

CONSULTATION COMMENTS

Proposal 1 - Removal of a discounted rate for respite stays

Theme: This will make respite unaffordable and will not be used as much, causing further strain on carers:

1. My mother has severe vascular dementia her respite costs me £140 per week for ten weeks as she cannot access the savings that she is being charged on. If you bring in the full charge I will simply not be able to afford £7000 per year - and yet in this survey you are spouting how good a service family carers provide. Without the respite which is the only help I get I will not be able to manage she will be in permanent care and I will be homeless.
2. Respite care is essential for some carers although not suitable for some of those needing care. Asking people to pay more for respite may mean people use it less, putting more strain on the carer. Incidentally, respite care is not always available when the client wants or needs it.
3. The proposal to withdraw the subsidised respite care is particularly distressing. My own health has been seriously affected by the constant demands of caring 24/7, to the point that I was recently admitted to A&E. I was told I needed complete rest and additional medication to help me cope. For the first time I used the respite service at Castle Grange, and it was a godsend. It gave me a few days to recharge my batteries and made me realise how important it was for carers like me to have that break from the constant responsibility. Had I had to pay the full cost I would have found it an added anxiety to contribute to all the others and would severely limit my ability to use this service in future. My GP and the Consultant treating my husband have advised that I must have the occasional respite, but this would not be possible if I had to pay full costs. I still have to maintain the home, and my income is largely dependent on my husband's income. As you so rightly say we carers do an invaluable job in caring for our loved ones, but this is often at the cost of our own health and any help we can get to maintain our own well-being must surely be an advantage to everyone. Don't begrudge us a little respite - after all the subsidised days are limited according to assessment and not available indefinitely. Paid carers get time off, but we don't. I have been so very grateful for the support that Kirklees Council has in place for carers, which has helped enormously at a very difficult time, but I sat down and cried when I read the first question of this survey. We are, after all, a soft target as everyone knows we will do our utmost to ensure our loved ones are looked after. Sadly, this is often at the cost of our own health - and who will care for the carers?
4. I also understand that respite charges are presently based on their ability to pay and should not be increased further as pensions do not increase much yet their utility bills continue to rise as does food etc., To need respite care means they cannot care for themselves without family/friends assistance and they should not be penalised by further increases.
5. Previously respite care was my safety net so as not to have to put my husband into full time care. If this occurs the authority will be even more out of pocket, as one if all clients in Cleckheaton needed beds there would not be sufficient to beds. I feel very angry as for the past 16 years have worked my butt off to care for family, first my mother and now my husband. Have you considered how and for how much

longer, we as carers can keep going? If you have a break you only have to pay for your break, we have to set aside extra to pay for respite care - this will be the last straw that will break the camel's back.- you the authority will not only have one extra person to fund but two , enough is enough.

6. This question is ultimately a choice between some people paying more for services and everybody paying more for services. The charges already seem expensive. If somebody's carers go on holiday for a fortnight, they could be paying £280 for respite care.
7. The life of a carer is tough while I appreciate the ever rising costs allocated respite nights are a way of keeping families together and therefore less pressure on the system if things go wrong the 57 nights of respite I have been allocated for my mum with dementia are invaluable but if we were asked to pay full cost we would possibly not use them the same but at what cost to my own health and wellbeing which may result in me needing support too.
8. The £20 per night option for respite has been really valued and well used by a lot of carers who pay full cost for all their other support. If this option were removed, people may not access respite which could have a knock on effect on their stress and the length of time they can continue to be a carer. It doesn't really square with the policy of not charging carers for services they receive.
9. The reason I do not support charges for respite as proposed is that as a nurse working with carers of people with Dementia, I often put a lot of work into visits before even referring people for allocation of respite services, I then spend a lot of time supporting this respite placement in order for it to be a positive experience. Carers are often reluctant to take that first step, even when it is clear that without it they are hurtling towards a carer breakdown, or their loved ones are becoming increasingly distressed at home. My experience is that the people who may pay more under the proposed scheme are the people most reluctant to try respite care. By introducing the proposed charges there is a strong chance that there will be an increase in carer breakdown cases, or cases will become increasingly complex and difficult to manage. The money saved would be offset by the cost of more people ending up in 24 hour care due to not having easy access to respite when needed (and let's be real 24 hour care placements are severely restricted already).
10. Any increase in payments for respite care at a care home will push people into not using them and increase the burden on the carer, for whom this is their main and possible only respite. Not using options e.g. respite due to choice is one thing and it is not unreasonable to charge for it - but if the person has no choice in the matter, surely this could be reconsidered. Again the carer and family have enough to do and pay for in such usually traumatic situations e.g. hospital admissions or other death in the family that to penalise them further is cruel.
11. It is I, as the main carer that would have to deal with any financial assessment on behalf of my mother, as she is incapable. Currently Mum pays £20 per day for respite stay for a maximum of 28 days.
12. I know that to take this concession away from the first seven nights respite care will be the final straw in reducing the carers ability to continue their ability to care 24/7 for the user, as this is usually the break the carer needs (really needs) to continue caring (and in my case husband has Advanced Parkinson's and Dementia, I am the only carer, from having a complete breakdown myself) with all the dire consequences that it entails for social services and families. In all probability the service would not be used by carers as frequently (if at all) because of financial

