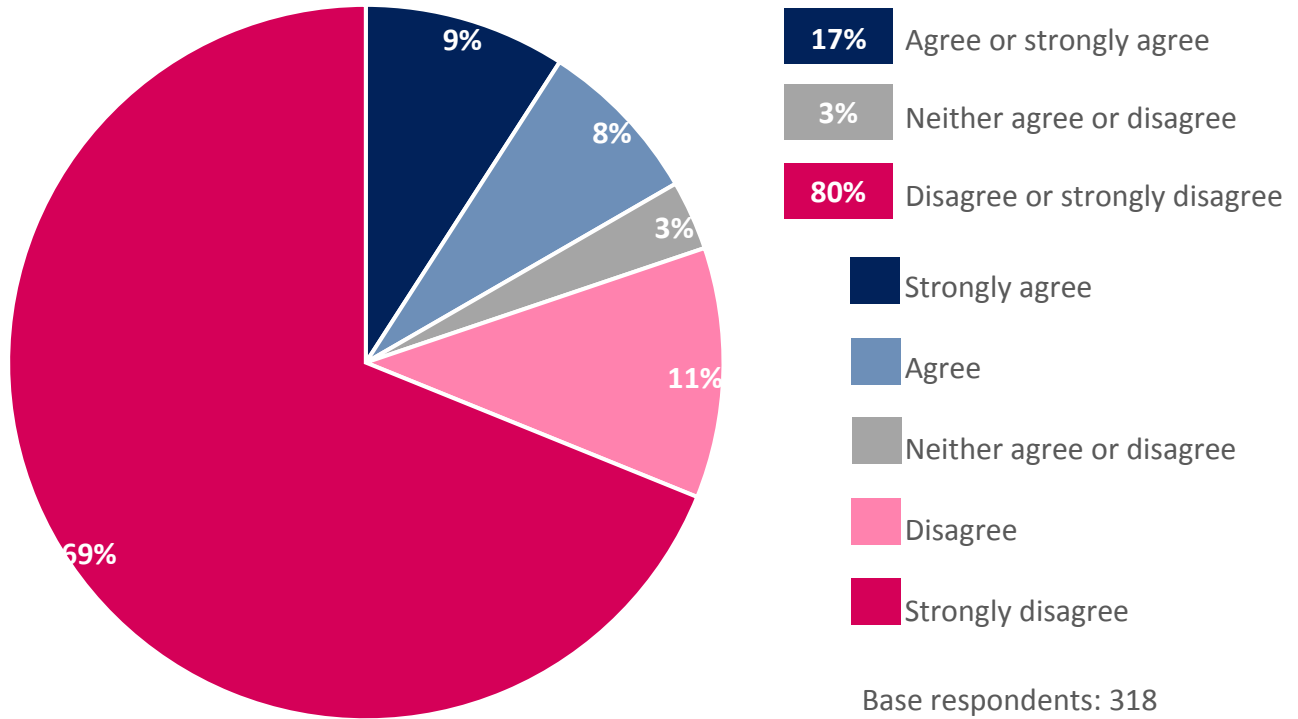


Figure 6

Impacts

43. Respondents were asked what the impacts would be on them, their family or community if the proposed changes were implemented. Figure 7 shows that 9% of respondents felt the impact of the proposed changes would be positive. Of this 3% felt it would be very positive, 3% fairly positive and 3% slightly positive. In comparison, over three quarters (77%) of respondents felt the impact of the proposed changes would have a negative impact; of which 60% felt it would be very negative, 11% fairly negative and 5% slightly negative. Of the remaining 15% of respondents, 13% felt there would no impact if the proposed changes were implemented and 1% did not know what the impact would be.

Q3. If the proposed changes were to be implemented, what impact do you feel this may have on you, your family or community?

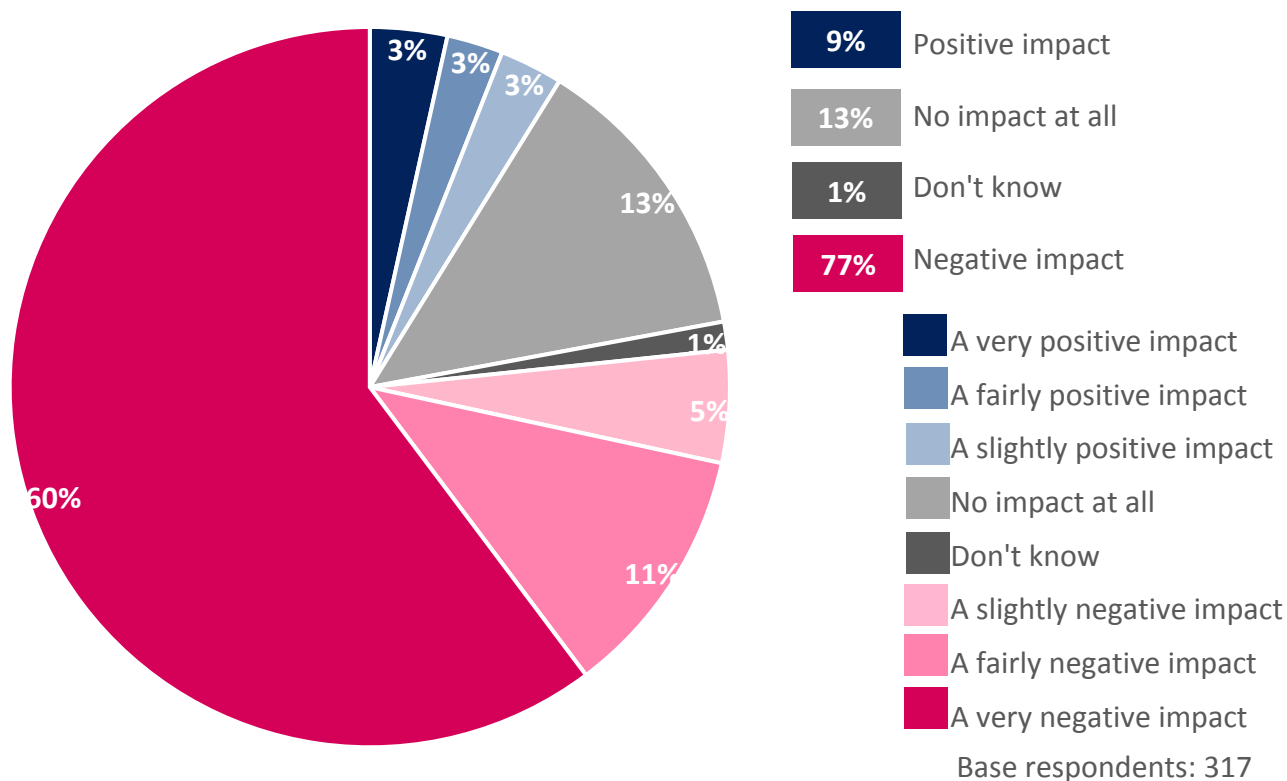


Figure 7

Qualitative written feedback from questionnaires, letters and emails

44. Respondents could provide written feedback to the consultation through a number of different routes. There were two free text questions within the questionnaire that respondents could provide feedback through. In addition anyone could provide feedback in the form of letters and emails.
45. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. Written responses to the consultation were assigned to 30 separate categories. Individual responses that raised a number of different points would be assigned to multiple categories. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation. The following section provides further detail on these categories and the numbers of respondents that raised that theme within their response.
46. Points raised within the written feedback to the consultation generally fell into one of 3 broad categories. These were:
- Comments expressing agreement relating to the proposed changes
 - Comments expressing disagreement or giving alternative suggestions relating to the proposed changes
 - Comments on the potential negative impacts of the proposed changes

Comments expressing agreement relating to the proposed changes

47. A total of 7 respondents expressed agreement with the proposed changes. The following table presents the unique comments associated with this.

General agreement with Option A to close both homes

| |
|--|
| Care homes are in poor condition and should be closed. |
| Glen Lee is a dump. |
| Residents would be better cared for in own homes or privately run care homes. |
| If the people in these homes can be moved to more suitable accommodation then closing the homes is the right way to go. |
| The business case and rationale behind the closures is sound. (There is plenty of evidence of a surplus of residential beds in the city and care in people's own homes is now the focus of adult social care.) |
| Agree with and support other ways of caring (e.g. housing with care). |
| Vulnerable people should not be allowed to live in these care homes. |

Table 2

Comments expressing disagreement or giving suggestions relating to the proposed changes

48. Figure 8 show the themes of comments where respondents expressed disagreement or gave suggestions related to the proposed closure of the care homes. The most mentioned theme (by 89 respondents) was of general disagreement. The next theme mentioned the most was the suggestion to go for the alternative option to keep both homes open, raised by 58 respondents. The third most frequently mentioned theme was various comments expressing disagreement or giving suggestions relating to the financial aspect of the care homes; this was commented upon by 56 respondents. More detail on the themes in Figure 8 can be found in the following tables.

Comments expressing disagreement or giving suggestions relating to the proposed changes

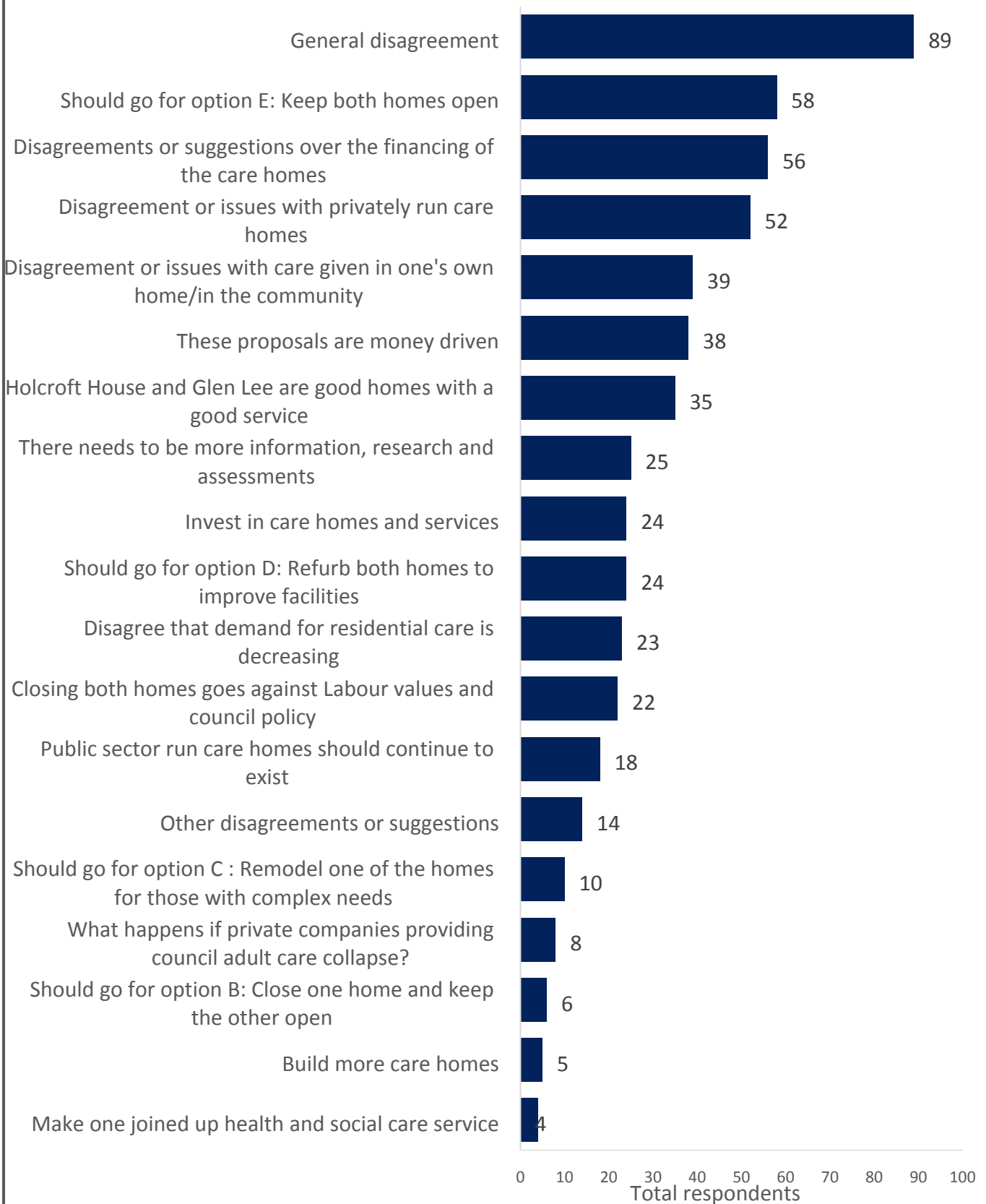


Figure 8

49. Overall, 89 respondents wrote of their general disagreement with the proposed changes to close both Glen Lee and Holcroft House residential home. The unique comments and suggestions relating to this are presented in the table below.

| General disagreement |
|---|
| Whoever drafted this proposal knows nothing about dementia. |
| This is the worst policy Southampton City Council have made. |
| The council has an obligation and a duty to provide care for those who need it - this proposal is taking away that care. |
| The preferred option is not progressive, nor will it meet the gap in the social care needs for the City's residents. |
| Closing homes is going against the council's commitment to offer services allowing people to have the best quality of life. |
| The council are trying to shift responsibility away from them. |
| Care homes are needed now more than ever. |
| Closing these homes will not be good for the community they are part of, just like many of the closures the council have already done. |
| Why are the council outsourcing this yet choosing to bring other services in house? |
| It will be difficult to find somewhere that will provide the same level of care and attention. |
| The proposed alternative accommodation in the city is not adequate enough to best meet the needs of people with all disabilities and dementia. Some of the care homes are also deemed as "requiring improvement" (Pinewood Rest, St Johns and Lawnbrook). |
| Oppose the cuts the government is forcing upon local authorities. |

Table 3

50. In total, 58 respondents suggested going with the alternative option to keep both care homes open. The unique comments and suggestions relating to this are summarised in the table below.

| Should go for Option E: Keep both homes |
|---|
| Find money from elsewhere to keep care homes open. |
| Lobby central government for more funding. |
| The homes contribute to the local economy. |
| Make our council homes leaders in elderly care. |
| The homes have just been redecorated - why do this if you they are being closed? |
| Keep both homes open to allow for continuity for existing residents which can only be in their best interests. Restrict intake of new residents and close only when it will not have a negative impact on anybody currently cared for in either facility. |
| Keep these last council owned care homes open. |
| The proposal to close these homes doesn't make sense - the business case is incoherent. |
| Work with the NHS to keep homes open and funded. |

Table 4

51. There were 56 respondents who expressed disagreement or gave suggestions in relation to the financing of the care homes. The unique comments and suggestions on this theme are detailed in the table below.

| Disagreement or suggestions over financial aspect of the care homes |
|---|
| Make cuts from other less important council budgets to keep one or both of the care homes open (Suggested budgets to cut include: roads; arts and culture; bins; fewer councillors; councillors pay). |
| Use council reserves to keep care homes open or update them. |
| Borrow and take out loans to finance the care homes. |

| |
|---|
| Stop running services at a loss, increase the care home charges to cover the cost. |
| Bring in residents who can pay for services to cover costs of running the homes, they can fill the empty spaces. |
| Support the care homes to be more cost effective (e.g. take away restrictions on where and who they can buy supplies and services from). |
| The Council should give Glen Lee and Holcroft House the opportunity to demonstrate value and financial management over a trial period of 12 months (minimum) with regular audits to monitor progress. |
| Renovate empty homes into profit making rented properties to subsidise the care homes. |
| Increase taxes to fund these services (both business rates and council tax). |
| Look into private sponsorship to fund the homes. |
| Set up charitable status for the homes in order to ask for and receive donations from the public to keep them open. |
| Put tighter restrictions on sick pay (e.g. insist those on long term sick pay see Occupational Health; do not give sick pay). |
| Review the cost of agency staff and share permanent staff across the two homes. |
| Consider an arms length management organisation for the homes. |
| Create a unitary authority across Hampshire to reduce costs and save money. |
| Sell the homes so that residents can stay there but the council can free finances for other projects. |

Table 5

52. Disagreements or issues with privately run care homes were highlighted by 52 respondents. The unique comments and suggestions regarding this are given in the table below.

| |
|---|
| Disagreement or issues with privately run care homes |
| Private care homes cost more because they are out to make a profit. How could the council provide a cheaper and better services using private care homes? |
| Private care homes push residents and their families into paying for more services without sufficient detail and accountability of services delivered. |
| Private care homes are more focused on profit than the level of care. |
| Private care homes do not provide better care. |
| Private care homes only provide basic care, they do not do things like provide activities for residents. |
| Private care homes don't have specialist skills that Holcroft House and Glen Lee do and therefore cannot provide adequate care to all residents. |
| Private care homes are not capable of providing like for like care, in either quality or availability, when Holcroft House and Glen Lee close. |
| The private care sector is not doing very well, some homes are even under investigation. There has been many instances of privately run homes not being able to cope, especially with the specialised care needed by those with dementia. |
| Is there sufficient capacity in private homes to take these new patients? |
| The council's inspections of private care homes are not frequent or robust enough to ensure standards are maintained and no exploitation is present. |
| Private homes have more abuse and neglect of residents by staff. |
| The city's private care homes are often converted old houses with narrow hallways; shared rooms and no en-suites which is not appropriate for people with care needs. |
| Unite and Unison research shows that the availability of rooms with en-suite facilities at the homes on the list provided by the Council is much more limited than the consultation alludes to. |
| Private care homes are unreliable. |

| |
|---|
| Private homes are known to refuse admission to those with more advanced dementia, incontinence or difficult behaviour or those who might have vascular dementia and therefore have a longer life expectancy with a decline in mental state over a long period of time. |
| Private care homes only accept a certain number of people who are not self-funding. |
| Unison and Unite researched all Southampton care homes and found little assurance in the availability of places for those who have no assets, can't pay top ups or who are solely funded by the local authority. Unite and Unison called Southampton care homes and found that room availability depended on how a potential resident was funded; the offer of rooms was restricted if someone was only state funded. |
| Private care home workforces are of lower quality, treated poorly and have a high turnover. (The workforce have lower pay; less sick pay; poor pension schemes and more temporary and zero hour contracts than the council care homes.) |
| Private care homes are more unstable and could close. |
| Profits from private care homes are not going back into the local area but into the companies' larger profits. |
| Lots of private companies don't pay UK tax as they are registered overseas. |

Table 6

53. A total of 39 respondents disagreed or had issues with care given in one's own home or in the community. The unique comments and suggestions relating to this are summarised in the table below.

| |
|---|
| Disagreement or issues with care in one's own home or in the community |
| Care in the community doesn't work. |
| Those with dementia often need the constant care that residential homes can provide and being in one's own home cannot. |
| Care in the community is not appropriate for all adult care needs for example it cannot support more complex needs. |
| Care in the community leaves people isolated. |
| Care in the community leaves people more vulnerable to abuse and neglect. |
| Care in the community has higher associated health and safety risks for those with dementia. E.g. A higher risk of falls or risks surrounding use of home appliances like toasters, ovens etc. |
| Some people with dementia do not have the space in their own home to stay and have the equipment needed. |
| The care given at home amounts to less support than in a care home, with staff not spending enough time in the home of the person needing care and company. |
| The support staff are never the same when receiving care at home. |
| There are little or no checks on staff actually completing duties (many don't do what they are paid to do). |
| Community services are too small and strained already to take on more residents who would have been in a care home otherwise. There are currently not enough staff to support everyone at home. |
| Care in one's own home can be very difficult or even impossible for family or friends or carers. |
| People do not trust the process for reviewing needs of those getting support in their own home to ensure it is the best thing for them. |

Table 7

54. Overall, 38 respondents believed the proposals to be mainly money driven. The unique comments and suggestions surrounding this are in the table below.

| |
|--|
| These proposals are money driven |
| Closing the homes will not save money as the savings will only be short term. |
| Closing the homes will not solve the issue of being underfunded. |
| The council is money grabbing with these proposals. |
| This proposal will save a small amount of money but have a huge impact on the care scene in the long term. |
| The council estimated savings will not be as large as predicted. |

| |
|--|
| Money saving should not be put above the care of residents. |
| Private care homes will increase prices which will reduce savings. |
| The alternative care mentioned will cost more. |
| Closing the homes is not a financially stable choice. |
| Consider the examples of Reading and Surrey councils, who also closed all their council run homes to then discover it was not cost effective and in the long-run and have bought back care homes in house. |

Table 8

55. In total, 35 respondents disagree with the closures because they believe Holcroft House and Glen Lee to be good homes with a good service. The unique comments and suggestions on this theme are detailed in the table below.

| |
|---|
| Holcroft House and Glen Lee are good homes with a good service |
| Residents like living at Holcroft House and Glen Lee. |
| The homes and service provided are good and effective. |
| Holcroft house is a shining example of how a care home should be run and the council should be proud of this. |
| The care homes have good staff |
| Holcroft house is small and one level so makes it safer and more friendly than private homes |

Table 9

56. A need for more information, research and assessments was highlighted by 25 respondents. The unique comments and suggestions for the information, research and assessments can be found in the table below.

| |
|--|
| There needs to be more information, research and assessments |
| Need more information on the costings: provide a cost-benefit analysis of how much the proposal will save vs. the cost of paying private companies to provide the service and have these estimates audited to ensure all costs have been included in the estimates. |
| Need more information and research to back up claim that demand for residential care is decreasing. |
| Provide a balanced assessment of all options suggested. |
| Need more information about the impact or equality assessments. |
| Need more information about plans to mitigate negative impacts on: moving current residents; jobs at risk; provision for respite services that will be lost. |
| Need more information about what will happen to the buildings and land. |
| Need more information to clarify the preferred option: what is meant by 'other providers'; who would pay the fees (including additional fees) incurred by the residents. The council or the residents? |
| Need more information on admissions criteria of private residential homes. |
| Research the examples given (by Unison and Unite) of local authorities that kept their care provision in house. Examples include: Glasgow City Council; Monmouthshire County Council; Solihull Council; Poole Council; Cumbria County Council; Hertfordshire County Council; Liverpool County Council; and Halton Council. Activities include building new council care homes including ones with specialist dementia facilities; working in partnership with private companies to provide care and develop dementia hubs and centres; buying care homes to prevent closure; redeveloping and modernising care homes; creating a non-profit arms length management company to keep provision in-house; replacing old care homes with newer ones; acknowledging that residential care has a part to play in the social care sector as some people cannot always remain in their home. |
| Reassess residents needs before making a decision to close the homes and get a more accurate idea of what will be needed. |
| Need more information as to how the increasing demand for specialist care will be met. |

Table 10

57. Investing in care homes and services was suggested by 24 respondents. The unique comments and suggestions relating to this are presented in the table below.

| |
|--|
| Invest in care homes and services |
| Invest to make savings in the long term. |
| Invest in preparation for the changes in the population increasing needs for care services (e.g. an ageing population and rise in life expectancy). |
| Do not believe demand for specialist residential care is decreasing; believe it is actually increasing. |
| Complex and specialist dementia needs should be provided for by the state. Build more fit for purpose properties which is specialised for people to live in - including for those with additional needs. |
| Need to develop an increased range of consistently high quality care. |
| There should be enough public run care homes for all who need it. |
| Work with not for profit adult care providers to maintain high standards of care in the city. |
| Improve management of Glen Lee and Holcroft House and keep them accountable as they have been mismanaged. |
| Have more respite care across the city; offer more respite care within Glen Lee and Holcroft House. |
| Train care homes staff in risk management etc. |
| Have a smoke free area for residents in Glen Lee and Holcroft House. |
| Make Glen Lee and Holcroft House dementia hubs or day centres with resources. |
| Build more modern care homes to replace Glen Lee and Holcroft House. |

Table 11

58. In total, 24 respondents suggested going with the alternative option to refurbish both homes to improve facilities. The unique comments and suggestions relating to this are summarised in the table below.

| |
|---|
| Should go for Option D: Refurbish both homes to improve facilities |
| Refurbishing both homes causing a reduction in capacity should be no issue if there are already vacancies. |
| Invest in these homes - they are purpose built and once refurbished will be better than some private homes. |

Table 12

59. A number of respondents (23) disagreed that demand for residential care is decreasing. The unique comments and suggestions regarding this are given in the table below.

| |
|---|
| Disagree that demand for residential care is decreasing |
| It's not true that demand for residential care is decreasing. The government are just pushing people towards extra care housing and staying at home because it is cheaper to fund. There has also been an increase in people with unmet care needs in the UK. |
| An ageing population would actually suggest an increase in demand of all adult care services. |
| Dementia cases are on the rise. |
| Don't believe there is a surplus of spaces for those with dementia or complex needs in the city. |
| The declining nature of dementia means this kind of care will always be needed. |

Table 13

60. The preferred option to close both homes was considered to be going against Labour values and council policy by 22 respondents. The unique comments and suggestions on this theme are detailed in the table below.

| |
|---|
| Closing both homes goes against Labour values and council policy |
| People will stop voting for a Labour council. |
| Labour are not sticking to their own values and morals and should be fighting to keep these homes open. |
| The preferred option goes against the 'Southampton City Council First' policy the Council has adopted, which provides a framework for considering appointment of in-house services to deliver council requirements before using external companies. External companies should not be used when Southampton City Council's in-house services can meet the Council's requirements and demonstrate 'Best Value'. If the Council commissions services |

to private companies it will lack flexibility to respond to local needs – the stated reason for ending the Capita Services contract.

The preferred option to close both homes does not follow the Labour Party’s commitment to ‘insource’ our public and local council services.

Don't use closures of care homes as a way to push the fault to central government.

Table 14

61. Overall, 18 respondents think public sector run care homes should continue to exist. The unique suggestions and comments surrounding this view can be found in the table below.

Public sector run care homes should continue to exist

Every city should have at least one public sector run residential care.

Bring back private care homes under council ownership again, like Surrey council.

Publicly owned care homes benefit the economy; its workers; residents, families and the local community. It ensures that public interests are put ahead of shareholders’ and that there is democratic accountability for services.

I strongly believe that Council facilities should be available for those that need them, whether fee paying or not.

Table 15

62. Other disagreements and suggestions that did not necessarily fit within other themes were given by 14 respondents. The unique comments and suggestions are summarised in the table below.

Other disagreements and suggestions

Stop refusing new permanent admissions.

The government via local Councils and the NHS should take a more holistic look at the whole issue around dementia and the effects and cost on the whole family - not just the one with the disease.

70 spare beds will easily be filled over the winter months.

Have a lower threshold for acceptance/admission to Holcroft House and Glen Lee.

One of the biggest causes of elderly people’s health deteriorating is a fall. Much more needs to be done to keep them mobile. Staff tend to leave them sitting far too long, exercise helps the mind and the body. More physiotherapy is needed, more expense, but cheaper in the long run saving all those injuries.

Disagree with installing en-suites as people with dementia are not used to them/don’t need them.

Fill vacancies in Glen Lee and Holcroft House with those who need rehabilitation following an operation or illness.

The closure of council care homes alongside the fact that if you have savings you have to pay for your own care will push people to spend their savings and just get free care from the council.

Central government should pay for all care needs if you have paid national insurance.

The council should create a longer term vision with strategy and policy to meet the care needs of all citizens, including older adults (and their carers and/or families), including the minority with dementia.

Central government should cut funds to other government budgets to give money to hospitals and care homes.

Disagree with some of the commitments as they are not possible or irrelevant for those with dementia.

Should work with private homes to create a joint scheme.

Table 16

63. A total of 10 respondents suggested going with the alternative option to remodel one of the homes for those with complex needs. The unique comments and suggestions relating to this are summarised in the table below.

Should go for Option C : Remodel one of the homes for those with complex needs

There is a need for a home for those with complex needs.

There needs to be a home for those with complex needs within the city.

Table 17

64. Questions and doubts were raised by 8 respondents around what would happen if private providers of adult care collapsed. The unique comments surrounding this can be found in the table below.

| |
|--|
| What happens if private companies providing council adult care collapse? |
| The council needs an emergency/contingency plan for when private companies collapse. How will council cope if the service they pay for is abruptly stopped due to private care company ceasing to exist? |
| Look at local authorities that are creating new, publically owned or led residential care or putting measures in place to reduce or minimise the effects of private providers going under in what is a volatile time for the sector. |

Table 18

65. In total, 6 respondents suggested going with the alternative option to close one home and keep the other open. The unique comments and suggestions relating to this are summarised in the table below.

| |
|---|
| Should go for Option B: Close one home and keep other open |
| Close Glen Lee and keep Holcroft House open. Glen Lee is dirty, smelly and has horrible staff. Holcroft House is a lovely home with lovely staff. |
| The council should keep at least one home open. |

Table 19

66. A suggestion to build more care homes was suggested by 5 respondents. The unique comments and suggestions on this theme are detailed in the table below.

| |
|---|
| Build more care homes |
| Other councils are opening new care homes and centres and they are under the same financial pressure. |
| Demand for care service is only increasing. |

Table 20

67. Overall, 4 respondents would like to see health and social care services combine to make one joined up service. The unique suggestions and comments surrounding this theme can be found in the table below.

| |
|--|
| Make one joined up health and social care service |
| Integrate health and social care into one joined up service. (A nationally run service providing free care and treatment on the basis of need, with fair pay for employees.) |
| NHS should take on care duties of council to have all health care and services under one organisation. Making healthcare free from cradle to grave. |

Table 21

Comments on the potential negative impacts of the proposed changes

68. Figure 9 shows the themes of comments that discuss the potential negative impacts of the proposed changes. The theme highlighted by the most respondents (85) was the negative impact on the resident and families currently living in the homes. The next most frequently mentioned theme was the negative impact on those working at the care homes; this was mentioned by 31 respondents. The third most referred to theme was the negative impacts on those with dementia who need care and their carers/families, which was raised by 28 respondents. More detail on the themes in Figure 9 can be found in the following tables.

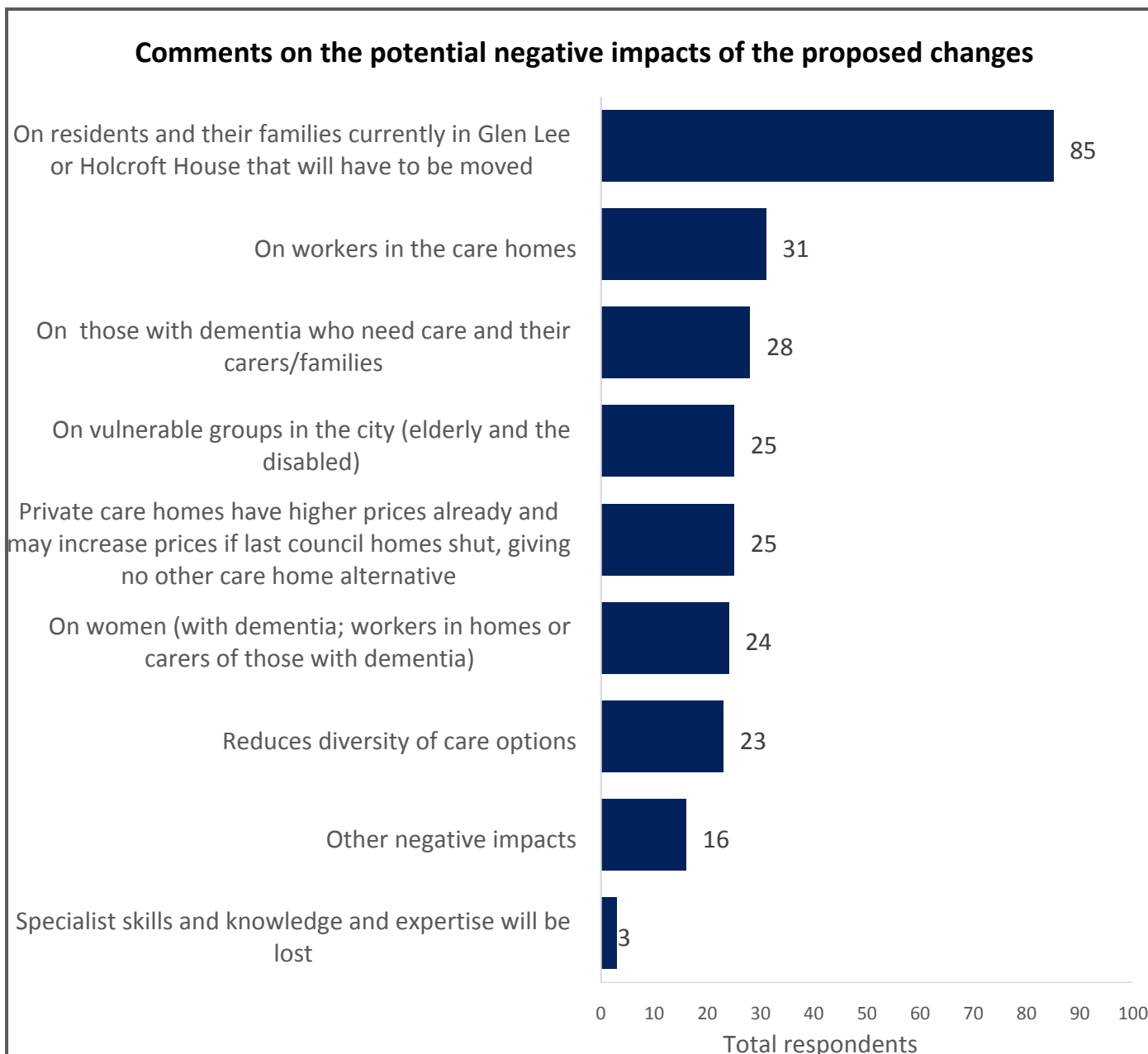


Figure 9

69. Overall, 85 respondents think there will be a negative impact on residents currently in Glen Lee and Holcroft House and their families. The unique comments and suggestions relating to this are presented in the table below.

| On residents and their families currently in Glen Lee or Holcroft House that will have to be moved |
|--|
| Moving residents could cause: distress; stress; trauma; worsen their mental health and/or dementia; cause more or worsen health issues; shorten life expectancy. |
| Residents will be losing their home. |
| Raises safeguarding concerns for those being moved. Some are under 24 hour supervision and could cause harm to themselves or others if they lose this. |
| If residents have to live alone again this could isolate them. |
| Extra care housing or living independently will not meet the residents needs and they will not cope with having care at their home again. |

| |
|---|
| Concern that residents without family will be put anywhere. These residents may find it the hardest to move and need extra support. |
| Families may have to travel further or find the journey more difficult to visit family that have been moved. |
| Families may suffer as they have to take on more care duties that are no longer provided for by the care home. |
| Residents are being put at a disadvantage due to their Age or Disability (dementia) which are protected characteristics. |
| Residents may have to pay more for care or receive a lower standard of care. |
| Will families have to look for another place for their relative currently residing in Glen Lee or Holcroft House? |
| Elderly residents could be at risk when being moved. - steps should be taken to prevent this from happening and causing harm. |
| Residents could be split up from their friends at the care homes - steps should be taken to prevent this from happening and causing harm. |
| Can you assure as stated in the Equality and Safety Impact Assessment that “Financially, no resident will be worse off as a result of this proposal...” and clarify this is the case for all residents of Holcroft House and Glen Lee and for how long. |
| Private residents who are paying the council to live at Holcroft House or Glen Lee will have to pay the difference for a private home. |

Table 22

70. A total of 31 respondents mentioned the potential negative impact on workers in the care homes. The unique comments and suggestions relating to this are summarised in the table below.

| |
|--|
| On workers in the care homes |
| Even if workers are moved to the private sector, their pay will be a lower rate than in council care homes, with worse sick pay and pensions schemes and could be on temporary contracts with no guaranteed hours. |
| Jobs are at risk for those working in the care homes. |
| There is no guarantee of a job move for those currently working in Glen Lee and Holcroft House. |
| Workers will not find comparable terms and conditions and work elsewhere. |
| There will be an increase in unemployment. |

Table 23

71. Potential negative impacts on those with dementia needing care and their family/carers were expressed by 28 respondents. The unique comments surrounding this can be found in the table below.

| |
|--|
| On those with dementia who need care and their carers/families |
| This proposal will harm those with dementia who need care. |
| This proposal will harm carers of those with dementia. |
| This will put affordable and good quality care out of reach for many who need care in the city. |
| People who don't meet the criteria for council-funded care may be pushed into poverty. |
| Those needing residential care may have to be placed further afield, meaning family and friends will have to travel further to visit. |
| More family members may have to become informal carers for their older relatives. |
| Will it be harder to access respite services? |
| The rate paid by the council is nowhere near the current market rate for private care home prices and requires substantial top up from the family. |

Table 24

72. In total, 25 respondents believe the proposed changes will have a negative impact on vulnerable groups in the city, including the disabled and elderly. The unique comments and suggestions on this theme are detailed in the table below.

| |
|---|
| On vulnerable groups in the city (the elderly and the disabled) |
| Closing secure homes with assistance could increase safety risks for individuals with dementia and the surrounding area. |
| This will particularly impact residents with dementia and no family to support and advocate for them. |
| May leave people vulnerable and isolated. |
| Do those that are vulnerable in this situation like the elderly and those with dementia get a say? It seems they have no voice in this. |
| It will impact the elderly who have worked and paid their way and deserve more |

Table 25

73. Private care homes increasing their already high prices following the closure of the last council homes in the city was a concern for 25 respondents. The unique comments and suggestions regarding this are given in the table below.

| |
|---|
| Private care homes have higher prices already and may increase prices if last council homes shut, giving no other care home alternative |
| For both individuals and for the council. |
| Private care homes will increase their prices because they will be the only residential care option in the city. |
| As demand increases so will cost. |
| The private care homes may charge the council more for residents living at the care homes for an extended period of time. |
| In order to provide the like for like provision promised, the council will end up paying more in the long run to private providers. In other areas private providers have increased their charges for local authorities and councils have ended up returning contracted out care homes back to their control. |
| The private care homes will increase prices and it will end up costing more than it would cost to keep Glen Lee and Holcroft House open. |

Table 26

74. A concern about the impact on women the proposed changes could have was expressed by 24 respondents. The unique comments and suggestions around this theme are in the table below.

| |
|--|
| On women |
| On low paid women. |
| Lots of women work at the care homes. |
| Women are more likely to require local authority support for later life care due to living longer and having had lower-paid or part-time jobs. |
| If the homes close, any unmet and informal care needs will likely be taken on by women. Women may give up paid employment or reduce their working hours to provide care. Alternatively, if they can't afford to stop working their wellbeing will be badly affected by working 'double shifts' – going to their day job and then doing extra hours to ensure others are cared for. |
| On women with dementia (women are often more likely to get dementia and need residential care). |

Table 27

75. Overall, 23 respondents think the proposed changes will reduce the diversity of care options available in the city. The unique comments and suggestions relating to this are presented in the table below.

| |
|---|
| Reducing diversity of care options |
| The removal of these care homes would impact negatively on people choices and access to care. |
| For some people residential care is the best option available. |
| This will leave private care as the only residential care option. |

| |
|---|
| Closing these homes will reduce the amount of care available in the city and there will no longer be enough capacity to meet demand, people will have to go further afield. |
| Alternative options mentioned in this proposal are not always appropriate care for all. |
| There is a need for respite and day care. |
| Unison and Unite believe the closure of Glen Lee and Holcroft House would significantly limit the choice of homes available to people who have no assets, can't pay top-ups and who are solely funded by the local authority. |

Table 28

76. A total of 16 respondents mentioned other potential negative impacts from the proposed changes. The unique comments and suggestions relating to this are summarised in the table below.

| |
|---|
| Other negative impacts |
| Quality of care service will reduce in the city. |
| Closing these homes will put more pressure and strain on the NHS who are likely to end up caring for these people as they struggle to discharge older patients to an appropriate home. (bed blocking). |
| Rehousing all residents from Glen Lee and Holcroft at the same time will impact significantly on the residential vacancies in the city and will mean placements will be harder to find. |
| Negative impact on those with protected characteristics: Gender; Age and Sexuality. |
| Other councils who have shut their own homes and used private have had buy back care homes to run themselves due to spiralling costs. |
| There is a potential that private care homes will look to make more revenue from private residents rather than the reduced amount agreed between them and the council. Potentially meaning residents would be moved on again. |

Table 29

77. In total, 3 respondents believe the proposed changes will cause specialist skills, knowledge and expertise in care to be lost. The unique comments and suggestions on this theme are detailed in the table below.

| |
|---|
| Specialist skills and knowledge and expertise will be lost |
| Bad to lose specialist skills and knowledge of care workers. |

Table 30

Public engagements, meetings and verbal feedback

78. In total there were seven separate public engagement events, one staff meeting and one stakeholder meeting where feedback was received to support the consultation process. The range of engagements are outlined below:

| Date | Topic | Number of attendees |
|---------------------------|---|---------------------|
| 8 th October | Pre-consultation awareness | 20 (approximately) |
| 30 th October | Intro to consultation | 14 – 18 |
| 30 th October | Staff meeting | 28 |
| 31 st October | Stakeholder meeting | 2 |
| 22 nd November | Discussion with Cllrs Hammond & Fielker | 16 |
| 3 rd December | Advocacy | 18 |
| 17 th December | Feedback on consultation themes | 23 |

| | | |
|--------------------------|-----------------|----|
| 8 th January | Q&A Open agenda | 13 |
| 11 th January | Q&A Open agenda | 1 |

Table 31

79. In total around 130 people engaged with this programme of events. The main purpose of these events was to explain the proposals, answer questions and signpost people towards the questionnaire as the main route for consultation feedback.

