



ADULT AND COMMUNITIES OVERVIEW AND SCRUTINY COMMITTEE
23 JANUARY 2023

OUTCOME OF CONSULTATION ON ELIGIBILITY FOR CARE
TECHNOLOGY SERVICES

REPORT OF DIRECTOR OF ADULTS AND COMMUNITIES

Purpose of the Report

1. The purpose of this report is to advise the Adults and Communities Overview and Scrutiny Committee on the outcome of the consultation on the eligibility of residents for care technology services and to seek its views on the proposed approach prior to Cabinet approval being sought on 1 April 2023.

Policy Framework and Previous Decisions

2. The relevant policy framework is the Adults and Communities Department Ambitions and Strategy for 2020–2024.
3. The Council's new Care Technology (hereinafter "CT") service went live on 25 April 2022. The Cabinet approved the business case for the new service on 5 February 2021. The service recognises the importance of assisted technology in enabling people with care and support needs to lead independent and fulfilling lives.
4. The majority of the CT service is provided on an eligibility basis. This is defined as a person being assessed as having eligible needs under the Care Act 2014 or is likely to have such needs within the proceeding six-months. The person must also be over 18 years old and live in Leicestershire. If a person is not eligible, then they are signposted to alternative support.
5. Since the launch of the new CT service on 25 April 2022, a discretionary repair and maintenance service has been provided, but this is not sustainable as demand increases for statutory provision.
6. It is proposed that requests for repairs and maintenance for legacy equipment be considered as part of a care and support review and that consideration of such requests be assessed by reference to Care Act' eligibility criteria to ensure fairness across the service and those it supports.
7. The Committee considered a report at its meeting on 7 November 2022 and supported the consultation on eligibility for CT services, and the consultation documentation was shared with the Committee prior to commencement of the consultation as requested by Committee Members.

Background

8. The CT service now offers a range of different equipment with a focus on falls protection, bed and door monitors and a 24/7 responder service. This is available free of charge to eligible adult residents in the county who meet the criteria and who will receive support in respect of their care needs.
9. People who have received care and support services in the past, including CT, will be assessed as part of their care and support review. If a person is not eligible to receive support, they will be signposted to other organisations who may be able to assist them.
10. The new CT service is proving to be highly successful since its launch with higher levels of demand than originally planned:
 - 1,250 referrals;
 - 900 installations;
 - 1,750 pieces of equipment installed;
 - 800 people in total on the service as at 9 December 2022.
11. The Council has an amount of older, legacy, equipment that was previously provided on a universal/discretionary basis by the former Assistive Technology service, particularly to people who are deaf or hearing impaired. It is estimated that there are over 8,000 items of legacy equipment. Since the launch of the new CT service it has responded to requests for repairs and maintenance of old equipment although capacity issues mean that it is impacting the numbers of installations of new equipment.
12. Legacy equipment is equipment no longer provided by the new supplier under the new CT service. Examples include personal listeners, amplified phones, adapted smoke alarms, doorbells, medication safes, big button telephones and key locators.

Consultation

13. A four week public consultation was launched online from 11 November to 9 December 2022, and provided the background on the proposal for requests for repairs and maintenance for legacy equipment to be considered as part of a care and support assessment review and be subject to Care Act eligibility criteria, and that the Council was seeking views on the CT service. The consultation included a link to a questionnaire to be completed.
14. Members of local communities were asked for their views on what the service offer could be going forward for people with legacy equipment, and also to ask about their experiences of using the Council's and other repair services.
15. The consultation was promoted through the Council's social media channels and an easy-read version of the consultation was produced and published. The consultation was also promoted internally to Care Pathway staff and on the Yammer platform.
16. A letter was sent to 1,130 people who had previously used the CT service for legacy equipment from the Council since 2018. This outlined similar information provided on

the website and invited people to complete the survey online or to contact the Council for a paper copy of the questionnaire.

17. A letter was also sent to the main organisations who specifically support deaf or hard of hearing communities seeking their views.
18. An offer was made to attend and explain the consultation to a local group representing deaf/hard of hearing and deaf/blind people aged over 50 but was not taken up.
19. A letter was received from the British Deaf Association and subsequently an offer has been made to meet with their members and provide details of the consultation with a BSL interpreter present.

