



ADULT SOCIAL CARE & SUPPORT PLANNING POLICY CONSULTATION PROCESS AND OUTCOME

Introduction.

The formal consultation on the draft Adult Social Care & Support Planning policy launched on 17th July 2017 and ran for 12 weeks ending on 8th October 2017.

The consultation process was publicised through Havering's communication channels, the processing of responses and the analysis of the data was completed by Council Officers.

THE CONSULTATION PROCESS.

The consultation took a number of forms:

Online

The online element of the consultation was hosted on the Havering Council website at www.havering.gov.uk/ASCPolicy . The consultation webpage contained:

- general information about the draft Adult Social Care & Support Planning policy and the consultation process;
- a copy of the draft Adult Social Care & Support Planning policy;
- a copy of the Easy Read version of the draft Adult Social Care & Support Planning policy;
- an on-line questionnaire about the policy;
- an on-line questionnaire about the Easy Read version of the policy;
- a PDF copy of the consultation questionnaire;
- a PDF copy of the Easy Read consultation questionnaire.

Information to key external stakeholders and consultation information events

Details about the draft Adult Social Care and support planning policy (and the Easy Read version) were distributed to 16 forums/organisations representing the broad range of local care and support agencies in Havering (see addendum 1).

Consultation information events were delivered to 12 of these community groups and forums collectively attended by over 300 people. These events were designed to ensure relevant local agencies and people were aware of the draft policy (and the Easy Read version) and the consultation taking place on these. For people not accustomed to using information technology people were provided with hard copies of the draft policy as well as consultation questionnaires and business reply envelopes to make it easy for people to make their views known. For those accustomed to using Information Technology people were signposted to the Council's consultation webpage. The events also gave people information on how to contribute to the consultation through participation in a Consultation Focus Group.

Information about the draft policy and consultation was also provided to key local health partners including Havering CCG, BHR CCG's, NELFT, and BHR Hospitals.

A small number of local residents requested a one to one meeting to find out more about the consultation, one person chose to provide feedback at one of these meetings

Internal consultation events

Professionals and practitioners working within adult social care and local health partner organisations were provided with a copy of the draft policy and information about the consultation (see addendum 1). Consultation information events were delivered to all integrated social care teams to make sure staff working in and with our Adult Social Care Services are aware of the development of the Adult Social Care & Support Planning policy, and had the opportunity to contribute their views to help shape the policy whilst it was still in draft form.

In total 9 consultation meetings were held with staff teams within in our Adult Social Care services during the consultation.

Focus Group

Participation in a Focus Group was offered to people who wanted to provide feedback about the draft policy without having to complete a questionnaire or the on-line survey. Uptake of this opportunity was limited and only 1 Focus Group was held representing 2 local care and support organisations.

PUBLICITY AND PROMOTION.

The Communications Team worked closely with Adult Social Services and the consultation was well supported with publicity including:

- a press release when the consultation was launched;
- on-line promotion through the Council's website;
- articles in LIVING and Sheltered Times;
- a poster campaign including posters in Libraries, Council buildings, satellite offices, and community notice boards;
- information sent out through Havering E-newsletter;
- information sent out though social media outputs.

The information provided included information about the draft policy, the Easy Read version of the policy, and how people could get involved in the consultation to make their views known.

RESPONSES TO THE CONSULTATION.

The consultation offered respondents the opportunity to provide their views about:

- the full draft Adult Social Care & Support Planning Policy:
- the Easy Read version of the draft Adult Social Care & Support Planning Policy.

This report summarises the responses received about the quantitative data collected about the draft policy, which focused on the level of detail respondents had read the full version of the draft policy as well as the Easy Read version, and respondent's views about the language used and the clarity of both documents.

This report also summarises the comments and views expressed about both draft documents, this includes comments and views about the content draft policy as well as the clarity of the documents.

OVERALL RESPONSE RATE.

The overall response rate was low compared to the scope of the consultation with a total of 36 responses. Responses were provided through hard copies of questionnaires, an on-line survey, written responses (mainly via email), a Focus Group and one individual meeting requested by a local resident.

Source	Total	Questionnaires total	Other responses total
Completed questionnaires about the full draft policy	9	27	
Completed questionnaires about the Easy Read version	1		
Completed on-line surveys about the full draft policy	11		
Completed on-line surveys about the Easy Read version	6		
Comments provided via email	6		9
Comments provided at a Focus Group	2		
Comments provided at an individual meeting	1		
TOTAL	36		

The 27 responses provided via questionnaires and the on-line survey provided quantitative data as well as comments and views about the policy. The other responses provided comments and views only and no statistical data for analysis.

ANALYSIS OF THE RESPONSES

Responses from staff and local residents

Responses were received from staff working within the Council and partner health agencies (e.g. NELFT, BHRUT) as well as local forums and residents. It cannot be assumed that staff from the Council and health partner agencies are local residents. The split between staff from the Council and partner organisations and local forums and residents is displayed below.