80. During the course of these events some feedback was gathered and the main themes were:

Disagreement with proposed service charges:

- Why consider re-modelling the homes if this proposal is a cost-cutting exercise and therefore money driven?
- The homes are good and provide a good service, so why close them?
- Private care homes do not provide as good a standard of care as the council run homes.
- Private care homes will not provide like for like care.
- Local authority funded residents in private care homes have to share rooms.
- Some private care homes do not like to accept many if any council funded residents.
- Some of the care homes given by the council as alternatives do not actually take residents with dementia.
- Dementia is actually increasing and demand for care homes will increase.
- Many private care homes are just converted homes and therefore the space is not appropriate.
- Private care homes have a high staff turnover.
- For some dementia sufferers, care in their own home or supported living would not be adequate.
- Do not want the homes to close – would like them to remain open.
- Issues when a poorer resident ends up subsidising the cost of care for another resident with the same needs but much more personal savings.
- This proposal is just a quick fix rather than a long term solution.
- Concerns that private care homes do not have the financial stability to be used by council.

Suggestions related to the proposed service charges:

- The council should reconsider its position following central government's commitment to more money in adult social care in its budget.
- The full cost and savings should be accurately worked out and published.
- Have the council considered running the homes as private homes?
- There should be efficiencies made when it comes to agency staff as currently there is a lot of agency staff covering sickness. This needs to be addressed.
- Actively invest in the wellbeing of permanent staff to improve their wellbeing, reducing sick leave and therefore saving money.
- Arrange staff to work in both homes, being flexible to cover where they are most needed.
- Should upgrade or remodel the homes.
- Build more care homes.
- Should fill vacancies of Glen Lee and Holcroft House with self-funders.
- Look into better models to more efficiently run the care homes.
- Should make the homes day-centres again.
- Consider making savings elsewhere in the budget.

Negative impacts:

- Skills and training that specialise in dementia care will be lost if homes close.
- Residents in the care homes will be severely affected by a move.
- Will private care homes increase their prices as the last two council run homes close?

- Concerned that promises made by labour council to cover extra costs of moving residents may be lost if the council were to become conservative. .

Feedback about the consultation process:

- Concerns over how the views of family members of people in Glen Lee or Holcroft House will be held equal to the council as they are a large body in comparison.
- Consultations should be conducted by an independent body.
- Some relatives of residents were concerned that there is not enough time to discuss and get feedback from residents with dementia on the consultation, especially with the consultation running over the Christmas period.
- It feels like the decision has already been made.
- Concern that this is just the last in a series of closures of care homes, so why would they not close?

81. Many of these topics will have also been raised through other channels as a part of the consultation but in the interest of transparency they have also been summarised here.

Petitions

82. There was one petition on the proposals for the future of the care homes, this petition had over 1,500 signatures so triggered a discussion at full council. This discussion took place on 21 November 2018.

83. The petition had a total of 2,565 signatures to the following:

- 'We the undersigned petition the council to abandon its proposals to close the last two council owned residential care homes: Glen Lee and Holcroft House, and place up to 85 loyal care staff at risk of redundancy.'

Feedback on the consultation process

84. Southampton City Council are committed to make the whole consultation process as transparent and fair as possible. As a part of this commitment, any feedback on the consultation process itself received during the course of the consultation is gathered together here.

85. Overall, out of the 380 people or organisations who took part in the consultation, 26 commented on the consultation process itself.

86. The table below summarises the unique comments and suggestions given about the consultation process.

| Comments on the consultation process |
|---|
| It feel likes the council has already made a decision by no longer sending people who need care to these homes, then saying the buildings are not fit for purpose. This consultation is a PR exercise. |
| Alternative proposals do not seem to have been properly considered. |
| Make sure talks with all interested parties take place (including talks about alternative options): staff, trade unions, labour members and constituency parties, residents and their families, universities, third sector organisations. |
| How are residents with dementia being consulted on this and given the chance to meaningfully participate as required in Section 4(4) of the Mental Health Capacity Act 2015? Make sure they are listened to as to how this could affect them. |

| |
|---|
| There has been little or no liaison with the community on this. |
| This survey presents options in a very biased way and should be presenting them as a balanced assessment. |
| There is not enough information about each home to decide which home should remain open. |
| There is nothing the public or residents can do about the closure. |
| Ensure all next of kin receive a copy of the consultation. |

Table 32

Conclusion

87. Southampton City Council sought views on proposals for the future of Glen Lee and Holcroft House care homes. The consultation ran for 12 weeks from 17 October 2018 to 16 January 2019.
88. As this report has demonstrated the consultation was extensively promoted throughout the period leading to good levels of engagement.
89. In total, there were 380 responses to consultation. Of this, 320 responded to the consultation questionnaire and all other submissions were made via emails, letters or in a public meeting. This consultation ran parallel with the overall budget consultation and two other consultations on specific proposals.
90. All questionnaire results have been analysed and presented in graphs within the report. In addition all written responses to the consultation were read and comments assigned to a category based upon similar sentiment or theme and descriptions have been provided of each category within the report.
91. In conclusion, this consultation allows Cabinet to understand the views of residents and stakeholders on the proposals that have been consulted on. It represents the best possible summary and categorisation of all the feedback received through the consultation period. Therefore it provides a sound base alongside the other information to inform a final decision.

Part 2 – Consideration of the Consultation Feedback

Summary

92. This report considers the outcome of a period of public consultation that took place from 24 October 2018 – 16 January 2019, considering the future use of Glen Lee and Holcroft House, Southampton.

Background

93. Southampton City Council currently provides residential care services for older people and older people with dementia at Glen Lee, Wavell Road, Southampton, SO18 4SB and Holcroft House, Holcroft Road, Southampton, SO19 6HA.

94. The consultation ran for 12 weeks from 24 October 2018 and followed the agreed protocol on proposals affecting its future use.

95. Southampton City Council currently provides residential care services for older people and older people with dementia at Glen Lee and Holcroft House. The council has considered a number of options relating to these homes including closing one or both of them, re-modelling one of them so it can support people with more complex needs, or refurbishing the homes and keeping both homes open as they are now.

96. Southampton City Council recognise that demand for adult social care is increasing, however, the demand for residential care is decreasing.

97. The proposal considered five options, and recommended that the preferred option was to close both homes on 31st March 2020.

98. The main drivers for this proposal to close the service are:

- People are living longer with complex health conditions and would like a choice in how their care is provided.
- People wish to continue living at home for as long as possible, or to access alternatives like Housing with Care or Shared Lives schemes, rather than go into a residential care home.
- Both Glen Lee and Holcroft House are dated buildings, and whilst the quality of the care by staff is good, the facilities no longer meet modern standards.
- There is an over-provision of residential care placements in the local area.
- These services are higher, and therefore savings can be generated.

99. The proposal of closing both homes has anticipated savings of £1.3m, and if the council supported the option to close one home it would save the council an anticipated £913,000 a year if Glen Lee was closed, and £413,000 a year if Holcroft House was closed.

100. The unit cost (gross) based on 33 beds at Glen Lee and 34 Holcroft House at actual occupancy for one bed was £1,116 per week in 2017/18. The annual gross expenditure for 2017/2018 was £3,390,000.

101. The unit cost (gross) based on 100% occupancy (33 beds at Glen Lee and 34 Holcroft House) for one bed in 2018/19 is expected to be £1,057 per week. The annual gross expenditure for 2017/2018 was £3,390,000.

102. Holcroft House has maintained its occupancy. In 2017/2018 the average occupancy was 94.6% which has increased to 96.8% in June 2018.
103. Glen Lee had an average occupancy of 78% which following a substantial quality and safeguarding large scale enquiry it was reduced to 43.5% in June 2018.
104. At Holcroft House there 24 permanent residents, 5 respite and 5 vacancies. At Glen Lee there are 11 permanent residents, 2 residents awaiting Nursing placements, 7 respite and 13 vacancies. This information is true as of 14 January 2019.
105. The full cost of placement at Glen Lee and Holcroft is £558.04 per week (based on the maximum cost to the individual) the current contract rate in private residential homes is £474.18 per week.
106. Despite an increasing older person's population – increased by 12% between 2014 and 2018, and due to increase further, the council's use of residential care settings has reduced during that same period from 416 in March 2014 to 330 in September 2018 (21% reduction). The trend is even more marked over an eight-year period from 2011 to 2018 – 27% reduction. At the same time however, demand for nursing care has been increasing, reflecting a change in how need is met, as residential settings provide care for only the most complex of clients.
107. The current residents in both homes, if both homes close will need to be placed at alternative residential units, and will not be supported at home.
108. If the option is agreed to close one home, residents of the home to be closed will have the choice of moving to the one home that remains open, or to a suitable alternative.
109. The move to an alternative home would be subject to all assessments being completed, and agreement from the individual or their representative. If the resident chooses to move to an alternative home, Southampton City Council will ensure that they will not have pay more for their placement than they currently do.

Consultation

110. The 12 week consultation ceased on 16 January 2019, to consider the future use of Glen Lee and Holcroft House. The consultation on the future use of the residential homes received a total of 379 responses. A number of letters were also sent to local MP's and Councillors from concerned relatives, residents and staff.
111. Unison and Unite completed a joint campaign against the home closures.
112. Due to the number of queries raised through the consultation, the proposal was discussed on 15 November 2018 at the Overview and Scrutiny Committee.
113. The families were engaged every two weeks during the consultation to keep them up to date with the consultation to discuss advocacy, process, and to meet with the Leader of the Council, Councillor Hammond and Cabinet member for Adult Social Care Councillor Fielker.
114. The family meetings were attend by an average of 13 families. All communication and presentations were followed up with emails and letters.
115. Staff have been engaged every two weeks, and night staff have been supported to represent their views as part of the public consultation

116. The quality of alternative provision in the independent sector has been raised as a concern during the consultation. It is essential that the current level of care is not diminished and that their social care needs are fully met. Residents continue to enjoy the same quality of life, dignity and remain happy. Individuals will receive the same level of care in the independent sector to maintain their quality of life, dignity and to engage in activities that suit them.

117. Quality of Existing Provision was raised during the consultation period, compared to other homes, Holcroft House and Glen Lee provides a good level of care and activities and this is due to the dedication of the staff. The proposal to close the service is in no way a reflection on the quality of the care provided at Glen Lee and Holcroft House or on our staff.

Alternative Options Considered and Rejected

118. The council has considered a number of options for these homes, including:

- A. Closing both homes
- B. Closing one home
- C. Remodelling one home to support people with more complex needs
- D. Refurbishing the homes to improve facilities
- E. Keeping both homes open as now.

A: Close both homes (the preferred option at the start of consultation). Other providers would continue to provide residential care where this is needed, whilst the council focused on supporting people at home or in schemes like Housing with Care. For people who currently live in the two homes, this would mean that alternative care and support would have to be put in place. Thorough assessments would be undertaken of each individual resident of the homes to determine their needs and how they could best be met in future. These would take into account the views and preferences of the person, as well as their families, carers and where appropriate their independent advocates. This option would save the council £1.3 million per year.

B: Close one home. This would mean that either Glen Lee or Holcroft House remained open, whilst the other closed. For people who currently live in the home that was closed, this would mean that alternative care and support would have to be put in place (as above). This option would save the council £913,000 a year if Glen Lee was closed, and £413,000 a year if Holcroft House was closed.

C: Re-model one home to support people with more complex needs, as whilst demand for residential care is decreasing, demand for more intensive or nursing care is increasing. This would mean that fewer residents could be supported, as space would need used to put in place facilities like larger rooms, more toilet and bathing facilities and access for specialist beds. It would mean that alternative care and support would have to be put in place for some people who currently live in the homes. It would also require significant investment. The preliminary estimate of costs to remodel Holcroft House was £1.75 million.

D: Refurbishing the homes to improve facilities, for example en-suite personal bathrooms and toilet facilities and/or facilities that would allow couples to continue living together. This would mean that fewer residents could be supported, as space would need used to put in place such facilities. It would mean that alternative care and support would have to be put in place for some people who currently live in the homes. It would also require significant investment.

E: Keep both homes open. This option would mean that both homes stayed open, as they are now, and the council would try to ensure the homes had as few vacancies as possible by marketing them to people who pay for their own care.

119. As part of option C further work has been completed to look at the option of developing Glen Lee in to a Nursing Home. This has been rejected due to the substantial investment required and that the investment would not be sustainable in the future.
120. The preferred option to close both homes was the most unpopular option during the consultation. 80% of respondents disagreed with our proposal. Consultation found that the alternative private homes were not found to be acceptable to the relatives of the current residents of both homes.
121. It has been highlighted that both homes need to look at their business model, and to establish different business models going forward to ensure sustainability.
122. Option B is now currently the preferred choice post consultation, and it is felt that Glen Lee should be the home that is closed to allow for optimum savings to be generated.

Detail

123. Overall there appears to be an agreement with the overall principles of Adult Social Care set out in the consultation, however, the respondents did not seem to answer this in relation to the needs of the current residents.
124. To close both homes (the preferred option at the start of consultation) was the most unpopular option during the consultation. The majority of respondents did not agree with this option, as they felt that both homes had good quality care, which was more important than having the accommodation that the council aspired to.
125. Other providers would continue to provide residential care where this is needed. During the consultation it was found that the alternative private homes were not found to be acceptable to the relatives of the current residents of both homes.
126. With regard to the option to close one home, Glen Lee occupancy is significantly lower than Holcroft House, less people would be affected, and the amount of savings will be greater if Glen Lee is closed. It is anticipated that the current residents in Glen Lee could be supported within Holcroft House with the agreement of their representative and it is in their best interest. The initial care management review completed indicates that the risk to those at Glen Lee is lower than at Holcroft House. Further regular assessments and reviews will be required of all residents.
127. During the consultation remodelling of the homes was considered, looking at Glen Lee becoming a nursing home and Holcroft House to be a dementia hub. Although this would be beneficial to the communities of Southampton, it was not financially sustainable. The remodelling would require a substantial investment from the council. It was proposed that Glen Lee could be demolished and a 32 bedded nursing home could be built on this site. Although, there was a commissioning requirement for the provision, there was not a financial model, and would require a £5.9m investment. The remodelling of Holcroft house, considered the option of reducing the number of beds to accommodate more complex needs, and to widen the service choice to offer day services, meal provision and low level health needs. There was neither a financial model nor commissioning requirement. This has therefore been rejected as an option.
128. It has been highlighted that both homes need to look at their business model, and to establish different business models going forward to ensure sustainability. Holcroft House needs minimal investment to maintain the unit at the current service provision. Although further investment is required by Southampton City Council to ensure that it is adequately budgeted to provide the required level of support.

129. It is not financially viable or a requirement to continue with both homes, as there is an over provision of residential homes with dementia in the city or on its boundary. Therefore, the option to keep both homes at the current level of investment has been rejected.
130. Option B to keep one home, if one home is to close then Holcroft should be the preferred home to remain open due to impact on residents, and savings generated.
131. Themes from consultation:
- Disagreements or suggestions over the financing of the care homes
 - Should go for option E: Keep both homes open
 - Disagree with privately run care homes
 - Disagreement with care given in one's own home/in the community
 - These proposals are mostly money driven

Financial

132. Financial modelling has been undertaken to ascertain the financial implications of the future care arrangements set out in this report. It is difficult to predict future costs as these will depend upon the numbers of customers supported, the types of care arrangement and the costs of these arrangements.
133. The retention of Holcroft House without further adaptation would mean that the overall savings achieved would reduce from £1.3m for both homes to £913,000 a year if only Glen Lee was closed. Further investment is expected to be required to ensure sustainability of Holcroft House. A staffing restructure will be undertaken to ensure the right number of staff, with appropriate qualifications to meet the level of need and support the residents. A further review of the budgets, including the levels of sickness, and overall management of the homes will need to be considered.
134. The longer term implications for the future use and further development of the building and facilities in line with expectations of clients and wider stakeholders will also need to be considered should Holcroft House be retained. This work will continue to explore the options raised during the consultation around providing additional services. These costs have not been quantified at this stage.

Legal

135. Southampton City Council has a statutory responsibility to accommodate people assessed as requiring residential care services. There is a duty to make sure all care home provision that the Council places residents in is safeguarding individuals and that effective contract management is in place.
136. There was a common law expectation duty to consult on the proposals put forward. The Council carried out a 12 week detailed consultation in line with the compact agreement. Cabinet must take into account the responses given during the consultation process before making any decision.
137. The Equality Act 2010 imposes various duties on Local Authorities and in particular the duty to have due regard to its public sector equality duty when carrying out any function. In particular the duty to eliminate discrimination, harassment and victimisation and advance equality of opportunity and fostering good relations. Local Authorities also have a duty under the Human Rights Act 1998, when carrying out any function, not to act incompatibly with rights under the European Convention for the Protection of Fundamental Rights and Freedoms. In particular Article 2 The right to life shall be protected in law, Article 8, the right to respect for private and family life and Article 25 the rights of elderly to lead a life of dignity and independence and to participate in social and cultural life.

138. Local Authorities when carrying out any function must adhere to the United Nations Convention of the Rights of Person With Disabilities and in particular respect for dignity, autonomy, freedom to make own choices, equality and elimination of discrimination. The ESIA sets out how the Council has had due regard to equality, human rights and safety implications.
139. The Care Act 2014 imposes various statutory duties on Local Authorities when exercising Adult Social Care functions. This includes the duty to promote the individual's well-being and protect them from abuse and neglect, including self-neglect. There is also the duty to prevent or delay the developments of needs for care and support and the general duty to provide advice and information on care and support available.
140. Local authorities must meet all unmet eligible needs of care and support unless an exemption applies e.g. most self-funded. The Act also places various duties and responsibilities on Local Authorities to commission appropriate, efficient and effective services and encourage a wide range of service provision to ensure that people have a choice of appropriate services and an emphasis on enabling people to stay independent for as long as possible.
141. Guidance on closing care home and European and domestic case law confirmed that Local Authorities should minimise the effect of closure by carrying out risk assessments of the potential deterioration of resident's physical and mental health and also risk of fatality and put in place clear and transparent transition plans to mitigate these risks.
142. Local Authorities are not legally obliged at the date of decision to have identified an actual alternative care home for each resident but it must be satisfied that there is sufficient evidence there is availability within the area that could meet the residents needs in the event of closure and that the needs of all residents will be taken into account at any future potential closure date and all residents will only be required to move when appropriate alternative provision has been found for them which is suitable to meet there various needs and that any move minimises the risk to deterioration on any resident health and well-being.

Adult Social Care Charging Policy – Consultation Feedback and response

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Introduction

1. Southampton City Council ran consultations on a range of budget proposals for 2019/20. As a part of this, views were sought on a specific set of proposals regarding the policy for charging for adult social care. The consultation ran from 17 October 2018 to 16 January 2019.
2. As a result of reductions in funding from central government, Southampton City Council has made £136.4 million savings over the last seven years and we need to make another £15.05 million savings by 2020/21. Income from the Council Tax only covers 17% of our total council expenditure (excluding Housing Revenue Account expenditure and schools expenditure) and the revenue support grant funding we receive from central government will be reduced by 54% over the medium term. At the same time as we are having to make further savings, demand for our services – particularly those for vulnerable children and adults – continues to increase year-on-year.
3. Southampton City Council’s charging policy sets out how much people have to pay towards the cost of their care and support. Southampton City Council currently does not charge for some services that it provides where it is permitted to do so under the Care Act 2014, and in other cases where there is a charge, the amount does not cover the actual cost of the service being delivered. We are thinking about making changes to the current charging policy to increase the income from charging to help maintain services. The changes are in line with other local authorities charging policies and with the Care Act 2014.
4. In light of the increasing demand for services to meet needs for care and support and the need to deliver savings the council has to look at how we are organised and how we provide services to continue to ensure that we provide the highest quality of services possible. We need to consider how we can make sure that this is fair and will meet the needs of local people, now and in the future. We are therefore proposing to increase the income from care charges for people receiving care at home (non-residential care) and for deferred payment agreements (loans that the council gives to meet the care costs of people living in residential or nursing care).
5. This report summarises the aims, principles, methodology and results of the public consultation. It provides a summary of the consultation responses both for the consideration of decision makers and any interested individuals and stakeholders.

Aims

6. The aim of this consultation was to:
 - Communicate clearly to residents and stakeholders the proposals for an updated Adult Social Care Charging Policy.
 - Ensure any resident, business or stakeholder who wishes to comment on the proposals has the opportunity to do so, enabling them to raise any impacts the proposals may have.
 - Allow participants to propose alternative suggestions for consideration which they feel could achieve the objective in a different way.

- Provide feedback on the results of the consultation to elected Members to enable them to make informed decisions about how to best progress.
 - Ensure that the results are analysed in a meaningful, timely fashion, so that feedback is taken into account when decisions are made.
7. The consultation was not a vote, it enabled participants to read about the preferred option, answer questions and make comments that will enable the final decision to be made. Decision makers need to consider the representations made during the consultation period but a majority view will not necessarily dictate the final decision. It is also important to note that the consultation is one element of the suite of reports that will feed into the final position.

Consultation principles

8. The council takes its duty to consult with residents and stakeholders on changes to services very seriously. The council's consultation principles ensure all consultation is:
- Inclusive: so that everyone in the city has the opportunity to express their views.
 - Informative: so that people have adequate information about the proposals, what different options mean, and a balanced and fair explanation of the potential impact, particularly the equality and safety impact.
 - Understandable: by ensuring that the language used to communicate is simple and clear and that efforts are made to reach all stakeholders, for example people who are non-English speakers or disabled people.
 - Appropriate: by targeting people who are more likely to be affected and using a more tailored approach to get their feedback, complemented by a general approach to all residents, staff, businesses and partners.
 - Meaningful: by ensuring decision makers have the full consultation feedback information so that they can make informed decisions.
 - Reported: by letting consultees know what was done with their feedback.
9. Southampton City Council is committed to consultations of the highest standard, which are meaningful and comply with the following legal standards:
- Consultation must take place when the proposal is still at a formative stage
 - Sufficient reasons must be put forward for the proposal to allow for intelligent consideration and response
 - Adequate time must be given for consideration and response
 - The product of consultation must be carefully taken into account.
10. Public sector organisations in Southampton also have a compact (or agreement) with the voluntary sector in which there is a commitment to undertake public consultations for a minimum of 12 weeks wherever possible. This aims to ensure that there is enough time for individuals and voluntary organisations to hear about, consider and respond to consultations. It was felt that a 12 week consultation period would be the best approach.

Consultation methodology

11. Deciding on the best process for gathering feedback from stakeholders when conducting a consultation requires an understanding of the audience and the focus of the consultation. It is also important to have more than one way for stakeholders to feedback on the consultation, to enable engagement with the widest range of the population. Previous best practice was also considered in the process of developing the consultation methodology.

12. The agreed approach for this consultation was to use a combination of online and paper questionnaires as the main basis, supported by a range of meetings with those directly affected. Feedback was also received through email, letter and via advocates of those affected by the proposals.
13. It was felt that due to the sensitivity of the consultation it was important to provide face to face contact with consultees to provide clarity and answer any questions. The drop-in or stakeholder sessions were designed to both increase awareness of the consultation but also to answer questions and explain some of the more technical elements to specific stakeholder groups.
14. This approach of open consultation, supported by a wide range of communications ensured that as many people as possible were aware of the issues and could have their say if they chose to.

Questionnaire

15. The main vehicle for gathering feedback through the consultation was a combination of online and paper questionnaires. Questionnaires enable an appropriate amount of explanatory and supporting information to be included in a structured questionnaire, helping to ensure respondents were aware of the background and detail of the proposals. It was deemed the most suitable methodology for consulting on this complex issue.
16. Paper copies of the questionnaire were made available in Southampton Civic Centre reception, Gateway and all Southampton libraries as well as at public consultation events.

Advocacy

17. To support the consultation activity and to ensure that the most vulnerable clients could share their views, the council employed Choices Advocacy an independent advocacy organisation. They met one to one with the people who were previously supported by the Locally Based Hospital Unit to make sure they were aware of the proposals and were supported to respond.

Meetings

18. To allow people the opportunity to ask questions and respond face to face a total of four public and stakeholder meetings were organised and a total attendance of over 38 across these.

Additional feedback channels

19. Any emails addressed to senior officers or Cabinet members were collated and analysed as a part of the overall consultation.
20. Respondents to the consultation could also write letters to provide feedback on the proposals.

Promotion and communication

21. Throughout the consultation, every effort was made to ensure that as many people as possible were aware of the budget proposals and had every opportunity to have their say.
22. Particular effort was made to communicate the proposals in a clear and easy to understand way. This was achieved by including key information within the questionnaire and signposting to a wide range of supporting information. This included the following which were hosted on a focused area of the council website.
 - Information sheets
 - Equality and Safety Impact Assessments
 - Questionnaire

- Supporting information for the three parallel consultations

23. For the duration of the consultation paper versions of the consultation questionnaire were available in libraries and council offices. Paper copies of the questionnaire or alternative format versions could be obtained on request.
24. At the start of the consultation a media release was issued.
25. The council also wrote to all recipients of adult social care in the city to make them aware of the consultation.
26. The council also wrote to all the residents or their representatives at the start of the consultation.
27. The budget consultations were included in 8 Southampton City Council e-alerts. The total reach of these e-alerts was in excess of 30,000. These e-alerts resulted in 810 clicks through to further information and the questionnaire.
28. With regard to social media a combination of Twitter and Facebook promotion was used, there were five posts about the overall budget consultation on Facebook with an overall reach of 37,033. There were a total of 17 tweets about the overall budget which had a total reach of 32,948. In addition to this there were six further tweets on the future of care home consultation with a reach of 10,419 and eight specific Facebook posts with a reach of 14,295.
29. To support the external promotion of the consultation there were also activities to make staff of Southampton City Council aware of the consultation, internal emails and promotion on staff webpages.

Part 1 – Summary of Consultation feedback

Overall respondents

30. Overall, there were 156 separate written responses to the consultation.

31. The majority of responses were received through the consultation questionnaire; 133 in total. Additional written responses were also received through emails and letters and social media comments. The breakdown of all written responses is shown within table 1 below.

| Feedback route | Total number of responses |
|----------------------------------|---------------------------|
| Questionnaire (Paper and online) | 133 |
| Letters or emails | 23 |
| Total | 156 |

Table 1

32. In addition to written responses to the consultation, there were a number of public engagements and meetings in which verbal feedback was provided.

33. All written and verbal feedback received is summarised within the following sections.

Questionnaire feedback

Breakdown of questionnaire respondents

34. A number of questions were asked within the questionnaire to find out a bit more about the respondents to help contextualise their response.

35. The first question asked respondents what their interest in the consultation was. Figure 1 shows the breakdown of responses to this question. Please note percentages add up to more than 100% as respondents could select multiple options. A total of 93 respondents (70%) were interested in the budget consultation as a resident of Southampton. The second highest proportion of respondents were family members of a recipient of adult social care; a total of 38 respondents (29%) selected this option. The third highest proportion of respondents were people who have their care arranged by Southampton City Council, this amounted to 28% (37) of respondents. A further 33 respondents were interested because they receive higher rate Attendance Allowance or disability benefits, 11 were recipients of adult social care, 11 said they worked as an employee of Southampton City Council, 6 selected a resident elsewhere in Hampshire, 5 described themselves as a member of a community group or organisation, 4 were formally supported by the Locally Based Hospital Unit, 3 were responding as a business or organisation, 2 were users of the deferred payment scheme, 1 respondent was a political member and a further 5 respondents selected "other".

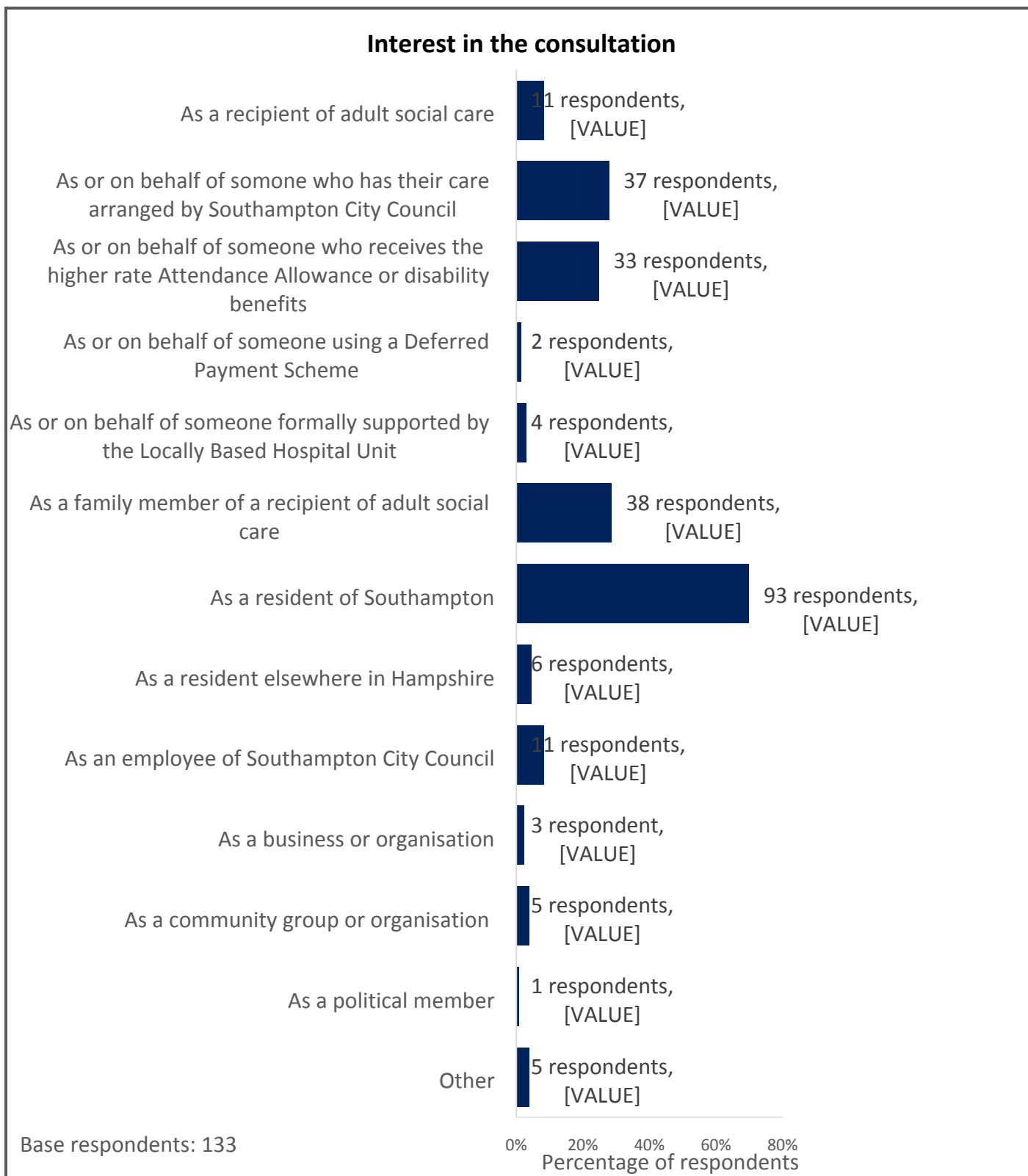


Figure 1

36. Figure 2 shows how respondents to the consultation questionnaire best described their gender. 63 respondents described themselves as Female, 54 respondents described themselves as Male and one respondent described themselves in another way.