constraints on their budgets. Fewer users mean less income for the respite care homes and the council and increased care for those who are now only just coping (if breakdown occurs) then the care services will become increasingly involved putting more strain on the services now provided. My suggestion is that you put the fees up by 25% e.g. £5 per night for the first seven nights or a small increase as the council sees fit.

13. Carers may suffer if they have financial responsibility (i.e. Power of Attorney) for the person they care for, if they face vastly increased respite care costs. They may well feel they shouldn't be spending that person's money, although the carer and their dependent family may in fact need that break from their caring role.
14. The proposal to scrap £20 a night respite will be very counterproductive. I am a social worker in Kirklees. I feel that there are many self-funders who will end up in long term 24 hour care sooner (due to carer breakdown) if this change in policy is adopted, therefore obliterating any saving we may have made by the additional charges for respite (as the sooner they go into 24 hour care, they sooner their funds run out and we end up paying for the 24 hour care). You may think that if a carer needed respite, it will be used whatever the cost; however there are many older people we work with who have been very careful with their money for their whole lives (maybe they lived through the war with this mind-set). As a result, whilst they are self-funders who could technically afford to pay £450 a week or more for respite, they are never going to pay this amount even if they grind themselves into the ground, affecting their own health and precipitating carer breakdown as a result. Also you have the problem that although it is the carer who needs a break, it is the person they care for who has to pay for it- therefore, if the service user refuses respite due to the cost and they have capacity to make the decision, there is nothing the carer can do but try to carry on without the break. As well as the problem of carer breakdown, I feel that the health of many carers will be adversely affected, meaning that they themselves will end up having care needs. This is hardly 'prevent, reduce, delay' or early intervention. I see that Kirklees has to save money, however this proposal will neither save money or benefit Kirklees residents.

Theme: Agree with the proposal:

1. The £20 per night charge for respite services has always, I feel been inequitable.
2. Ok so long as not expected to pay more than for their regular care this could prevent people (+ their carers) from taking breaks - greater likelihood of carer breakdown.

Proposal 2 - Charging for the administration of Appointeeships

Theme: Disagree, concern that the people affected are not able to make an informed choice about the service being charged for:

1. Disabled people whose finances are managed by the council don't always have a choice in the matter. The council imposes upon them its "management" of their finances. The adoption of this proposal would mean that if the council decides to manage somebody's finances, that person would be compelled to submit some of those finances to the council. The person could not choose to stop using the service because they considered it too expensive.

2. It isn't the service users fault if there is no one else who can support them with their money, it would be wrong to penalise someone further by charging them for a service when there is no alternative for them.
3. Quite a few people in supported living / residential care have recently been made to have Kirklees as their appointee without any consultation or reason for the change. These are people who were managing or being supported to manage their finances very well without problems, debts or abuses. I think it is immoral and possibly abusive to then charge them a fee to administer a service these people neither needed nor wanted.
4. They don't pay now & you don't qualify what a 'full charge' is against their actual finances.
5. I do not agree with charging for appointeeships for people that cannot through no fault of their own organise their own finances.
6. I do not agree with you charging people for something they would not choose to have. People need care. People need help to get washed and dressed. People need a person to manage their money. It is due to their illness it is not a choice.