Findings from the Consultation

20. The findings from the consultation are detailed in Appendix A attached to this report and are summarised below. Specific individual comments received are available upon request.
21. 49 responses were received (47 online responses and two postal responses). A further week was given for postal returns to arrive because of recent postal disruptions before the final results were collated.
22. 94% (46) of responses were from individuals and 6% (3) from those representing an organisation.
23. 83% (35) indicated they had a disability and 24% (9) had a role as a carer.
24. 81% (25) of respondents had previously used the former assistive technology Council service and 58% (14) indicated that they had had equipment repaired or maintained in the last two years.
25. 14 people responded that they had legacy equipment repaired and 100% had this via the Council CT service. 83% (10) said they were fairly or very satisfied with that service with positive comments about the promptness and helpfulness of the services provided.
26. People were asked to respond to a proposed approach, whereby as part of a care and support assessment review the Council would apply eligibility criteria currently in place for the new CT service, to requests for repairs and maintenance for legacy equipment. The approach was supported by 41% (20), and 49% (24) tended to disagree or strongly disagreed.
27. Many comments reflected the impact that the proposals may have if someone was assessed as ineligible, in particular how it would impact on a person's independence and the affordability to get any repairs done.
28. There was concern from a national charity that essential equipment for people with hearing loss would not be provided as part of a blanket policy and that people with hearing loss would not receive equipment to enable them to remain safely independent in their own home.

29. There were also comments from those who felt that this would add pressure onto front line staff to carry out assessments.
30. However, there were also more supportive comments such as those who could afford to pay should pay, and the Council should use its scarce resources sensibly and prioritise those in greatest need. There were further comments, including that the Council should ensure people know what equipment is available and where to get it, and to provide the service as a chargeable service to those who did not meet eligibility criteria. One person suggested finding a benefactor to operate a repairs service.
31. When it came to charging for a service, 12% (6) agreed and 38% (18) strongly disagreed, with a further 23% (11) tending to disagree. In addition, 34 comments were received, with the majority of people being concerned about affordability and that the equipment “was the Council’s” and that repairs to equipment should be the responsibility of the Council.
32. Affordability was reflected in the responses when people were asked if they would pay for a repairs service. 33% (10) indicated that it was not very likely or not at all likely that they could afford a service. However, 40% (12) stated that it was fairly or very likely that they could pay. There was a high number, 27% (8), of people who did not know whether they would be able to afford it.
33. Comments were mixed with some people who disagreed with the proposal saying that they relied on the equipment and would pay for repairs. Others stated it would depend on the cost of the repairs or on the cost and quality of alternatives.
34. In the event that a person was no longer eligible for Council support, 36% (10) stated this would impact them to a great extent and 50% (14) stated this would impact them to some extent.
35. Comments varied with some people stating that it would depend on the equipment and cost involved and others on the impact on their quality of life and independence.
36. The consultation also asked for any additional comments. Content varied with people wanting the status quo, some feeling that a decision had already been made, some were unaware that they had had a service until they received a letter, some people needing more support and others suggesting that providing the specialist equipment enables people to live safely and independently in their own homes, especially adapted smoke alarms.

Proposals/Options

37. The responses to the consultation have led to the following options being considered:
 - a) Option 1 - Continue to provide a service for users of legacy equipment using the existing resource in the CT service - This option is considered to be unsustainable as it does not achieve the Council’s objectives or ambition for the use of technology to improve people’s wellbeing and to deliver the most efficient service.

It would also create a two-tier system as the legacy service provided would be based on universal service provision when the rest of the service offer is based on eligibility. This would create unfairness and impact deliverability of the new service.

Using the current resource pool would ultimately reduce the capacity of the new service to support all those individuals that meet the eligibility criteria as set out in the Care Act to the extent that was intended when the new service was launched. This would therefore adversely impact the benefits identified in the business case approved by the Cabinet in February 2021.

Replacement equipment would need to be purchased at an estimated additional cost of £110,000 to provide the service based on the 2021 budget.

The cost for that equipment would have to be met from the existing budget, adversely impacting the amount of budget available for new equipment, thus reducing the cashable benefits identified in the original business case.

- b) Option 2 - Continue to provide a service for users of legacy equipment and recruit additional resource to manage the demand - The benefit of this option would enable the Council to retain and allocate any calls for repairs and maintenance, including replacement of broken equipment. The resource can be utilised to service requests for the new CT equipment when there is available capacity.