Responses from local forums/residents	Responses from Council and health partner staff	Unidentified	TOTAL
7	19	1	27
27%	73%		

Gender

The gender of respondents who provided statistical information is displayed below.

	Female	Male	Excluded
Council and health partner staff	14 (70%)	6 (30%)	
Local residents	6 (100%)	0 (0%)	1
TOTAL	20 (77%)	6 (23%)	

N.B. Local Forums excluded and assumed to be representative of both genders.

Whilst the sample is very small it is significant that all responses from local residents were from females and it can be concluded that female residents are over represented in the consultation with the residents of Havering.

Age profile of respondents

The age range of respondents of people who provided quantitative data is displayed in the table below:

Source	25-34	35-44	45-54	55-64	65-74	Prefer not to say/excluded
Council and health partner staff	4 (21%)	4 (21%)	4 (21%)	6 (31.6%)	1 (5.4%)	2
Local residents	0 (0%)	1 (20%)	1 (20%)	2 (40%)	1 (20%)	1
TOTAL	4	5	5	8	2	3

The small sample of respondents means it is not possible to make any firm conclusions about how well different age groups were represented during the consultation.

Post code data

Although respondents were given the opportunity to provide information about post codes insufficient information was provided to make any assumptions or conclusions about the participation of people from different areas of the Borough in the consultation process.

Ethnicity

Inadequate data was collected to draw any conclusions about the ethnicity of the respondents.

ANALYSIS OF THE COMMENTS AND VIEWS ABOUT THE FULL VERSION OF THE DRAFT POLICY

Quantitative data and written comments/views

A number of respondents provided data that can be quantified to gather broad views about the full version of the draft policy. In addition to this respondents provided written comments about the policy. What follows is a summary of the responses provided on the full version of the draft policy

People providing quantitative data about the full version of the draft policy

Source	Number
Questionnaires	9
On-line surveys	11
TOTAL	20

SUMMARY OF QUANTITATIVE RESPONSES

All 20 people providing quantitative data confirmed to what detail they had read all 7 sections providing a total of 140 ratings for all respondents for all sections. The results set out below indicate respondents had on average read the draft policy in quite a high level of detail.

SECTION	A lot of detail	In detail	In some detail	In little detail	In very little detail	Not stated
All	39	60	31	1	1	8
29.5% of responses						
75% of responses						
98.5% of responses						

A total of 98.5 % responses to questions about the level of detail in which respondents read sections of the policy indicate on average they read the sections at least in some detail. 75% of responses indicate respondents had read the sections in a slightly higher level of detail than that, whilst nearly 30% of responses indicate respondents had read all sections of the policy in a lot of detail.

Words or phrases people did not understand

Nearly all respondents who provided quantitative data (19) stated there were no words or phrases in the policy that they did not understand. Only 1 respondent indicated one word that they did not understand.

Clarity of the draft policy

The table below displays the ratings provided by respondents indicating how clear they felt the draft policy was (1 being completely unclear and 10 being completely clear).

1	2	3	4	5	6	7	8	9	10
	1				1	2	7	7	2
								45%	
							80%		
						90%			

45% of respondents scored the clarity of the draft policy as 9 or above indicating they felt it was extremely clear. A total of 80% of respondents scored the clarity of the draft policy 8 or above indicating they felt it was very clear or better. A further 3 respondents (12%) scored the policy above 6 indicating they felt it was reasonable clear. Only 1 respondent indicated the draft policy was not very clear giving a rating of 2.

OTHER COMMENTS AND VIEWS EXPRESSED ABOUT THE FULL VERSION OF THE DRAFT POLICY

Several respondents that provided other comments about the policy indicated they felt it was well presented, concise, easy to understand, reflects the key requirements of the Care Act 2014 in relation to Adult Social Care & Support planning, and is a useful document to have for local reference. However, a small number of concerns were raised about the presentation of the policy, in particular about the accessibility of the policy for people with sensory needs. In addition to this a number of comments were made about the content of the policy. What follows is a list of the key comments made during consultation, the full text of the comments provided by respondents will be made available for the Cabinet to review if needed.

Comments about the presentation of the policy:

Comments/views about the presentation of the policy include:

- concern about the presentation of the policy (font type and size for ease of reading) and about what arrangements are being made to enable people with a visual impairment to access the policy;
- a number of people commented that the policy needs to be made available to people who have a visual impairment;
- there were a small number of specific comments about the clarity of some sentences, words, and phrases used in the document.
- it was suggested that people reading the policy may benefit from illustrative examples to help them understand the finance sections of the policy;

Comments on the content of the policy:

Comments/views about the presentation of the policy include:

- a number of concerns were expressed about the requirement for some people to pay the full cost of any care and support services they or their relatives may need;
- there is no mention of Individual Service Fund arrangements in the policy and these are being made available for people in Havering who have care and support needs;
- a number of respondents requested more information about the timescales of the assessment and care planning process and timing of reviews etc;
- the section about the principles of assessment does not confirm that cultural needs must be taken into account during the assessment process;
- the section about the principles of assessment should include reference to the involvement of carers and/or significant others in assessments;
- the section about transition needs to clarify that young people with a disability extends to when the young person is 25 years old;
- there were a number of requests for reference to be made about ordinary resident issues and the Council's duties and responsibilities to asylum seekers;
- a request was made for improvements to the community for deaf people;
- a request was made to make reference to the advanced care planning process used by NELFT to anticipate and plan for the needs of people in their last year of life with a specific reference to young people in transition with a terminal illness;
- some comments made during the consultation related to operational matters, these were referred to the relevant operational managers for a response.
- greater clarity is required about "top up" issues;

Other comments made during the consultation

Concern was expressed that the consultation focussed more on the presentation of the policy rather than the policy itself.

THE EASY READ VERSION OF THE DRAFT ADULT SOCIAL CARE & SUPPORT PLANNING POLICY

Quantitative data and written comments/views

Seven respondents provided data that can be quantified to gather views about the Easy Read version of the draft policy. In addition to this respondents provided written comments about the policy. What follows is a summary of the responses provided on the Easy Read version of the draft policy

The number of people providing quantitative data about the Easy Read version of the draft policy

Source	Number
Easy Read Questionnaires	1
Easy Read On-line surveys	6
TOTAL	7

SUMMARY OF QUANTITATIVE RESPONSES

Quantitative data collected during the consultation confirms which sections of the Easy Read version of the policy respondents had a good look at. Respondents were asked to confirm if they had a good look at Sections 1 – 10 of the Easy Read version of the draft policy. A total of 6 of the 7 respondents answered this question. 5 of the respondents confirmed they had a good look at all 10 sections. The remaining respondent confirmed they had a good look at 7 of the 10 sections.

Section	1	2	3	4	5	6	7	8	9	10
Number of respondents	5	5	6	6	6	6	6	6	6	5

How easy did respondents find the draft policy to understand?

In summary 5 respondents that provided quantitative data about the Easy Read version indicated it was easy to understand. 1 respondent indicated it was neither easy nor difficult to understand, and one respondent indicated it was difficult to understand.

Words or phrases people did not understand

A total of 6 of the 7 respondents that had a good look at the Easy Read version confirmed that it did not contain any words or phrases that they did not understand, the results are set out in the table below. One person stated that there were words and phrases they did not understand throughout the document.

Response	Yes	No
Number of respondents	1	6

How clear is the policy?

As set out in the table below a total of 5 respondents indicated the Easy Read version of the policy is clear. One respondent was neutral on this question and one person indicated the policy was very unclear.

Level of clarity	Very clear	Quite clear	Neither	Not very clear	Very unclear
Number of respondents	3	2	1		1

OTHER COMMENTS AND VIEWS EXPRESSED ABOUT THE EASY READ VERSION OF THE DRAFT POLICY

In contrast to the quantitative data collected a number of concerns were expressed about the clarity of the Easy Read version of the policy, and its accessibility for the people it is targeted toward, i.e. people who have difficulty in reading such as people with learning disabilities. Responses indicate the Easy Read version may not even be up to a standard to enable people with mild to moderate learning disabilities to understand the policy and that further work is required to make the policy accessible for these people. In addition to this some comments were made about the content of the policy and the impact it has on people with disabilities. What follows is a list of the key comments made during consultation, the full text of the comments provided by respondents will be made available for the Cabinet to review if needed.

Comments about the presentation of the Easy Read version:

- the Easy Read version of the draft policy is very unclear and not understandable for people with learning disabilities and needs to be simplified;
- the policy is only accessible to people who have access to computers and the internet and more creative ways of informing people with learning disabilities should be arranged so that these people are not excluded (e.g.'s video, drama groups, a stall on the market);
- the Council should engage with the voluntary sector and people with learning disabilities to re-draft the Easy Read version to make sure it is easy for people with learning disabilities to understand;
- a number of suggestions to improve the wording and presentation of the Easy Read version were provided;

Comments on the content of the policy:

- people with moderate to mild learning disabilities are excluded from adult social care because of the eligibility criteria for social care. Other people get a lot of access to care, it should be more equal;
- people with mild learning disabilities are being pushed into independence. The current policy is not working and the criteria for access to social care are too tough;

- people with different needs e.g. people with mental health needs, severe learning disabilities, and people with physical disabilities, are being treated differently;
- concern was expressed that people with over £23,000 will get no help from the Council and this stops people accessing services.
- concern was expressed that the policy does not include time limits for the assessment and care planning processes;
- there is no mention of transport issues for people with dementia.

CONCLUSIONS ABOUT THE OUTCOME OF CONSULTATION AND RECOMMENDATIONS

The overall response to the consultation was low compared to the scope of the consultation process. A significant number of responses were received from staff that work either within the Council (mainly Adult Services) or partner health organisations, the proportion of these respondents who are local residents is not known. It is known that at least 27% of the responses were from local residents or representative bodies.