Theme Support the proposal:

1. I support a charge being made by KMC for providing appointeeship but would like to see the same charge levied by service providers who offer the same service.
2. So long as the amount charged does not mean the person hasn't enough to pay for the service they're assessed as needing.

Proposal 3 - Charging for setting up Deferred Payment Arrangements

Theme: Support the proposal:

1. My father paid for his care as he owned a property, which is only right. However, I feel the Council needs to look carefully at older people who have signed over properties, which they still live in, to their children/relatives purely to avoid paying for future care costs. I am aware of a number of people who have made these arrangements. I am sure this would save the Council a considerable sum of money which could be better spent on those who really need the support.
2. It is important to carefully explain the changes. For example people who are to be charged for arrangement of packages for service user funded care in care homes should have the terms explained to them. If the care is poor where does this leave them if they have to leave? Will they get a refund?
3. I think that you should give a time frame for the sale of any properties belonging to someone in care to encourage a speedy sale but giving due regard to the market value. Some people expect too much. Perhaps interest on the 'loan' should be increased the longer the sale takes.
4. If you are taking money from the sale of the house a charge for costs incurred should be made then.
5. This would depend on the size of both charges. They should not be allowed to eat up the capital so that the person may be forced to leave a home where they have friends into a different home at an advanced age. It is common for elderly people to die in these circumstances.

Theme: Against the proposal:

1. I appreciate that the council's budget is reducing, and it's bad enough that the only thing a person may have to pass on is the family home and this having to be sold off, but to charge interest on it also, encourages people not to bother buying their homes in future as it's doubtful that it can be kept. On the other side, if someone doesn't have a home, are they going to get the care or left on the street, as they won't have anything to fund them, if this isn't the case, are you not therefore penalising people who have a home, who maybe have scrimped and saved to buy this.
2. My Mum was in this position before finally qualifying for NHS Continuing Health Care funding. She was assessed as a self-funder despite having little cash and savings but because she had the temerity to own a small house. These vulnerable people are ripped off as it is by the system without adding to their misery. Also, how can this possibly fit with the CCG's crazy proposals for RCRPRT (or whatever they call it)?
3. The council wants to charge people more for care services. They will have less money to meet those extra costs if they have to pay more in deferred payments. As for the legal services argument, the council has spent money on getting legal advice on matters that amount to the undermining of democracy, avoidance of accountability and suppression of criticism. If the council stopped misusing its legal services, there would be more money for legitimate uses of those services.
4. Forcing additional charges on people who cannot pay at the moment but may be able to do so later once a property is sold is placing additional burden on the carer and family of that person, who are stressed enough at the necessity of their loved one being in a home. The value of the property involved may be quite small anyway and the family usually has plenty of additional costs at this time - extra petrol, visits, driving round to do all sorts of jobs, loss of own income to support the loved one, hospital parking charges to visit the loved one to name but the first ones that come to mind.
5. Don't agree to interest charges.
6. I do not agree with deferred payments because they are encouraging debt. People should pay as they go if they are to pay.
7. I believe it is wrong to charge interest for the administration charges on someone's home.

Proposal 4 - Charging for arranging services for people who are above the financial threshold (self-funders)

Theme: Agree with proposal:

1. The threshold could be lowered when the council wants to charge more people for care services. The council has already changed service criteria to make it more difficult for disabled people to access some services. People who use social care services because they have long-term conditions may already be spending a lot of money on the services they use.
2. If the Council want self-funders to pay even more, then quality and standards need to improve.
3. Only support if it is a small charge

Theme: Disagree with proposal:

1. Doesn't seem fair. They may have the money, but not choice other than to have the council arrange this for them (they may have no one else who is able to help them with this). Could end up charging people who have the money but no other option, but people below the threshold could access this service for free - even though they may have a whole network of people who could support with this (family, friends, carers etc.). People shouldn't be penalised when they have no choice but to ask the council for help.
2. Bothering people under these conditions is both worrying and debilitating.
3. Here we go again self-funders will be punished for just doing the right thing and saving for their old age. We have seen at least 3 lots of cut backs targeted at self-funders, and at the same time receive very little in interest on any savings which will most likely be a pension pot. You are expecting self-funders to take the brunt of the savings but not accepting that they are already stretched to their limits.
4. Charging for setting up care for "self-funders" is quite wrong: my understanding is that councils have a responsibility to ensure that vulnerable residents receive care and of course this is usually provided via a block contract. Picking out costs for individual and charging them would be invidious. It appears to me that using the term "self-funders" is leading to an attitude that KMC is operating as a business, via it's dreadfully named "brokerage" enterprise and selling its services, rather than admitting that it is providing vital services for the vulnerable and taxing them where they are deemed able to be taxed.