The disadvantages are that this will require staffing and replacement equipment. A dedicated assessor/installer post would be needed at a cost of £30,078 plus subsistence costs of £45,000 to cover visits across the County, plus £110,000 for equipment.

As with Option 1 this option does not achieve the Council's objectives or ambition for the use of technology to deliver the most efficient service. It would also still create a two-tier system with the legacy service being provided on universal service provision when the rest of the service offer is based on eligibility creating unfairness.

The costs of this option would also still have to be met from the existing budget, which would adversely impact delivery of the new CT service and reduce the cashable benefits identified in the original business case.

- c) Option 3 - Commission a third party that could provide the repairs and maintenance service on behalf of the Council - The benefit of this option is that a service partner allocates any calls for repairs and maintenance, including replacement of broken equipment, leaving the Council team to focus on delivery of the new service.

The disadvantages are that this will require budget and contract management/performance monitoring of the successful provider.

The costs would have to be met from the existing budget, again adversely impacting the delivery of the CT service and reducing the cashable benefits identified in the original business case.

It may not be possible to find an organisation that offers specialist repairs and installation. Recent contracts awarded by local councils are for provision of additional support and reablement to those with sensory impairments.

Similarly as with Options 1 and 2, this option also does not achieve the Council's objectives or ambition for the use of technology to deliver the most efficient service would still create a two-tier system with the legacy service being provided on universal service provision when the rest of the service offer is based on eligibility creating unfairness. It would mean operating a dual model.

- d) Option 4 – Align criteria for the legacy equipment with the new care technology offer - Requests for repairs and maintenance for legacy equipment would be considered as part of a care and support assessment review and be subject to Care Act eligibility criteria.

The main benefit of this option places this offer on the same equitable basis as the new equipment provision, to ensure fairness across the service and those it supports.

Those not meeting the eligibility criteria would be signposted to other available support. Many of the legacy devices are available from consumer sites at low cost, and devices could be easily sourced and replaced where they are beyond economical repair. Examples of typical equipment and the costs include:

- Personal Listener – £128;
- TV Loop - £170;
- Doorbell - £40;
- Amplified Phone – £50-£80;
- Smoke Alarm £125;
- Easy to use mobile - £150;
- AutoDial / Emergency Phone - £55.

Under this option, the CT service would be able to focus on delivering the new equipment to those identified as being in most need of support. It would continue to maximise the value of care technology across Leicestershire and driving the benefits to people and the cashable savings identified in the business case.

Resource Implications

38. The consultation process involved the Council's Communications Team, Data and Business Intelligence Team, and the Chief Executive's Policy Team, alongside the Adults and Communities Department.
39. The Director of Law and Governance has been consulted and provided information confirming that the approach being taken is in keeping with the Council's statutory duties under Section 9(1) of the Care Act 2014 where it appears to a local authority

that an adult may have needs for care and support, the authority must assess those needs for support.

40. To set-up the new CT service, funding has been utilised from previous equipment budgets and in-year reserves to fund new equipment. Any additional costs arising from the selected option would have to be met and managed from the existing budget and be within Medium Term Financial Strategy proposals.
41. The Director of Corporate Resources has been consulted on the content of this report.

Timetable for Decisions

42. The outcome of the consultation will be presented to the Cabinet on 10 February 2023 and subject to the Cabinet's agreement the proposed approach will be implemented from 1 April 2023.

Conclusion

43. It is proposed that Option 4 is the preferred approach.
44. Moving from a universal service provision to one based on eligibility is unpopular, with those who have received the service in the past having an expectation that it continues, and particularly in the current economic climate.
45. However, this is a fairer way to provide resources so that the Council can target those most in need of support and ensure equity across the service being provided.
46. Whilst there were more negative comments received, some people did state that they felt people who could afford to pay should and that the Council should focus on those most in need. It was believed that people would try to find ways of paying if it is an essential part of living independently. Whilst 61% (29) disagreed with charging and 86% (24) indicating it would impact them, 40% (12) were fairly or very likely to pay if they were ineligible.
47. People did want more in the way of signposting to other available support where devices can be obtained, and repairs sourced. Further consideration to be given to improving information given by customer services agents and information provided on the County Council's website.
48. The Committee is invited to comment on the outcome of the consultation and the proposed Option 4 approach that requests for repairs and maintenance for legacy equipment be considered as part of a care and support assessment review from 1 April 2023 and be subject to Care Act eligibility criteria to ensure fairness across the service and those it supports.