In general respondents indicated they had read the policy in detail and a number of these indicated they felt the policy was well presented, concise, easy to understand, reflective of the key aspects of the Care Act 2014, and is a useful document for local people who may need adult social care and social care practitioners. A significant proportion of respondents that provided data that can be quantified (45%) indicated the policy was extremely clear. 80% indicated the policy was very clear. Only 1 respondent indicated the policy was not very clear.

Although feedback about the clarity of the policy was on the whole positive, some feedback suggested the format of the policy was not clear enough for people with visual disabilities, and some people suggested the use of alternative media should be considered to make sure the policy is accessible for everyone, in particular the Easy Read version of the policy.

Respondents provided a number of comments about the content of the policy and made a number of suggestions on how the content could be improved. Some of these comments questioned fundamental requirements set out by the Care Act 2014 in relation to the provision of adult social care, e.g. the eligibility criteria for access to social care and the funding regulations. The Council cannot unilaterally change these requirements as they are set out in the Care Act and statutory guidance that the Council must follow. Where possible the policy has been amended in line with the views and comments made to make sure it is easily understood and reflects aspects of the requirements Care Act that local people feel are important.

In general the respondents who provided views and comments about the Easy Read version of the policy indicated they felt it was clear and useful. However, those that responded on behalf of people with learning disabilities, including mild learning disabilities, indicated the Easy Read version was far from being clear or

useful and needs to be re-drafted. In addition to this strong views were expressed to consider different approaches to present the policy instead of relying on a written version, even an Easy Read version.

Recommendations

- The changes outlined below have been made to the draft policy and it is recommended that the revised policy is approved.
- Adult services should prepare and deliver a plan to re-draft the Easy Read version of the policy in consultation with local people with learning disabilities, and to use other ways of making the core aspects of the policy accessible to people including people with sensory disabilities.

Changes made to the policy as a result of the responses to consultation

As a result of the consultation the following changes have been made to the draft policy for approval by Cabinet:

- the font used in the policy has been amended in line with recommendations made by the Sensory Trust.
- reference is provided to signpost readers to guidance on ordinary residence issues;
- statements have been made to confirm the Council's strong commitment to working in partnership with local healthcare agencies to ensure initiatives to improve and maintain the health and wellbeing of local residents are integrated appropriately with social care arrangements;
- statements have been added to emphasise the importance of ensuring assessments are proportionate to each individual's needs and are completed as quickly as possible to prevent needs escalating;
- a paragraph has been added to confirm there will normally be a proportionate review of the individual's care and support plan 6 weeks after their personal budget and plan have been signed off to ensure the care arrangements are appropriate;
- the principles of assessment have been updated to reflect the requirement to ensure religious and cultural needs are taken into account during individual assessments;
- the section on advocacy and participation support has been revised to provide examples of who an "appropriate person" may be;
- the frequency of annual reviews (normally annually) has been included in the section about Care & Support Plan reviews;
- a new paragraph has been added in the section on Transition to confirm that where a young person going through transition has complex healthcare needs the Council will work together with healthcare services to ensure the individual assessment and care planning process is holistic;
- a new paragraph has been added to clarify the Council's duties and responsibilities to meet the social care needs of adult asylum seekers if their needs for care and support do not derive from simple destitution;

- a paragraph has been added to the section on allocating funding to unmet eligible needs to signpost readers to additional sources of information and advice about funding to meet unmet eligible needs;
- the section on direct payments and third party managed accounts has been updated to signpost readers to more information and advice to help people manage their own care with direct payments;
- a whole new section has been added to confirm the Council's policy in relation to Individual Service Funds;
- words and phrases in the document that people felt may be difficult to understand have been made simpler.

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**ADULT SOCIAL CARE & SUPPORT PLANNING POLICY
CONSULTATION 17TH JULY – 8TH OCTOBER 2017
CONSULTATION EVENTS**

Information and consultation information events provided to key external groups/forums

- Learning Disabilities Partnership Board
- Mental Health Partnership Board
- Autism Partnership Board
- Havering Alzheimer's Society
- Havering Association for People with Disabilities
- HAVCARE
- Havering Direct Payments/Personal Budgets Support Group
- Havering Healthwatch
- Havering Carers Forum
- Havering Carers Voice
- Over 50's Forum
- Havering Mind Mental Health Carers Group
- VCS Forum (23 local care and support organisations are linked to the Forum)
- Residential and Nursing Care Providers Forum (all local residential and nursing home providers are linked to this forum)
- Learning Disabilities Provider Forum (all local services for people with learning disabilities are linked to this forum)
- Homecare Providers Forum (all local homecare providers are linked to this forum)
- Focus Group involving representatives from two local care and support agencies
- Information provided at individual meetings with two local residents

Information and consultation information events provided to key internal groups within Adult Services.

