

Consultation Feedback and Analysis

The Council held a consultation from the 11th April 2018 to the 22nd May 2018 on proposals to decommission CareOnLine and re-direct users to alternative service providers.

The primary purpose of CareOnLine is to assist vulnerable people to learn computer skills which can help to improve their quality of life, well-being and independence. Users have to meet eligibility criteria in order to access the service.

Support is delivered primarily through home visits to service users and via a telephone support line. There are 48 service users currently being supported with face-to-face training visits and in 2017/18 234 service users contacted the telephone support line. The service received approximately 100 new referrals a year.

CareOnLine is usually accessed by people with limiting conditions such as frailty, mental health problems, visual impairments and long-term health conditions or a disability and is subject to eligibility criteria.

CareOnLine is not a statutory service.

Consultation Process

1. Consultation documentation was developed which detailed:
 - The reasons why changes were being proposed
 - Who would be affected by the proposals
 - The proposals, including explanation of the services offered by alternative providers
 - How individuals could participate in the consultation
 - How individuals could access further information about the consultation and the different formats
2. An online consultation questionnaire and supporting information was available on the County Council website. The questionnaire was available in Easy Read and Screen Reader Adapted versions and hard copies were also available on request. In addition there was a dedicated telephone support line, managed through trained staff at the Customer Contact Centre, to support people to complete the survey. People were also able to email if they had any problems or required any additional support to complete the survey.
3. Current and recent service users, approximately 350, were contacted to make them aware of the survey and provided with the link to the consultation documents and the questionnaire. Information about the consultation questionnaire, including the link, was also sent to the distribution list for the CareOnLine newsletter.
4. The consultation was publicised on the “Have Your Say” pages of the Council’s website where it was possible to access the consultation documents. A Members News In Brief was circulated.

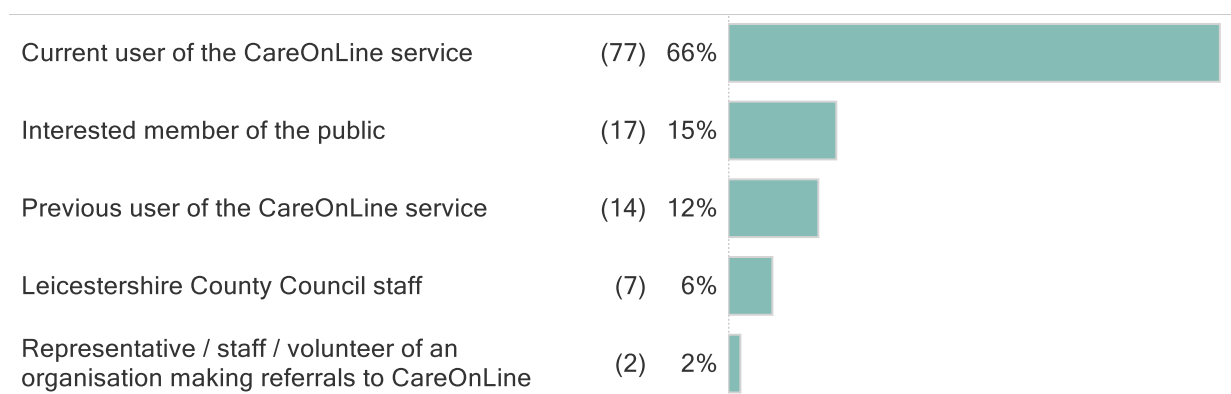
5. The consultation information and links were also shared with a range of stakeholders, including those who refer to the service and the alternative providers.
6. Arrangements were also put in place to provide face-to-face support if requested, via local area co-ordinators. This was not called upon.

