<b>Item No.</b> 20.	Classification: Open	Date: 15 September 2015	Meeting Name: Cabinet
Report title	:	Adult Social Care, Fa Outcomes of Cor Implementation	airer Contributions Policy – nsultation Exercise and
Ward(s) or groups affected:		All wards	
Cabinet Member:		Councillor Stephanie Financial Inclusion	Cryan, Adult Care and

# FOREWORD - COUNCILLOR STEPHANIE CRYAN, CABINET MEMBER FOR ADULT CARE AND FINANCIAL INCLUSION

The council's vision for adult social care underlines the importance of ensuring that there is good quality, co-ordinated care and support available to people in their own homes and in their local neighbourhoods. People are financially assessed to determine what amount they can afford to pay towards their service and the funding this raises is used to help provide and sustain current levels of care provision.

The existing charging policy has been in place since 2003 and with the introduction of the Care Act it is in need of reviewing. Local councils across the UK are facing increasingly challenging financial pressures and the way we fund existing services needs to be considered in the face of the financial restrictions being imposed upon us by the Government. We need to be realistic about our available resources and this includes looking at how people pay a contribution towards the cost of the care they receive.

We invited all of our service users to take part in a consultation which took the form of both a questionnaire and face to face events. There were six proposals contained within the outlines for a new policy which is being drafted and the aim is to introduce a modernised policy which takes due regards of the legislative requirements. I would like to thank everyone who participated in the consultation and who provided feedback to help us form the new policy. I believe it is important that we do consult people and that their views should be heard. I am therefore asking cabinet, after consideration of the officers' report set out in paragraph 1 onwards to approve the recommendations below.

# **RECOMMENDATIONS**

- 1. To note the responses to the consultation on the proposed changes to the Fairer Contributions Policy as set out within this report and in Appendix 2: "Fairer contributions policy consultation responses summary".
- 2. To note the equality and impact analyses set out in Appendix 1: "Equality and impact analysis Fairer Contributions Policy".
- 3. To consider the information contained within this report and its appendices, and to agree to adopt the proposed changes to charging policy:

- To change the level of available income after financial assessment below which a service user will not be charged anything for their care from £2 to £3 a week.
- To charge up to 100% of available income, after financial assessment, increasing this from up to 80%.
- To ask all eligible service users, who are assessed as financially able to contribute, for a contribution toward their care costs.
- To simplify charging, so that all services, including respite care, meals and telecare services currently charged at a flat rate, are included within a financial assessment so that service users will only pay what they can afford.
- To assess and charge non-residential care services in the same way that
  we assess residential care, so that non-residential care service users with
  savings or capital above £23,250 no longer have their care subsidized by
  the Council.
- To introduce a discount scheme for social care customers paying by direct debit.
- 4. To agree the proposed changes to be adopted in a new Fairer Contributions Policy to be applied from October 2015.

# **BACKGROUND INFORMATION**

- 5. The council's current approach to charging for social care was first developed in 2003, in accordance with contemporary guidance from the Department of Health, and is set out in Southwark's "Paying for your care assessments and contributions".
- 6. There have been significant changes in legislation since the current policy was created, with the introduction of the Care Act and the regulations and guidance issued under it. There is now a need to consider the implications of these changes and ensure our practice fits. This case is set out in the cabinet report "Adult Social Care, Fairer Contributions Policy Consultation Exercise", dated 2 June 2015, where the cabinet agreed to formally consult on 6 proposed changes to the council's existing contributions policy. The cabinet paper set out six proposals that would amend the current contributions policy, to form the basis of a new fairer contributions policy.
- 7. The proposed Fairer Contributions Policy aims to ensure that a fair and consistent approach is applied to all service users. The proposals brought to cabinet in June for approval of the approach to consult were set out in line with statutory guidance on the development of charging policies. When developing the proposals, the council considered the issues raised therein on whether to impose a maximum charge, the council's position on the amount of income assessed as available for charging, and on addressing the needs of those in receipt of services to make savings provisions. The council considered that the national guidance on lower and upper limits for charging provide for individuals to maintain sufficient savings. The council will re-consider the imposition of a maximum charge as national policy and legislation develops further.