- Adult Team (Physical Disabilities/Older People) South
- Adult Team (Physical Disabilities/Older People) North
- Integrated Learning Disabilities Team (2 sessions)
- Joint Assessment and Discharge Team (King George's Hospital)
- Joint Assessment and Discharge Team (Queens Hospital)
- Preventative and Assessment Team and the Front Door Team
- The Sensory Team
- The Safeguarding Team
- Internal services to adults
- Mental Health Practitioners and professionals
- Commissioning Services

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Information provided to key health partners.

- Havering CCG
- BHR CCG's
- NELFT
- BHR Hospitals

The views expressed during consultation, and comments/actions taken as a result of these views.

This is a list of the views expressed in the text boxes of consultation questionnaires that are made in addition to the quantitative data collected about the draft policy, as well as general views provided via emails, letters, and other routes, and the comments/actions taken as a result of these views.

Reference Key:

- S = Survey questionnaire
- OL-S = On-line survey questionnaire
- ERS = Easy Read questionnaire
- EROL-S = Easy Read on-line questionnaire
- E/L = Views provided via email or letter
- FG = Views provided via a Focus Group
- IM = Views provided at an individual meeting/discussion

Source	Section	Views	Comments/Action	Ref
Survey Questionnaire.	8	There is no mention of ISFs, in particular section 8.2. There is not a step where the Provider will be drafting the Support Plan with the service user. Once this has been signed off by the Authority the support is funded, with the funds being managed by the local authority.	The policy has been amended to make reference Individual Service Funds.	S 1

Source	Section	Views	Comments/Action	Ref
Comments received via email.	General comments	Many thanks for sending this information. I have had a quick look through this and tested the links etc. concentrating on the Easy Read, which I think works really well. My question is looking at all the associated paperwork - has the most useful font family been used across all the documents so I am thinking about Comic Sans SM. Not everyone will need an easy read but would appreciate a font family and size which is more practical. Also what arrangements have been made for the visually impaired who also may need either the more traditional paper or the Easy Read?	The final policy will be formatted in accordance with guidance from the Sensory Trust. Adult Services will review the production of future policies and information for the public to incorporate this guidance in future publications.	E/L 1
Survey Questionnaire	6.8 (1)	Should cultural needs be included here?	Paragraph 7.6. (1) has been amended to confirm religious and cultural needs will be taken into account in assessments.	S2
	6.8 (3)	The involvement of carers and/or significant others should be included in this section.	The participation of an appropriate person, including an independent advocate if there is no appropriate person close to the individual, is included in 6.22. This section has been amended to provide some examples on who an appropriate person may be according to the individual's wishes and taking into account mental capacity issues.	
	General comment	The policy is concise and specific.	No further action/comment required.	

Source	Section	Views	Comments/Action	Ref
Survey Questionnaire (cont)	General comments	The policy appears well written in accordance with the National Guidelines & Local Authority responsibilities. Also following legislation and statutory guidance, plus involving the voluntary sector agencies. Most importantly it adheres to the Care Act 2014. I am impressed that an holistic approach will be offered in the assessment and care planning process, as most individuals needing care and support have components of physical mental, psychological, social and sensory needs.	No further action/comment required.	S 2 (cont)
Comments received via email.	5.4	I would like some clarification on what is meant by "COMPACT supports the implementation of Havering's Voluntary Sector.	This section has been reviewed to provide greater clarity.	EL 2
	6	Who will carry out these assessments particularly for those individuals experiencing mental health distress or a carers?	This is an operational issue and has been referred to Mental Health services to advise the respondent.	
	6.32	People experiencing mental health distress situations can change very rapidly, will this be accounted for in regards to when reviews happen?	This is an operational issue and has been referred to Mental Health services to advise the respondent.	
	9.6	In my experience there is very low take up/offer of personal budgets in mental health, how will this change?	This is an operational issue and has been referred to Mental Health services to advise the respondent.	

Source	Section	Views	Comments/Action	Ref
Comments received via email.	6.34	The paragraph on transition needs to clarify that young adults in transition with a learning disability or some other disadvantages goes up to 25.	This paragraph confirms the definition of a young person for whom a transition assessment must be arranged unless it is refused.	EL 3
	12.1	Reference to the Corporate Management Team (CMT) needs to be changed to Senior Leadership Team (SLT).	12.1 has been reviewed to reflect appropriate structures.	
	5.7	Where they refuse (the intervention) but continue to have unmet eligible needs for care and support the Council will offer the individual an assessment - Why does the duty to offer an assessment not kick in at an earlier stage - surely you can only adequately signpost if you have already done some assessment of need?	This paragraph has been amended to remove a typo. "proceed" should read "continue".	
	6.1	This paragraph can be construed as saying the Council will meet all unmet eligible needs, is this the true liability under the Act. Presumably part of this allows the Council to discharge its duty by signposting to another provider. Otherwise 6.1 contradicts 6.5.	This paragraph is an accurate reflection of the Council's duties in relation to unmet eligible needs. If an individual is signposted to another service and this meets their eligible need then the need is no longer unmet. With this in mind there is no conflict between 6.1 and 6.5.	