CareOnLine Service Consultation Results

Key Themes

- Most responses came from service users
 - Most people use the service for training, advice and technical support in IT
 - Most respondents are current users of the service
 - Most respondents did not feel that the alternative services would meet their needs. The specialised nature and flexibility of the service and the value of home visits were raised as key factors.
 - Most respondents were not aware of alternative services available.
 - Some commentary stated that CareOnLine was not an essential service when compared to other council services
 - Most respondents felt that alternative services would make it harder for service users to use technology to undertake a range of activities, such as communicating with friends/family, accessing information and living independently
7. A total of 119 responses to the consultation questionnaire were received. Question results have been reported based on those who provided a valid response, i.e. taking out the 'don't know' responses and no replies.
 8. In response to Q1 the majority of respondents are current users of CareOnLine. Chart 1 shows the breakdown by type of respondent.

Chart 1: Respondent breakdown

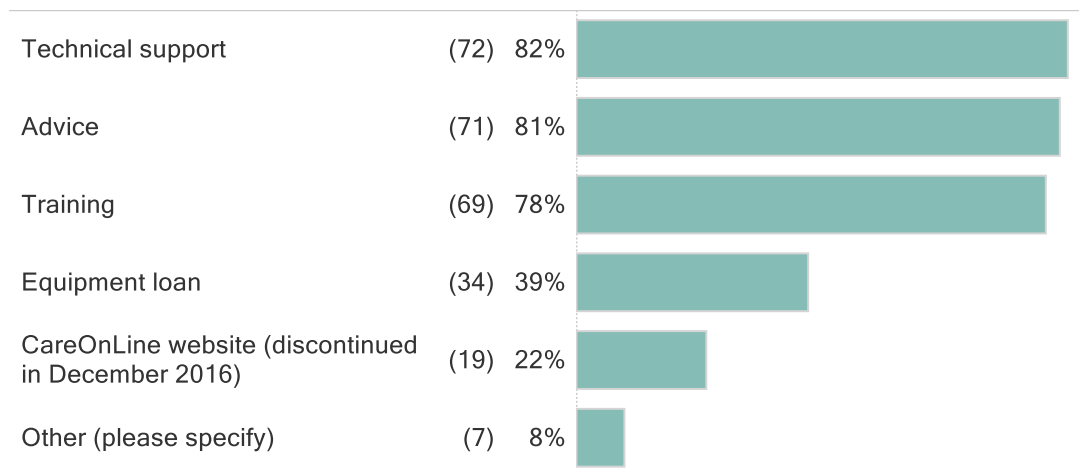


Base: 117

9. Of the 14 respondents who indicated that they were previous users of the CareOnLine service, four indicated that they had used the service within the last year, four had used it between 1 and 2 years ago and five respondents indicated that they had used it longer than 2 years ago.

10. In response to Q4 of the survey service users were asked what type of support they accessed from CareOnLine. Respondents indicated that technical support, advice and training were the most important types of support provided. Other support identified as being accessed through the service included: encouragement; moral and emotional support; confidence building.

Chart 2: Type of support accessed from CareOnLine (multiple response)



Base: 88

11. When asked what they had used the CareOnLine website for (Q5), most respondents indicated that they had used it to access or find information, including local information, events, household support and advice regarding disabilities.

12. In response to Q6 (73%) of service users disagreed that the alternative providers would meet their digital support needs. A lower percentage of other respondents (58%) also disagree with this question.

13. Respondents were then asked to provide additional comments relating to Q6 to explain why they agreed or disagreed that alternative providers would meet their digital support needs. Comments included concerns that the alternative providers were not offering the same service; access to other services would be difficult; potential impact on finances if they could not loan equipment for free ; health and wellbeing in terms of confidence and trust and social isolation. Some comments also reflected a lack of awareness and knowledge of the alternative provision and that they would not offer personalised one to one support, which covered all disabilities. Respondents also raised concerns that alternative providers would not give the same level of commitment, quality knowledge and expertise delivered by CareOnLine staff

- *“As far as I am aware, there are other similar providers, but none offering the level of flexibility and outreach within service user’s homes that is often imperative to working with older people / those with disabilities.”*
- *“I don’t know the alternative services that could be used”*
- *“They seem to cover all disabilities and do provide home visits”*