- 8. A 12 week consultation, "How do we fund Adult Social Care fairly?" started on 16 June 2015 and closed on 4 September 2015. The consultation approach included sending accessible letters and information posted to 2,236 individual service users, distributing newsletters and including information in community Action Southwark and community councils' communications outputs. Online information and response forms were provided alongside access to telephone and email contact points for responders to ask questions and provide commentary for consideration. Invitations were sent to 43 local advocacy groups to invite them to take part in the consultation and meetings about the proposed changes. Two public meetings were held for individuals and advocacy groups to hear about the proposed changes and ask questions before completing the consultation document.
- 9. All responses to the consultation received via all channels have been entered into the council's 'My Southwark' consultation tool, and the complete consultation results are set out in Appendix 2 to this report, "Fairer contributions policy consultation responses summary" and the key outcomes are included within this report.

#### **KEY ISSUES FOR CONSIDERATION**

- 10. The proposed Fairer Contributions Policy aims to ensure that a fair and consistent approach to contributions to social care costs is applied to all service users.
- 11. If the recommended changes to the policy are adopted, some existing clients will be expected to contribute a higher amount of their available income towards their care costs. In addition, people currently excluded from the existing policy will be financially assessed and as a result, some will be expected to contribute towards services they at present receive free.
- 12. If the recommended changes to the policy are adopted, some existing clients will contribute less than they do now due to the higher £3 rule for non-contribution, from the inclusion of flat-fee services in assessed income and the introduction of a discount for payment via direct debit.
- 13. The impact of the proposed changes on particular groups are set out in this report and considered in detail in "Equality and impact analysis Fairer Contributions Policy" appended to this report.
- 14. The consultation responses set out that 5 of the 6 proposed changes were supported by a majority of the responders. The consultation responses are considered in detail and set out in full in the "Fairer contributions policy consultation responses summary" at Appendix 2.
- 15. This policy would not include:
  - people who have Creutzfeldt-Jacob disease,
  - care services provided under section 117 of the Mental Health Act 1983,
  - re-ablement services up to six weeks,
  - aids and adaptations under the value of £1,000
  - services the NHS is under a duty to provide
  - services we are under a duty to provide under other legislation.

- 16. The council is not permitted to charge for the provision of these services.
- 17. The council would not apply the policy to carers or to ask them to pay for any support they receive.
- 18. Income received through the policy would be used to continue funding care services.

# **Policy implications**

- 19. The council has reviewed its current charging policy in light of legislative changes introduced by the Care Act. Cabinet agreed for the council to consult on proposed changes to the existing contributions policy.
- 20. The proposed changes are consistent with changes in the law introduced by the Care Act and the supporting secondary legislation and guidance issued by the Department of Health.
- 21. The council's intention is that these proposals lead to:
  - a more transparent system of charging;
  - a more sustainable and financially viable model (in order to meet the needs of the most vulnerable now, and into the future),
  - that the most vulnerable individuals are safeguarded against prohibitive costs; and,
  - that individuals can access the right services at the right time in order to maintain and/or improve their wellbeing.
- 22. These aims are consistent with the council's Fairer Future Values of 'being open, honest and accountable', 'Spending money as if it were from our own pocket', 'treating residents as if they were a valued member of our family', and 'working for everyone to realise their potential'.
- 23. The proposals are designed to modernise the policy and to offer a clearer, more understandable system for service users. The proposals are underpinned by the principle of introducing more equitable treatment of service user groups, and also ensuring that those on the lowest income do not have to contribute towards the costs of meeting their eligible needs.
- 24. The existing system, which makes separate charges for specific services such as meals at home, respite care and telecare would no longer operate. All components of individual (non-residential) care packages would be included, and the recipients' financial contribution would be assessed, resulting in one care charge per week against the personal budget amount.