Source	Section	Views	Comments/Action	Ref
Comments received via email (cont)	6.6	This paragraph seems to have too many "unmet".	This paragraph has been amended to correct a typo.	EL 3 (cont)
	6.30	Can the cost incurred be recouped from the individual or the authority where the individual is ordinary resident?	The same financial assessment regulations apply to an individual in this scenario in the same way as everyone else requiring adult social care. If there is a dispute about care costs between Havering and another local authority this would be resolved through the use of the Care and Support (Disputes Between Local Authorities) Regulations 2014. This is a very rare event and is not a critical issue that needs to be included in the policy, which aims to summarise the key parts of the Care Act to make the day to day delivery of adult social care easy to understand.	
Comments received at an individual meeting.	General comments about the Easy Read version of the policy	The Easy Read version of the draft policy is not very understandable for people with learning disabilities and it needs to be simplified.	The Easy Read version of the policy will be reviewed and people with learning disabilities will be consulted further in this.	IM 1
	General comments	People with mild learning disabilities are being pushed into independence. The current policy is not working and the criteria for access to social care are too tough.	Promoting independence and wellbeing are key principles of the Care Act. The criteria for access to social care are set by the Care Act.	

Source	Section	Views	Comments/Action	Ref
Comments received at an individual meeting (cont)	General comment	People with different needs, e.g. people with mental health needs, severe learning disabilities, and people with physical disabilities, are being treated differently.	One of the key purposes of creating a local Adult Social Care & Support Planning policy is to ensure there is equitable treatment and fairness in the provision of funded care and support.	IM 1 (cont)
Survey questionnaire	General comment	Sometimes I had to re-read parts of the policy again but I am aware that you have an Easy Read version of the policy.	No reference was made to a specific part of the policy that could be reviewed/amended.	S3
	Section 6	Some general timescales might be appropriate in implementation of assessments etc.	General timescales added to the policy	
Easy Read Survey Questionnaire	General comments about access to the Easy Read version of the policy	The policy is only accessible to people who have access to computers and the internet and more creative ways of informing people with learning disabilities should be arranged so that these people are not excluded. A video about the policy would be a good way of presenting the policy to people with learning disabilities. Drama groups would be a good way to help people understand what is in the policy and getting the message out. Colleagues might be able to help educate people with learning disabilities about the	The Easy Read version of the policy will be re-drafted after the full version of the policy has been approved. Options for developing alternative media formats to help explain the policy to people with sensory disabilities will be explored.	ERS 1

Source	Section	Views	Comments/Action	Ref
Easy Read Survey Questionnaire (cont)	General comments about access to the Easy Read version of the policy	Care Act and the Council's policy. Also, the Council could set up a stall in the Market and use local radio to provide people with information about the policy.	Use of a regular market stall is not considered an effective way of providing people with information about the policy.	ERS 1 (cont)
	Ideas about how to re-draft the Easy Read version of the policy	The Council should work with the voluntary sector and people with learning disabilities to re-draft the policy to make sure the language is easy for people with learning disabilities to understand.	The Easy Read version of the policy will be re-drafted after the full version of the policy has been approved.	
	General comments about the contents of the policy	People with moderate to mild learning disabilities are excluded from adult social care. We don't meet the criteria so we are left to our own devices when we still need support. People with severe learning disabilities, autism, mental health needs etc. get a lot of access to social care compared to people with moderate/mild learning disabilities. It should be more equal and not divisive, people should not be split up into categories or sections.	The Council provides adult social care to people whose needs meet the national eligibility criteria set by the Care Act 2014. The national eligibility threshold provides more transparency on what level of need is eligible for adult social care and promotes fairness, the criteria are applied equally across all care groups.	

Source	Section	Views	Comments/Action	Ref
Easy Read Survey Questionnaire (cont)	Section 2	There is a typo in the 8th bullet point (the work "for" is missing).	This will be amended when the Easy Read version of the policy is re-drafted.	ERS 1 (cont)
Comments received by email	General comment	I think the policy needs to make reference to ordinary residence and asylum seekers.	The policy has been amended to signpost readers to the relevant sections of the Care Act and statutory guidance in relation to ordinary residence issues (2.2). An additional paragraph has also been added to clarify the Council's policy in relation to asylum seekers who have social care needs (7.9).	E/L 4
	10.17	We have always been informed that "top ups" need to come from a 3rd party, so this needs to be explained in more detail.	Section 10.17 confirms that top-up's can be made by Third Parties. Further guidance for Social Work staff in relation to Top Up's is under consideration.	
Comments received by email	General comment	Can LBW improve the community for the BSL-users deaf people? There were always have news for others but nothing about deaf people. Thank you.	The adult social care and assessment/care planning processes for people with hearing difficulties are the same as all other people who need social care support.	E/L 5