14. In response to Q7 service users were asked if there were any other areas of need that are currently supported by CareOnLine which they felt would not be supported by the alternative services. The comments indicate that service users are concerned about not having a bespoke or personal service, including home visits. Other key themes amongst the comments included

references to the specialist knowledge of staff (including knowledge of specific disabilities), the availability of equipment and training. The comments below give a flavour of the responses. Some examples of the comments received are given below:

- *“Specialised personalised training and support”*
- *“I need someone who is fully trained in teaching the visually-impaired to use computers*
- *“Loan of and, when necessary, replacement of equipment.”*

15. In response to Q8 Respondents were asked to indicate how important certain activities were to them or to service users. As chart 3 shows, respondents felt that many activities were very important, communicating with friends and family (88%) and living independently (87%) had the highest responses. Over 50% of respondents indicated ‘gaining employment’ as not being important.

Chart 3: Importance of activities



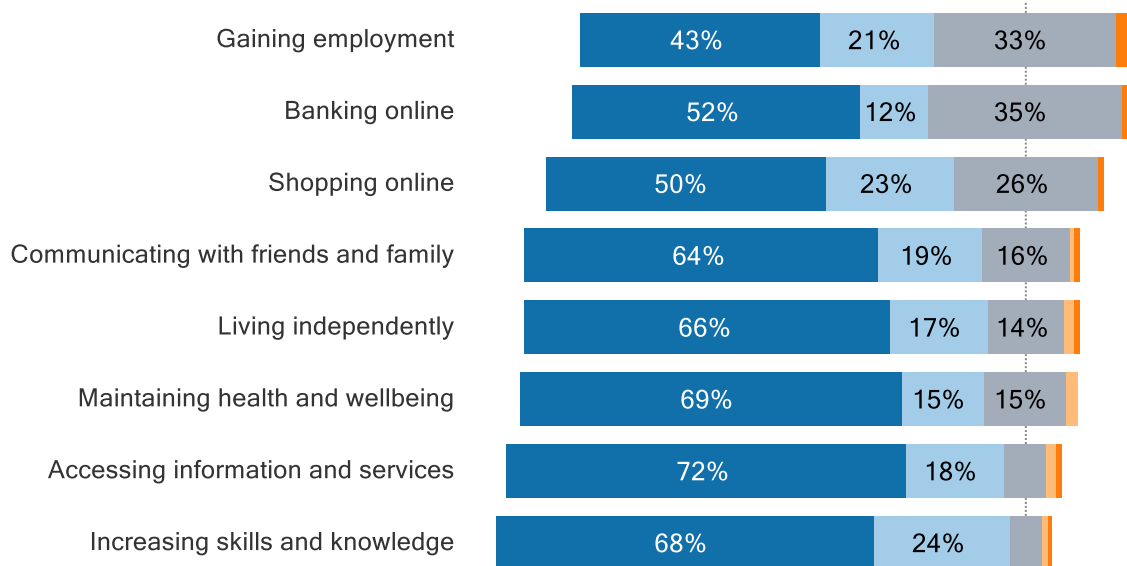
Base: 100 to 116

Response

- Not at all important
- Not very important
- Fairly important
- Very important

16. Q9 of the survey related to how the alternative services would affect service users ability to carry out certain activities. The majority of respondents felt that by using alternative services it would make it much harder for them to carry out a range of activities, in particular accessing information and services (72%), maintaining health and wellbeing (69%) and increasing skills and knowledge (68%).

Chart 4: Impact of alternative services



Base: 58 to 108

Response

- Make it much harder
- Make it a little harder
- No difference
- Make it a little easier
- Make it much easier

17. In Q10 service users were asked if there were any other activities they undertake which they felt that alternative services would have an impact upon. Many respondents took the opportunity to highlight the tailored and personal support offered by CareOnLine. Several respondents also highlighted concerns regarding specific disabilities such as visual impairment or hearing loss. Other specific activities referenced in responses include banking, employment search support, Leisure activities, shopping and online contact with overseas relatives.