# Consultation

- 25. The consultation received 124 responses. This represents a response level equivalent to 5.5% of the individual service users the council wrote to. This is in line with the historic levels of response to consultations.
- 26. Of the 6 proposals put forward, more consultation responders agreed than disagreed with 5 of the proposals.
- 27. Proposal 1, to make sure that those with the least money don't pay anything for

- their care by introducing a 'no charge to the service user if the assessed contribution is less than £3 a week' rule had an approval rating of 76%.
- 28. Proposal 2, to charge the full amount of available income (after a financial assessment), changing the charge rate for assessed available income from 80% up to 100%, had an approval rating of 57%.
- 29. Proposal 3, ensuring everyone who can afford to, pays a contribution towards their care, including mental health service users, by including all people who receive our services when assessing ability to pay a contribution had an approval rating of 54%.
- 30. Proposal 4, to simplify how respite care, meals and telecare are charged by including them in the financially assessed part of the policy, so that separate charges are unnecessary had an approval rating of 75%.
- 31. Proposal 6, to introduce a discount scheme for people who pay by Direct Debit had an approval rating of 76%.
- 32. More consultation responders disagreed than agreed with proposal 5, to charge the same for non-residential care as we do for residential care, meaning that if a person's savings or capital is above £23,250 their care is not subsidised by the council. 53% of respondents disagreed with this proposal.
- 33. Responders were most supportive of the changes which are anticipated to result in a saving to service users, proposals 1, 4 and 6. Responders showed lower support levels for proposals 2, 3 and 5 which are anticipated to result in an increased cost to some service users, although a majority of respondents still supported proposals 2 and 3.
- 34. Respondents to the consultation provided 94 comments that are included in full at appendix 2 Fairer contributions policy consultation responses summary.
- 35. Responses to individual questions presented a spectrum of opinions. Views set therein included those who felt that it was fair to ask users who could afford to contribute, to do so, those who felt that service users from different groups should be treated equitably, support for supporting those on the lowest incomes, those who agreed with the proposals but wanted them to go further, and those who felt that we should look to the government or increased council tax to pay for care. A representative selection of comments is set out below. All comments collected are included in full in the consultation summary report.

"We should all look after those who can't afford to look after themselves."

"Charges have allowed the poorest elderly people to keep £2 per week for more than ten years so that raising the level to £3 is doing little more than adjusting to the rise in prices during that period. Therefore, I think the minimum contribution should be raised to £5 per week."

"If they can afford to pay for it, they should."

"We should be moving towards paying for social care from taxation, not increasing the amounts individuals pay. Put up the council tax (preferably more for the higher band properties) and explain why - people who need care are the concern of all of us."

"It's not fair for those with physical health support needs to pay and not those with mental health support needs."

"This would be quite wrong. Mental illness is enough to cope with. Means testing mentally ill people is inhumane."

"If it's simpler it's better so long as no one is worse off."

"Makes the decision about going into residential care needs focused rather than financial."

"To encourage people to pay by direct debit the level of discount should be attractive and there will be less arrears."

"I think the council has come up with a great package of proposals - well done!"

36. Specific practical concerns about the implementation of the proposals, rather than principles behind the policy, and counter proposals raised in the consultation responses are set out in the table below, alongside a brief response to each issue.

Issue/counter proposal	Response
Proposal 3 – Including potential charges for social care support for mental health service users could incentivise healthcare professionals to use Mental Health Act 117, or discourage the uptake of services in vulnerable people.	Section 117 of the Mental Health Act imposes a duty on health and social services to provide aftercare services to certain patients who have been detained under the Act. This duty is not affected by the proposed changes in charging policy.  The council will work with local health partners, and the Health and Wellbeing board, to ensure that health professionals continue to arrange aftercare under section 117 of the Mental Health Act only in appropriate cases, in line with legislation and guidance. The changes are not intended to, or anticipated to discourage the uptake of services.  Southwark social care services maintain a presence in the South London and Maudsley. Social care also runs a hospital discharge service, community mental health services, supported housing schemes, and work closely with our mental health partners. These services enable us to identify individuals who would benefit from our services, and support them to engage in (and pay for, for example through benefit maximisation) services that they require.
Proposal 5 – Charging for non- residential services above the capital threshold will disadvantage disabled home- owners or disabled people	Although the council acknowledges the issue raised here, the council has a responsibility to generate income to ensure the availability of services to disabled and vulnerable individuals. We believe this contributions policy is the fairest