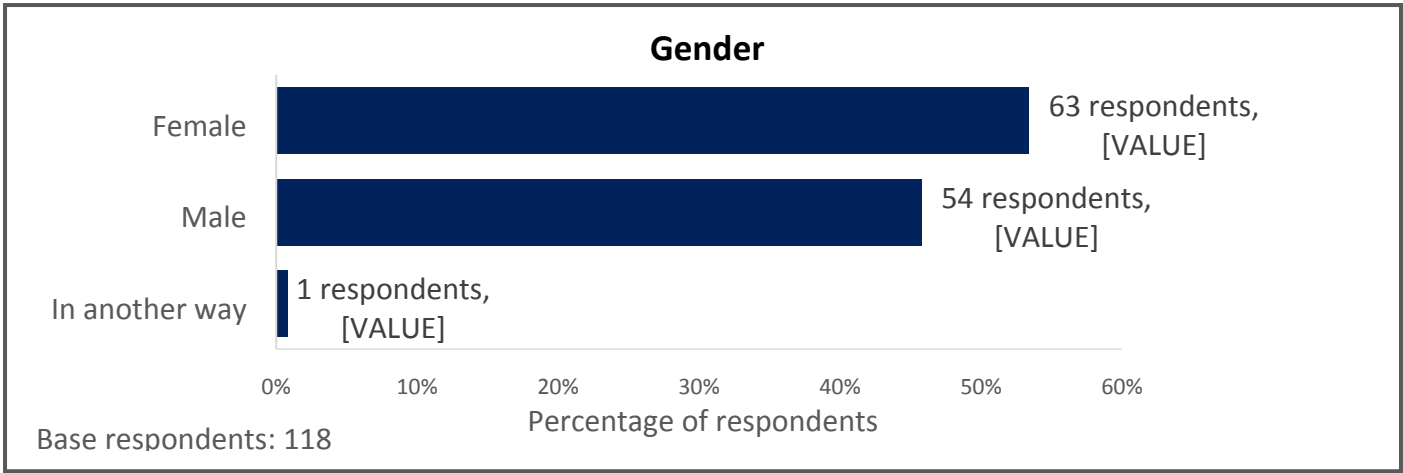


Figure 2

37. Respondents were also asked their age as shown within figure 3. The highest proportion of respondents were between the ages of 55 and 74 which comprised 53% of respondents. Categories with lower numbers of respondents were under the age of 25.

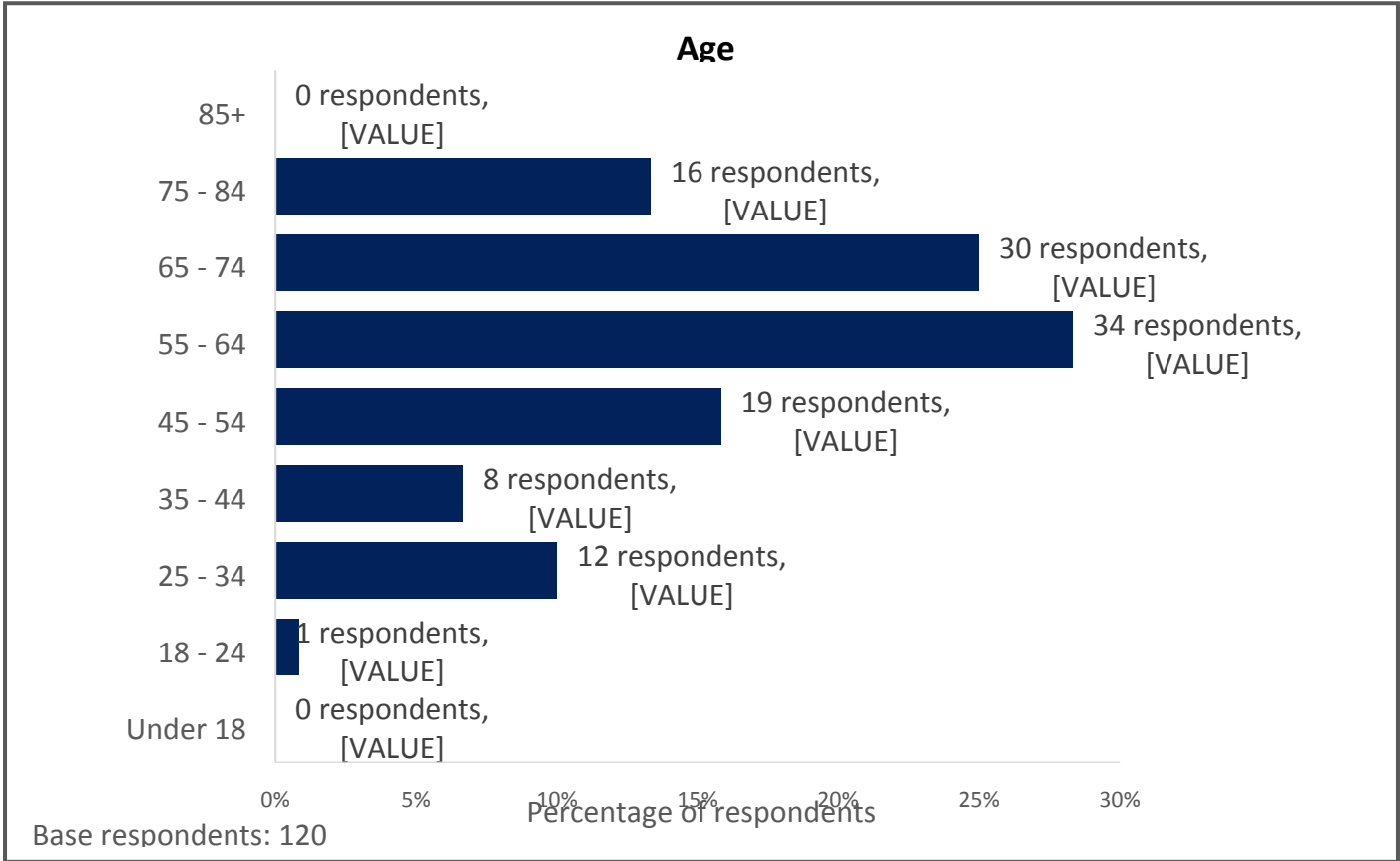


Figure 3

38. The final question asking for more information about the respondents themselves asked them their ethnicity. Figure 4 shows that the highest proportion of respondents (92%) described themselves as White. A further 4% of respondents described themselves as Asian or Asian British; 1% Black, African, Caribbean or Black British and 3% as mixed or multiple ethnic groups.

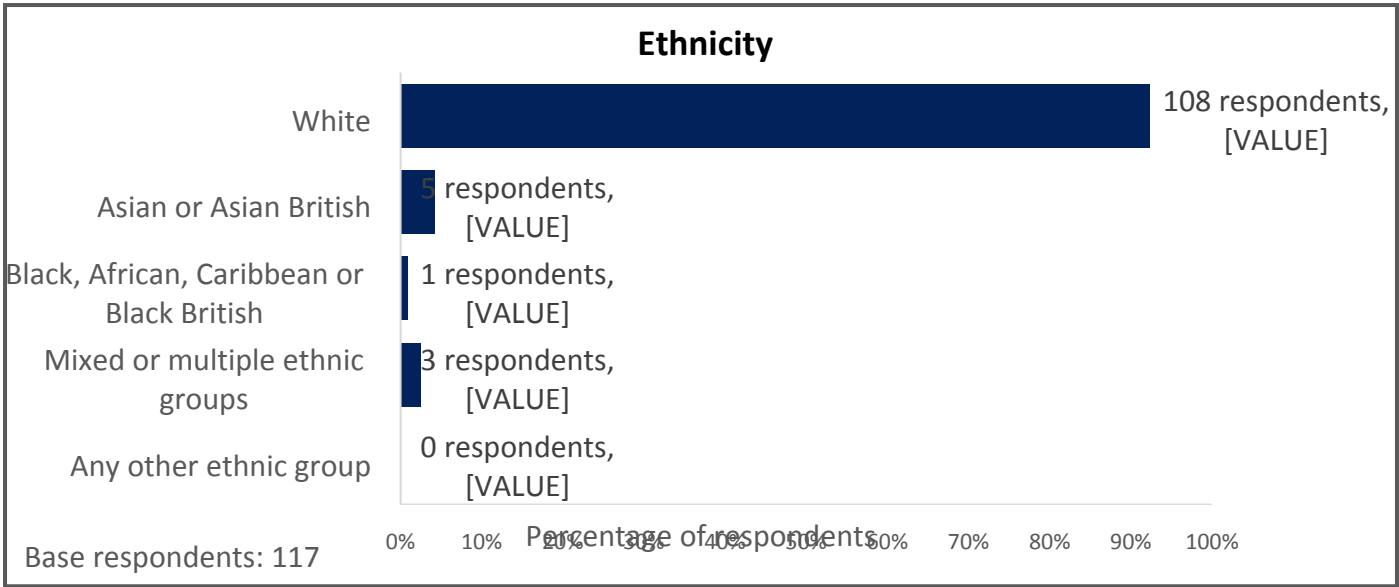


Figure 4

Arrangement Fee for people who pay for their care themselves

39. The council is proposing to introduce an arrangement fee of £250 for people who ask the council to make arrangements for their non-residential care and have over £23,250 in savings and assets. The council is also proposing to charge a further £250 for each occasion the customer asks for the council to arrange a new care package. This proposal is part of the council working towards a balanced budget.
40. Respondents were asked to what extent they agree or disagree with the proposal to introduce a charge to meet the administrative costs of non-residential care arrangements. The results of this question are shown in Figure 5.

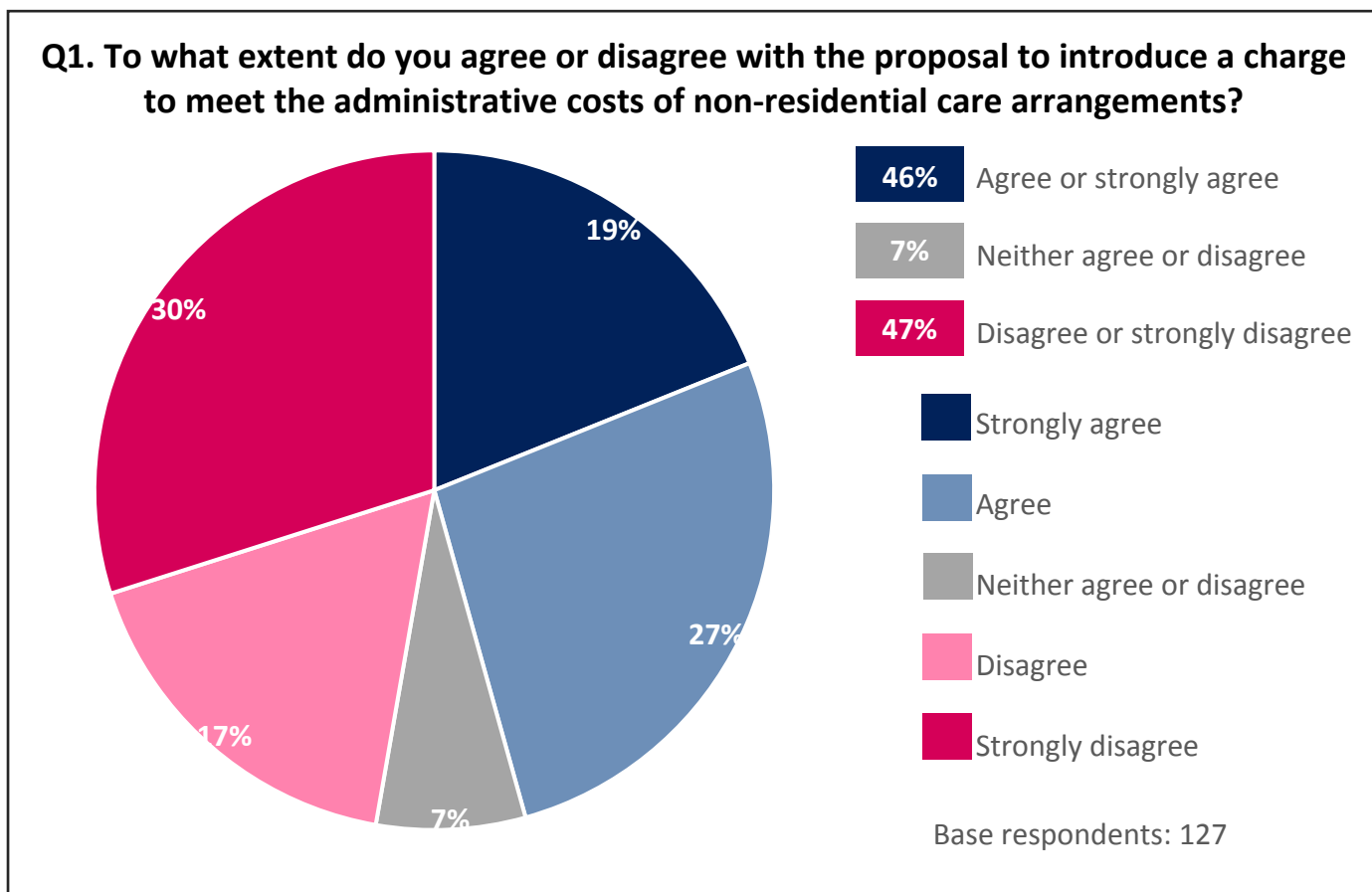


Figure 5

41. A total of 46% of respondents expressed overall agreement with the proposal to introduce a charge to meet the administrative costs of non-residential care arrangements. Of this 27% agreed with proposal and 19% strongly agreed. A further 47% of respondents either disagreed or strongly disagreed with the proposal; of which 17% disagreed and 30% strongly disagreed.
42. Respondents were then asked what they thought of the initial arrangement of £250. Figure 6 shows the results of this question. Overall, 5% of respondents thought the initial arrangement fee of £250 was too low (2% far too low, 2% slightly too low). In comparison, 57% of respondents believe the initial arrangement fee to be too high (38% far too high, 19% slightly too high). A further 38% of respondents said the initial arrangement was the right amount.

**Q1a. What do you think about the proposed charges?
The initial arrangement fee of £250**

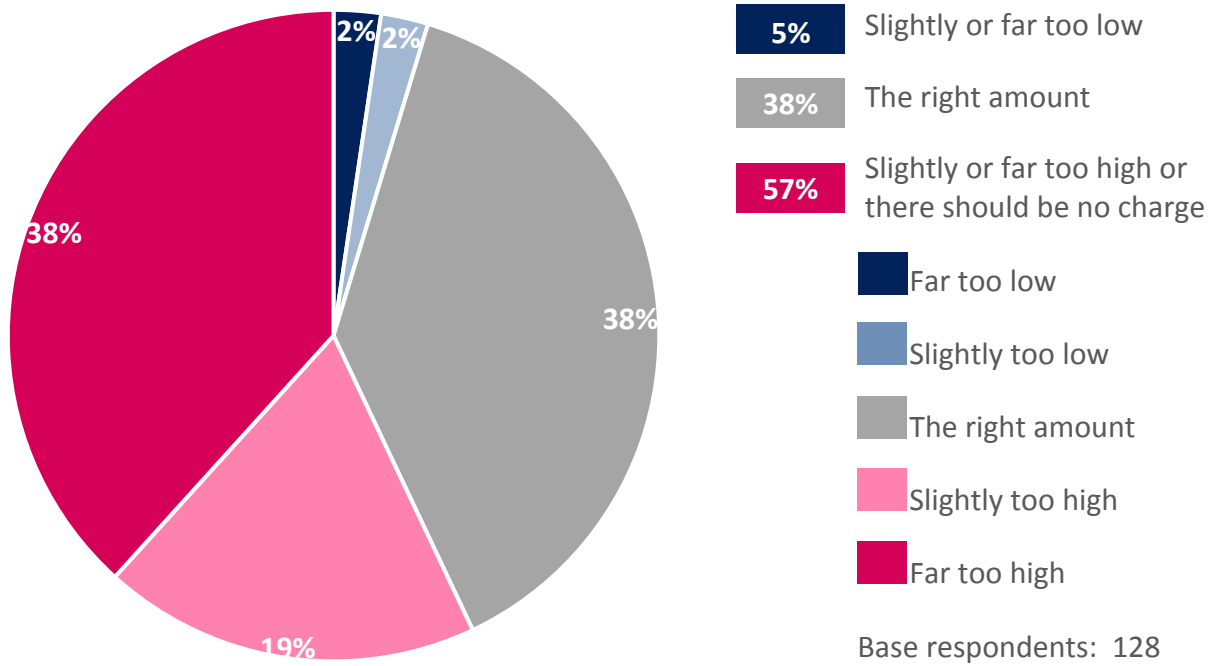


Figure 6

43. Respondents were also asked what they thought of the further charge of £250 for each new care package. Figure 7 shows that 1% of respondents considered the further charge to be too low (1% slightly too low) whilst another 79% believed it to be too high (20% slightly high, 58% far too high). One fifth (20%) of the respondents said the further of £250 for each new package was the right amount.

**Q1b. What do you think about the proposed charges?
The further charge of £250 for each new care package**

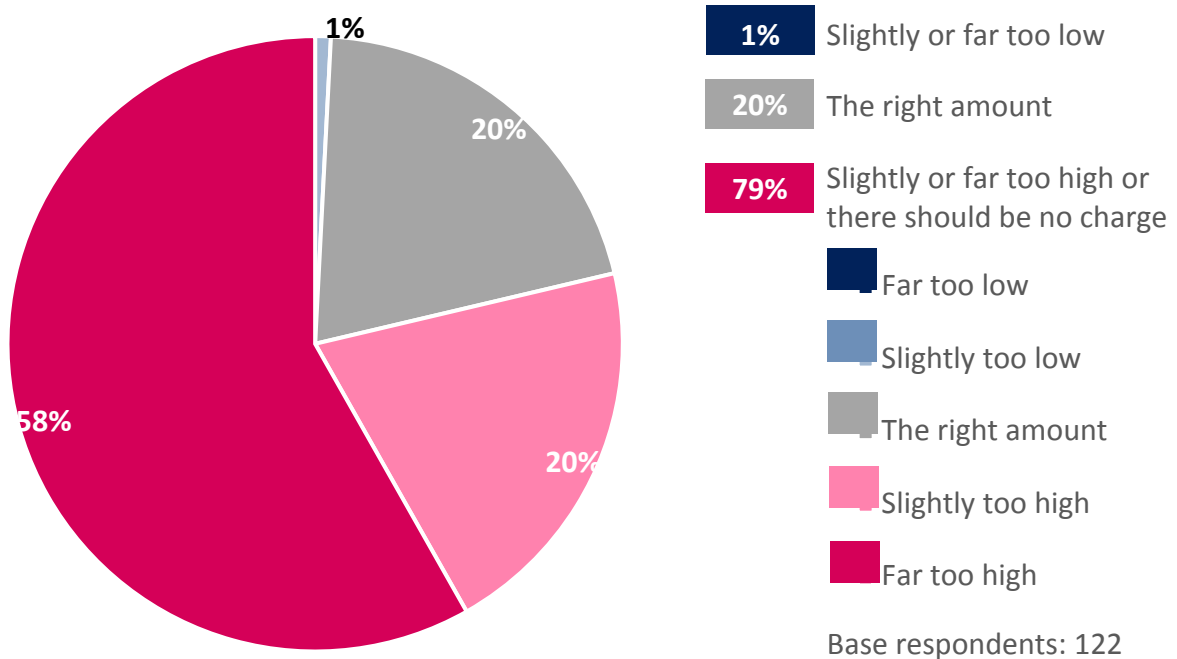


Figure 7

44. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. Figure 8 shows the themes of comments regarding the Arrangement Fee for people who pay for their care themselves and the number of respondents that raised this point. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides summaries or quotes of the unique comments and suggestions associated with these themes of comment.

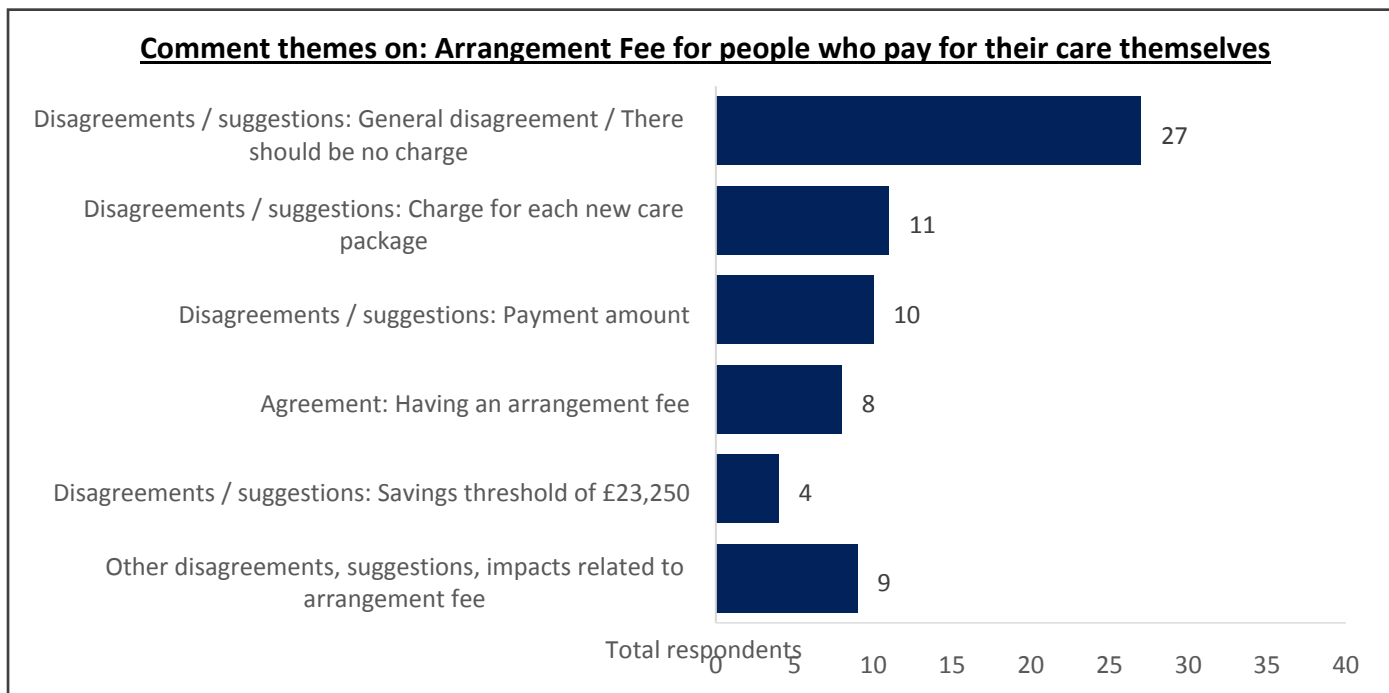


Figure 8

45. A total of 27 respondents expressed general disagreements against the proposals regarding arrangement fees. The following unique disagreements and suggestions were made:

| |
|--|
| Disagreement that people who have saved all this money are expected to pay |
| Some people save all their lives and do without extras whilst others spend more. Why should somebody with a little savings be penalized? |
| This proposal would have a severe impact on our income |
| Where are these people expected to find the extra money? |
| The charge should be met principally by the NHS |
| People caring for someone usually very busy so it is unfair to make them try to arrange a package themselves to avoid the charge |

46. Unique disagreements and suggestions regarding the charge for each new care package:

| |
|--|
| As this might change on a regular basis dependent upon state of health I feel that a single charge is more appropriate. |
| If the initial care package is in place but is not working, then why charge the same if it only needs tweaking with a new care provider. |
| A single one off charge is more appropriate |
| Concern that people may be deterred from seeking assistance due to the extra charge if their situation changes |

47. Unique suggestions and comments regarding disagreements with the payment amount:

| |
|---|
| Amount is too high: especially if someone requires multiple changes to their care package; £250 is a lot of money to an individual; too high if details are already on the system; concerned over why the charge so high. |
| Suggest a lower amount: e.g. £100, £125, £50, £25 |
| Suggest a sliding scale of charges |

48. Agreements with having an arrangement fee:

| |
|--|
| Taking into account the £23,250 threshold is understandable in austere times. We do feel that making provision for special circumstances is important, as well as the right to appeal to an independent body. We also consider that thought should be given to how frequently this fee is applied. If a person's care needs change within a short time, then charging a fee every time a new arrangement is made seems unfair. |
| Fair proposal |
| Fair charging amounts |
| Make sure the services are costed carefully |

49. Unique suggestions and comments regarding the savings threshold of £23,250:

| |
|--|
| Suggest a high threshold ie £50,000 |
| The charge, based on the £23,250 assets figure is stupid, it should be based on annual income alone |
| If someone is just at the threshold they are likely to fall below the threshold with the fee, so may need a refund |

50. Additional unique disagreements, suggestions and impacts relating to the arrangement fee proposals:

| |
|--|
| People should be means tested first |
| Cause financial stress and worries |
| This should be covered by the community charge which is paid by everyone especially as the Government has given permission for this to be increased by 3% part of which I understand is to cover social care. |
| The fee set up should be in line with inflation |
| some people who pay their own care do not really want it but if assessed by professionals as needing it they have to pay out more than those not having to pay. does having the amount over £23,250 include the value of a property they live in? I've always been told this should not be taken in to consideration if care is given at home! |
| There are no case studies, no advocates and I do not believe that those who stand to lose truly understand the implications of the cuts. I know that I don't. I think you are relying on this to push the motion through, because you have no other ideas and are not really committed to supporting us |
| The £250 should only recover the cost of the service and no more |
| How can someone pay with assets? Clearly people with savings could pay you; no argument there. But assets? Will you accept a television? Or bags of crisps? Will they have to sell their house? You need to think this through and try again |

Taking into account the higher rate Attendance Allowance and disability benefits

51. The council is proposing to now take into account the higher rate of payments of Attendance Allowance and disability benefits when doing financial assessments for adult social care support, whereas before only the lower rate of payment was taken into account within financial assessments.
52. Respondents were asked to what extent they agree or disagree with the proposal to take into account the full amount of the care components of Attendance Allowance and disability benefits, the results of which are shown in Figure 9. A total of 40% of respondents expressed agreement with the proposal to now take account of the full amount of the care components of Attendance Allowance and disability benefits; of which 29% agreed and 11% strongly agreed. Disagreement was expressed by half (50%) of the respondents, with 11% disagreeing and 40% strongly disagreeing with the proposal. A further 10% of respondents neither agreed nor disagreed with the proposal.

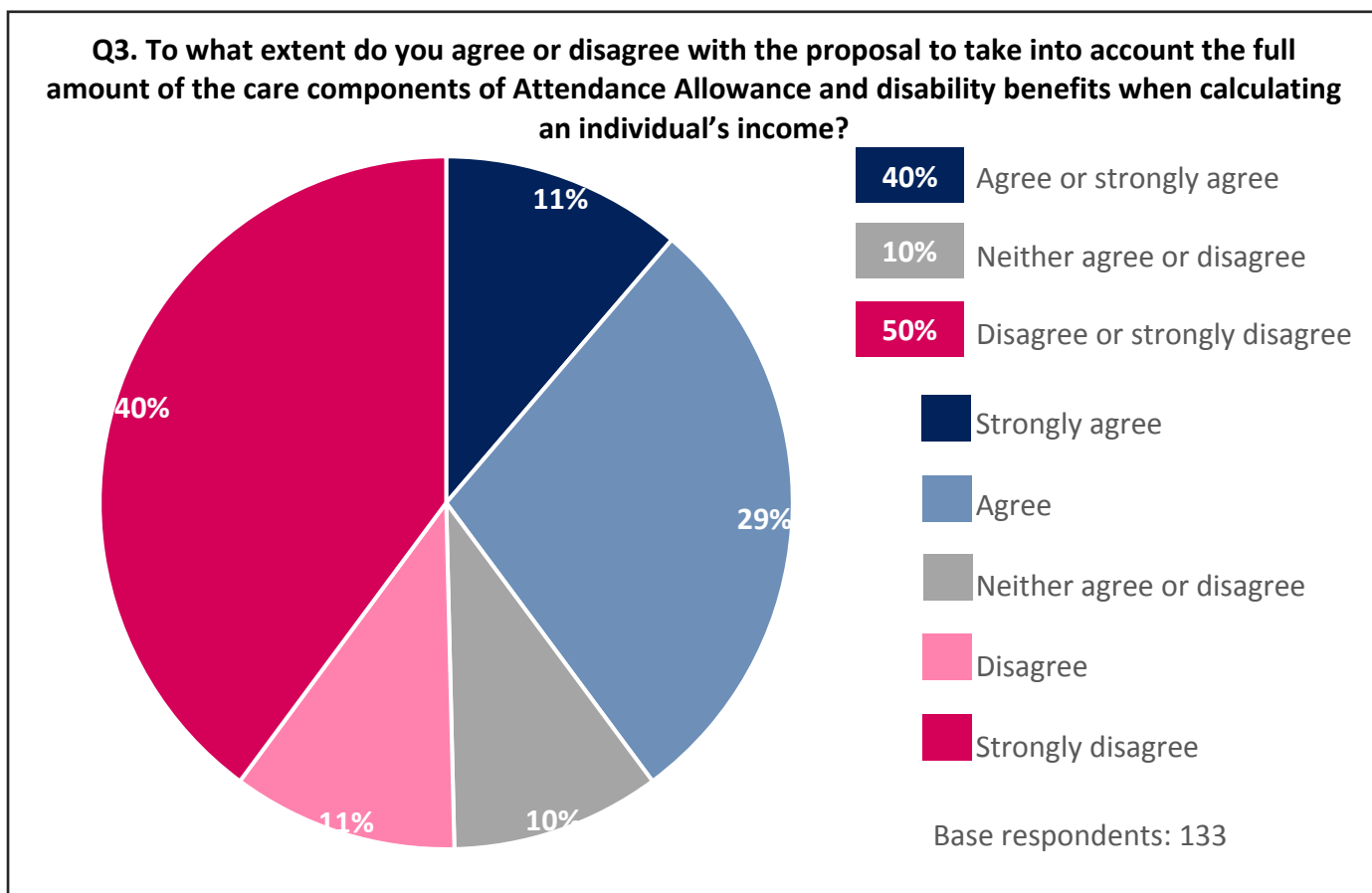


Figure 9

53. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. Figure 10 shows the themes of comments regarding taking into account the higher rate Attendance Allowance and disability benefits and the number of respondents that raised this point. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides summaries or quotes of the unique comments and suggestions associated with these themes of comment.

Comment themes on: Taking into account the higher rate Attendance Allowance and disability benefits

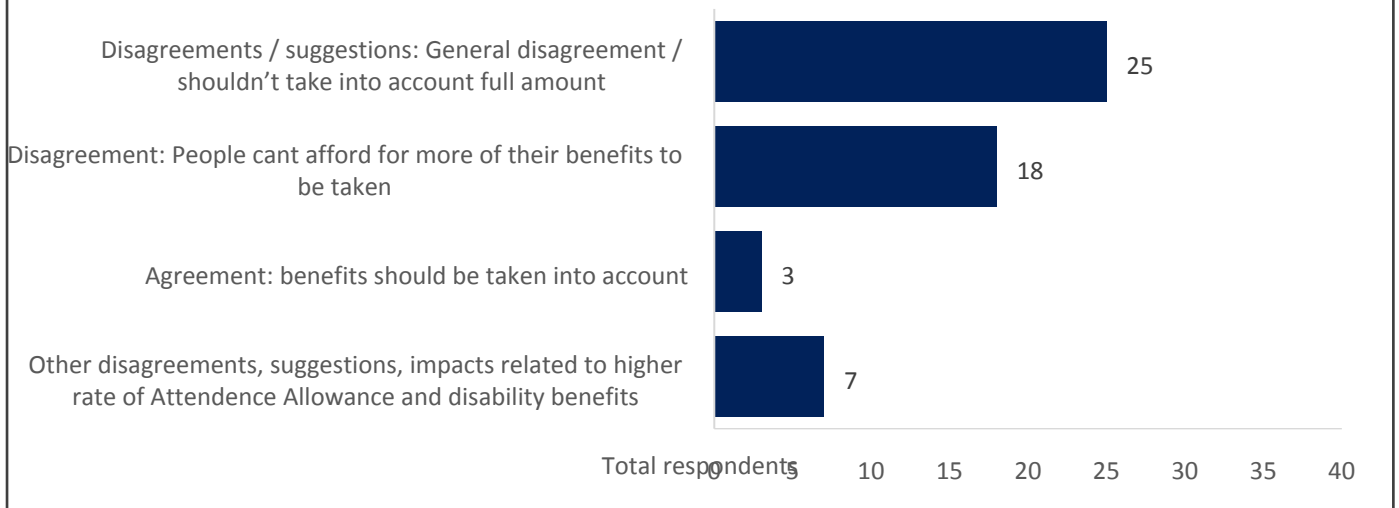


Figure 10

54. A total of 25 respondents raised comments expressing a general disagreement towards taking into account higher rates of Attendance Allowance and disability benefits. Unique comments and suggestions are summarised below:

| |
|---|
| Benefits shouldn't be counted |
| Why should those who saved more, pay for those who didn't save as much? |
| The proposal sounds like it would be bureaucratic (despite the intention of lighter touch assessment processes), stressful for all those involved and undermine living standards of people with care needs. It would also need further investment in support services to help people through the processes. |
| For you to take any of this money away from people would be a travesty and just add insult to injury. All MP's need to lobby the government over fuel payments and child benefit paid to the wealthy. Many people have asked to send these back but are unable to do so. A simple email or letter asking if they need these benefits would save millions. |
| You are taxing the most vulnerable |
| Make a stand against Austerity and find a new way to save |
| Disagreement as vulnerable people are left with absolutely no disposable income other than the recommended amount which the government states they need to live on |

55. In addition, 18 respondents raised a concern that people can't afford for more of their benefits to be taken. The following table summarises these responses:

| |
|--|
| Many people on the higher rate of Attendance Allowance are receiving it because they have a terminal illness. These people should at least be spared further charges |
| People have been assessed as needing this benefit already so clearly they NEED it or they would not have passed the stringent tests to get it. All cases taken to the Ombudsmen about including disability benefits in calculations for care costs have been ruled UNLAWFUL. |
| People who receive the higher level already have significantly higher needs and are limited in their ability to earn an income to support themselves. Disability aids are already at an inflated price. |
| My mother has been charged on this basis for a couple of years now. Her charges have gone from zero to almost £90 per month. We cannot afford more than this and this charge is already making us struggle. |

56. There were 3 respondents that expressed the following agreements with the proposals:

| |
|--|
| In this economical climate, TT should be taken into account. |
| People will always have added expenditure that these benefits pay for, if you take some of that away you are setting the council up for further costs in the long run. |

57. Additional disagreements, suggestions and impacts related to taking into account the higher rate of Attendance Allowance and disability benefits:

| |
|--|
| every disability is different to individual person. every case should be looked properly before the decision is made. |
| If the council takes into consideration DLA higher rate/ AA when calculating financial contributions to care, but travel arrangements such as taxis to hospital appointments are not covered as part of the care package, so they will need to pay this out of pocket. |
| Most old people loath claiming benefits of any kind |
| The travel expenses can be high leaving people with barely enough to live on. Consequently disabled people will become more isolated. |
| Make sure that the person who provides the care does so properly and effectively |
| Taxing allowances suggests the allowances are too generous |
| Think about the things they have to buy and why they get the higher rate they have other things to pay like transport and food and clothing. Making them pay more would be very unfair. |

Charges from the date the service commences

58. The council proposes to introduce charges for social care services from the point at which the service commences for those assessed as needing to make contribution towards the cost of their use of any chargeable services.

59. Figure 11 shows to what extent respondents agreed or disagreed with the proposal to introduce charges from the point at which the service commence. Overall agreement was expressed by 41% of respondents (25% agreed, 16% strongly agreed). A total of 48% of respondents said they disagreed on some level with the proposal to introduce charges from the point at which services commence; of which 18% disagreed and 30% strongly disagreed. 11% of respondents neither agreed nor disagreed with the proposal.