Proposal 5 - Charging for missed services

Theme: Agree to a point. Feel that reasons for non-attendance/cancellation should be taken into account. Often not the fault or choice of the service user:

1. Unused services allocated should not be chargeable as deterioration in health or mobility from time to time is out of the control of the client.
2. I don't think it's the persons fault if they have to pre-book services and pay for these and then don't end up using them. If it is the fault of the person just not attending for example then yes I don't think that they should get a refund, however if it's not the persons fault then I don't see why they should suffer, I think the process of having to pre-book and pay for a person's future should be looked at and the council being refunded too, again dependant on circumstances.
3. Charging for unused support. It depends on the circumstances. If there is a genuine unforeseen reason i.e. bereavement, hospital admission etc. then there should be no charge made.
4. I strongly agree with people being charged for services not used if no notice is given but there should be some exceptions, i.e. person using service is admitted to hospital.
5. I feel that charges should be on an individual basis, i.e. if there is a bereavement then I don't think it would be fair to charge for services
6. You have to be careful about charges for somebody not turning up they may have a genuine reason for not attending, this must be found out first and a decision made then.

7. This seems totally unacceptable for those who miss due to illness and also for those who are taking advantage of having a break in a short respite care home who are also paying the fees which are applicable to their stay at the care home.
8. Where people are in hospital, and inform the service, it would seem harsh to still charge for the missed service, whereas if people just don't attend for whatever reason, this would seem sensible to ensure that services are used to full capacity by those who want them.
9. There is no 'why can't the service be taken?' there are a myriad of reasons, none of which are taken into consideration.
10. If services set up in advance aren't used by clients, there should be no charge to the client if those staff are able to be deployed elsewhere - which will actually always be the case, given people fall ill and are discharged from hospital needing care on a daily basis. Charging clients for services not used (in the event of unforeseen circumstances or illness or admission to hospital) isn't fair if the council is receiving money from 2 clients for the same staff. Perhaps charge for 1 week maximum.
11. Absences booked well ahead such as a holiday should not be charged for: a disabled or otherwise infirm person may need to take and their carer with them. Having to pay accompanying care, home carer AND accommodate for accompanying cover would mean they could never have a holiday.

Theme: Disagree with proposal:

1. If relevant notice has been given then I do not think a charge should be made.
2. If the relevant notice is received in time and people are still charged for missing their appointments, they are being punished for the council's incompetency. The council is so incompetent, that it doesn't prohibit companies from charging for missed appointments, even though it claims it cannot afford to pay those charges. People may have legitimate reasons for missing services, such as being hospitalised. It is unfair to charge them in such circumstances.
3. If a service is missed without notice the charge can stay in place, but if the required notice has been given you cannot charge as it makes having a notice period irrelevant and seems very unfair. Perhaps this needs to be taken up with the service provider giving the service and asking them to remove charges for things that have been given the required notice to cancel / change and there should be a system in place to offer that place out to someone else at short notice so the service is not lost or wasted.
4. I am a self-funder and therefore pay the full costs of my home care of which I receive 4 visits a day. If I give sufficient notice to the provider of this service to cancel a home care visit e.g. due to hospital appointments etc. It is my understanding that Kirklees council and the self-funding service user are both not charged for these cancelled calls. I do not agree that in future I should pay for a visit which I don't receive, surely it would be most unfair if I am penalised in this way when others get a subsidised service and I have to use my savings to pay for my care.
5. I would support charging if the relevant notice had not been given but refunds should be given if the notice period is met.
6. Charging people for services they miss if they have not given notice is reasonable; however, if the required notice is given, the service user should not be charged. If the LA is charged by the provider when the required notice has been given then that is an issue between Kirklees and the provider, not something the SU should be charged for.