Issue/counter proposal	Response
looking to access the housing market.	way of doing so.
Proposal 6 - Assistance should be offered to service users to understand how the direct debit would work and to set one up to access the discount.  Proposal 6 - Discounts should also be made available to service users who pay by direct electronic transfer, as well as direct debit.	The council is committed to working with the London Mutual Credit Union to explore options and increase access for people who have difficulty in accessing a bank account or credit. The council will also provide support and assistance for service users to understand the direct debit scheme and how to access it.
How will the cost of broken equipment or new needs be taken into account?	Care plans are reviewed annually, and the financial assessment will be revisited as part of that process. Where needs or circumstances change significantly between review periods, we will conduct an early review of the care plan and financial assessment.  The financial assessment process does take into account the cost of, or expected wear and tear for equipment. If an item has been replaced and a cost incurred, the finance team will allow for this as part of the financial assessment process.
Would the savings level (lower limit of £14,250), together with the proposed changes, discriminate against service users who work freelance and need to save capital to pay tax at the end of the year?	As part of the financial assessment process, the portion of the individual's assets that is being held in order to pay for tax at the end of the year would not be included in the assets considered as part of the individual's savings.

# **Community impact statement**

- 37. The public sector Equality Duty, at section 149 of the Equality Act, requires public bodies to have due regard to the need to eliminate unlawful discrimination, harassment and victimisation and to advance equality of opportunity, and foster good relations between different people when carrying out their activities. The council's Approach to Equality ("the approach") commits the council to ensuring that equality is an integral part of our day to day business.
- 38. The council has conducted a detailed equality and impact analysis with regard to the potential impact of the proposals, this is provided at Appendix 1: "Equality and impact analysis Fairer Contributions Policy". The key findings of this are summarised in this community impact statement.
- 39. The service is accessible to all service users who Adult Social Care assesses as having eligible needs, and whose needs the council agrees to meet through the provision of care and support. The proposals will potentially impact on all Adult Social Care users in receipt of a personal budget, in particular:
  - those with sufficient weekly income to make a contribution following financial assessment;

- sufficient capital to make a contribution following financial assessment;
- service users whose needs are being met outside a care home; and, mental health service users in receipt of non-residential care services other than services provided as aftercare under the Mental Health Act.
- 40. Each of the protected characteristics have been considered as part of the equality impact analysis.
- 41. Considering age, the groups that will be most affected by the proposals are young people, and adults past the age of retirement. 62% of adults making a contribution to their care are over the age of 75. Over half of this figure are people over the age of 85.
- 42. As the population increases, average life expectancy continues to rise, with people living for longer with eligible care needs, the ability to provide a sustainable model of care funding is vital. These proposals ultimately provide a more sustainable model, from which we can reinvest monies generated to allow us to continue to meet the needs of the community in the long term, especially those age groups most likely to access the service.
- 43. However, we note the following negative impacts: young adults may pay more over the course of their lifetime than those accessing the service for the first time late on in their life; adults over the age of 75 are more likely to pay increased contributions; and, older adults are more likely to have eligible capital above the upper capital limit, rendering them responsible for meeting the entire costs of their care needs.
- 44. There are mitigating safeguards built into the Care Act regulations and guidance, including the Minimum Income Guarantee plus a 25% buffer, nil charges where there is not sufficient income available, free re-ablement services, and the disregarding of certain income and capital.
- 45. The proposal incentives help to balance some of the increased costs disproportionately more likely to affect an older cohort. The proposal incentives include the direct debit discount, the 'no charge' rule, and a shift from flat rate charges to assessed charges for services. Currently 63% of adults paying for meals on wheels only and 72% of adults paying for telecare only are over the age of 75. This suggests that over 75's will benefit from these proposals more than other age groups.
- 46. Taken together with the fact that the income the council generates will disproportionately benefit people with long term conditions and disabilities, who will require good quality services we consider that the safeguards and incentives identified will sufficiently mitigate any adverse impact.
- 47. The impact of these proposals may also negatively impact upon people with disabilities due to the nature of the service. Mental health service users will be particularly affected by the proposal to charge all groups (barring those receiving services under section 117 of the Mental Health Act, and service users with Creutzfeldt-Jacob). People with mental health needs, and people with disabilities in general, will be required to pay more towards meeting their care needs than under the current model.
- 48. The council considers that the new approach provides a more sustainable model, from which we can reinvest monies generated to allow us to continue to