Background papers

Delivering Wellbeing and opportunity in Leicestershire – Adults and Communities
Department Ambitions and Strategy for 2020-24

Report to the Cabinet: 5 February 2021: Technology Enabled Care
<https://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=6440&Ver=4>

Report to the Adults and Communities Overview and Scrutiny Committee: 7 November 2022 – Consultation on Eligibility for Care Technology
<https://politics.leics.gov.uk/ieListDocuments.aspx?CId=1040&MId=6842&Ver=4>

Circulation under the Local Issues Alert Procedure

49. None.

Equality and Human Rights Implications

50. An Equality and Human Rights Impact screening assessment was undertaken to assess the impact of the creation of the new service and the approach on the protected groups. That screening document indicated that the proposals would not reduce care and would be based on individual assessments and the outcomes for the person.
51. The original Equality and Human Rights Impact screening assessment has been revisited in light of the consultation to identify any potential impact of the proposal (positive and negative, intended and unintended) on people receiving the service and also that the previous service had a focus on people who were deaf or hard of hearing.
52. Users of the former Assistive Technology service were contacted by letter, as were groups specifically involved in supporting people who are deaf and hard of hearing and the views of those who responded are included in this report.
53. The outcome of the review of the original Equality and Human Rights Impact screening assessment was that, overall, it would be neutral impact on the following basis:
 - Discretionary services will stop meaning that individuals will require signposting to other sources of support and specialist suppliers with equipment readily available;
 - People who are deaf or hard of hearing will still be able to access the service if they have eligible care and support needs;
 - The impact on people who are deaf or hard of hearing is assessed overall as neutral. There will be some people who are ineligible and unable to afford equipment and they would see a negative impact. However, there will be people who meet the eligibility criteria for the service. 40% of people who responded to the consultation indicated that they would be likely to pay for a service;
 - Across all groups, the new service and eligibility criteria will deliver a positive impact for the people of Leicestershire;
 - Care technology, used appropriately, will enable service users to be more independent in their own homes or care setting. By adopting the same approach for eligibility across the care technology offer, provision for repairs and maintenance is on the same equitable basis as the new care technology equipment and ensures that all persons in need of support qualify on an equal or comparable basis.

The Public Sector Equality Duty

54. Decision makers evaluating whether or not to pursue the recommended option should have in mind the requirements of the 'Public Sector Equality Duty'.
55. For ready reference, the terms of Section 149 of the Equality Act 2010 are set out in Appendix B attached to this report. Materially, the duty requires public bodies to have due regard to the need to eliminate discrimination and advance equality of opportunity as between groups of persons who share a relevant protected characteristic and persons who do not share such protected characteristics.
56. The legislation explains that advancing equality of opportunity includes removing or minimising disadvantages suffered by persons who share a relevant protected characteristic.
57. It is right to recognise that CT services are routinely provided to persons with protected characteristics. For example, in the case of people with hearing or sight impairments, technology is used to minimise the disadvantages caused by the person's disability.
58. Many individuals with such disabilities will fulfil the eligibility criteria under the Care Act to receive support from the Council. However, some elderly or disabled persons (*and who are deemed in law to have a protected characteristic*) may not meet the eligibility criteria under the Care Act.
59. The issue then is that the Council is proposing to withhold services from certain persons who may have a protected characteristic on the basis that they do not meet the current eligibility criteria.
60. Undoubtedly, the objective of the Public Sector Equality Duty is to ensure that public bodies discharge their various functions in a manner which seeks to minimise discrimination and promote equality between different groups in society. The removal of discretionary services from a group with protected characteristics has the potential to adversely impact on the equality of opportunities as between groups.
61. Of course, the Public Sector Equality Duty does not create an immutable rule that the Council should apply its resources in a particular manner or for the benefit of a particular group (*whether or not they have protected characteristics*). Rather the duty is to have "due regard" to the objectives set out in the legislation.
62. Decision makers should properly have due regard to the impact on those who have historically received discretionary services and who may no longer receive such services (*if they do not meet the eligibility criteria*).
63. However, in this case the Council's goal is broadly to allocate its finite resources to addressing the needs of individuals who demonstrably have the greatest need (*as shown by the fact that they meet eligibility criteria*). Decision makers may then be satisfied that although they have considered the likely impacts of the proposed option it is reasonable (*and not in contravention of the Public Sector Equality Duty*) to adopt the proposed option.