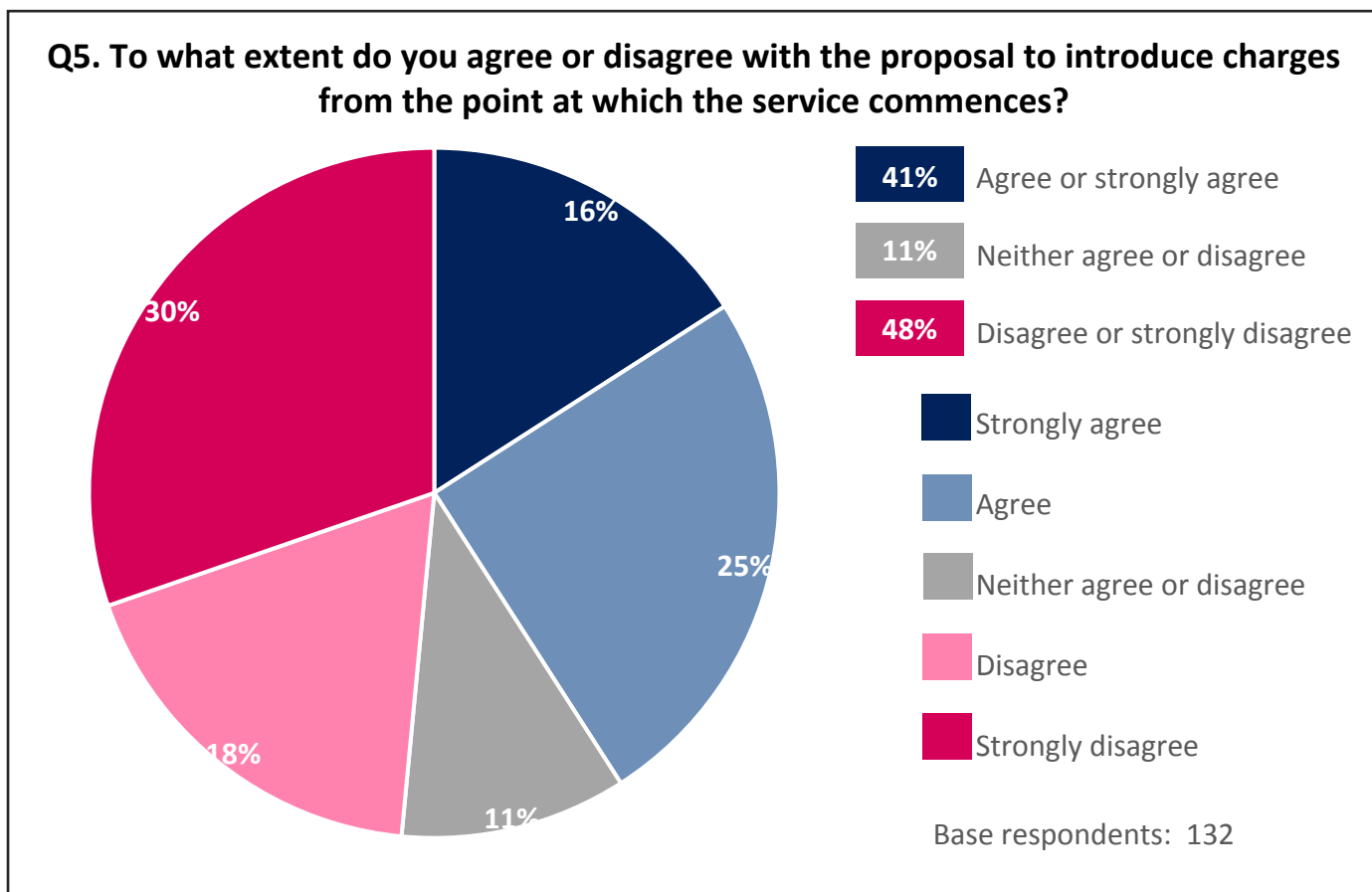


Figure 11

60. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. Figure 12 shows the themes of comments regarding charges from the date the service commences and the number of respondents that raised this point. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides summaries or quotes of the unique comments and suggestions associated with these themes of comment.

Comment themes on: Charges from the date the service commences

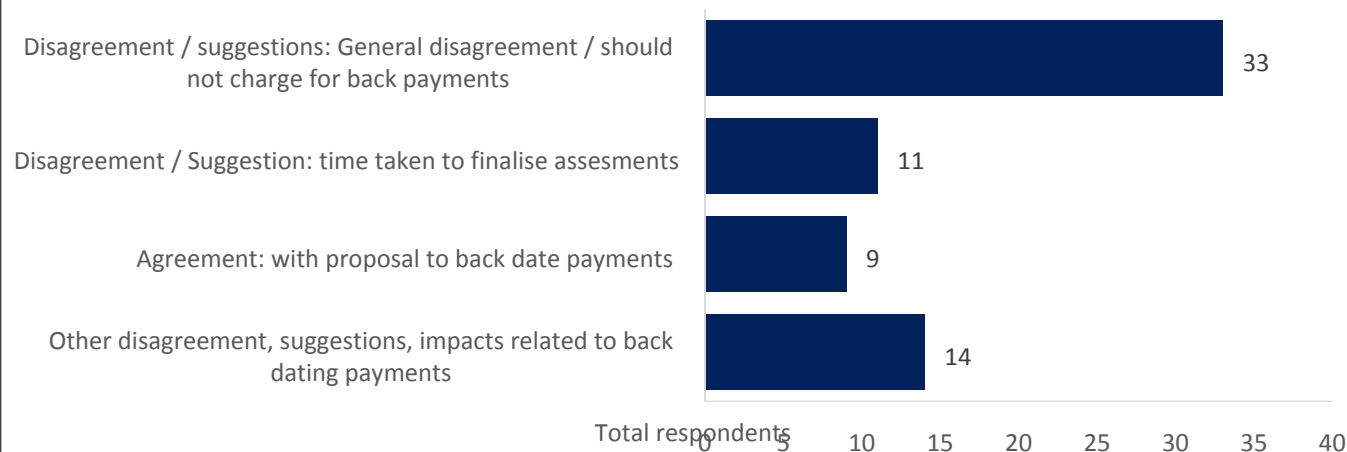


Figure 12

61. A total of 33 respondents expressed general disagreements about the proposal to charge from the date the service commences. The following unique comments and suggestions were raised:

| |
|---|
| Charging for back payment is unacceptable |
| The cost should only start when all state funding is in place. |
| Charges should come into place after the financial assessment is complete. |
| This could cause undue stress on people |
| You are charging the most vulnerable |
| Backdating as a concept can increase anxiety and leave people out of pocket unexpectedly. |

62. In addition, 11 responses raised points about the time taken for assessments to happen as outlined below:

| |
|--|
| It takes too long for the council to finalise financial assessments, this could mean people paying too much for a long period of time. |
| My last financial assessment took a year to complete and was completed wrongly 5 times in that period |
| The onus and incentive to complete the assessments quickly should remain with the Council . |
| With this in place where is the incentive to ensure the Council acts with a sensible timescale |
| If this time frame is not met you will only be able to charge back dated payments to a maximum the target time frame (6 weeks). |

63. A total of 9 respondents expressed the following agreements with the proposals:

| |
|--|
| The Council should consider further ways to make it easy for people to navigate and be supported through the financial process. This could be a suitable piece of coproduction work. |
| But make sure that adult's with learning disabilities fully understand this |
| If a charge was implemented this could help with budget pressures and potentially increase flow through the services |

64. Additional disagreements, suggestions and impacts related to back dating payments:

| |
|--|
| If the assessment can be done within the first month of charges then yes that would be okay but any longer and no. |
| The problem will be if financial assessments become back logged, which knowing how things tend to go will undoubtedly become the next problem. |
| Is the amount likely to be up to £100, or up to £1,000, or over £1000? Perhaps the easiest solution would be to charge people at the start then once the financial assessment is finished confirm charges or issue refunds or enter a credit into people's accounts. |
| In other parts of the UK care is free so why not here |
| Complaints will increase |
| This can only work if the council gets their processes working more efficiently and that the FAB team have the capacity to deliver this proposal. |
| I think that the claim will be backdated so charge once the claim has gone through and the client has the money, to charge beforehand will possibly put the client in debt that can't happen. |
| I am getting into debt because SCA cannot seem to get her charges for meals etc correct. It was much easier when I could send the cost of her meals in each day, as some days her health does not allow her to attend. |

Increase charges for Deferred Payment Scheme Loans

65. The council is proposing to increase their charges for people using the Deferred Payment Scheme to cover their administrative costs. This will include increasing the one-off administration fee to £810 and introducing an annual administration fee of £305 (or £505 if a property has to be revalued). The council is also proposing to start charging interest on the deferred amount for the whole period that the agreement is in place.

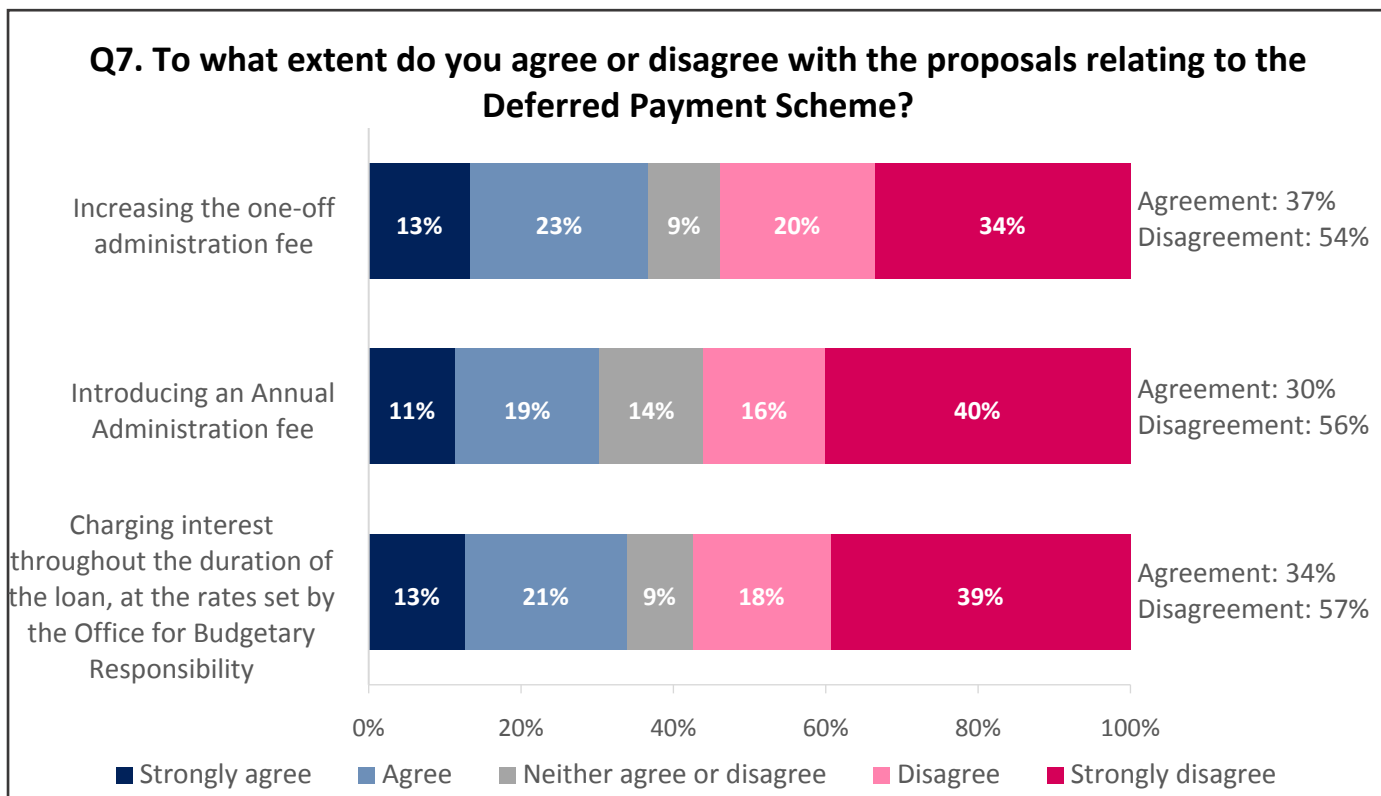


Figure 13

66. Respondents were asked to what extent they agreed or disagreed with the proposal to increase the one-off administration fee. The results of this question are shown in Figure 13. Overall, 37% of respondents expressed agreement with the proposal to increase the one-off administration fee; of this 23% said they agreed and 13% said they strongly agreed with the proposal. A further 54% of respondents disagreed with the proposal (20% disagreed, 34% strongly disagreed). The remaining 9% of respondents neither agreed nor disagreed with increasing the one-off administration fee.

67. Respondents were also asked to what extent they agreed or disagreed with the proposal to introduce an annual administration fee. Figure 13 shows that 30% of respondents agreed with such a proposal; of which 19% agreed and 11% strongly agreed. In comparison, 56% disagreed with the introduction of an annual administration fee (16% disagreed, 40% strongly disagreed). A further 14% of respondents said they neither agreed nor disagreed with the proposal.

68. Respondents were then asked to what extent they agreed or disagreed with the proposal to charge interest throughout the duration of the loan, at the rates set by the Office for Budgetary Responsibility. Figure 13 shows the results of this question. In total, 34% of respondents agreed with the proposal to charge interest on the loan; of which 21% agreed and 13% strongly agreed. Overall, 57% of respondents disagreed with the proposal (18% disagreed, 39% strongly disagreed). A further 9% of respondents neither agreed nor disagreed with the proposal to charge interest on the loan.

69. Following these questions, respondents were then asked what they thought of the proposed amount charged for the set-up administration charge of £810, the summary of which can be seen in Figure 14. 1% of respondents thought the proposed £810 for a set-up administration charge was slightly too low. Over three quarters (76%) of respondents felt the charge was too high (20% slightly too high, 55% far too high). A further 23% of respondents considered £810 to be the right amount.

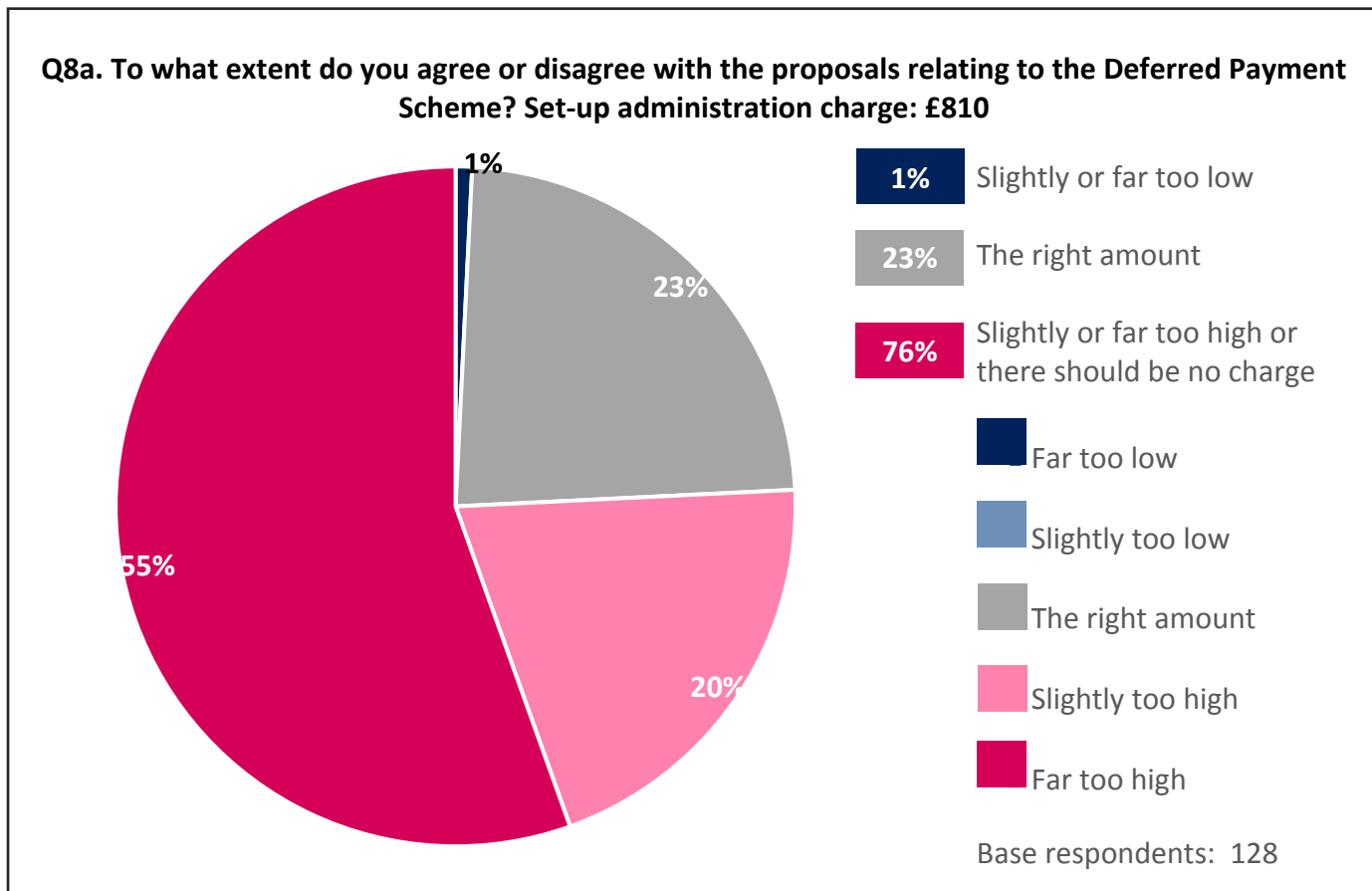


Figure 14

70. Figure 15 shows what respondents thought of the proposed amount charged for the annual administration charge of £305 (or £505 if a property revaluation is required). As was the case with the set-up administration charge, 1% of respondents said the annual administration charge was too slightly too low. A further 73% of respondents considered the proposed £305 (or £505) to be too high; of which 21% said it was slightly too high and 55% said it was far too high. The remaining 26% of respondents believed the proposed administration charged to be the right amount.

Q8b. To what extent do you agree or disagree with the proposals relating to the Deferred Payment Scheme? Annual administration charge: £305 (or £505 if a property revaluation is required)

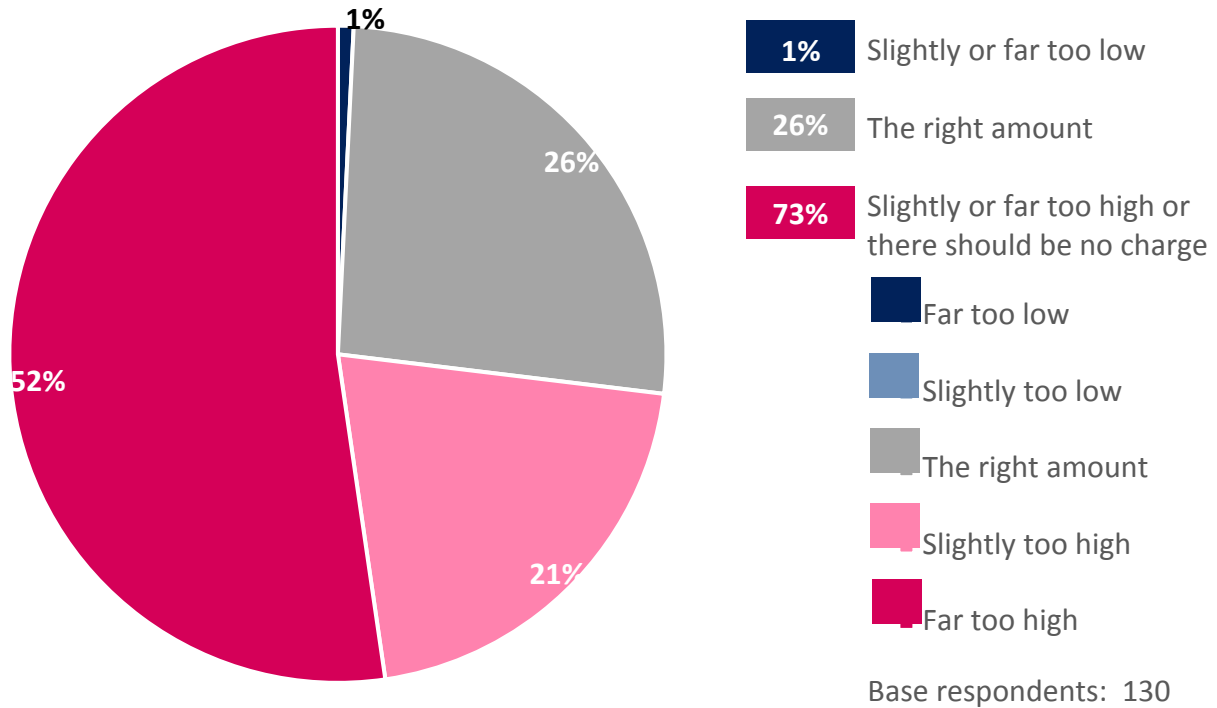


Figure 15

71. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. Figure 16 shows the themes of comments regarding increased charges for Deferred Payment Scheme Loans. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides summaries or quotes of the unique comments and suggestions associated with these themes of comment.

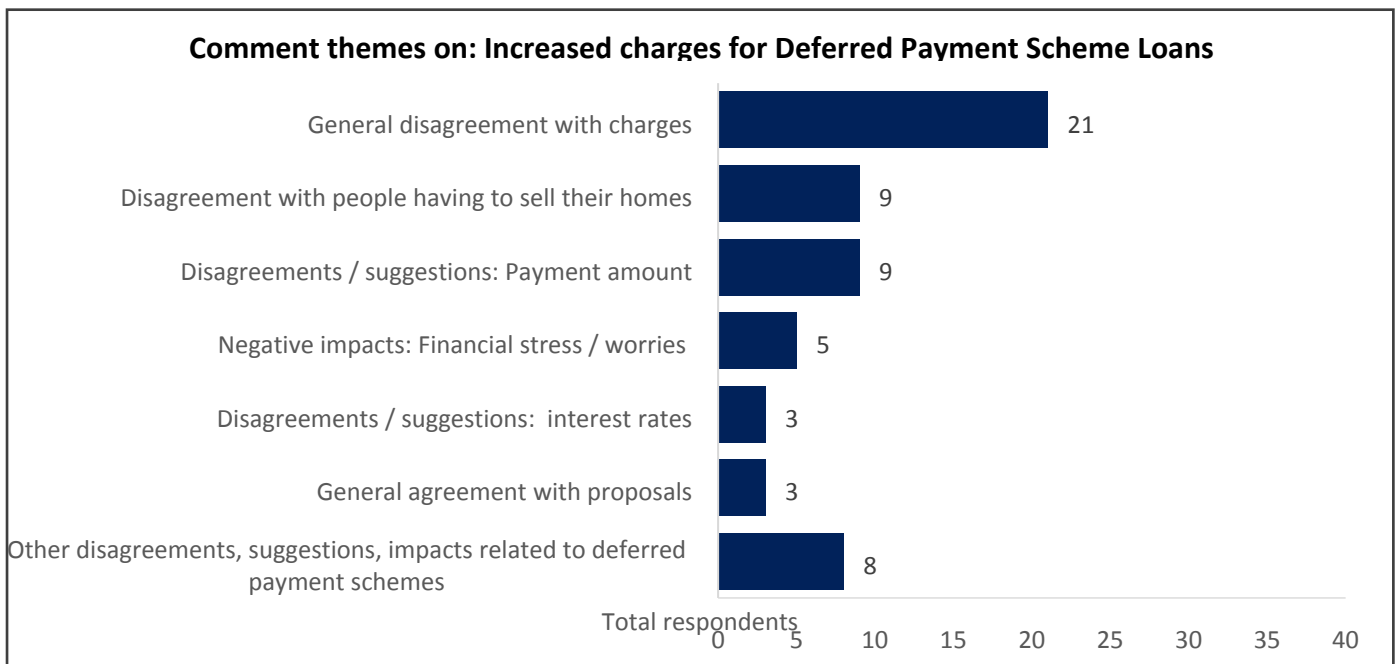


Figure 16

72. Overall, 21 respondents expressed general disagreement with the increased charges for Deferred Payment Scheme Loans. The following table encompasses the sentiment of these responses:

| |
|--|
| Pay council tax to cover this already |
| Additional amount of money on top of care costs |
| The quality of the service will not reflect the charge. |
| Why should people who have worked hard all their lives have to borrow money to pay for their care. |
| Healthcare should be for everyone, not just those that can afford it. |
| People already have to sell their homes to pay for care, there should be no additional charges |

73. Unique comments and suggestions regarding a disagreement with people having to sell their homes:

| |
|--|
| People who work hard all their lives to own their property are being penalised and it is no wonder that the house market is dropping |
| In the future people who rent property should also be obliged to pay something towards their care, a much fairer system must be sorted out in the future. If this carries on putting all the burden on house owners, people will all consider renting property. Then perhaps a fairer system will be put into effect. This is just an easy way to find money at property owners expense. |
| Would force people to sell their homes much earlier in order to avoid/meet these costs. |

74. Unique comments and suggestions regarding the payment amount:

| |
|---|
| Charges are too high |
| Charges should be included in loan |
| Charges should properly reflect the cost |
| Suggestions for administration charges: £500 |
| Suggestions for annual charge: £200 or £300 if revaluation required |

75. Concerns over the negative impact of the proposals on individual finances and stress:

| |
|--|
| Some people will run out of money sooner and be completely dependent on the state |
| What about people who might be unable to pay that, I know that they own a home but doesn't mean they are not strapped for cash what is done in that case?? |
| Cause additional worry and concern. |
| Leave people out of pocket before they reach the end of their care needs |

76. Unique comments and suggestions regarding the interest rates:

| |
|--|
| Interest rates should be the same as savers get - very low |
| Interest should not be charged |
| Why is the council relying on the setting of interest rates to Government Office for Budgetary Responsibility? |

77. Agreements with the Deferred Payment Scheme proposals:

| |
|---|
| If this scheme were not in place, then people would have to sell their homes. |
| We agree, with a request to inform people of alternatives We understand that the Council feels the need to pass on the cost to the Council of the arranging a loan on a person's house. Due to increase in costs to individuals, it is important that people are also given information about other options in a clear format. |
| Providing the client can pay this I don't see a problem |
| If the initial charge if is paid out of the loan amount, the person paying it shouldn't experience financial distress trying to come up with the money. |

78. Additional comments, suggestions and impacts related to the Deferred Payment Scheme Loans:

| |
|--|
| Too complex |
| Consolidate charge would be preferable |
| Cost neutral does not mean it aids the applicant but costs the Council. This scheme needs to be self funding at the very least so not an extra burden or cost to Council Tax payers. |
| Greater incentive to avoid charges |
| Would like more information on: breakdown of the charges; who calculated the charges |
| Fight the Government for the monies you really need |
| Affects the people that are most vulnerable |
| what if their assests are less than the total debt when they die - who pays? |
| People who qualify for benefits should not be charged |
| Again, potential for complaints increases. |

Remove the Locally Based Hospital Unit (LBHU) exception

79. The council are proposing to remove an exception from the adult social care charging policy for those previously supported by the Local Hospital Based Unit (LBHU), meaning these individuals would have a financial assessment to see if they have to pay for, or contribute towards the cost of their home care, the same as any other individual under the adult social care charging policy.

80. Respondents were asked to what extent they agree or disagree with the proposal to introduce charges in line with the charging policy for those people who are currently exempt from charges. Figure 17 shows 49% of respondents agree with the proposal to introduce charges in line with the charging policy for those currently exempt (27% agreed, 22% strongly agreed). A further 34% of respondents disagreed with this proposal; of which 10% disagreed and 24% strongly disagreed. A further 17% of respondents neither agreed nor disagreed with the proposal.

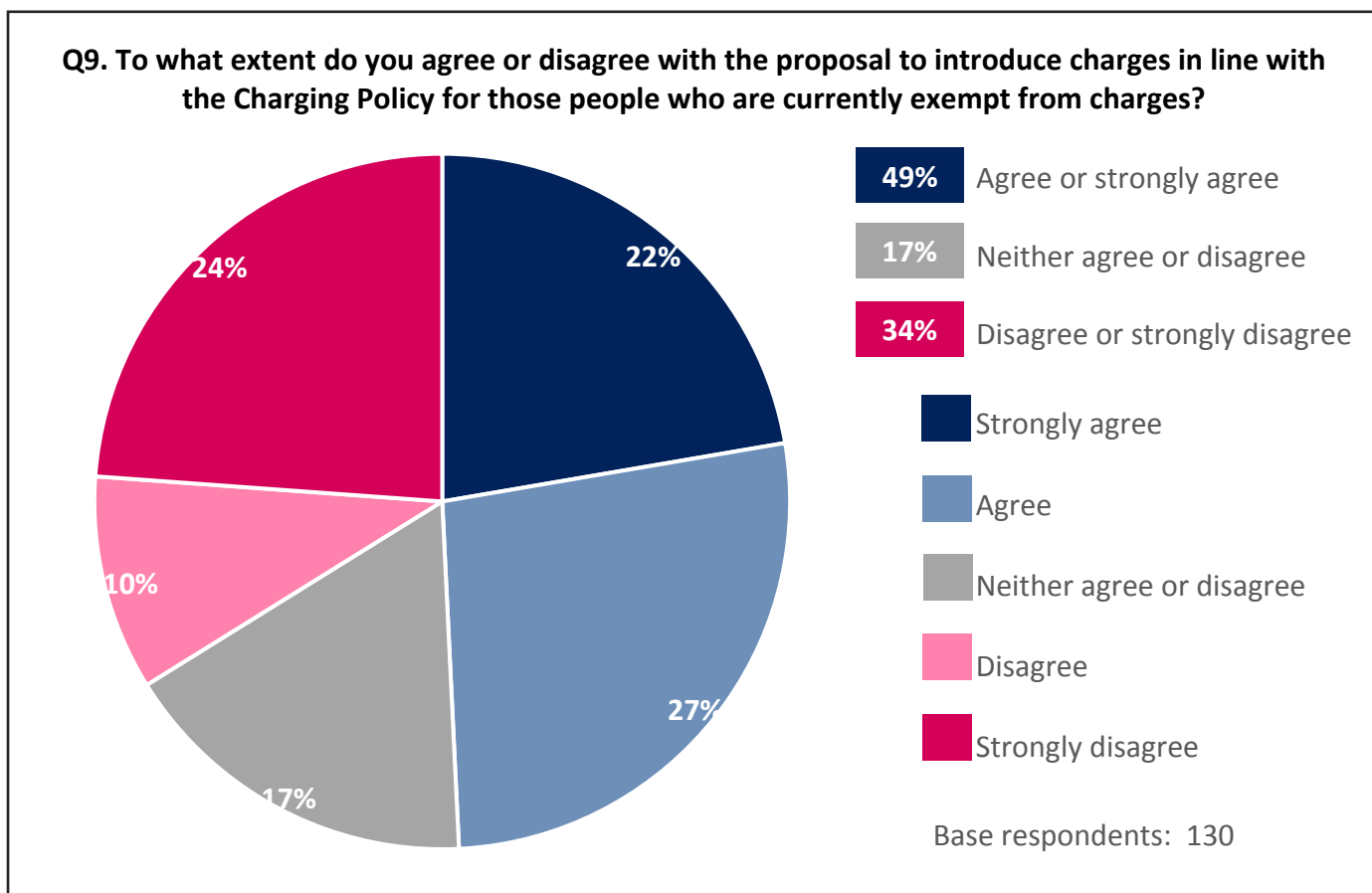


Figure 17

81. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. Figure 18 shows the themes of comments regarding the removal of the Locally Based Hospital Unit (LBHU) exception. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides summaries or quotes of the unique comments and suggestions associated with these themes of comment.

Comment themes on: Removal of the Locally Based Hospital Unit exception

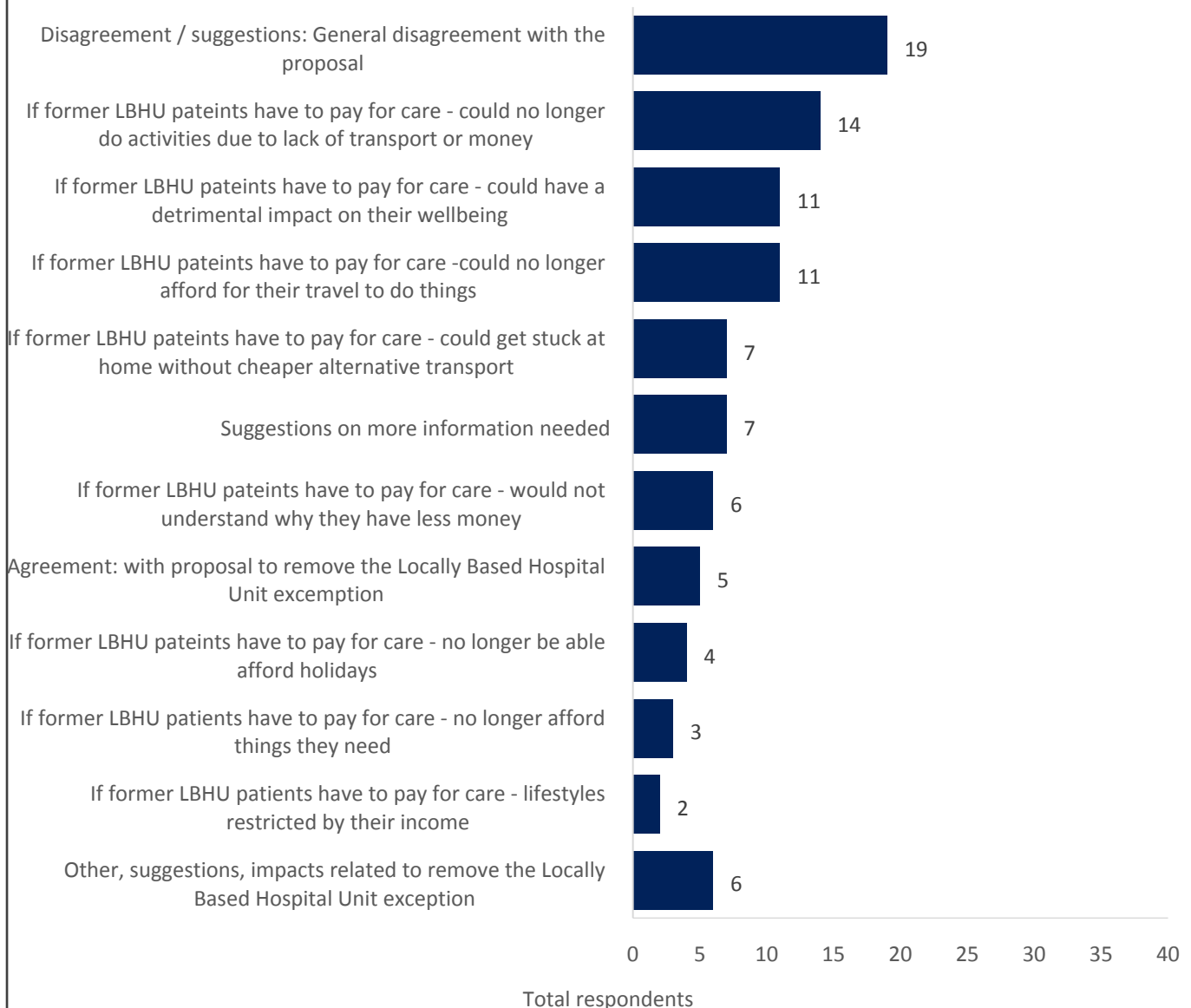


Figure 18

82. General disagreements with the proposal to remove the Locally Based Hospital Unit exception:

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|---|
| Have a national strike against the Tories and get some backbone to fight the Tories. |
| The family feel the history behind the LBHU should be taken into consideration and that the NHS should continue to fund these individuals. |
| There is always something changing but you closed the unit they should not have to pay for it. |
| They are concerned that a blanket policy is being proposed and the LBHU individuals are not being considered on an individual level. |
| Everybody should be exempt from charges. |
| Southampton Cabinet paper dated 19th June 2006 the council outlined their obligation to support the 38 people living in LBHU through a joint arrangement. We feel the council and NHS has a long term commitment to this. |
| This is highly controversial because of the treatment of people who currently receive the exemption. We believe the Council should reconsider this change. |

| |
|--|
| I am concerned that the change in policy will mean the standard of care will be downgraded. |
| They expressed concern that if MI had less spending money it would have a negative impact on his social activities and daily routine, which would increase his challenging behaviour significantly. |
| There appears to be little empathy or understanding. All these things will do is make private care providers of all types very rich whilst causing untold suffering and distress. |
| Another nasty, mean spirited proposal from a Labour council that has badly lost it's way. |
| If people were promised this because their existing provision was taken away, it will cause an outcry if that promise is broken. |
| This is a dreadful decision. Many of these people were disadvantaged and received a substandard quality of care for several years of their lives, often wrongly placed and denied their human rights. |
| SCC has Appointeeship for MI finances and the family stated that because they do not have access to MI's finances they were in a difficult position to comment on the proposal. Initially they expressed confusion as to why they were being informed if they do not oversee MI's finances. They also felt the Appointee does not know MI well enough to understand his needs and therefore a financial assessment would not be representative of his needs. |

83. Additional comments, suggestions and impacts related to the removal of the Locally Based Hospital Unit exception.

| |
|--|
| We feel you to consider every case on it individual circumstances rather than a blanket policy for all of the 24 people moved out of LBHUs. |
| Is it really worth is for the savings involved? |
| Could charities help at all? |
| Negative impacts expressed by those who were in the LBHU intially. (These individuals will have less money for other things like petrol for their car to travel; for activities that are important to them; for items they need to better cope; or for holidays. If individuals can no longer afford these things they may struggle to leave the house resulting in isolation, frustration and a detrimental effect on their wellbeing and those they live with. The change in financial situation could result in a change in routine which would unnerve some of the individuals. Many of the individuals said they would not understand why there is less money.) |

The clarification of the policy generally

84. Following these questions, respondents were asked a series of questions about what they thought of the policy if they had read it.
85. Respondents were first asked if they had read the proposed draft policy. In total, 84% of respondents have read some or all of the proposed draft policy. Of this, 53% had read all of it and 31% had read some of it. 16% had not read the proposed draft policy.
86. Those that had read the draft policy were then asked to what extent they agreed or disagreed that the draft policy is easy to understand. Figure 19 shows that 57% of respondents agreed that the draft policy was easy to understand (49% agreed, 9% strongly agreed). A further 27% disagreed with this statement, of which 20% disagreed and 7% strongly disagreed. The remaining 16% of respondents neither agreed nor disagreed that the draft policy was easy to understand.