- provide high quality support to individuals whose wellbeing is significantly impacted by a disability/illness, and this will benefit this group particularly.
- 49. The council considers that the proposal to start charging mental health service users is equitable, and that maintaining the current contributions model, of charging people with physical disabilities, but not service users with mental health needs, would be unfair.
- 50. Adults with sensory impairments and/or mental health or capacity concerns may be disadvantaged by their ability to understand the general information (including literature) provided and the assessment and payment processes. It is proposed that this risk be mitigated by ensuring that adequate advocacy is provided through the assessment process.
- 51. Analysis of adults currently in receipt of a personal budget reveals that over half, 54%, are White British (in the 2011 census, White British made up 40% of Southwark's population). White British service users comprise 66% of service users in receipt of meals on wheels only, and 65% of service users in receipt of telecare only. As the largest group of service users, White British service users will benefit disproportionately from proposals to move to an assessed rate for these services. Increased contributions by White British service users are partially mitigated by the proposal to move away from flat rate services which are likely to have a positive impact on service users. The Minimum Income Guarantee (MIG) will leave individuals with (at least) the equivalent of Income Support plus 25% to spend as they see fit. Such an approach leaves White British service users no more disadvantaged than their peers on similar benefits/income.
- 52. Although the majority of those affected by these proposals are likely to speak English as a first language, we must give due regard to the needs of those from other ethnic groups/cultures, with a limited grasp of the English language. Our translation and interpretation policy requires that we arrange for an interpretation/ translation to assist service users during important/significant communications.
- 53. Analysis suggests that the group of adults that proposals will have the largest impact on are service users identifying themselves as belonging to a Christian denomination. 82% of adults currently in receipt of a personal budget, and making a contribution, identify themselves as belonging to a Christian denomination. 74% of service users paying for meals on wheels only and 89% of service users paying for telecare only identify themselves as belonging to a Christian denomination. The data illustrates that, while service users who identify themselves as belonging to a Christian denomination are more likely to be impacted by higher charges, they are also more likely to benefit from the phasing out of flat charge services such as meals on wheels and telecare.
- 54. Analysis of service users sets out that 60% of service users currently making a contribution, and the majority of service users paying for meals on wheels only (54%) and telecare only (79%) are women. The data sets out that while women are more likely to be impacted by higher charges, they are also more likely to benefit from the phasing out of flat charge services such as meals on wheels and telecare.
- 55. The analysis sets out that there would be no disproportionate negative impact on individuals due to their status as having undergone gender re-assignment, their marital or civil partnership status, pregnancy or maternity, sexual orientation.

- 56. There are no assessed adverse consequences that are incompatible with the articles set out in the Human Rights Act.
- 57. The equality and impact analysis sets out four recommendations relating to the proposals. Two are to ensure that information provided about the financial assessment and care costs are available in appropriate accessible formats and languages; one to ensure that advocacy is available to those undergoing financial assessments; and, the fourth to increase the proportion of service users for whom we have information available about each of the protected characteristics. The council proposes to adopt each of these recommendations and a timescale is set out for each of these in the equality and impact analysis report.
- 58. The report concludes that in so far as the proposals may give rise to negative effects in relation to some of the protected characteristics namely age, sex, race, ethnicity and disability these can be mitigated. In light of these analyses, we do not assess that these proposals give rise to unlawful discrimination, harassment, victimization and/or fail to advance the equality of opportunity between those who share a protected characteristic and those who do not.

# **Resource implications**

- 59. Adoption of the proposed Fairer Contributions policy will create a potential increase in workload (case numbers) for staff undertaking financial assessments, invoicing and collection of payment. If proposal 6 is adopted as recommended, there will be some efficiency found by collecting payments via Direct Debit.
- 60. A more intensive re-organisation of departmental support staff is being progressed which will address this issue. For the scheme to be cost effective it will be necessary for the potential increase in income to the department to be far in excess of the costs of collection.
- 61. The level of income collected by Southwark from Adult Social Care, is compared in the table 1 below to CIFPA's statistically similar boroughs. Southwark income collection is below the average collection figure for the group.