Environmental Implications

64. There are no negative environmental impacts anticipated as part of approach to legacy equipment.

Partnership Working and Associated Issues

65. The CT service already engages with a number of stakeholders including the NHS, the Health and Wellbeing Board, Public Health and local district councils to ensure that the approach aligns with related activity across their sectors.

Risk Assessment

66. There is a risk that some groups will see the changes as negatively impacting people to live safely and independently in their own homes. The mitigation is that the care technology that has been introduced since April 2022, is directly provided to enable people to live safely and independently in their own homes, to support carers and to speed up discharges from hospital and to provide a 24/7 response service.
67. There is a risk that the new service has to split its focus on delivering the new value added equipment if it has to continue to provide repairs and maintenance to legacy equipment. The mitigation is to move to a service based wholly on eligibility.
68. The national charity stated that lives will be put at risk if people do not have access to the appropriate equipment, especially safe and reliable adapted smoke alarms. The mitigation is that these are readily available on the consumer market. The Royal National Institute for Deaf People has links to specialist suppliers of equipment with smoke alarm prices at £55, doorbells and amplified/big button phones from about £40.
69. There is a risk that lack of access to a specialist assessment and the recommendation of safe and reliable assistive devices in the home can lead to people with hearing loss becoming isolated and cut off, which can lead to more complex support needs developing – for example, mental health issues or physical health issues. The mitigation is that a person in need would be assessed and if they were not eligible signposted to a range of reliable and cost-effective alternatives.
70. There is a risk of negative publicity for the Council as people who may have received a service in the past, find that they need an assessment and, as a result, are no longer eligible for the service. The mitigation will be to explain that the service is for those most in need and to signpost to a range of reliable and cost-effective alternatives.

Officers to Contact

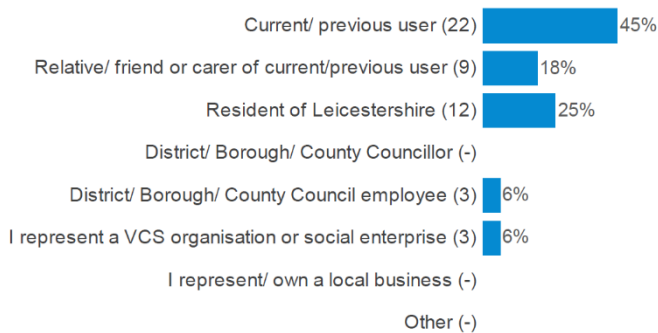
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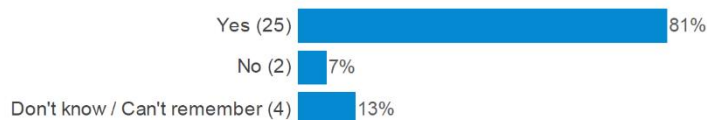
ANALYSES FROM THE CONSULTATION ON ELIGIBILITY FOR CARE TECHNOLOGY SERVICES

This report was generated on 19/12/22. Overall 49 respondents completed this questionnaire. The report has been filtered to show the responses for 'All Respondents'.

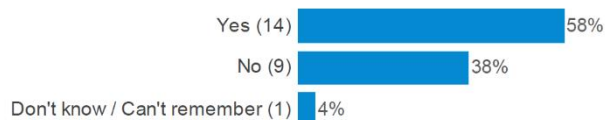
(In what role are you responding to this consultation?)



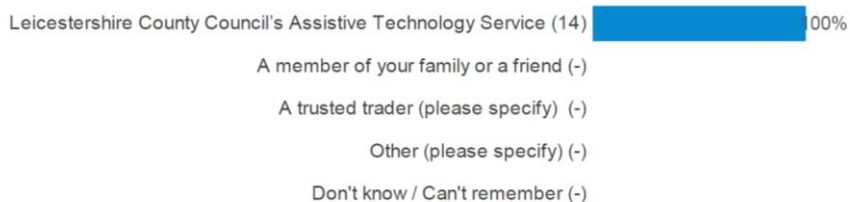
Did you use Leicestershire County Council's Assistive Technology Service (before 25 April 2022)?



In the last 2 years, have you had any legacy equipment maintained or repaired that was supplied by Leicestershire County Council (either by Leicestershire County Council or somebody else)?