Source	Section	Views	Comments/Action	Ref
Survey Questionnaire	General comment	I found the policy clear and easy to understand	No further action/comment required.	S4
	General comment	The policy is effective in the summary of the Care Act. It is a very useful document.	No further action/comment required.	
Survey Questionnaire	7.1	The word "pursuant" may not be understood by everyone.	This paragraph has been amended to replace the word "pursuant" and make the policy easier to understand (7.1).	S5
	General comment	The draft policy is clear enough and easy to understand	No further action/comment required.	
	General comment	The policy is concise and non-repetitive	No further action/comment required.	
Survey Questionnaire	All	No comments other than completing tick boxes	No further action/comment required.	S6
Survey Questionnaire	General comment	It is clear & not as jargon as the Care Act	No further action/comment required.	S7
	General comments	I feel some area's need to be addressed more: top up payments, asylum seekers/no recourse to public funds, ordinary residence.	See actions/comments in relation to E/L 3 and E/L 4.	
Comments received by email	General comment	I would recommend a section on advanced care planning, possibly highlighting the PEACE document as used in Havering and preferred place of care and preferred place of death, to be taken into consideration. These are seen as vital strands of care when supporting anyone near the end of life.	The PEACE advanced care planning process is the process used by NELFT to anticipate the care needs of patients discharged from Hospital to a care home who is in their last year of life. The policy has been amended to reflect the Council's commitment to working in partnership with local health services to ensure initiatives to improve and maintain the health and wellbeing of local residents are integrated appropriately with social care arrangements (3.8).	E/L 6

Source	Section	Views	Comments/Action	Ref
Comments received by email (cont)	Sections 6.33 & 6.34	You have mentioned transition in 6.33 and 6.34 maybe this could be expanded on to include the 'Transition' of young people with life threatening illnesses from children's services into adult services. Every young person with a life-limiting condition deserves a smooth transition to adult services, respecting their wishes while providing care and support. all young people approaching adulthood with life-limiting conditions will make the transition to adult services and live their lives as independently as possible according to their wishes, while receiving the care and support they and their families need. To achieve this there must be some building and strengthening of bridges between adult and children's services.	A new paragraph has been added to confirm the Council's commitment to work in partnership with local health services where a young person going through transition has complex healthcare needs to ensure the individual assessment and care planning process is holistic (6.36).	E/L 6 (cont)
FG comments on the Easy Read version	General comment on the Easy Read version of the policy	The participant confirmed they had read the entire Easy Read version of the draft policy in a lot of detail and had carefully considered the document in the light of their knowledge about the needs of people with learning disabilities (including people with mild to moderate learning disabilities as well as those with more severe disabilities).	The Easy Read version of the policy will be re-drafted when the policy is approved and people with learning disabilities will be consulted.	FG
	General comment on the Easy Read version of the policy	The participant felt that the Easy Read version of the policy was very unclear for people with learning disabilities and gave a number of detailed suggestions to improve some of the presentation and wording.		

Source	Section	Views	Comments/Action	Ref
FG comments on the Easy Read version (cont)	Front page of the easy Read version	The graphic on the front page will not be understood by people with learning disabilities and needs to be changed.		FG (cont)
FG comments on the Easy Read version (cont)	"Introduction" in the Easy Read version	Change "focuses on promoting" to "is about".	The Easy Read version of the policy will be re-drafted when the policy is approved and people with learning disabilities will be consulted.	FG (cont)
		The phrase "under the Care Act" is unclear and needs to be changed.		
		People with learning disabilities will not understand the term "eligibility" and this needs to be explained more so that people can understand who is eligible for support.		
	"Why Do We Need This Policy" section of the Easy Read version	People with learning disabilities will not understand the term "Prevention" and this will need more explanation.		
		Change "the Council looks at all the options available when deciding how to meet someone`s needs" to "the Council looks at all the possibilities and different ways when deciding how to meet someone`s needs".		
		Again an explanation is needed to define who is eligible.		
		What does "take responsibility" mean, this needs to be clarified.		
"The Council's General Responsibilities" section of the Easy Read version	This includes people who don't have eligible care needs, again this needs to be clarified to make it easily understood by people with learning disabilities.			

Source	Section	Views	Comments/Action	Ref
FG comments on the Easy Read version (cont)	"Eligibility" section of the Easy Read version	This section is not clear about what needs people must have to get funded support.	The Easy Read version of the policy will be re-drafted when the policy is approved and people with learning disabilities will be consulted.	FG (cont)
	"Personal Budgets" section	None of this is likely to be comprehensible to people with special needs.		
FG comments on the Full version	General comment	The participant confirmed they had read the Policy up to and including the Care & Support Planning section, but not the sections on Funding or Appeals and Disputes. The person confirmed they had read these sections in some detail.	No further action/comment required.	FG
	General comment	The participant thought the parts of the policy they had read was very clear and concise.	No further action/comment required.	
	General comment	The participant thought the content of the parts of the policy they had read was OK.	No further action/comment required.	
Survey Questionnaire	General	I feel the policy could have been shorter and more abridged	The draft policy has been reviewed to ensure there is no repetition.	S8
Comments made on the On-Line Survey about the full version of the draft policy	Section 9	We would pay full cost for all services having paid national insurance and taxes all our lives. This would also include my 91 year old mother in law who now relies on family support.	The charging framework for adult social care is set out in the Care Act Guidance and is based on a set of principles intended to ensure charging for care is fair and easy to understand. The overarching principle is that individuals should only be required to pay what they can afford. The overall framework is set nationally not locally, and local	OL-S