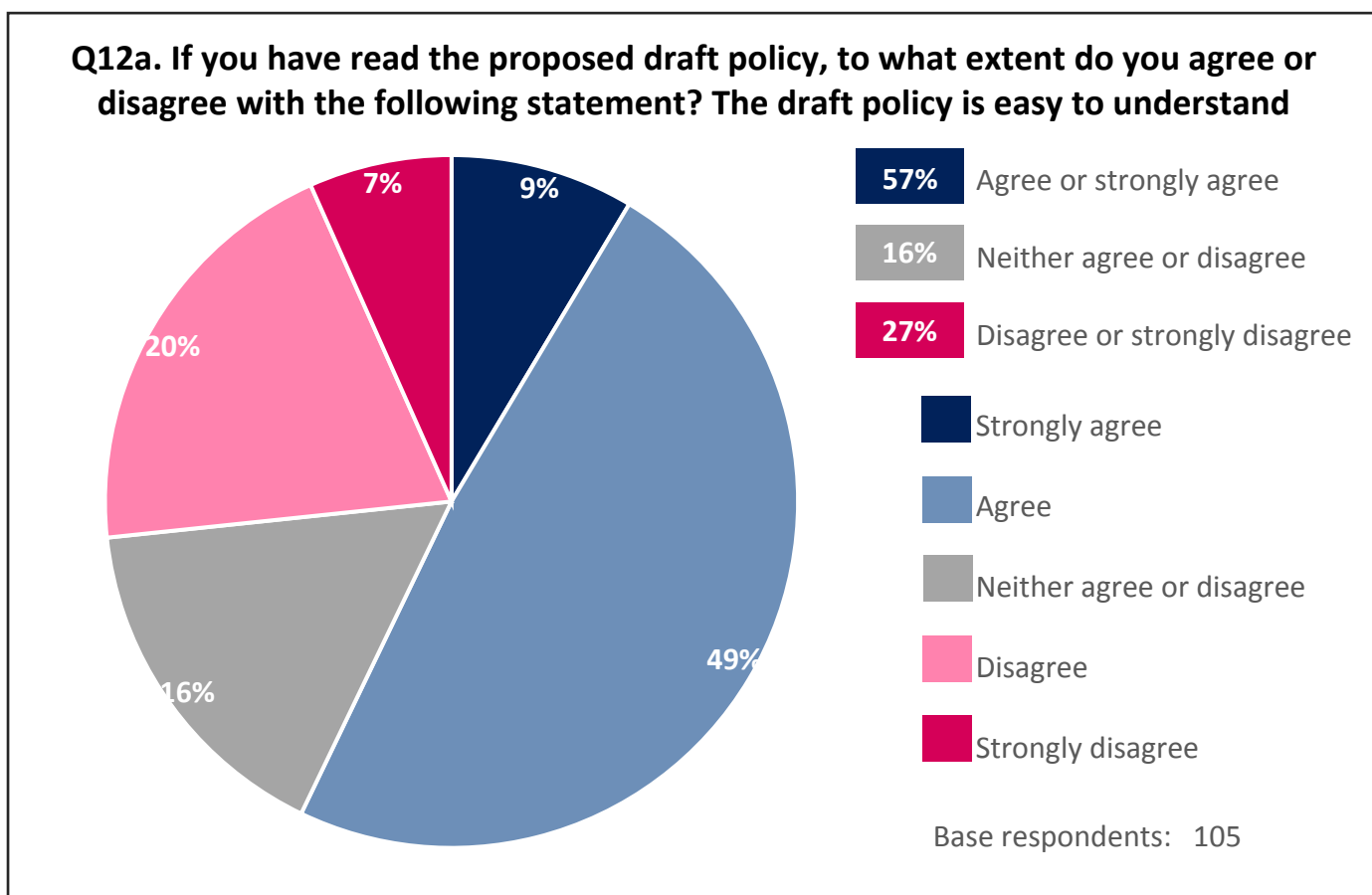


Figure 19

87. Respondents that had read the policy were also asked to what extent they agreed or disagreed that the draft policy provided enough information. Figure 20 shows the results of this question. Overall, 57% of respondents agreed that the draft policy provided sufficient information (50% agreed, 8% strongly agreed). A quarter (25%) of respondents disagreed with this statement, of which 18% disagreed and 7% strongly disagreed. The remaining 17% of respondents neither agreed nor disagreed that the draft policy provide enough information.

Q12b. If you have read the proposed draft policy, to what extent do you agree or disagree with the following statement? The draft policy provides sufficient

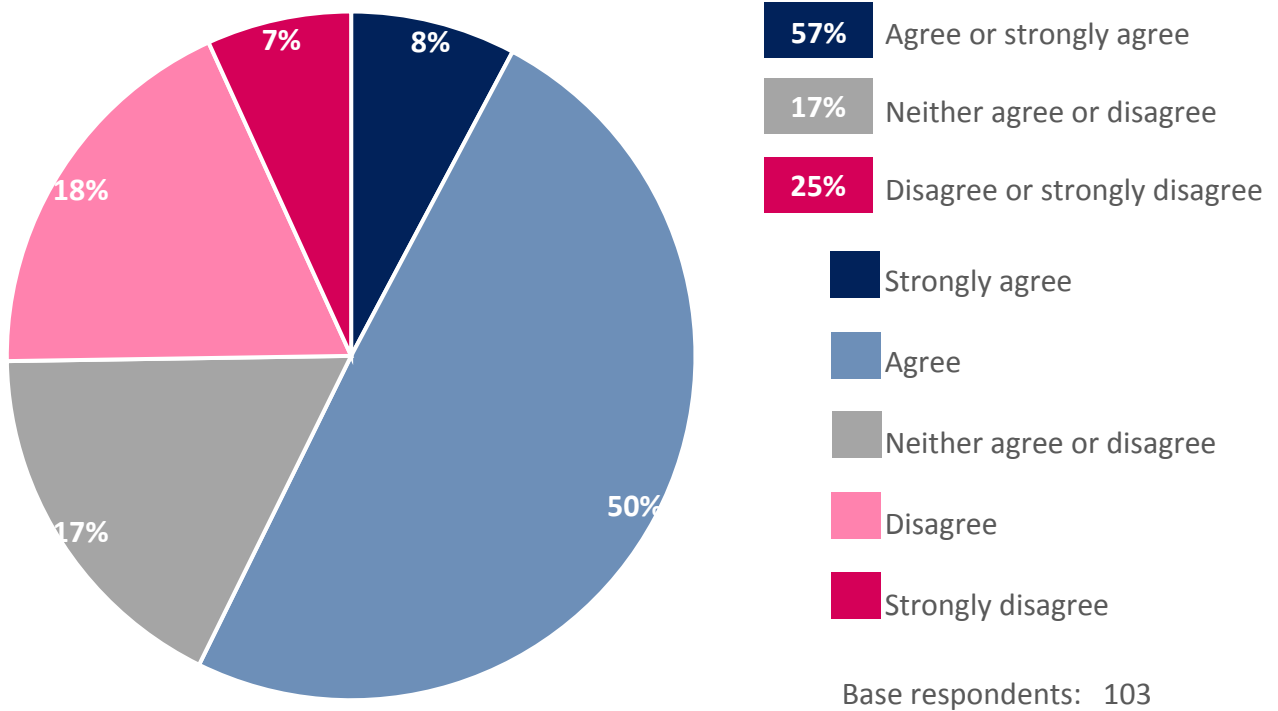


Figure 20

88. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. Figure 21 shows the themes of comments regarding the clarification of the policy generally. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides summaries or quotes of the unique comments and suggestions associated with these themes of comment.

Comment themes on: The clarification of the policy generally

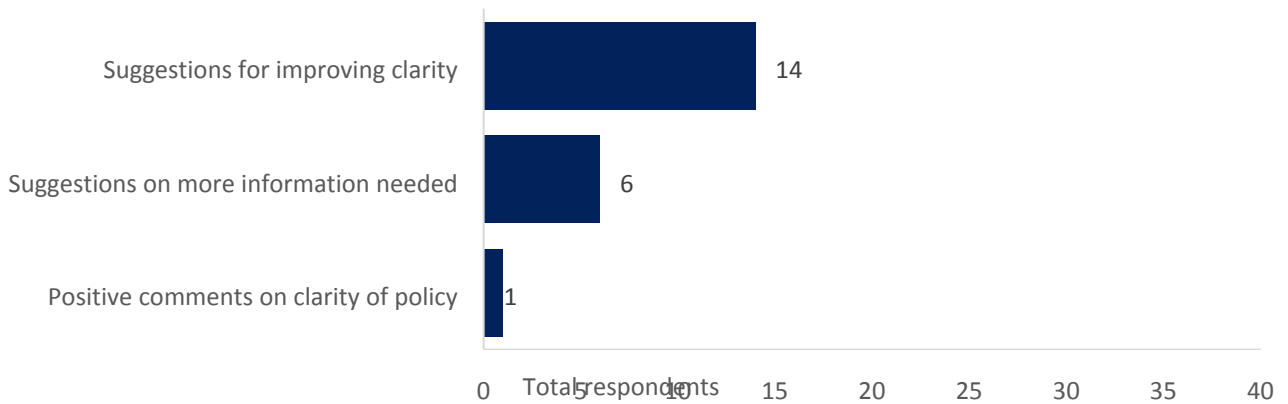


Figure 21

89. A total of 14 respondents provided suggestions for how the clarity of the policy could be improved. These suggestions are outlined below:

| |
|---|
| Some quantification needed to indicate scale. |
| I understand very little of the draft policy. |
| If would be far better if it did not use "legal speak" |
| ethnic and background or religion related issues to be considered as some of the ethnic background people live together which is a relief for the council and also less burden of care on the council should be considered appropriately according to their personalised needs and circumstances. |
| It would have been helpful to have been directed to the policy prior to completing this form. |
| Appendix 1 provides a table of types of Disability Related Expenditure, evidence and amounts. I believe that each case should be assessed on its own merits in line with the Care Act and this table is misleading and unlawful. It appears to impose caps on costs when a disabled person's unique needs might mean that their DRE is significantly above the amounts set out in this table or they might have a unique need with evidence outside this list. |
| i understood it, but i have a background in adult social care, i would ask how accessible it is for those families of service users undertaking the consultation. |
| You had 4 open meetings but there was no option for older or disabled people to get to any of the venues. When I asked 2 housing support workers what the consultation was about they didn't have a clue and both were indignant |
| All policies are vague and send worry to people affected. People need direct information i.e how much are you money they are going to loose |
| The draft policy does not make clear why admin fees are necessary. It does not make clear the lengthy hoops disabled people need to go through in order to get disability related expenditure removed from their care contribution, nor that this is spread over time, nor that this is retrospective, nor that the disabled person has to risk making the cost only for it to be turned down. I would even go so far as to say that it is misleading in that an uninformed person would think that any disability related cost would immediately be subtracted from that month's care cost. (This is what my friends and family believed upon reading this document). This is far from the case. |

90. In addition, 8 respondents stated that more information was needed in the policy. The following suggestions were made:

| |
|---|
| What happens to relatives living in the house? |
| You do not define what are assets? Does this include your own home? |
| Where are the figures for every service you intend charging for? We need a breakdown off past and future payments for all individual services not just a bulk figure. |
| A couple of illustrated examples showing one scenario where and charges would apply and another where charges wouldn't for services |
| I don't know what the actual costs are for the council, so it is not really possible for me to say. |
| Again, there are no case studies, so I have no idea what the impact will be. So I cannot support it. |

Impacts and further comments

91. Respondents were asked what the impact of the proposed changes would have on them, their family or community if they were to be implemented. Figure 22 shows that 12% of respondents felt the changes would have some level of positive impact. Of this 5% felt it would be slightly positive, 3% fairly positive and 4% very

positive. In comparison 64% of respondents felt the proposed changes would have a negative impact of which 13% felt it would slightly negative, 20% fairly negative and 31% very negative. Of the remaining 24% of respondents, 12% felt there would be no impact from the proposed changes and another 12% did not know what the impact would be.

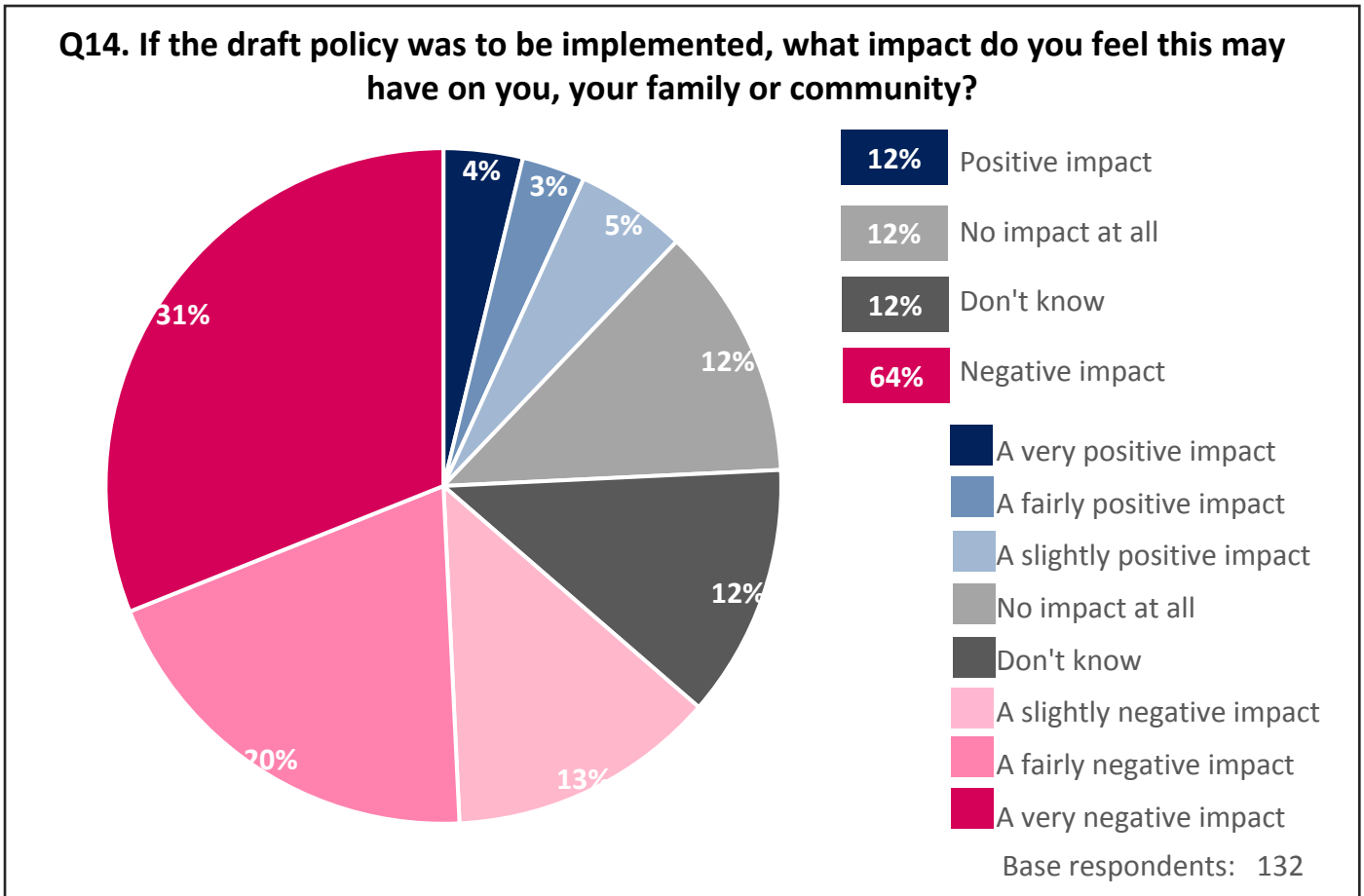


Figure 22

92. Respondents were given opportunities throughout the questionnaire to provide written feedback on the proposals. In addition anyone could provide feedback in letters and emails. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. Figure 23 shows the themes of comments regarding the changes to the policy generally rather than specific aspects of the policy. The report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation and so the subsequent tables after provides summaries or quotes of the unique comments and suggestions associated with these themes of comment.

Comments themes on changes to the policy generally

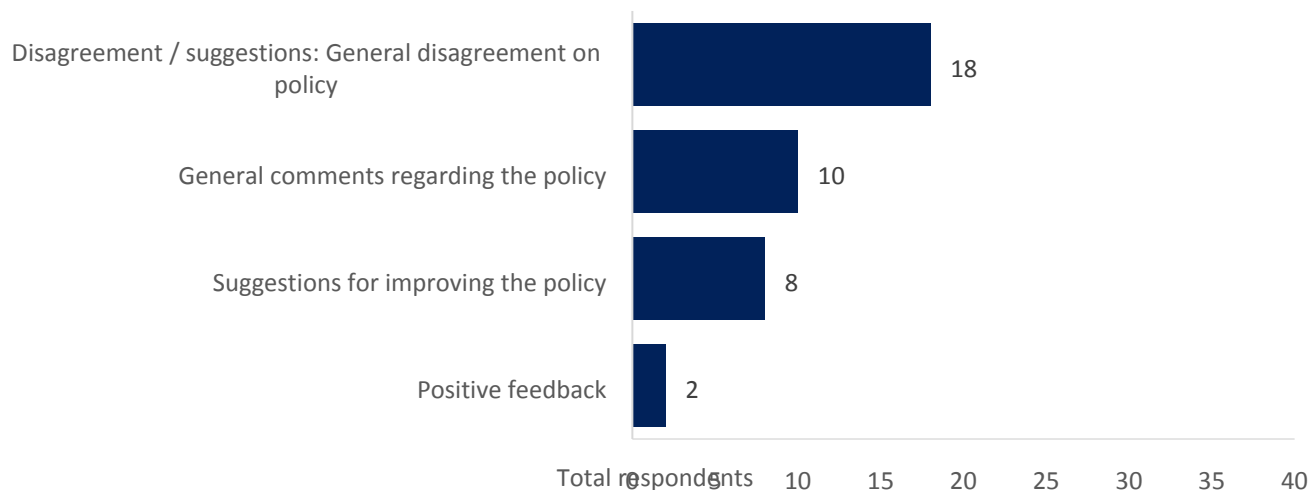


Figure 23

93. Comments and suggestions regarding a general disagreement with the policy:

The council to very short sighted putting people in a position where they are forced to put people into residential care because they cannot afford your charges for their daycare. Surely this would cost the council much more?

You are making it sound as if things that are a pleasure in life are not essential, but to our people it is essential to experience those pleasures.

We do not believe that the level of consultation, particularly public engagement, has been sufficient in reaching the wider members of the Southampton public

All this is very stressful for the service user

Example that the council could provide of how this would work would be useful.

This policy could cause a lot of financial problem for the future.

Disabled people living alone with high rate DLA/PIP but without 24/7 care will be very adversely affected. As I mentioned previously there are many "soft costs" which are currently mitigated by that extra £28 per week. Care hours have already been cut as much as possible, but this was in the knowledge that the disabled person would and could purchase more expensive but disability friendly products that they would be able to use when the carer was not there. By "products" I don't mean one off purchases easily redeemable via the "disability related expenditure", but groceries such as pre-cut/peeled fruit, cans instead of bottles, disposable wipes, etc This could now be put in jeopardy.

On my and my family "no impact at all" but on the community at large "a very negative impact"

In my old age this policy will cost me more if I use it but I should pay rather than be subsidised by others.

The closure of both homes is disgusting, along with Merrydale and Kentish road it seems this council is very discriminatory against elderly and disabled residents who have paid a great deal of council tax in their lifetimes and deserve better

I do not think it is right for individual Councils to be setting these policies as the matter then becomes a post code inequality issue. I also think local government Councils should not be having to struggle to find funds for Social Care which is imposed upon them by the decisions that the NHS make in keeping adults and children alive for longer when they have substantial needs. Because of advances in medical treatments and the fact that no one is allowed to die of 'natural causes', Social Care services should be transferred under the NHS who would then be responsible for 'cradle to grave' care, which is what they advocate. They would then be required to identify full costs and budgets for the Health Service model that this country chooses to follow, and make decisions accordingly. This would cut out a lot of duplication within the end-to-end service. Local Councils should be able to concentrate on managing and maintaining the assets under their control and not have to be so multifaceted and disparate. You would never run a private business in this way with such a diverse set of services, some of which have no inter-relationships.

94. Additional comments regarding the policy:

Please do not lose sight of the fact that you are dealing with the lives and well being of some very vulnerable human beings.

Only the general equality point which is that most carers are women, and they are more likely to be asked to give up what they are doing to provide unpaid care if the perception is that the care provided by the council has become too expensive.

Each case is individual however all the care plans try to be a one size fits all never mind the reasons.

considered as being given relief towards paying for the services and since the family itself putting extra efforts to save for the council and lowered the burden for the SCC itself.

Ensure that those who are vulnerable have assistance to enable them to understand what action is being taken put in simple and easily understood words.

people that are disabled and elderly find it difficult to use computers to respond letters from the council also this budget care plan is unaffordable to many disabled vulnerable people

We feel it is very important that a hardship fund and transitional arrangements are made. We believe there is potential some coproduction work that could effectively look at the existing system and changes, and make sure communications are presented in a way that is easy to for care-receivers to understand and as stress-free as possible. There is also need for greater understanding of the cumulative effects of care and budget changes on people in the city.

I am worried about people who are alone, can you reassure us that we will be treated fairly? Many of us have always saved for a rainy day, is it worth it?

The implications for the complaints process need to be considered.

With a son in supported living I understand what a fab job the council do and know what strains there are financially, but I feel that the charges you are proposing are far too high. This will deter those in need from seeking help

95. Suggestions for improving the policy:

I know you're under severe financial pressure from a Government that doesn't care about anybody except the rich but please try and minimise the adverse effects on older/disabled people.

As already stated feel any increased charges should be covered by community tax as everyone should pay towards care in old age. Also taking into account what the government pay towards this from the centre. Also feel that persons who are not being subsidised by the council should be able to deal with carers company direct possibly saving money when only a small amount of care is needed.

Wouldn't it make sense to merge back with HCC and share services and expertise rather than charge the residents more? In times of austerity, it makes absolutely no sense for a unitary authority to be so stand alone and would make more sense to share or merge with its successful and better run neighbour.

I think there should be further opportunities for face to face dialogue with council officers and cabinet members before the consultation ends and certainly before any decision is made.

96. Positive feedback on the policy:

There is a sense of fairness that pervades the draft policy. As such it would level the playing fields for all who need adult social care. Well done!

Public engagements, meetings and verbal feedback

97. In total there were 5 separate public engagement events to support the consultation process. The range of engagements are outlined below:
98. In total around 38 people engaged with this programme of events. The main purpose of these events was to explain the proposals, answer questions and signpost people towards the questionnaire as the main route for consultation feedback.
99. During the course of these events some feedback was gathered and the main themes have been summarised or quoted in the following paragraphs.
100. Comments and suggestions related to an arrangement fee for people who pay for their care themselves:
- Needed clarity on what “significant changes” meant. If there were financial changes would they need to apply again?
 - “According to the 1999 Health Act service users from LBHU will be looked after considering the circumstances and experiences they have already been through. I think that you’re just come up with new legislation that moves the posts.”
 - “The biggest problem we will face is that the providers cannot afford the fees if their spouse needs care.”
 - Thought it was a monthly payment
 - Will service users get their money back if they drop below £23,250?
 - Questions about what the £250 charge covers
101. Comments and suggestions related to taking into account the Higher Rate Disability Benefits:
- Concern that taking into account the higher rate of disability benefit is legal under the Care Act 2014.
 - Controversial proposal and likely to lead to challenges
 - Concern over the impact on individual finances
 - Suggestion that it is important to manage people’s expectations
 - “Concern was raised during the meeting about the processes involved in implementing the proposals. Some people haven’t had an assessment in years. Social worker time is needed in making the assessments. There is also concern on what support is available for vulnerable people.”
 - “Carers are having to support each other in navigating these processes. Most navigators and advocacy organisations including dementia navigators are not funded to fill out forms. There is often no one to navigate to. Citizen Advice Bureau has a 12 week wait. Care and advocacy organisations would like to be funded to help with form filling and supporting people through the process.”
 - “It is helpful when people from local authority, health and care organisations come and talk to carers and people who need support in order to understand the real impact of their policies and procedures on people. One of the concerns with consultation is that carers don’t have time to get involved.”
 - “In terms of whether the message has got through to the people working in organisations that these changes are being proposed, people in the room mentioned that there is low awareness.”
 - “Expressed concern about lack of clarity with letters as they are difficult for people to understand. In providing all the explanation of how income is calculated, people are confused. People want to know really clearly what they owe.”
 - “Concern over the impact on carers. Implementing the proposals could lead to people giving over the caring responsibility to the local authority. Therefore, the additional stress and pressures caused by these proposals could be false economy.”
 - “We can’t afford it, if it goes up again (contributions) I will have to stop using the care services as it has already gone up 5 times!”

- " We already have limited resources - SCC are just taken more and more money"
- "A list for DRE exists but it is not definitive"
- Higher Rate Disability and Personal independence payments are already taken into account
- "I'm not at pension age, yet you take money for pension out of DLA"
- "The reality is if the people don't end up with any disposal income they will still have to pay the £28.30"
- "Will you have extra DRE Assessors to do the assessments will it be cost effective for the council"

102. Comments and suggestions related to charges from the date the service commences

- " Benefits should be awarded from the start date of care or back dated to cover stay/start date"
- "Communication is difficult / not there"
- "All communications should be discussed and shared among the organisations that are needed to help complete financial assessments"
- The council should speed up the process for financial assessments as it currently takes a long time.

103. Comments and suggestions related to the deferred payments scheme:

- "It would be better for people to remortgage their house, or use the 7 year rule (where people give away their assets and are exempt for inheritance tax after 7 years)"
- "What happens if the property is wife/husbands go into residential care or decease and daughter still wants to live in it? We want to leave it to our daughter (LD) and have care in her own home?"
- "Will you be taking homes as money in your bank or as assets?"
- "Why does a solicitor have to involved? Has this becomes a legal right for SCC to seize the house/asset of somebody that has moved into residential home?"
- "Are there charges for looking into private equity?"
- "Asked if his wife could stay in their home if he went into care/ deceased"

104. Comments and suggestions related to the removal of the locally-based hospital exemption:

- "There was some deep concern expressed in the room about this policy. These are people who have been subject to terrible care, the system has let them down. It is disgraceful that people are proposed to be charged. A reference was made to a book by Chris Lucas "Names" which highlights the problems with some institutional care. These people will be on higher rate benefits. There was some anecdotal reports of processes not allowing people to spend their money."
- "Making sure that people that need 100% funding continues to get 100% funding"
- "I think that it's disgusting they should be left alone they have had awful times & experiences already throughout their life (LBHU) and leave the NHS to look after/fund them."
- "A lot will struggle and find change challenging."

105. General comments and suggestions related to the proposals:

- "A representative from a care provider mentioned that not that many people involved in care know about the proposals."
- "There was talk in the room about the cumulative impact of this proposal alongside other changes brought on by austerity. There are lots of changes happening from different directions e.g. adult social care, transport, housing etc. Who is having an overarching look at what that means for families? People are at breaking point. In terms of taking into account the higher rate benefits this could be difference between people having a small amount of money to contribute to their quality of life."
- "The proposals could be joined up with other services, to increase joint working between health and social care and ensure a holistic approach for people who access services, taking into account community factors as well as health and care. The Better Care changes are trying to join everything up."

- More funding to be provided by government following legislation changes.
- Health Care isn't free
- "We have worked all our lives and paid into the system"
- Think it is scare mongering vulnerable people
- "If they are going to be any charges, when will the alteration happened? Care will be reviewed and funds will go up and down, how much will they pay towards their care?"
- "Will Service User have money taken out of his wages – financial assessment will take place"
- "When you do an assessment, do you take mobility LA / PIP – is that not breaking the law?"
- "Care Plans are inappropriate"
- "Most vulnerable people are no being looked after – I do not trust you!"
- "what might not affect them now might affect them later on."
- "If the policy isn't compliant should I be asking for contributions back?"
- Clarification on the costs and savings.

106. Many of these topics will have also been raised through other channels as a part of the consultation but in the interest of transparency they have also been summarised here.

Advocacy

107. The independent advocates provided summaries of individual conversations along with their summary of the overarching themes. The summary view from Choices Advocacy was that people with the Local Hospital Based Unit (LBHU) exemption strongly disagreed with the proposal to introduce charges in line with the Charging Policy. They provided the following as a summary position:

'Individuals who are ex LBHU residents have a history of bad institutional care as part of a system which failed them. They are now living much happier lives with opportunities to take part in activities they enjoy and promotes their well-being. They are extremely vulnerable and complex people for whom changes in their current living situation due to loss of income could be extremely detrimental.'

108. The advocates also provided a summary position of the potential impacts this proposal may have on the individuals, the summary view was that it would have a very negative impact, and the following summary statement:

'If these individuals have less income they will not understand why they can't do things and there is a huge risk that for many of them that challenging behaviours and self-harm may increase as a result of changes to the lifestyle they expect.'

Feedback on the consultation process

109. A total of 13 respondents provided written feedback commenting on the consultation process. The following points were raised:

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| Perhaps when Budget Consultations, such as this one, where questions require a response, reference could be made to the page of the proposed draft policy for further information. After all, not everyone is an expert on filling in these web form pages on a day to day basis. |
|---|

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|---|
| Its a draft policy therefore the final policy could be completely different |
|---|

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|---|
| I also have concerns about how the council has promoted the feedback to the general public. |
|---|

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|------------------------------|
| Insufficient detail provided |
|------------------------------|

I think there should be further opportunities for face to face dialogue with council officers and cabinet members before the consultation ends and certainly before any decision is made. It would be good to think that said council officers and cabinet members take the time to visit and talk to individuals and their families or carers at the coal face before decisions are made to find out the true impact if these are approved.

Would like to see case studies to help understand the proposals.

Don't think they are knowledgeable enough to express a view.

110. In addition to written feedback, verbal feedback on the consultation process was also provided during public meetings. The following points were raised:

- “Doesn’t believe that that there has been enough advertisement or been publicly spread enough.”
- Concern that a small number of respondents views will not express the large number of people currently receiving benefits.
- “Doesn’t feel that the venues have been accessible enough and feels that a generic letter has been sent and they should be more personalised to individuals?”

Conclusion

111. Southampton City Council sought views on a draft Adult Social Care Charging Policy. The consultation ran for 12 weeks from 17 October 2018 to 16 January 2019.

112. In total, there were 156 responses to consultation. Of this, 133 responded to the consultation questionnaire and all other submissions were made via emails, letters or in a public meeting. This consultation ran parallel with the overall budget consultation and two other consultations on specific proposals.

113. All questionnaire results have been analysed and presented in graphs within the report. In addition all written responses to the consultation were read and comments assigned to a category based upon similar sentiment or theme and descriptions have been provided of each category within the report.

114. In conclusion, this consultation allows Cabinet to understand the views of residents and stakeholders on the proposals that have been consulted on. It represents the best possible summary and categorisation of all the feedback received through the consultation period. Therefore it provides a sound base alongside the other information to inform a final decision.

Part 2 – Consideration of the Consultation Feedback

Background

115. Under the Care Act 2014, the council has discretion whether to charge for services to meet both eligible and non-eligible needs, except where it is required to arrange care and support free of charge.
116. Southampton City Council has an Adult Social Care Charging Policy which sets out the charges that apply for non-residential care and support. Under this policy, the council charges for some services provided, where it is permitted to do so under the Care Act 2014, and carries a financial assessment (means test) to determine the amount an individual has to contribute towards the cost of their care and support.
117. To date, the council has exercised its discretion to not charge at all for some services, and for other services, has not charged the full amount to cover the actual service being delivered. The Care Act 2014, and associated relevant regulations, set out the services that a local authority can and cannot charge for.
118. The proposed policy was published alongside the consultation, and consultation was undertaken on the following changes to the policy:
1. To introduce a new Arrangement Fee of £250 for people whose assets are over the capital threshold, currently £23,250, (and who therefore must pay the full cost of their care) but who request Southampton City Council to make the arrangements for their non-residential care.
 2. To take account of the higher rate Attendance Allowance and disability benefits (Personal Independence Payment and the care component of Disability Living Allowance) when assessing for financial contributions for non-residential care.
 3. To make it clear that Southampton City Council will begin charging the assessed contribution from the first day that chargeable services are provided.
 4. To increase charges for deferred payment scheme loans to reflect the actual costs of administering the scheme, and introduce an interest charge in line with the Care Act 2014.
 5. To apply the charging policy to clients receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011.
119. The proposed policy aims to deliver a fairer and more equitable service, whilst ensuring that the services can remain sustainable in order to meet the needs of local people, now and in the future. Southampton City Council currently supports approximately 2,600 people with care and support needs. The proposed Charging Policy will not impact on all of the existing clients but is likely to impact on approximately 700 clients.

Summary of changes:

1. Arrangement Fee
 - No changes were made to the draft policy and the recommendation is to implement the proposal
2. Higher rate Attendance Allowance and disability benefits
 - The policy has been updated to clarify how Disability Related Expenditure will be taken into account.
 - It is proposed to amend the policy to state that individuals with a terminal illness who have been issued with a DS 1500 form by a medical practitioner will not have disability related benefits taken into account in their income assessment.
3. Charging from the date the service commences

- It is proposed to amend the policy to state that charges will not apply for a period any longer than 8 weeks prior to the completion of financial assessment.
4. Increase charges for Deferred Payment Scheme loans
 - The one-off initial set-up charge amount has been reviewed and revised to £730 in line with actual costs.
 - It is proposed that the annual administration charge of £305 is not introduced.
 5. Applying the charging policy to clients receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011
 - No changes were made to the draft policy
 - A further review of these individuals' circumstances carried out during the consultation period, with the support of independent advocates and the individuals' representatives, has shown that by virtue of their significant and complex health care needs, they would not in any case be affected by this proposal and on the basis of their current circumstances, they would not be assessed as requiring to make any contribution towards the cost of their care
 - These individuals will continue to receive regular individual assessments to ensure that the arrangements for funding their care and support are made in accordance with the Adult Social Care charging policy, arrangements for Continuing Healthcare and other relevant policies.

Consultation considerations

Arrangement Fee

120. 46% of respondents supported the proposal to introduce an arrangement fee, 47% did not support the proposal. 57% felt the charge was too high and 38% felt it was an appropriate amount. Some respondents were concerned that the charge should reflect actual costs and no more.

121. A review of the average costs of making arrangements for a care package demonstrated that average costs are between £250 and £310. The proposed charge of £250 is therefore considered a reasonable contribution towards the actual costs of arrangements.

122. 79% felt that the proposed charge for subsequent changes to care packages was too high. Minor changes to existing arrangements will not be subject to a further charge, and the charge would only apply to major changes such as a change in provider of care and support or a significant change in need requiring new arrangements.

123. The key risk is that people, especially families and carers may be disinclined to request support for making arrangements from the council due to the arrangement fee. Those who are below the income threshold of £23,250 (as set out in the Care Act 2014) will not be subject to the charge. Charges will not be applied before an individual has had every opportunity of being financially assessed to ensure their income and savings are above the capital threshold, (currently £23,250). In exceptional circumstances, the council will consider options to defer, suspend or waive the charge.

Higher rate Attendance Allowance and disability benefits

124. There were just over 700 clients in receipt of higher rate disability related benefits at the time of the consultation which, subject to financial assessment, may be affected by the change. Approximately 400 were

aged over 65, the majority being female in receipt of the higher rate care component of Attendance Allowance. The remaining 300 were adults aged 18 to 64 receiving higher rate disability benefits and of mixed gender.