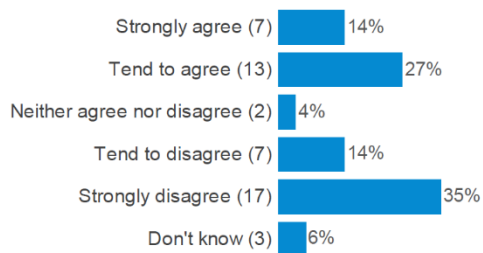
Thinking about the most recent time you had any legacy equipment maintained or repaired, who undertook the repair/maintenance?



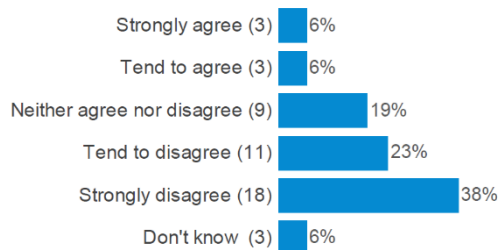
Thinking about the most recent time you had any legacy equipment maintained or repaired, to what extent were you satisfied or dissatisfied with the service you received? (Leicestershire County Council's Assistive Technology Service)



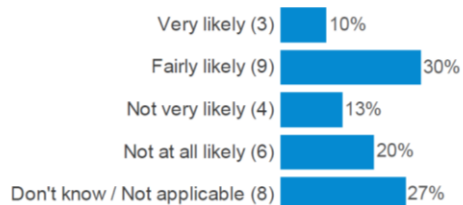
To what extent do you agree or disagree with the above proposed approach?



To what extent do you agree or disagree that the council should charge service users for the repair and maintenance of legacy equipment? ()



Going forward, how likely, if at all, would you be to pay for the repair/maintenance of your legacy equipment should you not meet the eligibility criteria?



In the event that you were not eligible for repairs and maintenance paid for by the Council, to what extent, if at all, would this impact you?



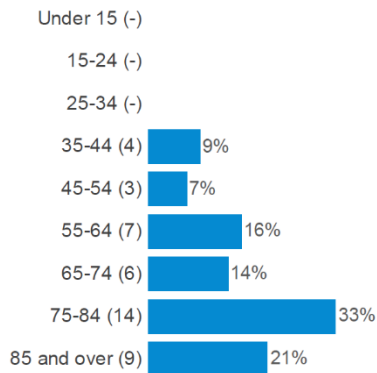
What is your gender?



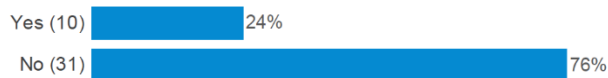
Is the gender you identify with the same as your sex registered at birth?



(What was your age on your last birthday? (derived))

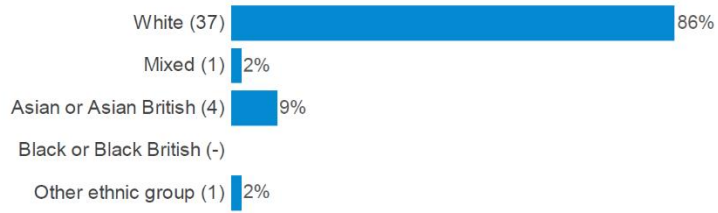


Are you a carer of a person aged 18 or over?



Do you have a long-standing illness, disability or infirmity?



What is your ethnic group?**Are you an employee of Leicestershire County Council?****What is your sexual orientation?**

149 Public sector equality duty

- (1) A public authority must, in the exercise of its functions, have due regard to the need to:
 - (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- (2) A person who is not a public authority but who exercises public functions must, in the exercise of those functions, have due regard to the matters mentioned in subsection (1).
- (3) Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to—
 - (a) remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
 - (b) take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;
 - (c) encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- (4) The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.
- (5) Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:
 - (a) tackle prejudice, and
 - (b) promote understanding.
- (6) Compliance with the duties in this section may involve treating some persons more favourably than others; but that is not to be taken as permitting conduct that would otherwise be prohibited by or under this Act.
- (7) The relevant protected characteristics are:
 - age;
 - disability;

- gender reassignment;
 - pregnancy and maternity;
 - race;
 - religion or belief;
 - sex;
 - sexual orientation.
- (8) A reference to conduct that is prohibited by or under this Act includes a reference to:
- (a) a breach of an equality clause or rule;
 - (b) a breach of a non-discrimination rule.
 - (9) Schedule 18 (exceptions) has effect.

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