- *“The support I would need just wouldn't be there. As there's not enough money in PB for support to go anywhere for this”*
- *“I am a deaf person, so the alternative services which offer telephone support would be totally useless. Further I am under the age of 60.”*

18. One respondent indicated that there was sufficient alternative providers who covered all disabilities

19. In response to Q11 Respondents were asked if they had any further comments about the potential impact of these proposals, including anything else that could be done to reduce any negative impacts. Many responses expressed concern regarding the potential negative impacts of the proposal, including the personal impact. A number of respondents also took the opportunity to praise or highlight the value of the current service. Several respondents also requested or suggested that the current service remain, examples of these comments are included below.

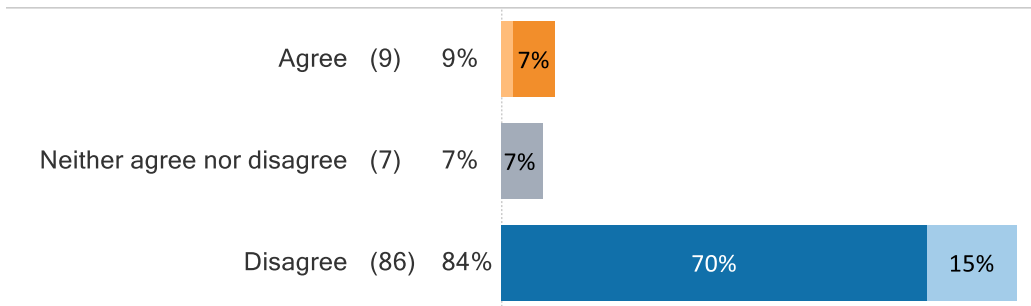
- *“Care online is [vital] for vulnerable , disabled and isolated people. How will an isolated blind person have a life if they don't have access to this service. No stigma attached to using care online.”*
- *“The older people that CareOnLine are helping to stay independent and to stay in their own home, and without CareOnLine we will not be able to keep up with what is happening, ie. banking, shopping and communication with other people”*

20. In response to Q 12 Respondents were asked if there they were aware of any alternative services available that could meet digital support needs. Most respondents indicated that they were unaware of any other alternative options. Some respondents expressed concern that the alternative services were not comparable in the level of service offered.

- *“No, as there are none”*
- *“One or two - Technical volunteers and RNIB.”*
- *“I am but they fall far short of the dedication of the Care on Line team, plus the vast knowledge and experience of help needed for particular conditions.”*

21. In response to Q13 service users were asked to what extent they felt that the proposals provide a reasonable way forward, the majority of respondents disagreed (84%).

Chart 5: Overall agreement with proposals



Base: 102

Response

- Strongly agree
- Tend to agree
- Neither agree nor disagree
- Tend to disagree
- Strongly disagree

22. When asked if service users had any other comments, on a reasonable way forward for the service, many respondents expressed concern over the potential negative impacts of the proposals and a number of respondents requested or suggested that the services should be maintained. Respondents also took the opportunity to highlight the positive benefits and value of the current service.

- *“Please don't decommission CareOnLine as it will affect me badly”*

- *“My heart goes out to younger blind people who have depended on CareOnLine who have given them hope for the future. For myself, I would be very sad if the service was taken away, just as I feel I am making progress”*
- *“Whilst some of the current CareOnline users may be able to find alternative options that work for them, I can see no alternative organisation that is specialised enough to take on board the more extreme health cases in the county. With ever increasing pressure to do stuff 'online' these people are in danger of losing all their independence, triggering depression, isolation and deterioration in quality of life. To be given one to one support in your own home. You need to be able to trust who's coming through the door and orgs services are delivered in a set way and are not adapted to individual needs.”*

Additional Comments

- Two petitions were received: An online petition of 61 signatures and a paper petition of 51 signatures. Both petitions recommended that the Council should not decommission the service.
- We received 6 individual responses to the CareOnLine consultation. Points included a request to extend the consultation period and concerns that the alternative providers may not have the expertise and skills to replace the current service and the highly specialised staff.

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