Source	Section	Views	Comments/Action	Ref
Comments made on the On-Line Survey about the full version of the draft policy (cont)	Section 9 (cont)		<p>arrangements for charging people for adult social care in Havering are set out in two Council policy documents: "Residential Care Charging Policy" and "Non Residential Care Charging Policy".</p> <p>General advice on charging arrangements for adult social care is also available to local people on the CarePoint information and advice webpages. An additional paragraph has been added to the policy to signpost readers to additional sources of information and advice on charging arrangements (9.29).</p>	OL-S (cont)
	General comment	The policy will have an impact across the social care economy - that after all is it's purpose.	<p>The Council's policy on adult social care is determined by the Care Act and this will not change a result of producing a local summary of the Act focusing on adult social care and support planning. The purpose of producing a local written Adult Social Care & Support Planning policy document is to ensure the policy is accessible to local residents and all staff working within adult social care services. The Council's policy on adult social care is determined by the Care Act and this will not change.</p>	

Source	Section	Views	Comments/Action	Ref
Comments made on the On-Line Survey about the full version of the draft policy (cont)	General comment	The policy needs to be made available to people who have sensory needs.	As a result of consultation the final policy will be produced in accordance with guidance from the Sensory Trust.	OL-S (cont)
	General comment	The policy will need to be made available for individuals who have a visual impairment.	As above	
	General comment	It is very disappointing that this questionnaire is designed more to test the readability of the content of the policy than to go into the detail about the intent of the content. While it is no doubt useful to know whether people find it easy to read and understand, it would have been more useful surely to use this as an opportunity to gauge what they thought about the content rather than the style.	The Council's policy on adult social care is determined by the Care Act 2014 and subsequent guidance, this cannot be changed unilaterally by the Council. The purpose of the consultation was to ensure the local interpretation of the requirements of the Act in relation to adult social care and support planning are accurate and easy for everyone to understand.	
	General comment	The policy is clear and easy to read without being too repetitive.	No further action/comment required.	
Comments made on the Easy Read Survey about the Easy Read version of the draft policy	Section 9	If we have over £23,000 we will get no help from the Council. This stops many who could do with receiving day care as it costs more than £60 per day.	As OL-S (comments on Section 9)	EROL-S
	General comment	Transport issues for dementia sufferers is not addressed.	The assessment and care planning processes for people with dementia are the same as all other people who need social care support. Transport needs will be taken into account during the assessment and care planning processes on an individual basis.	

Source	Section	Views	Comments/Action	Ref
	General comment	It (the policy) makes it sound good but only the few benefit. Many who have funds are left on their own to sort things out.	See actions/comments in relation to OL-S (comments on Section 9).	
Comments made on the Easy Read Survey about the Easy Read version of the draft policy (cont)	General comment	The policy does not include how long it takes to put things in place, there are no time limits.	Assessments and care plans need to be person centred and proportionate to the needs of each person as well as their personal circumstances, aspirations, and any fluctuating pattern of needs they may have. Because of these complex and variable factors neither the Care Act nor the Care Act Guidance dictate any firm timescales for the completion of these processes and it would be unwise for the Council to unilaterally set inflexible timescales for the same reason. However, the Act does recognise the importance of these processes being concluded in a timely manner. Responding quickly to the needs of people who may have social care needs is critical to preventing needs escalating and reducing/ delaying needs as much as possible. The draft policy has been amended to emphasise the need for assessments and care plans to be proportionate, as well as the need for the assessment and care planning processes to be completed in a timely manner (6.7, 6.32, and 8.2).	EROL-S (cont)
	Section 7 (Personal Budgets)	Those who declare funds below your limit get all. Those above get nothing but bills and worry, which does not help at such times. There are many in the community	As OL-S (comments on Section 9)	

Source	Section	Views	Comments/Action	Ref
Comments made on the Easy Read Survey about the Easy Read version of the draft policy (cont)	Section 7 (Personal Budgets) (cont)	who could benefit from services but will not apply as they are means tested.	As OL-S (comments on Section 9)	EROL-S (cont)
Survey Questionnaire	General comment	Sometimes I had to read parts of the policy again but I am aware you have an Easy Read version.	No further action/comment required.	S9
	General comment	Some general timescales might be appropriate in implementation of assessments etc.	As EROL-S	