CIPFA Comparator Group Borough	Income from Adult Social Care
Tower Hamlets	£2,842,000
Hackney	£5,740,000
Newham	£5,882,000
Hounslow	£6,355,000
Southwark	£6,851,000
Islington	£8,209,000
Waltham Forest	£8,695,000
Wandsworth	£8,801,000
Camden	£9,284,000
Brent	£9,756,000
Greenwich	£9,785,000
Lambeth	£10,134,000
Merton	£10,164,000
Lewisham	£10,376,000
Haringey	£10,610,000
Ealing	£11,462,000

# SUPPLEMENTARY ADVICE FROM OTHER OFFICERS

# **Director of Legal Services**

- 62. This report asks cabinet to consider the outcome of the consultation on proposed changes to the council's approach to charging for social care set out in the draft 'Fairer Contributions Policy. It further seeks the approval of cabinet for the proposed policy.
- 63. The background to this report is the decision of cabinet on 2 June 2015 as follows:
  - a) That consultation on proposals for a 'Fairer Contributions Policy' be agreed.
  - b) That the consultation commence on 15 June 2015 to run for 12 weeks until 4 September 2015.
  - c) That the outcomes of the consultation be considered at the cabinet meeting scheduled for 15 September where implementation decisions will be made.

# **Legislative Framework**

- 64. Section 14 of the Care Act 2014 (and similar provisions in the previous legislation) permit a local authority to make reasonable charges for social care services provided outside of a care home. The power is subject to regulations and statutory guidance that requires local authorities to assess what a person can afford to contribute towards their care costs. The guidance affords local authorities some flexibility to develop their own policies by choosing whether to disregard additional sources of income, set maximum charges or to charge a person a maximum percentage of their disposable income. The guidance also says that in designing their policy local authorities should consider the objectives of care and support charging and how it can:
  - (i) ensure that people are not charge more than it is reasonable practicable for them to pay
  - (ii) be comprehensive and reduce variation in the way that people are charged
  - (iii) be clear and transparent so people will know what they will be charged
  - (iv) promote wellbeing, social inclusion and support the vision of personalisation
  - (v) support carers to look after their own health and wellbeing
  - (vi) be person focused and reflect the variety of care and caring journeys and the variety of options available to meet needs
  - (vii) apply the charging rules equally so that those with similar needs or services are treated the same and minimise anomalies between differed care settings
  - (viii) 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
  - (ix) be sustainable for local authorities in the long term
  - (x) administer a policy for people who lack capacity or are loosing capacity in a way that considers what capacity remains and their rights.
- 65. Local authorities are required to follow the statutory guidance unless there are compelling reasons not to do so. There is a risk of legal challenge to any policy

adopted where consideration has not been given to these issues.

# Consultation

- 66. For effective consultation to take place there are 6 requirements:
  - Consultation must be conducted when the proposals are at a formative stage
  - The decision maker must give sufficient reasons for its proposals to permit intelligent consideration and response
  - Adequate time must be given for consideration and response
  - The product of consultation must be conscientiously taken into account before making the relevant decision
  - Where, as here, a consultation is aimed at the general public it should explain its proposals in more detail than if it were aimed at a professional audience with relevant knowledge of the issues involved
  - The authority will be held to a higher standard of fairness where the proposal will take away a benefit or advantage which people already enjoy.
- 67. Following the recent case in the Supreme Court, the authority should heed the Supreme Court's warning that public bodies have a more stringent duty of fairness in cases where what is proposed is the removal of a benefit or advantage.
- 68. The report outlines at paragraphs 7 8 the means by which the council consulted on its proposals. The key outcomes of the consultation are recorded in the report with the complete results of the consultation set out in Appendix 2 for consideration prior to making any decision on the policy. The report records that the consultation lasted for twelve weeks starting on 16 June and closing on 4 September. Guidance indicates that a 12 week consultation period is generally good practice.

# **Equalities Duties**

- 69. Finally in making its decision the cabinet must have due regard to its equalities duties as set out in the Equalities Act 2010 and specifically the need to:
  - Eliminate discrimination, harassment, victimisation or other prohibited conduct
  - Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not. The protected characteristics covered by the equality duty are age, disability, gender reassignment, pregnancy and maternity, race, religion, sex and sexual orientation. The duty also includes marriage and civil partnerships in respect of eliminating unlawful discrimination.
  - Foster good relations between those who share a relevant characteristic and those who do not.
- 68. The report includes a community impact statement and records that it has conducted a detailed Equality and Impact Analysis of the proposals. The key points from this analysis are included in the report at paragraphs 34 to 55. This includes discussion of the impact of the proposals on the protected characteristics. The full analysis is appended to this report at Appendix 1 and the cabinet is advised to read this document before taking its decision.

**Strategic Director of Finance and Corporate Services (FC15/001)** 

70. The strategic director of finance and corporate services notes the recommendations in this report for implementation of a 'Fairer Contributions Policy'. Comparison data is provided within this report which indicates that the income generated under the current policy is in the lower quartile when compared to the council's statistical neighbours.

# **REASONS FOR URGENCY**

71. The proposals contained in this report are intended to modernise the council's approach to charging for social care and, in a time of financial austerity, to ensure its approach to charging for services is sustainable for the local authority in the long term. If the proposals are accepted income raised will be used to fund care services. Any delay in implementing the policy could adversely affect this income stream. If the income stream is affected then other services may suffer as the difference will need to be found.

# **REASONS FOR LATENESS**

72. It has not been possible to circulate this report five clear days in advance of the meeting because the consultation period did not end until 4 September 2015. Given the requirement that the products of the consultation be collated and considered it was not therefore possible to complete this report before the despatch of the main agenda on Monday 7 September. The key themes from the consultation have been collated and are presented in this report. In addition a detailed report on the outcome of the consultation has been prepared and is appended to this report.

# **BACKGROUND PAPERS**

Background Papers	Held At	Contact			
"Paying for your care	Finance and Corporate	Kevin Almond, Charging			
	•				
assessments and	Services	and Debt Team Leader			
contributions"	Southwark Council	020 7525 3555			
Current contributions policy	160 Tooley Street				
	London SE1 2QH				
http://www.southwark.gov.uk/in	http://www.southwark.gov.uk/info/200387/assessments benefits and advice/2398/pa				
ying for your care assessments and contributions					
"Adult Social Care, Fairer	Finance and Corporate	Kevin Almond, Charging			
Contributions Policy –	Services	and Debt Team Leader			
Consultation Exercise"	Southwark Council	020 7525 3555			
Cabinet report 2 June 2015	160 Tooley Street				
· ·	London SÉ1 2QH				
http://moderngov.southwark.gov	v.uk/documents/s53936/Repo	ort%20Adult%20Social%2			
0Care%20Fairer%20Contributions%20Policy%20Consultation%20Exercise.pdf					
"How do we fund adult social	Finance and Corporate	Kevin Almond, Charging			
care fairly?"	Services	and Debt Team Leader			
Consultation document	Southwark Council	020 7525 3555			
	160 Tooley Street				
	London SÉ1 2QH				
http://www.southwark.gov.uk/careact					

# **APPENDICES**

No.	Title
Appendix 1	Equality and impact analysis – Fairer Contributions Policy
Appendix 2	Fairer contributions policy consultation responses summary

# **AUDIT TRAIL**

Cabinet Member	Councillor Stephanie Cryan, Adult Care and Financial Inclusion		
Lead Officer	Jay Stickland, Director of Adults' Social Care		
Report Author	Kevin Almond, Charging and Debt Team Leader, Finance and		
	Corporate Services		
Version	Final		
Dated	8 September 2015		
Key Decision?	Yes		
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET			
MEMBER			
Officer Title		Comments sought	Comments included
Director of Legal Services		Yes	Yes
Strategic Director of Finance		Yes	Yes
and Corporate Services			
Cabinet Member		Yes	Yes
Date final report sent to Constitutional Team8 September 20°			8 September 2015