7. How can you think that it is fair to charge for a missed service even if the relevant notice has been received?!
8. This impacts mostly on the carer who is in most cases the person involved in balancing the books. To charge for services not received is against all principles as people already pay for the services they receive. To say the provider is providing the service even if cancelled is ridiculous as the providers just fit you in when not receiving the service every day, and when the girls don't visit they have the same rounds as when they do. This seems like once again targeting the easy targets for maybe being more honest than the majority who withhold the correct information? Self-providers are not wealthy people we earn next to nothing in interest and are just trying to manage being left in a bad situation. Some of you who make the final decision should experience what we are going through without these proposed changes. You will, if given the go ahead remove the cared for Respite, charge for visits not made, and charge a management fee to cap all of this. Where do you think all the extra costs will come from but jointly from both the cared for and the carer as ageing they will most probably have joint finances. You say in the consultation that you value carers but these proposals do the exact opposite, and will only take carers a step nearer total breakdown. So I ask don't take the easy option but look elsewhere.
9. I strongly oppose the proposed charging for "missed" services. I have spoken to Care Assistants and they DO NOT GET PAID for calls cancelled with 24hours notice. It would be quite wrong for the private care companies to charge KMC in these cases and equally wrong for KMC to pass this charge on to the "recipients" of non-existent care.
10. Discriminates between full payers and part payers. Do you not hold the service for people paying the full amount the same way you do for those who pay part of the charges? If so, why do people paying full amount get a refund and those paying part not? Surely those paying the full amount can 'afford' to pay to reserve / hold the service while in hospital more than those who are paying a portion of the charges?

Proposal 6 - No charge for services for carers

Theme: Agree with proposal, keen to continue to recognise the important service that unpaid carers provide:

1. This proposal is confusing. How do you charge someone who gives their own time to care for a relative? Surely Kirklees should be paying them for the work they do which saves the authority money.
2. I do believe there should be some help for unpaid carers like my husband and I to take some of the strain so I do believe means-testing would be an unnecessary stress. Having certain things where we are on a level playing field with other carers is important to me to feel that the community values the contribution of all carers.
3. I feel that supporting unpaid carers contributes to the overall saving of money throughout all councils, without these people the councils would cripple under the pressure of 24hr services required. Enabling the support and continued support for unpaid carers is imperative; remember they save the country billions!!! They are the unsung heroes!!
4. I am pleased that you have decided to continue to not charge carers for the support you give to them.

5. Carers save the council and government a lot of money in resources - the council should support them any way they can. They provide an invaluable service - and can the council really afford to have potential carers not accessing essential services to help them cope with their caring role because of costs and the potential additional stress re money worries etc. If barriers are created then these people may feel it is too difficult/expensive/feel completely alone and everyone out to just get money from them because of circumstances out of their control - which will result in people less willing to take on the mammoth responsibility that being an unpaid carer is. This could mean the council then have to pick up this shortfall/fallout from this - meaning increased costs in the long run (probably in the short term as well), that won't be offset by the money charged to those carers that feel they have no option than to pay to access essential services/support. We would need more adult social care services in place to cope with the increase due to the reduction in people willing to be a carer.
6. You say there will be no charges to carers but respite is a service for carers so that seems inconsistent.
7. I feel strongly that unpaid carers have service free of charge. Life is bad enough! Often the ones who go into care and offset the cost of care with their homes are the elderly and I feel that they should not paying more as they worked all their lives and paid taxes, unless they are wealthy.
8. I think charging carers money for their services is wrong as they are contributing to the efforts of care.
9. I don't think carers should be unpaid.
10. I'm not sure I understand the bit about carer support being free of charge? What would you charge for? Advice?
11. I am an unpaid carer and it is a very hard job and we still need the support of what we can get to help to release some of the stress.
12. In view of the amount of time and effort that most carers freely give, saving the councils, governments and indeed the whole country, untold amounts, more FREE support and services should be provided. In fact instead of the pittance that carers are currently allowed, they should be paid the national living wage as their caring duties are often 24/7, not only 40 hours per week or less. National Insurance has been paid throughout most people's lives supposedly for just these situations.
13. Ultimately carers will carry the responsibilities in an ageing society with restrictions on social care and hospital restrictions. So support and understanding is essential ...respite is needed.
14. It's highly complicated for people in need to understand the system. Vulnerable people getting trapped in difficult personal and financial circumstances and local authority has no further support system at place for those carers/cared for (or both as one or each together). Carers are caring for more than one person at a time with diminishing hope of ability to continue earning if working than the one on benefits and little children are at safe sides. The system is triggered pressurising family or friends choosing caring roles along with managing working also lead to isolation for many cared for people and paying towards through earning or loses earnings. Some carers provide care at their own home to the cared for free accommodation but get nothing but fear of future without job in care need advanced. More personal centred approach to the care is wrongly rigging the system towards personal centred care cost recovery than ensuring citizens to have own right to decide the cost and care options.

15. Unpaid carers save 'the system' a lot of money and I don't think they should have to pay.
16. Services for unpaid carers should not be charged for.
17. Does not make sense to charge carers for a service you don't know how many hours the carer is performing for. Badly worded. I suspect the majority of people that this survey has gone out to would not be able to complete this on line.
18. This question is not clear.
19. To charge people to look after friends and family borders on criminal.
20. Carers do unpaid work and are not appreciated in my opinion. It is hard enough being a carer without having to worry about additional charges and cuts. Kirklees should lobby the Government for more funding as Huddersfield is one of the poorer areas in the country.
21. I would be concerned though if you started charging carers for packages of care where this care was entirely funded by the carer.

Theme: Disagree with proposal:

1. Carers are not unpaid most of them get carers allowance from the department of work and pensions. So they should pay just like people who have illnesses pay. Neither the carer nor the ill person choice their situation so both should be treated equally. If carers do not have to pay then ill should not either.
2. Unpaid carers will often get carers allowance and should pay something towards the services that they access even if it's not the full amount. A sick/disabled service user has a financial assessment so why not the carers as well.

Proposal 7 - Longer period between bills for low cost services like Carephones, and promotion of Direct Debit

Theme: Disagree with proposal, feel that less frequent bills would put more financial pressure on vulnerable people as the amounts would be larger and difficult to afford:

1. Carephone costs are not low cost and would be bigger if sent less frequently.
2. Many elderly do not use Direct Debit as a means of payment.
3. The amount people pay over a quarter is lower than the amount people pay over a year. The more frequently people can pay for services, the easier it will be for them to pay.
4. Paying weekly for everything is a much better option as it reduces the chance of people getting into debt. As the money is not sat in your bank account.
5. I think £5 a week is a lot of money as it is £20 a month. It is probably okay to reduce invoicing but it may impact on some people's ability to pay. I think you could look at domiciliary care charging.
6. As some people cannot save money I think it is best for Direct Debit or some other way to pay. Could it be done with rent or whatever they pay?
7. I certainly don't think that bills for Carephones should be sent less frequently than every quarter. I am sorry to say that it seems to be the case that those who have lived a thrifty life in order to provide a reasonably comfortable old age end up paying for all services they need. By the same token they are helping to pay for the needs of

those who in many cases could have paid for their own if they had not frittered away their income.

8. Small charges on an annual or bi-annual basis are not small to people on a low income.

Theme: Agree with proposal:

1. Twice yearly rather than annual.
2. I would welcome PAPERLESS INVOICES for CAREPHONES wherever possible along with DIRECT DEBIT SCHEME.
3. I find the quality of the invoices received at present is very poor. The information is unclear, and does not comply with any crystal mark guidance. I would have thought that for ongoing items such as care phones, or continuing day care a monthly direct debit should be used to cover the charge. There is no need for all the paperwork to be sent from the council every time I use a service, an annual invoice should be used. If direct debit is to be encouraged, link it to a small discount. Make on line paperless billing available to cut the paperwork, or the care home could print the invoice and give it to me after I have used the service, saving on postage The current billing system is also very slow, it can be months before a bill arrives after the service has been used. This cannot help the budget. It must not be forgotten that services are paid through the council tax, and general income taxation.
4. These should be done as a matter of course as they don't have an adverse impact on any services.
5. Direct debit arrangements should be made where possible, but otherwise a six monthly bill would be a lot to pay all at once?
6. Common sense needs to prevail. If services provided are minimum cost, it makes sense to bill less frequently. If services cost more in general such as respite stays, it would be appreciated if the invoices were sent quicker to reduce the shock of the expense (even though it's to be expected).
7. Suggest - why shouldn't payment in advance be considered?
8. I was a carer for my mother with heart disease and dementia. She had a good care package which she paid for. She had the care phone and other equipment. Looking after someone like my mum was very hard and any support from social care was much appreciated. Billing for services once set up need only be quarterly.
9. Could you please only send bills for such services as contributions to meals, fares and day care services a few times a year also? It is also an extra burden on carers to have to deal with payment of bills every few weeks.
10. Direct Debits annually for CarePhones would be a good idea.

Other common Themes:

Theme: Penalising people who have worked and saved all of their lives:

1. For those who have paid into the system all of their lives to be fleeced at the end of it when they need help is reprehensible. Those who have contributed nothing and saved nothing have everything provided for them. Those who have saved a little for their retirement end up funding those who have spent the lot, or lived on benefits all their lives - which those who contribute have paid for! Just fleece us a little more why don't you. And pray that you do not need care in the future, or your children

will end up with nothing too, even though they spent years caring for elderly relatives.

2. I feel that people who have saved for old age are penalised because they have to pay for any help they get, this seems very unfair to me. On the other hand the people who spend all their income are allowed to have free care, is this right?
3. I feel the elderly and vulnerable in our community need as much assistance as possible and any further charges will be unfair to them as they already suffer often silently enough. In most cases they have contributed to society and in old age we should provide all we can within the community. The Council Tax was recently increased to assist with these costs as I understand it and therefore wonder why these proposals are necessary in view of this fact.
4. Do not penalise people who have paid into the system all their working life. The people who need to pay are those who have not paid in or just walked into our sponge of a country.
5. For people who have paid contributions all their lives care should be free, for those who have not worked, or not worked in this country for the length of time it takes to accrue a full pension then charges should be levied and be proportionate to contributions.
6. I feel that people who have worked all their life and put a bit of money aside are being penalised for people who have never worked/saved and have never contributed to the system.
7. The elderly have often paid tax and national insurance for many years. While I appreciate the council is running on limited resources, these people have paid into the pot for many years, they should be able to access the care they need without having to sell their homes etc.
8. Instead of focusing on the elderly whom most of them have worked hard and paid taxes and are entitled to this care and compassion. Maybe we should focus a little more on the younger generation, who don't work. If after 21 they don't have a job they should be made to do national service. Surely this would save more money and prevent worrying the elderly and their poorly paid carers.
9. Stop penalising the elderly, disabled and vulnerable. It's exploitation of those least able to defend their interests. It is reprehensible to treat them as parasites- the elderly for example have contributed to the system in their productive years. A first world country should be ashamed of such a despicable attitude which encourages exclusion and disrespect of the less fortunate.
10. My father lived alone following the death of my mother. He became chronically ill and required help. He had a small amount of savings £7000, this was means tested and he had to pay for someone to come in once a week for approx. 15/20 mins and cooked him bacon and egg! I worked two days a week with a baby and young child but cared for him the rest of the week. My aunt fell (93 years) she became confused whilst in hospital (previously cared for herself, with care for shopping) it was then decided she couldn't be allowed to return home and would have to go into care, laterally nursing care. We were forced to immediately sell her home to pay for this together with the small amount of savings she had. It disgusts me, people who have saved and paid for their own house through working all their adult lives are treated in this way, but if you are feckless... You get everything for free.
11. Adult Social Care Services seems to be a Service which is being cut or price increased every year. If you have never saved it appears everything comes free. If savings have been made over the lifetime it's all taken away.

12. It really feels inequitable that those who have worked or saved all their life should be penalised in terms of payment for services, whilst others on benefits get these provided. The system does not encourage people to save for retirement, but I appreciate that this is a national approach and not of Kirklees implementation.
13. Over the years my husband and I have made significant contributions to ensure our free care when we became elderly. These proposals suggest charges for our care. Our savings are meant to ensure a comfortable retirement not to subsidise care services.
14. The council provide a good service to people who need care. However there are a lot of inequalities. People who have worked and saved are penalised when they are at their most vulnerable, as it would be their wish to pass their home and assets to their family. But they are left with a small amount to cover their funeral costs and settle their estate. These are often the families who have provided hours of unpaid care and support, whilst trying to hold down their own jobs and look after their family. Is it not traumatic enough watching your loved ones deteriorate without having to go against their hopes and dreams, and lifetime of hard work to provide for their family? