Buckinghamshire County Council

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County Council 16 July 2015

Agenda Item

11 **CABINET MEMBERS' REPORTS** Written questions and answers attached



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QUESTION FOR COUNCIL FROM ROBIN STUCHBURY TO MIKE APPLEYARD, CABINET MEMBER FOR HEALTH & WELLBEING

Questions received: 6 July 2015

1. How much money has the Government transferred to Buckinghamshire County Council in order to meet the needs of those disabled people previously on ILF and how much will it be transferring for 2016/7 and 2017/18?

The only funding announcement to date is for the 9 month period, 1st July 2015 to 31st March 2016. The sum allocated to Buckinghamshire County Council is £891,008

2. How much does Buckinghamshire County Council estimate it will need to spend on meeting those needs over this year and for 2016/7 and 2017/18?

Work is currently being undertaken to determine the amounts needed to be spent.

3. Is the independent living fund going to be ring fenced within the budgets of Buckinghamshire County Council?

The money is not ring fenced for ILF users. It will form part of the base budget for social care and used equitably to meet the needs of local people.

Questions received: 13 June 2015

What will the effect be on Buckinghamshire people with the cut to the independent living fund?

The government decided to close the ILF and hand funds over to local authorities on the 1st of July 2015. This decision was challenged by people with disabilities and by organisations supporting them. The decision was halted for period of time in 2014 and taken to court, but following a high court ruling, it was agreed that the decision will go ahead.

Buckinghamshire has 81 ILF service users. We liaised with the ILF and all service users throughout the planned period of closure and recently held two communication days with service users to discuss any concerns they may have and to provide information as to how Buckinghamshire will be managing the transfer.

We agreed to allow a three month period to review service users and to communicate with them to arrange a smooth transfer of funds to the local authority and into their accounts by the 1st of July 2015. This was to allow sufficient time to carry out assessments appropriately, ensuring an individual based outcome for all service users. During the period April 2015 to end of June 2015, all service users received an individual needs assessment and care plans are being agreed based on individual need of each service user rather than make a "blanket" decision to transfer existing amounts of ILF monies. We believe this is Care Act compliant and allows the local authority to meet individual needs appropriately and safely.

This approach means that some service users may find a reduction in their care provision, but others will receive an increase in care provision as it is based on an individual needs assessment at the time of assessment. Although the LA has a RAS (resource allocation system) this is only an indicative budget and most ILF users fall over and above the RAS. The CFC (Care funding calculator) was used to support our needs assessment as this allows for an indicative needs assessment for complex needs. The majority of our ILF users came out above the RAS, within the CFC and within or over the joint ILF/LA funding quota which is being transferred to the LA on the 1st of July. In some instances this has created a financial pressure for the LA, rather than a "surplus" of funds being available. We believe this is an equitable way of meeting each individual need safely and appropriately.

Service users have had regular contact with their social workers and with senior management throughout the period and very few concerns have been raised by individual service users. We have also been liaising with service user and carer groups throughout the period to keep them informed.

What plans has the Council undertaken to support people who have support removed?

None of the 81 service users had support removed. As explained in question 1, all service users had an individual needs assessed and outcome based assessment. This is the same process we apply to all service users approaching the local authority for an assessment and care plans will be finalised based on individual assessment. Any adjustment within care provision would have been as a result of the individual assessment. Care Act eligibility criteria have been applied to each individual assessment and according to each individual's needs which will vary from another service user. Very few care provisions have been reduced and quite a few have increased following the needs assessment. Quite a few live-in care provision, despite the existing care provision only being transferred from the ILF to LA.

What increased cost will this bring to the local authority in meeting high demand with reducing support for disabled people?

As explained in Questions 1 and 2, cost has not been the deciding factor in assessing the ILF service users. Service users were assessed based on need and cost for their care provision has been calculated according to that individual need. In some instances, the care provision has increased and in a few examples, the care provision has reduced based on individual needs.

The ILF will transfer existing funds to the LA on the 1st of July. Where following an individual needs assessment the cost has increased, the ILF will not increase their transfer to the LA, resulting in a financial pressure on the LA budget for 2015. We found following assessment that where any reduction applied, this was minimal. ILF service users used to pay a client contribution to the ILF based on the service user and carer income. The LA will only assess the income of the service user, not the

carer, resulting in a reduction for ILF service users in paying client contribution to the LA. ILF will transfer to the LA on the 1st of July 2015 and continue at an attrition rate of 5% per year. The needs of some users may increase, but others may become eligible for Continuing Health care based on individual assessment. All service users will receive a six week review following the transfer of monies and again annually or if and when there is a change of individual need.

No support for disabled people will be reduced unless an individual based assessment of need necessitates this. There is no generic or blanket decision for the disabled service users of Buckinghamshire, but instead all service users have received an individual assessment of need.

With Buckinghamshire being the home of the disability Olympics will Buckinghamshire be making strong representation to government:

A. To ask that this cut is not taken forward; B. To make a public stand against the removing of the ILF; C. Does Buckinghamshire County Council support the Human Rights Act regarding the right for disabled people to live an independent life?

A To ask that this cut is not taken forward

As I mentioned at the start of my response, the decision to close the ILF has been a decision from central government, in liaison with all disabled people (through consultation with the ILF) and the courts. This is not a decision that BCC can influence.

It is not a correct assumption that there are cuts taken place. As explained, each service user received an assessment based on needs and the outcomes for care provision was based on need and not any decisions from the ILF or monetary allocation of funds. No service users received a total "cut" in funds, and most service users will receive the same or a higher allocation of funds based on their individual needs assessment.

B To make a public stand against the removing of the independent living fund

The removal of the ILF is a central government decision and not one BCC is able to influence. We can only carry out assessment based on Care Act compliant individual needs based assessment and support service users and staff accordingly.

Buckinghamshire County Council wrote to all service users and held information days regarding our plans for managing the ILF resource and the plans for individual service users. We held two information days and invited service users and carers to come and discuss any concerns. We had positive feedback regarding our communication with service users on that day. Social work and management/senior management staff have been available to all ILF service users for phone discussions or meetings if service users requested it. We have had a consistent quota of experienced staff carrying out ILF assessments who were able to answer queries and manage a smooth transfer of funds and care to individual service users based on need. There has been very little concern from service users and on the whole staff were able to relay any concerns and support service users accordingly.

C Does Buckinghamshire County Council support the Human Rights Act regarding the right for disabled people to live an independent live?

Buckinghamshire County Council absolutely supports the Human Rights Act and the need for disabled service users to live an independent life. This is demonstrated by the fact that we carried out individual needs based assessments for all 81 service users and agreed outcomes based on individual needs and care needs. This is the same principle we apply to all other service users whether younger or older adults. We understand that younger adult service users in particular, have a need to remain living independently at home and in the community rather than accept nursing care where the majority of service users tend to be older. There is care provision for younger people in nursing home establishments or those who would like to choose this provision to meet their care needs, but this is agreed with individual service users based on their assessment of need and choice. ILF service users have choice and control over their care provision and our recent assessment of 81 service users has allowed those service users to maintain their existing care arrangements by and large. We recognised that quite a few ILF service users had PA's and carers that have been with them for a long time and who were meeting their needs appropriately. Where possible, we have tried to honour those agreements with service users. Care needs will be reviewed in six weeks and then annually unless there is a change that necessitates a review at a different time.