125. 50% of respondents disagreed with the proposal to include all forms of benefit payments (unless explicitly disregarded under the Care Act, such as the mobility component of disability related payments) in the in the assessment of an individual's income. Historically, Southampton City Council has disregarded the higher rate of Disability Living Allowance or Attendance Allowance, equating to £28.30 (2018/19 rates). Respondents were concerned about the negative financial impact of this proposal, and the fact that disability payments are intended to meet care needs (including transportation, specific food requirements etc).
126. There is a risk that clients choose to reduce or cancel care and support as a result of the proposal being implemented. This could have an adverse impact on health and wellbeing on the individual and on their carer(s), family members and/or friends who may have to give additional care and support.
127. The policy is considered lawful, and is in line with Care Act 2014 Guidance (Annex C) which states that benefit payments should be considered as part of the income assessment unless explicitly disregarded under the Care Act.
128. Everyone directly affected by this proposal will be financially reviewed. This will include a benefits check and an offer of a Disability related Expenditure (DRE) assessment/ re-assessment so that all of their allowable disability related expenditure is taken into account, including where relevant, night-time care costs that are not met by the council. In addition, Southampton City Council will ensure that individuals receiving non-residential care services retain Minimum Income Guarantee amount. Having taken the representations made in the consultation into consideration, the draft policy has been updated at sections 35 – 41 to ensure that the policy is clear regarding the treatment of DRE and living expenses, which help to mitigate the risks relating to negative financial impacts.
129. The policy also includes the option options to defer, suspend or waive charges in exceptional circumstances such as financial hardship.
130. Some respondents also raised a concern that this proposal should not apply to those with a terminal illness. After consideration by the relevant Cabinet Member and Director, the draft policy has been updated at s.30 to disregard all disability related benefits for individuals who are terminally ill and have been issued with a DS 1500 form.

Charging from the date the service commences

131. Under the current policy, people are not charged for services they are getting prior to completing a financial assessment. This proposal will enable the council to align charges and payments with services provided, from the point at which they start being provided. This will mean that recipients of support may have to commence payment earlier than at present, and therefore pay more overall.
132. This proposal will not impact on existing clients and only affect new clients when the policy is implemented. 48% of respondents disagreed with this proposal and 41% agreed.
133. An average of 294 new clients a year will require a chargeable non-residential care services. The average weekly contribution for a new client receiving non-residential services at the time of the consultation was £83.47 but with an average 7 weeks each client has services before completing a financial assessment, it is estimated that the new policy would result in new clients paying on average, £581 more towards the cost of their care services.

134. The main concern from the consultation feedback was that the proposed policy would put people at risk of getting into debt, especially when there is a significant length of time between starting a service and completing the financial assessment.
135. Following consideration of the representations made in the consultation, the draft policy has been amended at s.48 to confirm that, in cases of lengthy financial assessments, charges will not apply to a period any longer than 8 weeks prior to the notification date of the completed financial assessment.
136. The council will ensure people are offered a light-touch financial assessment to minimise delay and offer appropriate support to engage in the assessment. In exceptional circumstances, the council will consider options to defer, suspend or remove charges where the charges might create financial hardship.

Increase charges for Deferred Payment Scheme loans

137. The Deferred Payment Scheme (DPS) is designed to prevent people from being forced to sell their homes in their lifetime to meet the costs of their residential care. The council supports an average of 15 customers a year through the DPS scheme.
138. Southampton City Council currently charges a one of administration fee of £250 which does not align to the actual costs of the service. 54% of respondents disagreed with the proposal to increase this charge (37% agreed) and 76% felt that the proposed charge of £810 was too high.
139. The actual costs of the charge have been reviewed and the proposal is to amend this charge to £730 to reflect the actual costs of setting up the loan, and Appendix 2 of the draft policy has been amended to reflect this.
140. Following consideration of the representations made in the consultation, Southampton City Council is no longer proposing to introduce an annual administration fee.
141. 34% of respondents agreed with the proposal to introduce an interest charge for the duration of the loan and 57% disagreed.
142. The consultation identified that for some people, the set-up charge and introduction of an interest charge may deter them from utilising the scheme. The charging of costs and interest is permitted under the Care Act 2014, and the council's proposal is to charge the maximum rate, in line with a number of other local authorities. The set-up fee can be paid upfront or be included in the deferred loan where funds are unavailable to pay the charge upfront. In exceptional circumstances, the council will consider options to defer, suspend or remove charges where the charges.

Applying the charging policy to clients receiving social care support who were previously supported by the Locally Based Hospital Unit (LBHU) prior to its closure in 2011

143. The consultation proposed that the council would apply the new charging policy to everyone receiving chargeable social care and support services. This may have affected up to 25 people who, until 2011, lived at the Locally Based Hospital Unit (LBHU), at which time the responsibility transferred from the NHS to the council.

144. This proposal may have impacted up to 25 clients who were previously residents of the LBHU. All 25 clients affected by the proposal were supported by independent advocacy as well as Deputies for Property and Financial Affairs for those who had them to engage in the consultation process as much as they were able. Assessments were carried out for each individual to understand the impact of the proposal.
145. These assessments have shown that by virtue of their significant and complex health care needs, these individuals would not in any case be affected by this proposal and, on the basis of their current circumstances, they would not be assessed as requiring to make any contribution towards the cost of their care.
146. These individuals will continue to receive regular individual assessments to ensure that the arrangements for funding their care and support are made in accordance with the Adult Social Care charging policy, arrangements for Continuing Healthcare and other relevant policies.
147. It has not been necessary to make any changes to the draft policy, as these individuals will not be impacted by the proposal.

Further considerations

148. Some consultation responses indicated that the draft Appendix 1 (related to DRE assessment criteria) as published in the consultation could be considered misleading by including examples of potential amounts allocated to criteria of need. Each individual's DRE will be assessed on a case by case basis, and Appendix 1 of the draft policy has been amended to include a non-exhaustive list of DRE considerations in line with Care Act 2014 guidance.
149. Some consultation responses indicated that the policy included a lot of complex information and legal terminology which made it inaccessible. Therefore, subject to the policy being adopted, the council will ensure that an 'easy read guide' to the policy is developed which takes into account accessibility guidance.
150. All proposals outlined in this paper will be implemented when the new charging policy is commenced on 6 May 2019.

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Proposals for service charge changes for council tenants for 2019/20 – Consultation feedback and narrative

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Introduction

1. Southampton City Council ran consultations on a range of budget proposals for 2019/20. As a part of this, the council sought views on a specific set of proposals regarding service charges for housing tenants. The consultation ran from 17 October 2018 to 16 January 2019.
2. As a result of reductions in funding from central government, Southampton City Council has made £136.4 million savings over the last seven years and needs to make another £15.05 million savings by 2020/21. Income from Council Tax covers 17% of total council expenditure (excluding Housing Revenue Account expenditure and schools expenditure) and the revenue support grant funding the council receives from central government will be reduced by 54% over the medium term. At the same time as having to make further savings, demand for council services – particularly those for vulnerable children and adults – continues to increase year-on-year.
3. Housing service has its own budget, called the Housing Revenue Account. Within this budget, are services including managing the housing register, helping people and families to manage their budgets and debts, tenancy management, estate management, tenant involvement, independent domestic violence advocacy for the victims of domestic abuse, Telecare and responding services, repairs and maintenance, leasehold management and the decent neighbourhoods programme.
4. As a result of reductions in funding from central government, the housing service needs to make £4 million savings by 2020/21. These are in addition to the £15.05 million savings the council needs to make from its 'General Fund' budget (which covers everything apart from housing).
5. This consultation sought views on a proposal to increase service charges and introduce four new service charges to council tenants, which will help the housing service to balance its budget. The council has legal powers to charge for these services as long as the charges represent the actual cost of the service. The council's current charges are lower than the actual costs and in some cases the council has not previously made a charge, but has been providing a service to tenants. These proposals reflect a step towards recovering the full cost of the services provided. These proposals will only affect tenants living in walk-up blocks and tower blocks.
6. This report summarises the aims, principles, methodology and results of the public consultation. It provides a summary of the consultation responses both for the consideration of decision makers and any interested individuals and stakeholders.

Aims

7. The aim of this consultation was to:
 - a. Communicate clearly to residents and stakeholders the proposals for service charges.
 - b. Ensure any resident, business or stakeholder who wishes to comment on the proposals has the opportunity to do so, enabling them to raise any impacts the proposals may have.
 - c. Allow participants to propose alternative suggestions for consideration which they feel could achieve the objective in a different way.
 - d. Provide feedback on the results of the consultation to elected Members to enable them to make informed decisions about how to best progress.
 - e. Ensure that the results are analysed in a meaningful, timely fashion, so that feedback is taken into account when decisions are made.

8. The consultation was not a vote, it enabled participants to read about the preferred option, answer questions and make comments that will enable the final decision to be made. Decision makers need to consider the representations made during the consultation period but a majority view will not necessarily dictate the final decision. It is also important to note that the consultation is one element of the suite of reports that will feed into the final position.

Consultation principles

9. The council takes its duty to consult with residents and stakeholders on changes to services very seriously. The council's consultation principles ensure all consultation is:
 - a. Inclusive: so that everyone in the city has the opportunity to express their views.
 - b. Informative: so that people have adequate information about the proposals, what different options mean, and a balanced and fair explanation of the potential impact, particularly the equality and safety impact.
 - c. Understandable: by ensuring that the language used to communicate is simple and clear and that efforts are made to reach all stakeholders, for example people who are non-English speakers or disabled people.
 - d. Appropriate: by targeting people who are more likely to be affected and using a more tailored approach to get their feedback, complemented by a general approach to all residents, staff, businesses and partners.
 - e. Meaningful: by ensuring decision makers have the full consultation feedback information so that they can make informed decisions.
 - f. Reported: by letting consultees know what was done with their feedback.
10. Southampton City Council is committed to consultations of the highest standard, which are meaningful and comply with the following legal standards:
 - a. Consultation must take place when the proposal is still at a formative stage
 - b. Sufficient reasons must be put forward for the proposal to allow for intelligent consideration and response
 - c. Adequate time must be given for consideration and response
 - d. The product of consultation must be carefully taken into account.
11. Public sector organisations in Southampton also have a compact (or agreement) with the voluntary sector in which there is a commitment to undertake public consultations for a minimum of 12 weeks wherever possible. This aims to ensure that there is enough time for individuals and voluntary organisations to hear about, consider and respond to consultations. It was felt that a 12 week consultation period would be the best approach.
12. Southampton City Council has published statement of arrangements for consultation on matters of housing management in compliance with Section 105 Housing Act 1985 and Section 137 Housing Act 1996. This consultation was undertaken in compliance with these arrangements.

Consultation methodology

13. Deciding on the best process for gathering feedback from stakeholders when conducting a consultation requires an understanding of the audience and the focus of the consultation. It is also important to have more than one way for stakeholders to feedback on the consultation, to enable engagement with the widest range of the population. Previous best practice was also considered in the process of developing the consultation methodology.

14. The agreed approach for this consultation was to use a combination of online and paper questionnaires as the main basis, supported by a range of meetings with those directly affected. Feedback was also received through email and letter.
15. It was felt that due to the sensitivity of the consultation it was important to provide face to face contact with consultees to provide clarity and answer any questions. The drop-in or stakeholder sessions were designed to both increase awareness of the consultation but also to answer questions and explain some of the more technical elements to specific stakeholder groups.
16. This approach of open consultation, supported by a wide range of communications ensured that as many people as possible were aware of the issues and could have their say if they chose to.

Questionnaire

17. The main vehicle for gathering feedback through the consultation was a combination of online and paper questionnaires. Questionnaires enable an appropriate amount of explanatory and supporting information to be included in a structured questionnaire, helping to ensure respondents were aware of the background and detail of the proposals. It was deemed the most suitable methodology for consulting on this complex issue alongside the information sheets which act as a summary of proposals by area.
18. Paper copies of the questionnaire were made available in Southampton Civic Centre reception, Gateway, all Southampton libraries and were shared at a wide range of events for tenants and with block reps.

Public drop-ins

19. A range of service charge consultation drop-in events were run at four locations around the city from the 20 November to 6 December 2018. These drop-ins were attended by 21 tenants and leaseholders. The aim was to promote the consultation and answer any questions that came up.
20. The drop-in dates were:
 - 20 November 2018. Weston – 5 attendees
 - 26 November 2018. Golden Grove – 3 attendees
 - 30 November 2018. Thornhill – 6 attendees
 - 6 December 2018. Millbrook – 7 attendees

Additional feedback channels

21. Any emails addressed to senior officers or Cabinet members were collated and analysed as a part of the overall consultation.
22. Respondents to the consultation could also write letters to provide feedback on the proposals.

Promotion and communication

23. Throughout the consultation, every effort was made to ensure that as many people as possible were aware of the budget proposals and had every opportunity to have their say.
24. Particular effort was made to communicate the proposals in a clear and easy to understand way. This was achieved by including key information within the questionnaire and signposting to a wide range of supporting information. This included the following which were hosted on a focused area of the council website.
 - a. Information sheets

- b. Equality and Safety Impact Assessments
- c. Questionnaire
- d. Supporting information for the three parallel consultations.

25. For the duration of the consultation, paper versions of the consultation questionnaire were available in libraries and council offices. Paper copies of the questionnaire or alternative format versions could be obtained on request.
26. At the start of the consultation a media release was issued.
27. The tenant engagement team promoted the consultation through a wide range of mechanisms including tenants meetings, drop-in events, emails, magazine, online newsletters and calendars, texts, posters and electronic noticeboards.
28. There was a special edition of the online Tenants Link Magazine publicising the consultation, emailed to 6,500+ tenants and leaseholders.
29. Tenants and leaseholders were also informed about the consultation in the annual Housing Service magazine, hand delivered to tenants and leaseholders.
30. Tenant reps were both emailed and texted about the consultation and the proposals were presented to a number of tenant groups including the Tenants Panel and Block Rep Forum.
31. A combination of paper and electronic posters advertised both the consultation and the drop-in events at various noticeboards around the city.
32. The budget consultations were included in 8 Southampton City Council e-alerts. The total reach of these e-alerts was in excess of 30,000. These e-alerts resulted in 810 clicks through to further information and the questionnaire.
33. With regard to social media, a combination of Twitter and Facebook promotion was used, there were five posts about the overall budget consultation on Facebook with an overall reach of 37,033. There were a total of 17 tweets about the overall budget which had a total reach of 32,948. In addition to this there were three further tweets on the tenant service charge consultation with a reach of 5,744 and three specific Facebook posts with a reach of 24,961. Also through housing specific social media accounts there were a total of eight posts about the consultation with a total reach of 7,637.
34. To support the external promotion of the consultation, there were also activities to make staff of Southampton City Council aware of the consultation, internal emails and promotion on staff webpages.

Part 1 – Summary of Consultation Feedback

Overall respondents

35. Overall, there were 200 separate written responses to the consultation.

36. The majority of responses were received through the consultation questionnaire; 182 in total. Additional written responses were also received through emails and letters. The breakdown of all written responses is shown within table 1 below.

| Feedback route | Total number of responses |
|--|---------------------------|
| Questionnaire (Paper and online) | 182 |
| Letters or emails | 16 |
| Feedback received through the overall budget questionnaire | 2 |
| Total | 200 |

Table 1

37. In addition to written responses to the consultation, there were a number of public engagements and meetings in which verbal feedback was provided.

38. All written and verbal feedback received is summarised within the following sections.

Questionnaire quantitative feedback

Breakdown of questionnaire respondents

39. A number of questions were asked within the questionnaire to find out a bit more about the respondents to help contextualise their response.

40. The first question asked respondents what their interest in the consultation was. Figure 1 shows the breakdown of responses to this question. Please note percentages add up to more than 100% as respondents could select multiple options. A total of 103 respondents (57%) were interested as a resident of Southampton. The second highest proportion of respondents were tenants of walk-up blocks; a total of 62 (34%) selected this option. The next highest proportion of respondents were tenants of tower blocks; a total of 25 (14%) respondents selected this option. It is worth noting that when combined the number of respondents who were tenants of either a walk-up block or tower block totalled 87 (48%). A further 12 respondents described themselves as a family member of a tenant, 11 selected an employee of a local authority, 9 respondents were tenants of an unaffected property, 4 respondents selected a resident elsewhere in Hampshire, 4 respondents were political members, another 4 respondents described themselves as a member of a community group or organisation and a further 6 respondents selected “other”.

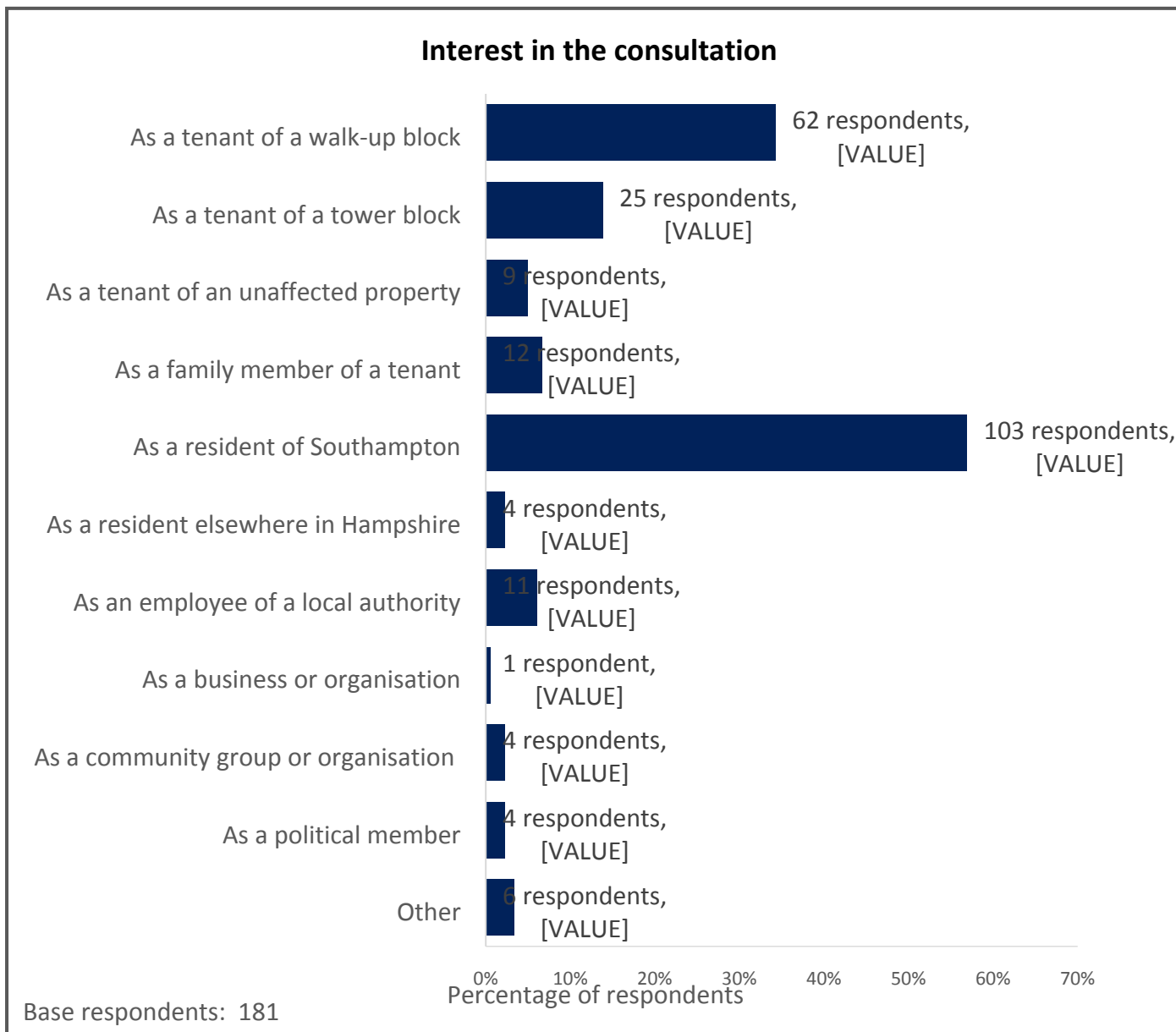


Figure 1

41. Figure 2 shows how respondents to the consultation best described their gender. 85 respondents described themselves as Male, 81 described themselves as Female and a further 3 respondents described themselves in another way.

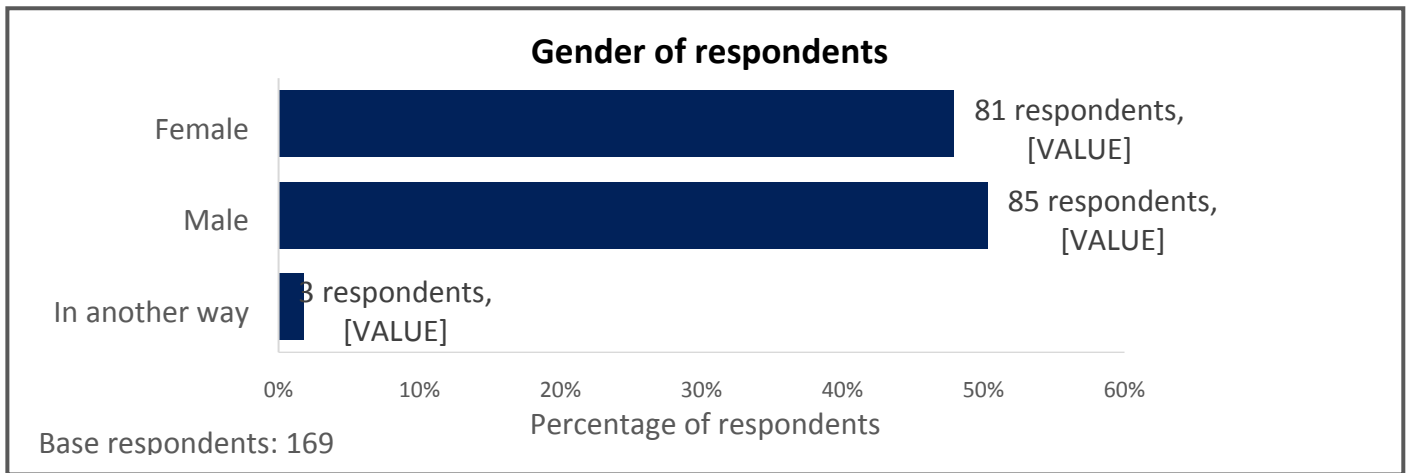


Figure 2

42. Respondents were also asked their age as shown within Figure 3. The highest proportion of respondents were between the ages of 45 and 64 which comprised 49% of respondents. There were a lower number of respondents for categories over the age of 75 and under the age of 25.

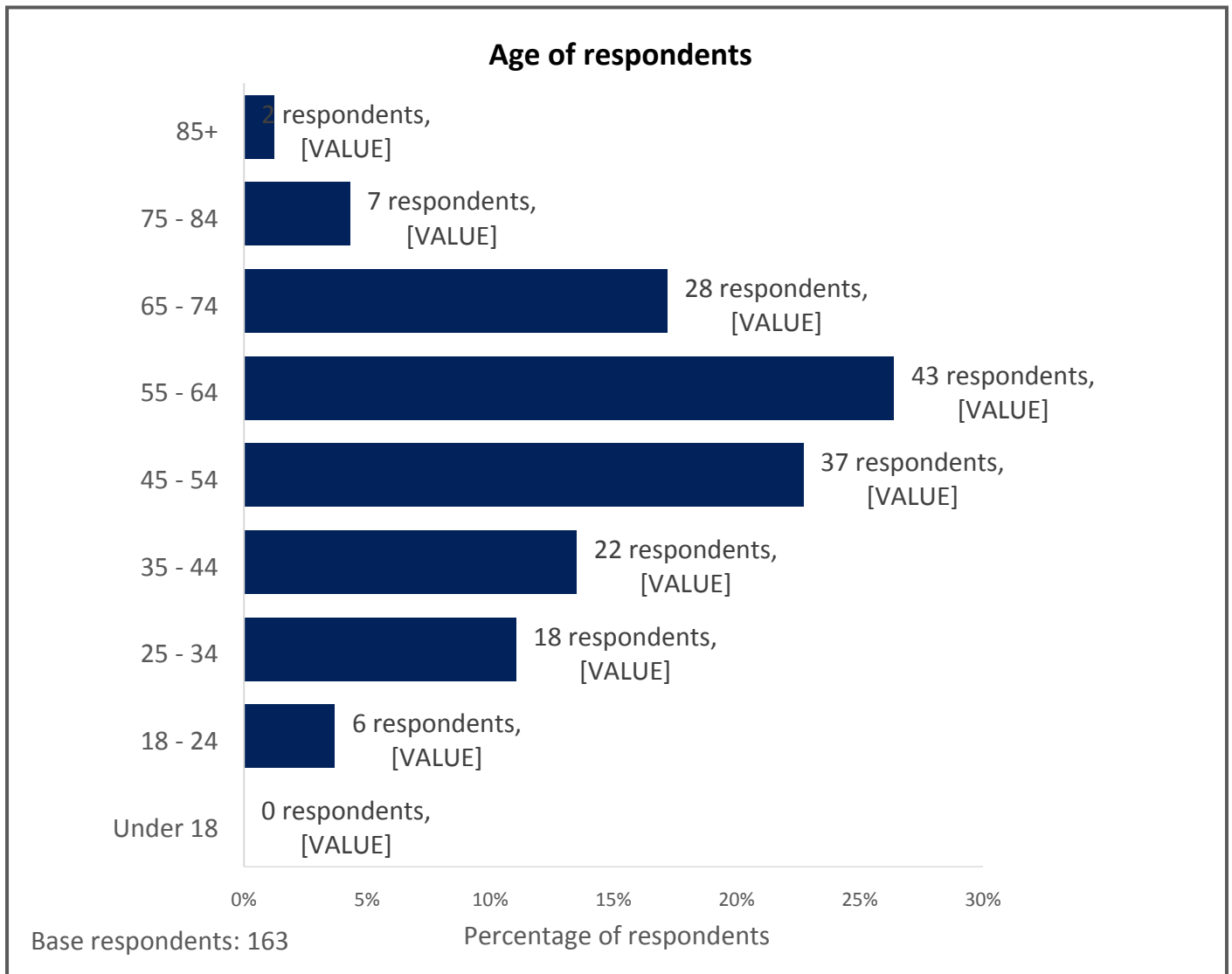


Figure 3

43. The final question asking for more information about the respondents themselves asked for their ethnicity. Figure 4 shows that the highest proportion of respondents (93%) described themselves as White. A further 2% of respondents described themselves as Asian or Asian British; 2% Black, African, Caribbean or Black British; 1% mixed or multiple ethnic groups and 2% as another ethnic group.

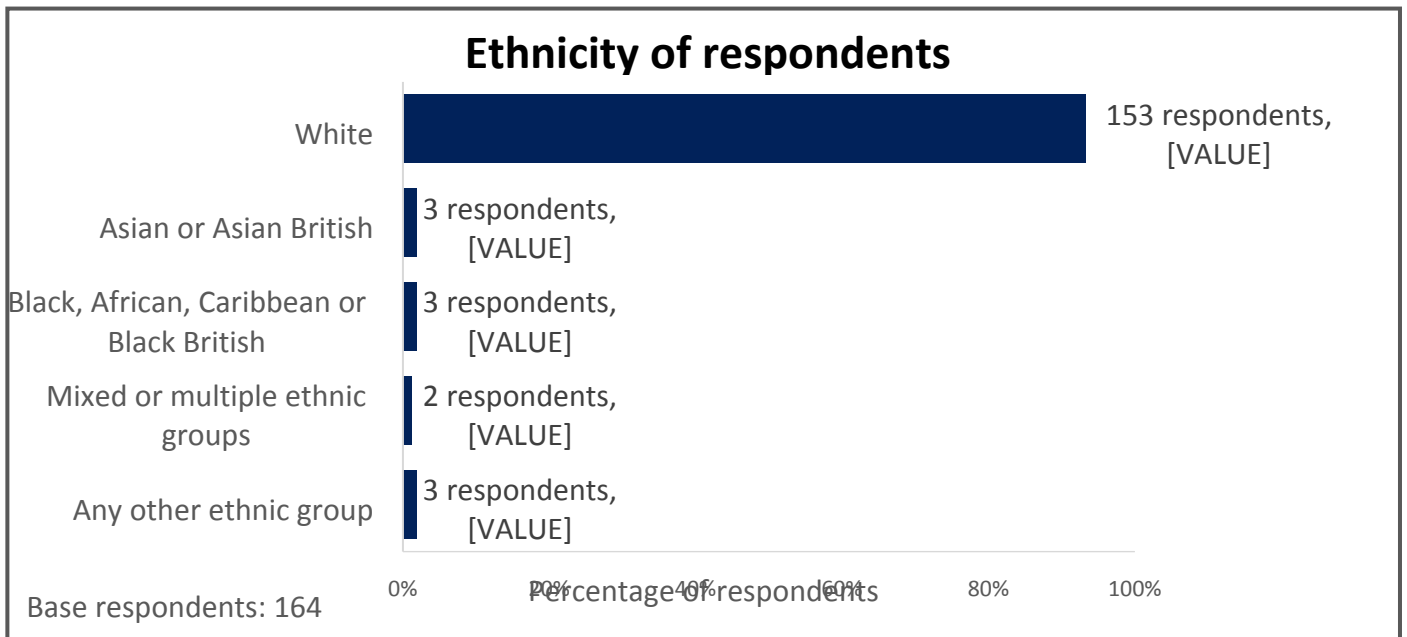


Figure 4

Agreement or disagreement with the council recovering some of the cost of providing services

44. The proposed change to service charges for council tenants for 2019/20 put forward the idea of increasing service charges and introducing new services charges to council tenants in order to help the housing service balance its budget by recovering some of the cost of the services provided.
45. Respondents were asked to what extent they agreed or disagreed with the principle of the council seeking to recover some of the cost of providing services. Figure 5 shows the results of this question.
46. A total of 62% of respondents expressed overall agreement with the principle of the council seeking to recover some of the cost of providing services. Of this, 37% strongly agreed and 26% agreed with the principle. A further 8% neither agreed nor disagreed. Overall, 30% of respondents either disagreed or strongly disagreed with the proposal; of which 14% disagreed and 16% strongly disagreed.
47. When focusing on the views of council tenants (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges), a total of 49% agreed with the principle of the council seeking to recover some of the cost of providing services. Another 43% said they disagreed with this principle and a further 9% neither agreed nor disagreed.

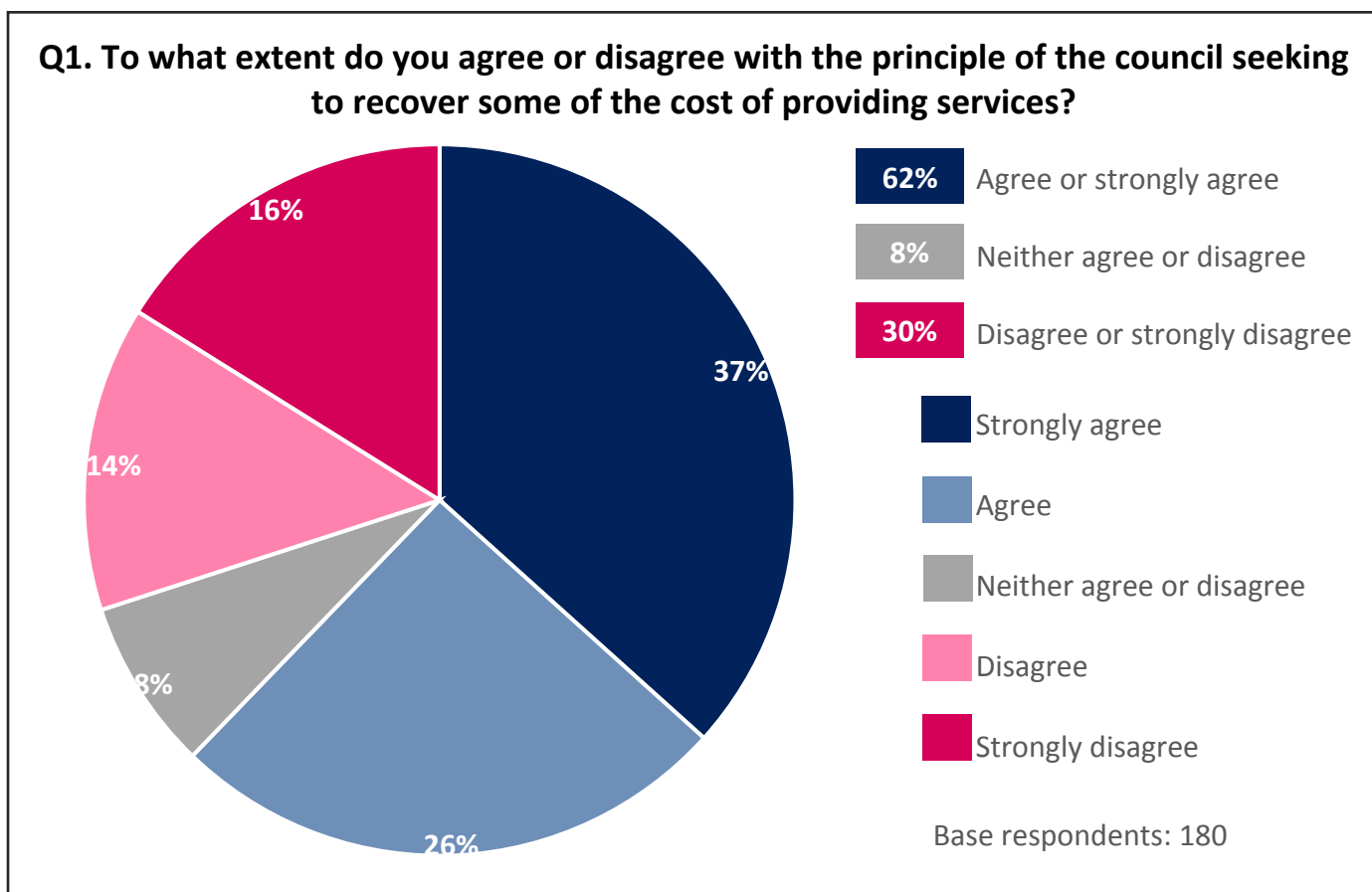


Figure 5

Changes to service charges for walk-ups blocks and tower blocks

48. The next section within the questionnaire asked respondents about proposed changes to service charges for walk-up blocks and tower blocks. The following charges were proposed:

| Service (all charges are weekly) | Walk-up block | | | Tower block | | |
|-------------------------------------|----------------|-------------------------|-------------------------|----------------|-------------------------|-------------------------|
| | Current Charge | Proposed Charge 2019/20 | Proposed Charge 2020/21 | Current Charge | Proposed Charge 2019/20 | Proposed Charge 2020/21 |
| Existing Charge | | | | | | |
| Cleaning | 65p | 72p | 72p | - | - | - |
| Concierge | - | - | - | £1.24 | £2.18 | £2.73 |
| Neighbourhood Wardens | - | - | - | £5.12 | £5.12 | £5.12 |
| TV Aerial (communal) | 43p | 43p | 43p | 43p | 43p | 43p |
| New Service Charge | | | | | | |
| Neighbourhood Wardens | - | 54p | £1.45 | - | - | - |
| Test/Repair Emergency | - | 27p | 27p | - | 27p | 27p |
| Garden/Grounds | - | 22p | 22p | - | 22p | 22p |
| Door Entry | - | 22p | 22p | - | - | - |
| TOTAL | £1.08 | £2.40 | £3.31 | £6.79 | £8.22 | £8.77 |

Table 2

49. Respondents were asked what they thought about the proposed services charges for walk-up blocks. Figure 6 shows the results to this question.

50. When thinking about the door entry system, a total of 40% of respondents believed the proposed charge to be too high (30% far too high, 11% slightly too high). A further 36% of respondents thought the proposed charge to be the right amount. Overall, 24% of respondents were of the opinion that the proposed charge for the door entry system was too low (13% far too low, 11% slightly too low). When considering the views of council tenants (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges), 63% believed the charge for the door entry system was too high. Another 10% considered it to be too low, whilst 27% thought it was the right amount.

51. Looking at the thoughts of respondents on the proposed charge for the garden/grounds maintenance, 36% of respondents considered the proposed charge to be too high (28% far too high, 8% slightly too high). A further 34% of respondents said the proposed charge was the right amount. A total of 30% of respondents believe the proposed charge for garden/ground maintenance to be too low (15% far too low, 14% slightly too low). This is the highest proportion of respondents believing the charge to be too low of any proposed walk-up block charge. When looking specifically at the views of council tenants (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges), 59% said the charge for the garden/grounds maintenance was too high. Another 10% thought it to be too low whilst 31% expressed that it was the right amount.

52. Overall a total of 38% of respondents considered the proposed charge for emergency lighting to be too high (27% far too high, 12% slightly too high). A further 38% of respondents thought the proposed charge was the right amount whilst another 24% of respondents said the proposed charge was too low (11% far too low, 12% slightly too low). Now concentrating on what council tenants said (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges) shows that 60% believe the emergency lighting charge to be too high. Some 7% of council tenants considered them to be too low and a further third (33%) thought it was the right amount.
53. The proposed charge for the communal TV aerial was believed to be too high by 33% of respondents (24% far too high, 8% slightly too high). A further 46% of respondents said the proposed charge for the communal TV aerial was the right amount. This is the highest proportion of respondents believing the charge to be the right amount for any proposed walk-up block charge. A total of 21% of respondents said the proposed communal TV aerial charges were too low (13% far too low, 9% slightly too low). Looking at the opinions of council tenants (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges), 48% think the charges for the communal TV aerial was too high. 9% considered the charge to be too low whilst 43% said it was the right amount.
54. When thinking about the proposed charge for neighbourhood wardens, a total of 45% of respondents believed the proposed charge to be too high (29% far too high, 16% slightly too high). This is the highest proportion of respondents who think the charge is too high of any proposed walk-up block charge. A further 32% of respondents thought the proposed charge to be the right amount. Overall, 23% of respondents were of the opinion that the proposed charge for neighbourhood wardens was too low (14% far too low, 10% slightly too low). Focusing on council tenants (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges), 65% of them said the charges for neighbourhood wardens were too high. Another 5% of tenants believed the charges for this to be too low whilst 31% considered it to be the right amount.
55. Overall a total of 29% of respondents considered the proposed charge for cleaning to be too high (20% far too high, 10% slightly too high). A further 43% of respondents thought the proposed charge was the right amount whilst another 28% of respondents said the proposed charge was too low (18% far too low, 10% slightly too low). A total of 43% of council tenants (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges) were of the opinion that the charges were too high for cleaning. A further 14% stated that the charges were too low whilst 43% said it was the right amount.

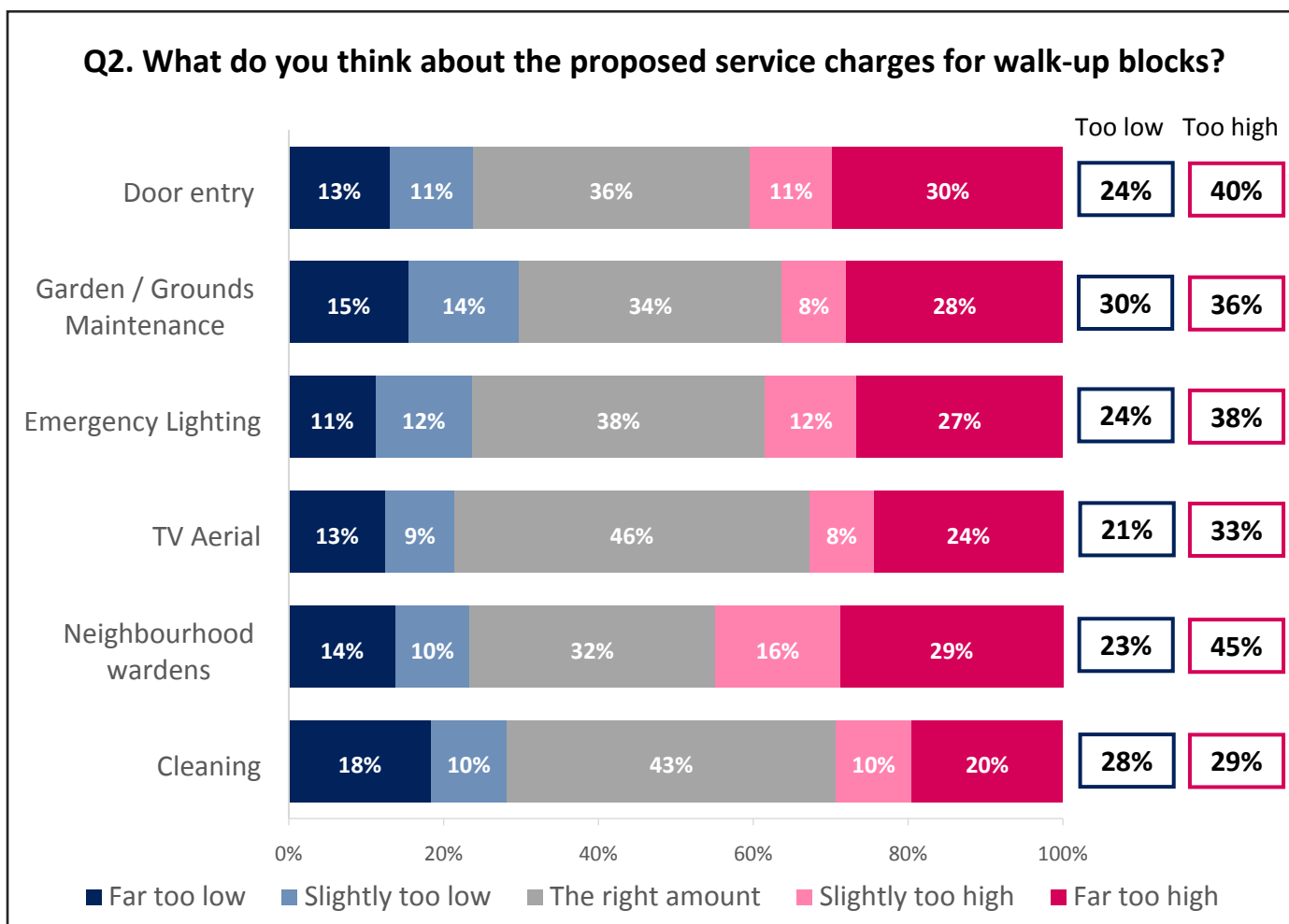


Figure 6

56. Respondents were also asked what they thought about the proposed services charges for tower blocks. Figure 7 shows the results to this question.

57. When asked about the proposed charge for tower block garden / grounds maintenance, 37% of respondents said the charge was too high (25% far too high, 12% slightly too high). A further 31% of respondents think the proposed charge is the right amount. The remaining 31% of respondents believe the charge is too low (16% far too low, 16% slightly too low). This is the highest proportion of respondents believing the charge to be too low of any proposed tower block charge, which was also the case for proposed walk-up block charges. When considering the views of council tenants (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges), 63% believed the charge for the garden/grounds maintenance was too high. Another 15% considered it to be too low whilst 22% thought it was the right amount.

58. Looking at the thoughts of respondents on the proposed charge for tower block emergency lighting, 33% of respondents believed the proposed charge to be too high (22% far too high, 11% slightly too high). A further 39% thought the charge was the right amount and another 27% considered the proposed charge to be too low (12% far too low, 15% slightly too low). When looking specifically at the views of council tenants (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges), 54% said the charge for the emergency lighting was too high. Another 14% thought it to be too low, whilst 32% expressed that it was the right amount.

59. A total of 27% of respondents believed the TV aerial charge to be too high (20% far too high, 7% slightly too high). A further 51% said the proposed charge was the right amount. As was the case with the walk-up blocks, this is the highest proportion of respondents believing the charge to be the right amount for any proposed tower block charge. Overall, 22% of respondents were of the opinion that the proposed charge for the TV aerial was too low (12% far too low, 10% slightly too low). Looking at the opinions of council tenants (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges), 38% think the charges for the communal TV aerial was too high. 12% considered the charge to be too low whilst 49% said it was the right amount.
60. When thinking about the proposed charge for neighbourhood wardens, 39% of respondents thought the charge was too high (25% far too high, 14% slightly too high). As was the case with neighbourhood wardens for walk-up blocks, this is the highest proportion of respondents believing the charge to be too high of any proposed tower block charge. In comparison, 21% of respondents thought the charge was too low (12% far too low, 8% slightly too low). A further 40% of respondents said the proposed neighbourhood warden charge was the right amount. Focusing on council tenants (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges), 56% of them said the charges for neighbourhood wardens were too high. Another 10% of tenants believed the charges for this to be too low whilst 35% considered it to be the right amount.
61. Overall, a total of 37% of respondents considered the proposed charge for the concierge service to be too high (23% far too high, 14% slightly too high). A further 37% of respondents believed the proposed charge was the right amount whilst another 26% of respondents said the proposed charge for the tower block concierge service was too low (13% far too low, 13% slightly too low). A total of 59% of council tenants were of the opinion that the charges were too high for the concierge service. In comparison, 16% stated that the charges were too low whilst 25% said it was the right amount.

Q3. What do you think about the proposed service charges for tower blocks?

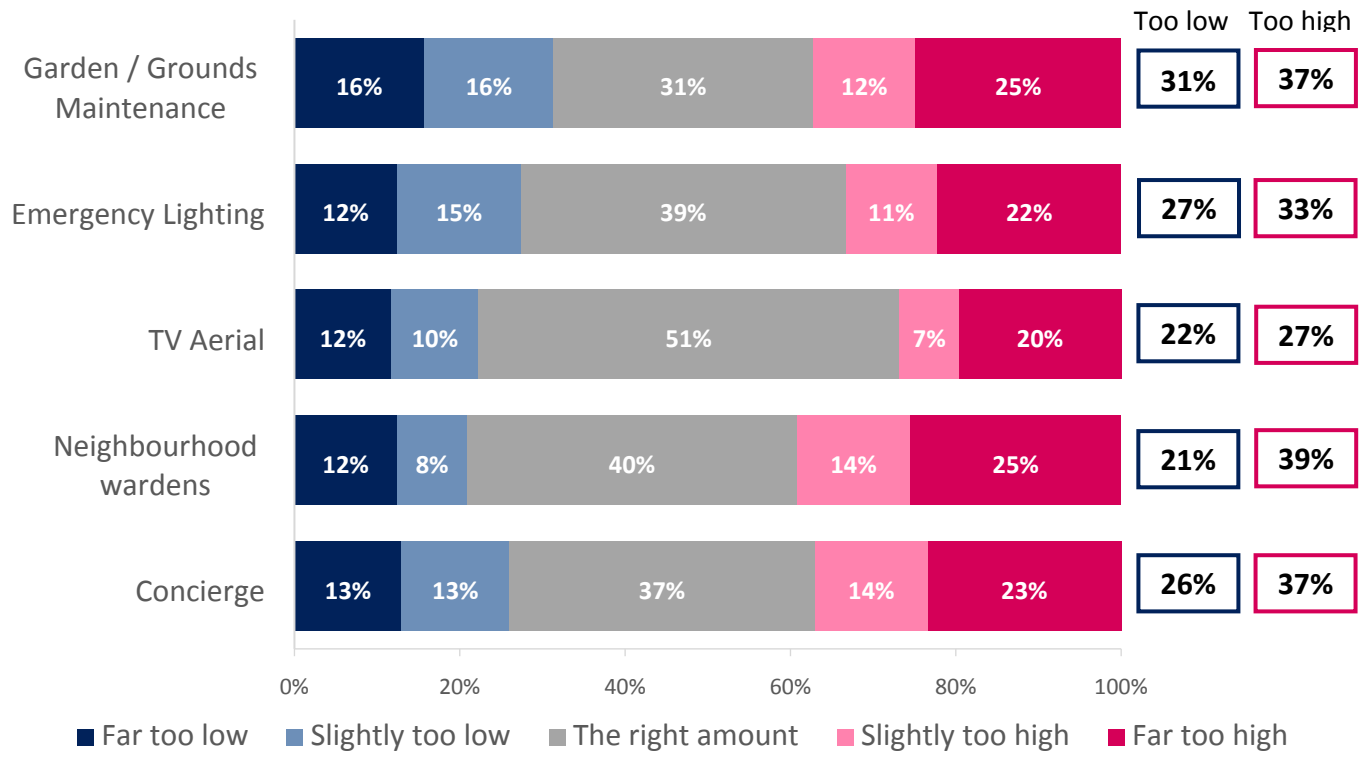


Figure 7

Impacts

62. Respondents were asked what the impact of the proposed charges would have on them, their family or community if they were to be implemented. Figure 8 shows that over a quarter (27%) of respondents felt the impact of these proposed charges would be positive. Of this 13% felt it would be very positive, 7% fairly positive and 7% slightly positive. In comparison, nearly half (49%) of respondents felt the impact of these proposed charges would be negative of which 21% felt it would be very negative, 15% fairly negative and 13% slightly negative. Of the remaining quarter (25%) of respondents, 19% felt there would no impact if the proposed charges were implemented and 6% of respondents did not know what the impact would be. When asking council tenants (this includes those who are tenants of walk-up blocks, tower blocks and properties unaffected by the proposed charges) about the potential impacts, a total of 16% said it would have a positive impact. In comparison, 70% of council tenants believed it would have a negative impact. Of the remaining 15% of council tenants, 11% think it will not have any impact whilst 3% did not know what the impact would be.

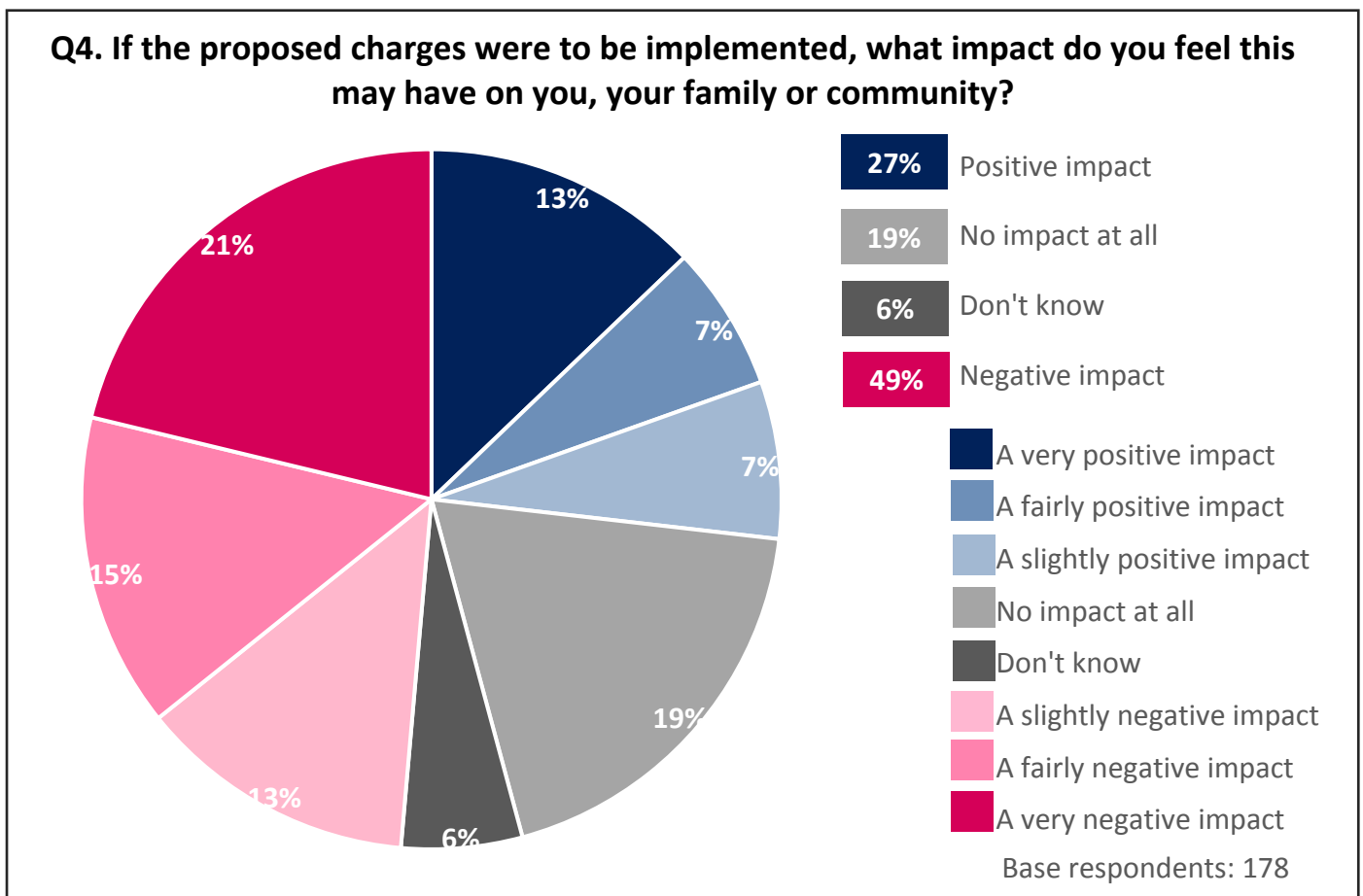


Figure 8

Qualitative written feedback from questionnaires, letters and emails

63. Respondents could provide written feedback to the consultation through a number of different routes. There was one free text question within the questionnaire that respondents could provide feedback through. In addition anyone could provide feedback in the form of letters and emails.

64. All written responses and questionnaire comments have been read and then assigned to categories based upon similar sentiment or theme. Written responses to the consultation were assigned to 21 separate categories. Individual responses that raised a number of different points would be assigned to multiple categories. The

report has also endeavoured to outline all the unique suggestions gathered as a part of the consultation. The following section provides further detail on these categories and the numbers of respondents that raised that theme within their response.

65. Points raised within the written feedback to the consultation generally fell into one of 6 broad categories. These were:

- a. Comments expressing agreement with the proposed service charges
- b. Comments expressing disagreement with the proposed service charges
- c. Comments on the potential impacts of the proposed service charges
- d. Comments giving suggestions related to the proposed service charges
- e. Other comments related the proposed service charges
- f. Comments regarding the housing service in general

Comments expressing agreement with the proposed service charges

66. A total of 15 respondents expressed agreement with the proposed service charges. The following table presents the unique comments associated with this.

| Agree with charging for services | |
|---|--|
| Council tenants should pay for service provision in the same way private tenants and owners have to. | |
| I have no issue with charging for services generally. | |
| Tenants in council housing are already receiving a reduced rate for rent, they do not need the same on service charges. | |
| These services are necessary so charge to allow them to continue. | |
| The council must cover their costs of all services to residents, even if this means charging. | |
| Charge market rate for all services to residents. | |

Table 3

Comments expressing disagreement with the proposed service charges

67. Figure 9 shows the themes of comments that expressed disagreement with the proposed service charges. The most frequently mentioned theme (by 47 respondents) was that tenants should not have to pay for what is a currently poor service. The second most referred to theme (by 26 respondents) was disagreement with specific charges mentioned within the proposal. The unique comments relating to this theme can be found in table 5. The third theme most often raised (by 20 respondents) was that the charges were unfair.

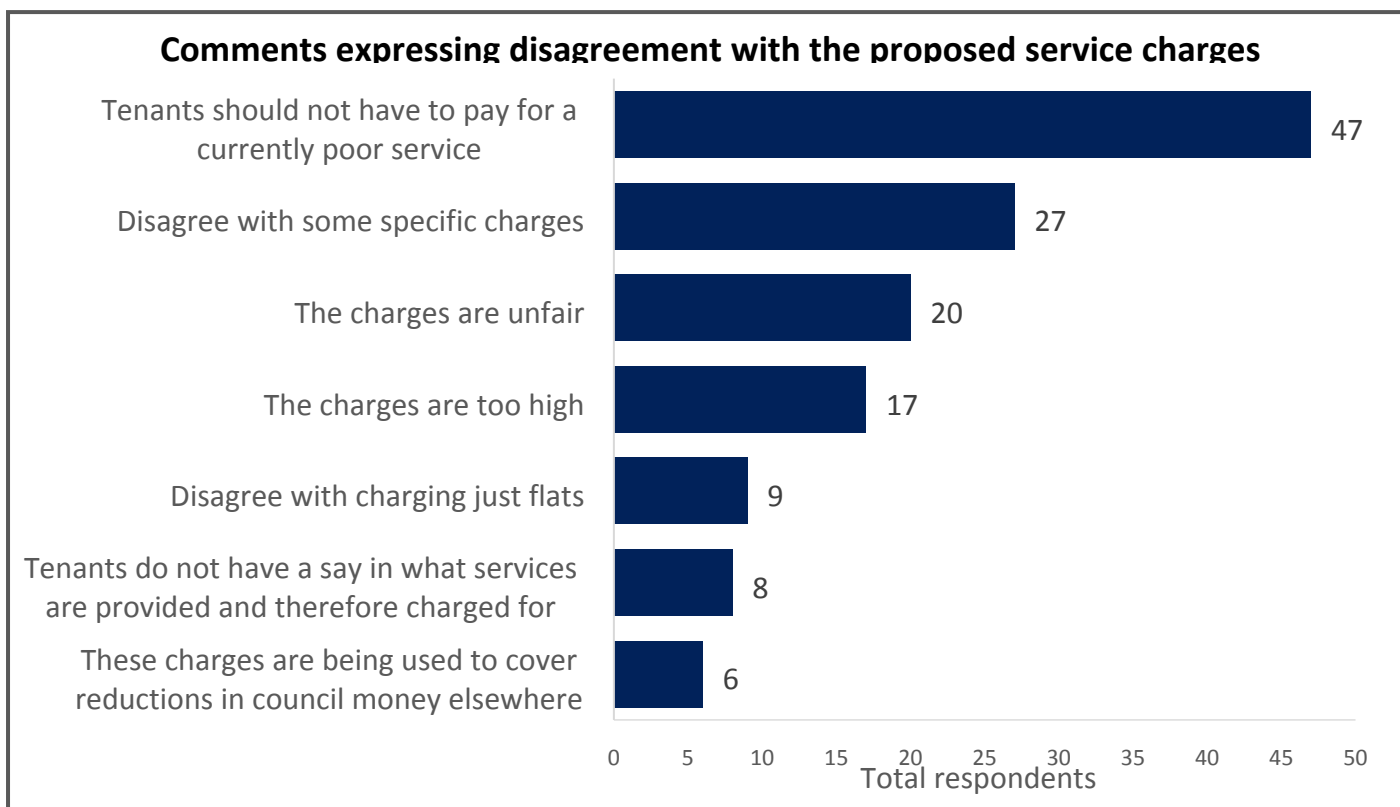


Figure 9

68. Overall, 47 respondents wrote about tenants not having to pay for a currently poor service. The unique comments and suggestions relating to this are presented in the table below.

| Tenants should not have to pay for a currently poor service |
|--|
| Services charges are an agreement to pay for the provision of a service. It is therefore unreasonable to keep increasing the amount paid when the service provided has reduced or no longer exists. |
| Disagree with increasing charges as the current service is not good value for money. |
| There are services are of poor quality or not done properly (e.g. neighbourhood wardens; concierge; cleaning; grass cutting; window cleaning; clearing or corridors; lights not cleaned; litter not cleared up; broken paving not fixed; broken doors not fixed; no fire alarm installed). |

Table 4

69. In total, 26 respondents disagreed with some specific charges. The unique comments and suggestions relating to this are summarised in the table below.

| Disagree with some specific charges |
|---|
| Disagree with ground floor tenants being charged for services they don't use or aren't provided. (e.g. the door entry system if they don't use it as they have their own front door; repairing communal lighting when their property does not connect to the communal areas; ground floor tenants often get overlooked for cleaning). |
| Disagree with charging for the TV aerial when it is the only option to get television provided. |
| Disagree with some charges that are one off payments that will pay itself off, the council are now just profiting from said charges (e.g. TV aerial, door entry system). |
| Disagree with some blocks being charged for garden/grounds maintenance that they don't need or receive. |

| |
|---|
| Disagree with the door entry system charges because many people leave the door propped open so it is pointless. |
| Disagree with some charges that should be covered by other budgets or funding (e.g. emergency lighting should be in the normal budget as part of health and safety requirements; the garden/grounds maintenance should be covered by the housing revenue account; neighbourhood warden wages should be covered by the housing revenue account). |
| Disagree with paying for services that are inefficient (e.g. paying for two cleaners to do a job that could be done by one). |
| Disagree that the leaseholder charges for a variety of jobs done always ends up costing the same £1600 a year. |

Table 5

70. There were 20 respondents who considered the proposed charges to be unfair. The unique comments and suggestions regarding this are given in the table below.

| The charges are unfair | |
|--|--|
| The charges are unfair because tenants are already paying for these services. | |
| It is unfair to have to pay for a service that I don't use (e.g. paying for the TV aerial). | |
| The charges are unfair because they are just a hidden rent increase, because the government capped rents. | |
| The charges are unfair because many flat block tenants receive some kind of benefits and therefore won't be affected by proposed increases, whilst any of those not receiving benefits will have to pay. | |
| It is unfair to charge particular flat blocks as opposed to charging every flat block. | |
| Some of these services are covered by other budgets so tenants should not have to pay twice (e.g. grounds maintenance is surely covered in the overall council budget). | |
| It is unfair to charge all flat tenants for issues caused by the anti-social behaviour of a few people. | |

Table 6

71. The charges being too high was mentioned by 17 respondents. The unique comments and suggestions on this theme are detailed in the table below.

| The charges are too high | |
|---|--|
| Especially for wardens. | |
| Previous increases in charges should have been enough. | |
| Not willing to pay extra charges caused by council admin fees and over inflated costs from contractors. | |
| These charges are disproportionate to people's earnings. | |

Table 7

72. There were 9 respondents who disagreed with the proposal to charge just flat blocks. The unique comments and suggestions relating to this are presented in the table below.

| Disagree with charging just flats | |
|---|--|
| Disagree with charging just flats, as opposed to all council tenants. | |
| Disagree with charging just council flat tenants, as opposed to all city residents. | |
| Disagree with charging just flats when houses used some of these services as well. (e.g. neighbourhood wardens and open spaces) | |

Table 8

73. In total, 8 respondents felt tenants do not have a say in what services are provided and charged for. The unique comments and suggestions relating to this are summarised in the table below.

| |
|--|
| Tenants do not have a say in what services are provided and therefore charged for |
|--|

| |
|--|
| Tenants have no say in any of the services provided. |
| Tenants should be consulted on services, including the cost to determine if that service is carried out. (E.g. consult on the need or desire for neighbourhood wardens, cleaning etc.) |
| Some tenants are happy without particular services and so do not want to pay for them. |
| Tenants used to do their own block cleaning. |

Table 9

74. Overall, 6 respondents think these proposed service charges are being used to cover reductions in council money elsewhere. The unique comments and suggestions on this theme are detailed in the table below.

| |
|--|
| Tenants do not have a say in what services are provided and therefore charged for |
|--|

| |
|---|
| This is being used to make up for lost income from reduction in central government funding for the council. |
| These increases are being used to make up for the loss in income due to the government rent cap. To avoid this problem, the council should have adjusted the 30 year plan and 6 year plan to fit the budget following the government rent cap. If this had been done the Housing Revenue Account could have covered these proposed costs. |
| There should be an emergency fund to cover this sort of thing? |

Table 10

Comments on the potential impacts of the proposed service charges

75. Figure 10 shows the themes of comments surrounding the potential impacts of the proposed service charges. There were 2 negative impacts mentioned by respondents: that some tenants may not be able to afford the proposed increase in service charges (15 respondents) and that the proposed service charges would impact the most disadvantaged (9 respondents). A number of respondents mentioned 2 positive impacts: that the proposed service charges would encourage responsibility and care in tenants for where they live (10 respondents) and the proposed services charges could potentially improve the neighbourhood (1 respondent).

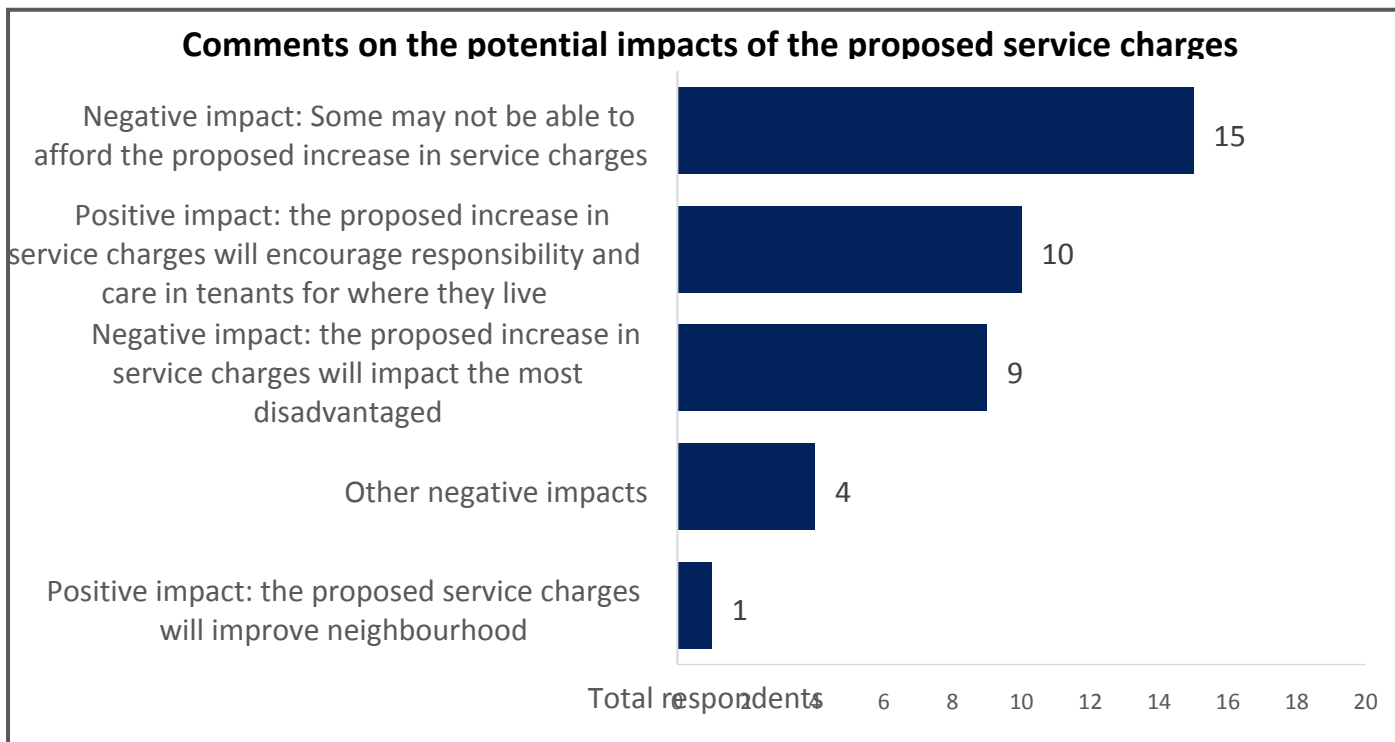


Figure 10

76. Overall, 15 respondents believe the proposed service charges may not be affordable to some tenants. The unique comments and suggestions relating to this are presented in the table below.

| Negative impact: some may not be able to afford the proposed increase in service charges | |
|---|--|
| I am concerned about tenants on low to medium incomes being able to afford these charges. | |
| £8 a week more, best part of £400 a year! What are tenants supposed to do? | |
| For some this will just end up being covered for by benefits. | |
| Concerned for those tenants on benefits that may not be able to afford this. | |

Table 11

77. A total of 10 respondents think the proposed service charge will encourage responsibility and care in tenants for where they live. The unique comments and suggestions relating to this are summarised in the table below.

| Positive impact: the proposed increase in service charges will encourage responsibility and care in tenants for where they live | |
|--|--|
| If tenants have to pay more for services provided, then they may begin to value the provision more. | |
| If everyone has to pay then maybe everyone would take more care of their surroundings. | |
| If people had to pay for damage then perhaps they would rethink treating the area poorly. | |

Make tenants responsible for litter.

Table 12

78. The proposed service charges impacting the most disadvantaged was mentioned by 9 people. The unique comments and suggestions regarding this are given in the table below.

Negative impact: the proposed increase in service charges will impact the most disadvantaged

These charges are taking money from those who can barely afford to survive.

The proposal is discriminating against the poorest and to mention a hardship fund is acknowledgement that the poorest will be hit.

Table 13

79. Other negative impacts were mentioned by 4 respondents. The unique comments and suggestions on this theme are detailed in the table below.

Other negative impacts

Charging for services (and repairs) will stop people reporting when things are not working and get others to fix it for cheaper and do a cowboy job.

The increase in charges will not help the tenants in anyway as it won't bring more wardens or more cleaners or better grass cutting, it will all go on just as before.

Table 14

80. One respondent said that the proposed service charges could potentially improve the neighbourhood. The unique comment for this theme is given below.

Positive impact: the proposed service charges will improve the neighbourhood

As long as the service being charged for is reliably delivered it should have a positive impact on the neighbourhood.

Table 15

Comments giving suggestions related to the proposed service charges

81. Figure 11 shows the themes of comments with suggestions related to the proposed service charges. The most frequently mentioned theme of comments was a suggestion to improve the current service provided (by 23 respondents). 12 respondents gave other suggestions of their own, more details of which can be found in table 18. Other suggestions mentioned by several respondents include: including some of the service charges within the rent (mentioned by 7 respondents); tenants becoming responsible for their flat blocks (mentioned by 6 respondents); and giving discounts or exemptions for those struggling financially (mentioned by 3 respondents).

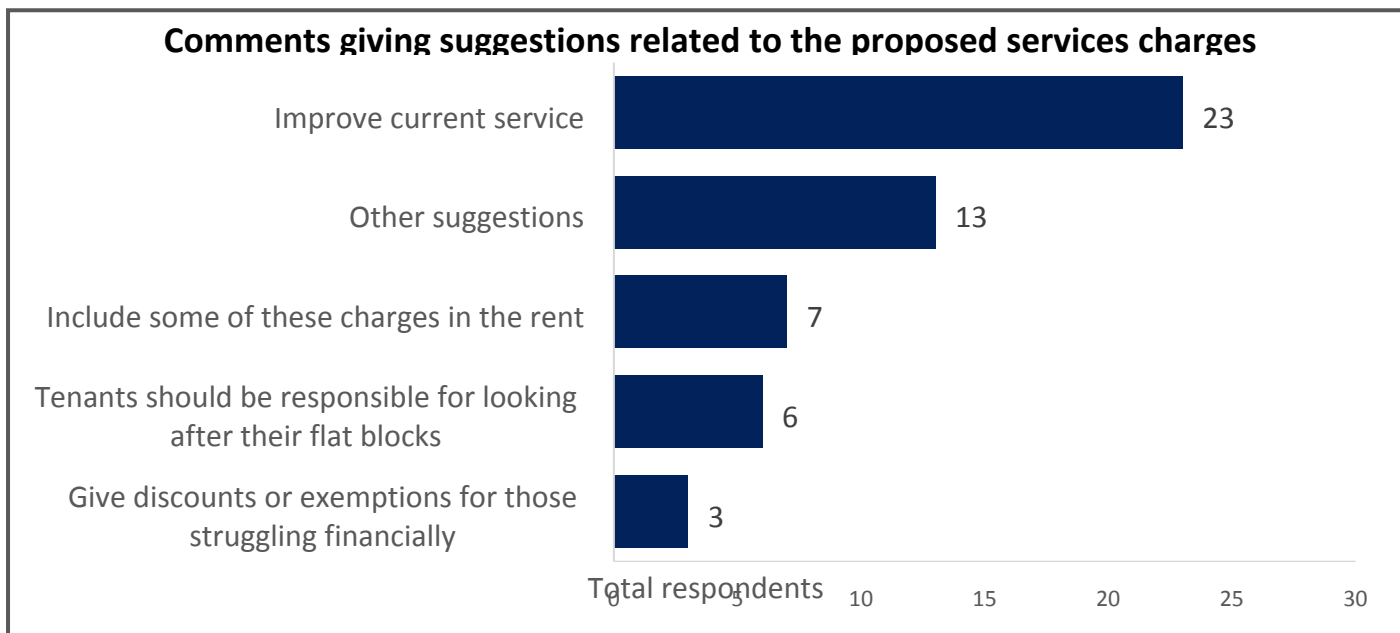


Figure 11

82. In total, 23 respondents suggested the current service should be improved. The unique comments and suggestions regarding this are given in the table below.

| Improve the current service |
|---|
| Improve current service before charging for it. |
| Happy to pay more if this means an improvement in the service (e.g. more frequent cleaning of tower blocks). |
| Services to improve: litter pick up; grass cutting; smell of cannabis in blocks; cleaning of block; more inspections, visits and responsibility taken by neighbourhood wardens; door access; TV aerials should be upgraded to allow SkyQ and aerial access to all bedrooms. |
| We would like to see more rigorous enforcement of the Service Level Agreements including financial penalties when services are not up to scratch. This will mean that tenants either get a saving, or will have less issues paying for the service. |

Table 17

83. Overall, 12 respondents gave other suggestions related to the proposed service charges. The unique comments and suggestions relating to this are presented in the table below.

| Other suggestions |
|---|
| Charge businesses more tax instead. |
| Have mobile cleaning teams with van and equipment to clean all estates. |
| Charge everyone for these costs via council tax. |
| Make flat areas including green spaces and bin stores more secure so only residents of blocks can access them. |
| Conduct an investigation and review of the current service - why is so much being spent on such a poor service? |
| Give a more comprehensive breakdown of service charges for leaseholders too. |
| Find cheaper processes and contractors. |
| Scrap cleaners - they don't do a good job and are not worth the cost. |
| Charges should reflect cost of service only. |
| Get rid of wardens and have more cleaners. The wardens don't do anything and are never seen. |
| Cut down on the amount of emergency lighting and make them LED to save energy. |

| |
|--|
| Charges should be higher (e.g. charge more for TV aerial). |
| Charge for non-residential parking instead. |
| Service charges should be limited to make them affordable. |

Table 18

84. The suggestion to include some of the proposed service charges in the rent was mentioned by 7 respondents. The unique comments and suggestions on this theme are detailed in the table below.

| |
|--|
| Include some of these charges in the rent |
| Emergency systems and lighting should be included in the rent. |
| Door entry systems should be included in the rent. |
| Some of these services are a landlord's responsibility so should be included in the rent. |
| These charges are part of the rent already so we should not be incurring extra charges. |
| All charges should come from rents (and this could then be spread across all council tenants). |

Table 19

85. A total of 6 respondents suggested that tenants should be responsible for looking after their flat blocks. The unique comments and suggestions relating to this are summarised in the table below.

| |
|--|
| Tenants should be responsible for looking after their flat blocks |
| There are some services which could be encouraged by making tenants more responsible for where they live. |
| It might be useful to provide incentives for residents to volunteer to help with gardening/grounds maintenance in exchange for a reduced maintenance charge. |
| Tenants should be free to pay for their own maintenance. |
| Hand out fines for tenants that fly tip. |

Table 20

86. The final suggestion given by 3 respondents was to give discounts or exemptions to the proposed service charges for those financially struggling. The unique comments and suggestions relating to this are presented in the table below.

| |
|---|
| Give discounts and exemptions for those struggling financially |
| Income based contribution to service charges. |
| Money off or no charge should be given to those in the most financial difficulty. |

Table 21

Other comments related the proposed service charges

87. A further 4 respondents made other comments related to the proposed service charges that did not necessarily fit into the other broad categories of themes. The unique comment for this theme is given below.

| |
|--|
| Other comments related the proposed service charges |
| The cleaners and neighbourhood wardens do a fantastic job and do the work that no other departments do. |
| What's the point of paying for these services to clear up and care for the area when tenants won't care for it themselves? |
| Charge a fair price for repairs and improvements to properties. |
| We pay more council tax for less services but it goes up each year! We have parking charges coming soon too. |

Table 22

Comments regarding the housing service in general

88. Comments about the overall housing service were made by 4 respondents. The unique comments for this are given below.

| Comments about the overall housing service |
|--|
| Housing service is poor in general. |
| The contractors used to fix things by the council are extortionate. |
| The repairs service is poor. |
| Though the proposed charges are not for this service I believe it is symptomatic of the overall service that is on offer to tenants. God forbid a tenant wanting to actually speak to a member of staff at any of the local housing offices. Shutters down, posters saying do not knock on this door as you will not be seen without an appointment. Long term sickness and the inability to recruit new neighbourhood wardens/housing officers adds a poor service. |

Table 23

Public engagements, meetings and verbal feedback

89. In total there were 4 separate public engagement events to support the consultation process. The details of the engagements are outlined below:

| Date | Location | Number of attendees |
|------------------|------------------------------------|---------------------|
| 20 November 2018 | Weston Court | 5 |
| 26 November 2018 | Golden Grove (James Street Church) | 3 |
| 30 November 2018 | Thornhill Library | 6 |
| 6 December 2018 | Millbrook (Holy Family Church) | 7 |

Table 24

90. In total 21 people engaged with this programme of events, made up of council tenants and leaseholders. The main purpose of these events was to explain the proposals, answer questions and signpost people towards the questionnaire as the main route for consultation feedback.

91. During the course of these events some feedback was gathered and the main themes were:

Disagreement with proposed service charges:

- There were concerns from some tenants that the Concierge and Neighbourhood Warden services were currently poor, and were concerned about paying more for a poor service.
- Some of the concerns raised about the concierge system were that they were not stopping non-tenants entering the building, particularly rough sleepers. And that they were very poor at following up any issues raised.
- The issues about Neighbourhood Wardens were that they were rarely seen.
- One person was unhappy about paying for safety checks for emergency lighting and felt this should be covered by all tenants in the city.
- Another tenant felt they should not have to pay for a communal door entry system, when they lived in a ground floor flat and did not use, or benefit from it.
- There were concerns from residents living in high rise flats in Thornhill about having to pay for maintenance of green spaces when their buildings curtilage didn't contained any green space.
- Some tenants questioning why we were now separating service charges from rent.

Suggestions related to the proposed service charges:

- There was an expectation from tenants that the introduction and increase of service charges should result in an improved service.

Feedback about the consultation process:

- Some tenants were seeking clarity on what service charges were.
- Supported Housing Tenants who already pay service charges were unclear about what services they were paying for and what the “management” cost included.

92. Many of these topics will have also been raised through other channels as a part of the consultation but in the interest of transparency they have also been summarised here.

Feedback on the consultation process

93. Southampton City Council are committed to make the whole consultation process as transparent and fair as possible. As a part of this commitment, any feedback on the consultation process itself received during the course of the consultation is gathered together here.

94. Overall, out of the 200 people or organisations who took part in the consultation, 7 commented on the consultation process itself.

95. The table below summarises the unique comments and suggestions given about the consultation process.

| Comments on the consultation process | |
|--|--|
| Please clarify proposed service charges prices in pence in the table: per day, per week or other. | |
| Dates for when the results will be published should be given. | |
| Consultation does not clearly say which of the proposed services charges will be eligible for benefit support. | |
| This consultation is a tick-box exercise, the council will not listen. | |
| More should be done to promote this consultation (e.g. information on notice boards in walk up blocks). | |
| Provide more information about the proposed service charges and what they will include. (E.g. what will be included in the cleaning service; what will wardens be responsible for as this is biggest increase in cost; what will the garden/grounds maintenance service provide?). | |

Table 25

Conclusion

96. Southampton City Council sought views on proposals for increasing service charges for tenants. The consultation ran for 12 weeks from 17 October 2018 to 16 January 2019.

97. As this report has demonstrated the consultation was extensively promoted throughout the period leading to good levels of engagement.

98. In total, there were 200 responses to this consultation. Of this, 182 responded to the consultation questionnaire and all other submissions were made via emails, letters or in a public meeting. This consultation ran parallel with the overall budget consultation and two other consultations on specific proposals.

99. All questionnaire results have been analysed and presented in graphs within the report. In addition all written responses to the consultation were read and comments assigned to a category based upon similar sentiment or theme and descriptions have been provided of each category within the report.

100. In conclusion, this consultation allows Cabinet to understand the views of residents and stakeholders on the proposals that have been consulted on. It represents the best possible summary and categorisation of all the feedback received through the consultation period. Therefore it provides a sound base alongside the other information to inform a final decision.

Part 2 – Consideration of the Consultation Feedback

Background

101. This proposal will increase the costs to tenants living in the council’s walk-up blocks and tower blocks across the city. Southampton City Council is a major landlord with around 18,000 council properties of these properties, over 16,000 are rented by tenants.

102. As a landlord, the council provides a range of services to tenants and leaseholders. These include block cleaning, concierge, heating, grounds and garden maintenance and other services. The council has legal powers to charge for these additional services so long as the charges are clear and transparent and represent the actual cost of the service.

103. The council needs to have a viable and sustainable Housing Revenue Account (HRA) that enables the council to deliver effective services, invest in its properties to ensure homes are of a modern standard, and to provide new social housing to rent. The council’s current service charges are lower than the actual costs and in some cases the council has not previously charged for services, but has been providing a service to tenants.

104. In addition, HRA has been impacted by the Government requirement introduce a reduction in rent of 1% in the 2019/2020 year (this is the last of a four year rent reduction of 1% each year).

105. As part of the consideration as to how that money could be found, service charges paid by tenants and leaseholders were considered and the decision made to consult on increasing current service charges, and introducing some new service charges. These amounts are not full cost recovery of that service but are a contribution towards the provision of that service.

Consultation considerations

106. A total of 62% of respondents expressed overall agreement with the principle of the council seeking to recover some of the cost of providing services.
107. In the consultation, respondents were asked what the impact of the proposed charges would have on them, their family or community if they were to be implemented. Nearly half (49%) of respondents felt the impact of these proposed charges would be negative.
108. Southampton City Council recognises that for some people, an increase in service charge will have a negative financial impact, which in turn could affect their health and wellbeing.
109. Approximately 10,000 tenants (out of a total of approximately 16,000 total) are currently in receipt of Housing Benefit or Universal Credit, and therefore all or some of their rent and services charges are met by benefit payments. Tenants will be given information as to how to gain advice from local agencies such as the council's Homeless Prevention Team, Citizen Advice, Money Advice Service, StepChange, Money Matters, Age UK, and local relevant charitable/voluntary sector organisations.
110. The council intends to set up a discretionary relief fund if these proposals are approved to help those in most need to pay for all or part of the additional charges. This fund will assist the people and families in most need, and will enable them to transition to being able to pay for the additional charges, if the charges are not covered by Housing Benefit/Universal Credit or they are not entitled to these benefits.
111. Following consideration of the representations made in the consultation, the proposal is to increase service charges for tenants as proposed in the consultation and set out in the table below:

| Service (all charges are weekly) | Walk-up block | | | Tower block | | |
|---|----------------|-------------------------|-------------------------|----------------|-------------------------|-------------------------|
| | Current Charge | Proposed Charge 2019/20 | Proposed Charge 2020/21 | Current Charge | Proposed Charge 2019/20 | Proposed Charge 2020/21 |
| Existing Charge | | | | | | |
| Cleaning | 65p | 72p | 72p | - | - | - |
| Concierge | - | - | - | £1.24 | £2.18 | £2.73 |
| Neighbour-hood Wardens | | | | £5.12 | £5.12 | £5.12 |
| TV Aerial (communal) | 43p | 43p | 43p | 43p | 43p | 43p |

| <i>New Service Charge</i> | | | | | | |
|----------------------------------|--------------|--------------|--------------|--------------|--------------|--------------|
| Neighbour-hood Wardens | - | 54p | £1.45 | | | |
| Test/Repair Emergency Lighting | - | 27p | 27p | - | 27p | 27p |
| Garden/ Grounds Maintenance | - | 22p | 22p | - | 22p | 22p |
| Door Entry | - | 22p | 22p | - | - | - |
| TOTAL | £1.08 | £2.40 | £3.31 | £6.79 | £8.22 | £8.77 |

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Southampton City Council Adult Social Care Charging Policy



Southampton City Council Adult Social Care Charging Policy



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Purpose

1. The Southampton City Council Adult Social Care Charging Policy sets out how the council meets its legal requirements in relation to the determination and calculation of charges for Adult Social Care.
2. This policy should be read in conjunction with the council's Adult Social Care and Support Planning Policy, which sets out its approach to assessing and meeting unmet, eligible social care needs, by drawing wherever possible on an individual's and communities' strengths and assets to support people to meet their goals and desired outcomes.

Legal context

3. This policy is based on appropriate legislation and Government guidance, including:
 - The Care Act 2014, associated regulations and statutory guidance
 - The Mental Capacity Act 2005
 - Mental Health Act 1983, section 117 – the duty on health and social care services to provide free aftercare to patients previously detained under certain sections of the Act
 - Equality Act 2010
 - Human Rights Act 1998

Scope

4. This policy applies to packages of care and support funded wholly or partly by Southampton City Council, and charges in relation to making arrangements for self-funders. This policy does not apply to individuals for whom the following applies, who are exempted from charges under the Care Act Statutory Guidance 2014:
 - Intermediate care, including reablement, which must be provided free of charge for up to 6 weeks. However, local authorities must have regard to the guidance on preventative support set out in Chapter 2 of the guidance. This sets out that neither should have a strict time limit but should reflect the needs of the person. Local authorities therefore may wish to apply their discretion to offer this free of charge for longer than 6 weeks where there are clear preventative benefits, such as when a person has recently become visually impaired
 - Community equipment (aids and minor adaptations). Aids must be provided free of charge whether provided to meet or prevent/delay needs. A minor adaptation is one costing £1,000 or less
 - Care and support provided to people with Creutzfeldt-Jacob Disease
 - After-care services/support provided under section 117 of the Mental Health Act 1983, unless the needs do not arise from, or are not related to, their mental disorder then those needs fall outside the scope of S117 and can be charged for.
 - Any service or part of service which the NHS is under a duty to provide. This includes Continuing Healthcare and the NHS contribution to Registered Nursing Care
 - More broadly, any services which a local authority is under a duty to provide through other legislation may not be charged for under the Care Act 2014

- Assessment of needs and care planning may also not be charged for, since these processes do not constitute 'meeting needs'.

Principles

5. In line with the Care Act Statutory Guidance, the overarching principle of this policy is that people should only be required to pay what they can afford. People will be entitled to financial support based on a means-test and some will be entitled to free care. The key principles that this policy supports are:
 - ensure that people are not charged more than it is reasonably practicable for them to pay
 - be comprehensive, to reduce variation in the way people are assessed and charged
 - be clear and transparent, so people know what they will be charged
 - promote wellbeing, social inclusion, and support the vision of personalisation, independence, choice and control
 - support carers to look after their own health and wellbeing and to care effectively and safely
 - be person-focused, reflecting the variety of care and caring journeys and the variety of options available to meet their needs
 - apply the charging rules equally so those with similar needs or services are treated the same and minimise anomalies between different care settings
 - encourage and enable those who wish to stay in or take up employment, education or training or plan for the future costs of meeting their needs to do so
 - be sustainable for local authorities in the long-term
6. In line with the Care Act 2014, and the principles set out in the Mental Capacity Act 2005, the council will assume that people have mental capacity and can make decisions for themselves unless it is established otherwise. If established otherwise, appropriate support will be identified.

Eligibility and Arrangement Charges

Non-Residential Care

7. Southampton City Council has a duty to meet the eligible, un-met care and support needs of people who require non-residential care and request the assistance of the council. The council will meet un-met needs where the client is ordinarily resident in Southampton or is present in its area but of no settled residence, and one of the following applies:
 - Following a financial assessment the person has less than £23,250 in savings and assets; or
 - Where the client has over £23,250 but the client asks the local authority to meet their needs; or
 - Where a client has over £23,250 and they lack mental capacity to make arrangements for their own care and there is no person authorised to do so under the Mental Capacity Act 2005 or otherwise (an attorney or deputy).
8. When a client has more than £23,250 in savings and assets and requests the council to assist in arranging care at home, the council may charge the client an arrangement fee of **£250** to meet the administration costs of the service.

9. A further charge will be levied on each occasion the customer asks the council to arrange a new or significantly changed provision of services. Minor changes to existing arrangements will not be subject to a charge.

Residential Care

10. Southampton City Council has a duty to meet the eligible care and support needs of people who require residential care/ nursing care and who have less than £23,250 in savings and assets.
11. In relation to residential care, where the financial assessment identifies that the person's resources exceed savings and assets limit of £23,250, the council will not pay towards the costs of care as the council is precluded from doing so under the Care Act 2014.
12. If the person lacks the mental capacity to take part in the assessment and there is no one else who is legally able to do so, such as a deputy or attorney, the council has the discretion to pay in the interim for the costs of care pending the court of protection appointing a suitable deputy. Once a deputy has been appointed a full financial assessment will be carried out and if the person has over the savings and assets limit of £23,250 the council will seek re-imburement of the charges from the person's assets via the deputy.

Financial Assessment

13. Eligible individuals will be assessed on their own finances to calculate their assessed contribution towards the cost of the care they receive, in line with relevant guidance and regulations.
14. Eligible individuals or their representatives will be required to provide all of the information required to complete the financial assessment, and to inform the council of any changes in their financial circumstances. If a person refuses to disclose their financial details they may be required to pay the full cost of the service.
15. The council has no power under the Care Act 2014 to assess couples or civil partners according to their joint resources. Each person will therefore be treated individually in line with legislation and statutory guidance.
16. If someone has deprived themselves of assets in order to reduce their contribution, this may be treated as deprivation of funds to pay for care and the contribution will be calculated as if the individual still owned the asset.
17. At the time of the assessment of care and support needs, the council must establish whether the individual has the capacity to take part in the assessment. If after a mental capacity assessment has been carried out and it is determined that the individual lacks capacity to make the relevant decisions, the council must find out if the person has any of the following an appropriate person will need to be involved:
 - Enduring power of attorney (EPA).
 - Lasting power of attorney (LPA) for property and affairs.
 - Lasting power of attorney (LPA) for health and welfare.
 - Deputyship under the Court of Protection.
 - Any other person legally dealing with that person's affairs (for example, someone who has been given appointeeship by the Department for Work and Pensions (DWP) for the purpose of benefits payments).

18. Individuals who lack mental capacity to give consent and take part in a financial assessment and who do not have any of the above people with authority to be involved in their affairs, may require the appointment of a property and affairs Deputy. Family members can apply for this to the Court of Protection or the council can apply if there is no suitable person who is willing to apply. Once the court appoints Deputy that person will be able to make decisions authorised by the court e.g. providing the council with financial information so that a full financial assessment can be undertaken.

Financial Assessments

19. Individuals will be assessed on their own finances to calculate their assessed contribution towards the cost of the care they receive. It is the individual's responsibility or their legally appointed representative to provide all of the information required to complete the financial assessment.
20. A full financial assessment involves the assessor gathering comprehensive information about every element of assets and income of the client before making a determination about the level of financial support they may be entitled to from the council.
21. In some circumstances, the council can do a shorter financial assessment, this is called a 'light touch assessment', if the person agrees to this. The person is allowed to give the council much less financial information and it can be mean an easier and quicker assessment. However, the council must be satisfied that the person can afford the assessed contribution and will continue to be able to afford this.
22. If a 'light touch' approach is taken, the council will make sure that the client is willing to pay the charges and will continue to do so. If the client does not agree with the assessed charges assessed under this route, then a full financial assessment may be needed.
23. The main circumstances where a light-touch assessment will be considered are:
- Where a person has significant financial resources and does not want to have a financial assessment.
 - Where the council is satisfied that the person can afford the charges due because their savings are clearly above the upper limit, any property taken into account is above the savings or assets limit of £23,250, or they would have sufficient income to pay the full cost.
 - Where there is a small or nominal charge for a service which the person can clearly meet.
 - When an individual is in receipt of benefits which demonstrate that they would not be able to contribute towards their care and support costs. This might include income from Jobseeker's Allowance.
 - Where a person requests a direct payment and consents to a light-touch assessment.
24. If a light-touch assessment is carried out for the purposes of an application for a direct payment, a full financial assessment may be carried out at a later date.
25. In order for the light-touch assessment to be carried out the person must consent to the assessment, if they refuse, a full financial assessment may be required. The person has a right to request a full assessment at any time even if they have had a light-touch assessment.
26. The council will calculate the person's contribution to the cost of care and support based on the light-touch assessment. If a full assessment is carried out at a later stage and the contributions vary the person will need to pay the amended amount after them being notified of the outcome of the full assessment.

27. If an individual disagrees with their financial assessment they can request a reassessment of their finances.

Calculating the contribution

28. The financial assessment process gathers information about income first. This includes most types of benefits as well as savings, shares, bonds, premium bonds and other assets.
29. In line with the Care Act 2014, savings and assets are taken into account to calculate the charges or contributions that will be applied in relation to an eligible individual's care. The council will take into account all relevant income, savings or assets including benefits (unless required to be disregarded). The mobility element of disability related benefits (including Disability Living Allowance, Personal Independence Payments, Attendance Allowance and Constant Attendance Allowance) will not be taken into account in line with legislation and guidance.
30. In cases where an individual is terminally ill and has been issued with a DS 1500 form by a medical practitioner, disability related benefits (including Disability Living Allowance, Personal Independence Payments, Attendance Allowance and Constant Attendance Allowance) will be disregarded for the purpose of financial assessment.
31. At current levels, savings up to £14,250 will not be taken into account, but for any savings between £14,250 and £23,250 an amount of £1 for every £250 (called the tariff income) will be added to the client's weekly income within the financial assessment.
32. Some types of personal injury claims or compensation awards may be taken into account in the financial assessment. This will be dependent on the nature of the award.
33. The council will consider whether to recover the cost of care from a trust fund, where reasonable to do so, having regard for the terms of the trust.

Disability Related Expenses

34. Disability Related Expenses relate to the reasonable additional costs that an individual receiving non-residential care may incur due to their age or disability, in order to live independently. The costs may vary from individual to individual.
35. Allowance will be made for disability related expenditure (DRE) for care and support at home, and the equivalent amount of these costs will be disregarded when calculating an individual's income.
36. The aim is to allow for reasonable expenditure needed for independent living by the person. The council will not include items that could be considered as normal living costs, which are covered by the allowance made in the Minimum Income Guarantee (MIG).
37. The council will take all reasonable DRE into account that has been incurred to meet the individual's needs for care and support. An illustration of the types of DRE is set out in Appendix 1, but this is not meant to be an exhaustive list. DRE will be assessed on a case by case basis.

Living Expenses

38. Southampton City Council will ensure that individuals receiving non-residential care services retain Minimum Income Guarantee amount.

39. In addition to the Minimum Income Guarantee further allowance may be made for other expenses for individuals receiving non-residential care services such as:
- Rent not covered by Housing Benefit or Universal Credit (including rent payable for 'under occupancy').
 - Council Tax not covered by Council Tax Reduction.
 - Mortgage repayments.
 - Some service charges (other than service charges which are ineligible under Schedule 1 to the Housing Benefit Regulations 2006).
40. Where an individual is cared for within a residential care setting, and charges are applicable, the council will ensure the individual retains the Personal Expenses Allowance, in order to meet personal costs not covered by the care home. In certain circumstances the council may consider increasing the Personal Expenses Allowance to cover other exceptional living costs as set out in the Care Act 2014.

Treatment of Property

41. For non-residential adult social care financial assessments, the value of a property owned and occupied by the client as their main residence will not be taken into account in assessing contributions but the value of any other properties, land or assets owned in this country or abroad will be included.
42. For long term residential care financial assessments, the value of a property owned and occupied by the client may be taken into account in the financial assessment. The home will not be taken into account if one of the following people also lives in the home, and will continue to live there after you have moved into a care home:
- a husband, wife or civil partner;
 - a close relative over the age of 60;
 - a dependent child;
 - a relative who is disabled or incapacitated.
43. For long term residential care financial assessments, if a property which is owned and occupied by the client is taken into account, the council will ignore its value for the first 12 weeks starting from the date when the person enters permanent residential care. This is referred to as a 12 week property disregard. The aim of this period is to give the client time to decide what to do with their former home. During this period the client will be expected to contribute towards their care from their income and other assets.
44. The disregard will end if the property is sold within 12-weeks and the resulting funds will be included in the person's assessment.
45. The council may use its discretion in appropriate cases to disregard the value of a person's property from the financial assessment, if a qualifying third-party lives there. For example, this may be where it is the sole residence of someone who has given up their own home to care for the resident, or someone who is an elderly companion of the resident (particularly if they have given up their own home).

Payment of contributions

46. Southampton City Council will begin charging the assessed contribution from the first day that chargeable services are provided.

47. The council will undertake financial assessments as swiftly as possible, and relevant individuals are expected to cooperate in the financial assessment in line with Care Act Regulations. In cases of lengthy financial assessments, charges will not apply to a period any longer than 8 weeks prior to the notification date of the completed financial assessment.
48. In cases where an individual is admitted to hospital or for any other reason is not making full use of their care provision for a short period of time, but their care arrangement remains in place, they will need to continue paying the contribution charge. This is because the care package needs to be kept in place, to ensure that it is still available when the individual is released from hospital. Therefore, during this period, there is still a cost of keeping the service in place, even though it is not being used for that period of time. This will be subject to regular review, and charges will cease if the hospital stay becomes more permanent and the care arrangement ceases.
49. In some cases when services are temporarily cancelled or missed, the level of contribution for that period may be adjusted. This may include but is not limited to the following examples:
- A contribution will not be payable for care that is cancelled for a period of more than 7 days.
 - If care is cancelled by the individual receiving a service for periods of up to and including 7 days, the usual contribution will still be payable.
 - A contribution will not be payable where the care provider cancels the care or a carer fails to attend, as long as the council is informed about this by the service user or their representative.
50. The council will not charge for services provided directly to carers to support them. All forms of respite or replacement care that involve personal care to the client will be treated as services for the client rather than for the carer. This means that respite that includes the provision of personal care will be seen as part of the client's personal budget and will therefore be subject to financial assessment and charging.

Changes in an individual's financial circumstances

51. Individuals are responsible for notifying the council of any changes to their personal and financial circumstances as these can affect their financial assessment. A change in a contribution may be triggered either by a range of factors, including (but not limited to) changes to:
- The type or level of service.
 - The accommodation of the eligible individual.
 - The financial circumstances of the individual (income or savings/assets).
 - Membership of the household.
52. Changes to contributions may be backdated to the actual date of any change.
53. The council will usually review an individual's financial situation annually but reserves the right to carry out a financial review at any time, for example in the event of the Department of Works and Pensions making a policy change or regulation changes. These may include annual increases to standard benefit payments such as the State Retirement Pension, occupational or other private pensions (except fixed rate annuities) or service cost increases. This may require individuals to provide new or additional information and evidence where necessary. Where individuals fail to provide information following written requests, contributions may be recalculated, which may result in the client paying the full cost of their care and support package.

Personal Budgets

54. Everyone whose needs are met by the council, whether those needs are eligible or if the council has chosen to meet other needs, will receive a Personal Budget. A Personal Budget is the amount of money allocated to an individual to provide the support they require, based on an assessment of needs. For more information about Personal Budgets, please see the Southampton City Council Adult Social Care and Support Planning Policy.
55. An individual will make a single contribution towards the cost of their care based on an assessment of their financial circumstances. They will then pay whichever is the lesser amount of either the full cost of the care they require to meet their needs, or their maximum assessed contribution. If the assessed contribution is less than the full cost of the care they require to meet their needs, the council will fund the difference. Individuals may choose to purchase additional care at their own expense.

'Top up' payments and purchasing additional services

56. If a person chooses to receive care that is more expensive than the council has assessed they require to meet their eligible needs, a third party and, in very limited circumstances, the individual (see 57 below) can 'top-up' the costs to purchase the care of their choice. The amount of the 'top up' is the difference between the actual costs of the preferred home and the amount that the council have set in the persons Personal Budget or Mental Health After Care Limit.

Example:

The council assesses that the cost for meeting a client's eligible needs at is £80 per week.

The client chooses a home care provider which costs £100 per week. This is £20 amount more than the council has assessed as the cost of the client's needs.

So, a top-up payment of £20 per week may need to be paid if the client chooses to use the more expensive provider.

57. If a person is receiving funding from the council and they are in a care home they cannot 'top-up' their own care funding unless they have a 12-week property disregard or receive funding via Section 117 of the Mental Health Act 1983. They would instead require top-up from a third party, e.g. family or charity.
58. The council will at all times ensure that Personal Budgets are sufficient to meet the person's eligible care needs. Any 'top ups' will be the individual's choice, and can only be made once they are aware of their right to have all their eligible care needs met without the requirement for a 'top up'.
59. The person paying the 'top up' will be expected to sign an agreement, which sets out the conditions of making a 'top up'.
60. In the event the 'top up' ceases, the council is under no obligation to increase its contribution to cover the difference in cost. This may result, for example, in the person having to move to other accommodation and being given a number of alternative options to choose from, unless, after an assessment of need, it is shown that their assessed eligible needs can only be met in the current accommodation.

Deferred Payments

61. Deferred payment agreements are designed to prevent people from being forced to sell their home in their lifetime to meet the cost of their care. This can help people who have been assessed to pay for the cost of their care home fees, but cannot afford to pay the full contribution immediately because their funds are tied up in their home.
62. The Deferred Payment Scheme is designed to help "defer" or delay paying the costs of care and support until a later date. Typically, this means that a land registry charge is attached to their property and the council will recover the cost of care after the property is sold or from the person's estate. The Deferred Payment Scheme is considered by the council to be a potential lower cost alternative to other lending options.

Loan eligibility

63. Southampton City Council will offer a deferred payment, in line with the Care Act 2014, where the person;
- Is ordinarily resident in Southampton, or present in the area but has no settled resident or ordinary resident elsewhere but the council has determined that they will or would meet the person's needs.
 - Has been assessed as having eligible unmet needs for care and support and those needs are to be met in a care home placement.
 - Has savings or assets excluding the value of their main or only home, of less than or equal to £23,250.
 - Own or has part legal ownership of a property (which is not benefitting from a property disregard).
 - Has mental capacity to agree to a deferred payment agreement or has a legally appointed agent willing to agree to this.
64. The property against which the loan is to be secured must be registered with the Land Registry. If the property is not, you must arrange for it to be registered at your own expense.
65. There should be no other beneficial or legal interests on the property e.g. mortgages, equity release schemes, or secured legal charges.
66. Individuals can only defer the cost of care up to a maximum equivalent of 70% of the equity in their property. The council will undertake annual reviews of any loan arrangements to ensure that this limit is not reached. The council will refuse to defer care costs beyond this limit, although administration and interest can continue to be deferred. In such cases, the council will signpost individuals to financial and welfare advice.
67. The council has discretion to approve a Deferred Payment Agreement in other circumstances even if the above criteria have not been met, for example, by considering alternative security to the property. Any additional costs that may be incurred by the council as a result of investigating or agreeing to alternative security, including any legal or valuation costs must be met by the person and cannot be added to the deferred debt.
68. Whilst in the agreement the eligible individual will also need to:
- Have a responsible person willing and able to ensure that necessary maintenance is carried out on the property to retain its value. The client or their representatives will be liable for such expenses.

- Insure the property (at the expense of the client or their representative), and supply the council with a copy of the certificate. Please note that the policy must show that the property is insured as unoccupied if there is no one living in it.
 - Pay any administrative charges relating to the Deferred Payment Loan in a timely and regular manner. If charges are not paid the council reserves the right to add this debt to the loan amount.
 - Pay the assessed financial contribution to the care provision in a timely and regular manner. If financial contributions are not paid the council reserves the right to add this debt to the loan amount.
69. The council will provide relevant information and advice to applicants prior to them entering into any Deferred Payment Agreement. This will include:
- Setting out clearly all the fees and charges that will be made during the lifetime of the agreement.
 - Offer and facilitate access to appropriate independent financial advice.
70. The council will not offer a deferred payment where any one of the following apply:
- If the council cannot secure a first charge on the person's property and no other adequate security can be provided.
 - If the person is seeking a top-up for a more expensive placement than the council would usually fund and the amount of the top-up does not seem sustainable for the duration of the placement.
 - Where the person does not agree to the terms and conditions of the agreement.
 - In the case of jointly-owned property, if all owners or those people with a beneficial interest in the property refuse to consent to a legal charge against the property.

Charges for Deferred Payments

71. Southampton City Council will make an administration charge for the initial set-up and arrangement of the Deferred Payment Agreement and interest on the amount of the loan.
72. The administrative charge is set at £730, and covers the council's costs to set up and administer the Deferred Payment Agreement. This charge can be paid upfront or be included in the deferred loan where funds are unavailable to pay the charge upfront.
73. The charges reflect the actual administration costs of the scheme, as included at appendix 2.
74. The council will charge interest on the deferred amount for the whole period that the agreement is in place. The interest will form part of the total overall amount owed to the council.
75. The council charges interest at the maximum government approved standard interest rate as set out in the Care Act 2014. The rate of interest is updated twice yearly in Government Office of Budgetary Responsibility reports. Updated rates will be applied to the debt from the following 1 January and 1 July as appropriate. The rate of interest may therefore change between starting discussions with the council and the time when the agreement is signed, and the applicant will be notified of the rate at the start of the loan and at any point at which it changes.
76. The council will calculate the interest on the deferred amount including any administration charges that the applicant has asked to be deferred; the interest will be compounded on a daily basis.

77. The Deferred Payment Agreement can be terminated at any time, when the full amount is due is repaid to the council or where there is a breach of the Agreement. The council can also in some circumstances refuse to defer or loan any more charges for a person who has an active agreement for example where the person total assets fall below the level of the means test or where the person no longer has need for care in a care home. This will be decided on a case by case basis.

Debt Recovery

78. Where an individual fails to make payment of invoices for care services provided by the council, action may be taken in accordance with the council's policy. This may result in legal action being taken and extra cost to the individual.

79. Non-payment of a deferred charge, or otherwise not following the terms of a deferred payment agreement, may result in debt recovery processes being instigated.

Waivers

80. In exceptional circumstances, the council will consider options to defer, suspend or remove charges for the provision of care.

81. Waivers will only be considered in exceptional circumstances, for example when incurring the full assessed contribution would cause exceptional financial hardship or place the individual at risk or the council assess that the charges are not affordable for that person. This will be determined on a case by case basis.

82. Waivers will be considered and approved by the relevant delegated senior officer in the council. All waivers will be documented and reviewed at an agreed frequency.

Appeals and Complaints

83. Clients/ client representatives with legal power can appeal the outcome of their financial assessment for non-residential or residential care via the appeals process. The outcome of a financial assessment can be and is not limited to: treatment of a property; treatment of deprivation; how allowances and income have been taken into account; start and end dates of financial assessments; disability related expenses.

84. Complaints about the conduct of officers and concerns that the policy has not been properly enforced should be made via the council's corporate complaints procedure.

Governance

85. This policy will be reviewed annually or when there is any significant change in legislation or other circumstances that affect its effectiveness and validity. Charges may be reviewed and amended in line with inflation or changes in actual cost under appropriate delegated powers.

86. In line with the council's [Scheme of Delegation](#), authority has been delegated to the relevant Service Director to review the format and content of this policy and to make textual, formatting, administrative or minor changes to ensure that it is fit for purpose.

87. In line with the council's [Scheme of Delegation](#), authority has been delegated to the relevant Service Director to determine which 'one off' services should be included within the policy as chargeable and the determination of the scale of fees and charges to be applied to the services.

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Appendix 1: Examples of Disability Related Expenditure

This list is neither exclusive nor exhaustive. This list has been compiled to taking into account the disability related expenditure items set out in Annex C of the Care Act 2014 statutory guidance.

The level of cost will be determined on a case by case basis, into account an individual's particular circumstances. Evidence of necessity for the expenditure may be required from an expert or medical practitioner and actual costs may be requested and required as part of the assessment or review process. The council will have regard to guidance issued by the National Association of Financial Assessment Officers (NAFAO) in determining reasonable eligible disability related expenditure.

Disability-related expenditure

- Community alarm system.
- Privately arranged care services that meet an assessed need but are not provided by the Local Authority.
- Private domestic care (day and/or night).
- Additional laundry costs and replacement bedding costs (wear and tear) and specialist laundry products.
- Additional costs of specialist dietary needs.
- Incontinence products may be considered if there is an assessed need and use is above free NHS provision.
- Specialist clothing or footwear - where this needs to be specially made or additional wear and tear which is caused by disability.
- Household items e.g. because of excessive wear & tear
- Heating or metered water costs that exceed average levels for the area and housing type.
- Basic garden maintenance.
- Purchase, maintenance, and repair of disability-related equipment e.g. wheelchair, Powered bed, Turning bed, Powered reclining chair, stairlift, hoist recent expenditure may be considered if the product is for an assessed need and it is not available free e.g. from either the Local Authority, NHS, etc.
- Chiropody costs may be considered if you are unable to access NHS free service
- Transport costs if there is an assessed need but service is not provided by the Local Authority or NHS and the costs are in excess of the mobility component of DLA or PIP.
- Personal assistance costs
- IT equipment and maintenance costs e.g. internet access for blind and partially sighted people
- Any other relevant disability related costs on a case by case basis necessitated by illness or disability.

Appendix 2: Deferred Payments administration costs*

*Costs as calculated by Southampton City Council reflecting the actual administrative costs of the Deferred Payment Scheme as at September 2018.

| First year charges | Cost (£) |
|---|------------------|
| <i>Averaged costs of printing, postage, copying, staff time and overhead apportionment:</i> | |
| List of charges linked to legal elements of set up | 160 |
| Processing administration | 186 |
| Financial elements of set up | 75 |
| Adult services elements of set up | 66 |
| Property valuation fee | 200 ¹ |
| Land registry charges | 43 ² |
| Total | 730 |

¹ Property Valuation is charged at cost, and £200 is therefore only an indicative fee based on average value of property in the city.

The flat rate valuation fee will be applied for straight forward valuations. More complex valuations, including appeals, are likely to be referred for independent valuation and would be charged on a sliding scale for the property value. The council will accept a recent (within 3 months) written professional market valuation from the applicant. In this case, the valuation fee would not be applied as part of administration costs. Any extra valuations, appeals or revaluations may incur additional costs, which may be charged back to the applicant.

² This includes the land registry charge of £40. The remaining £3 is for the land registry search.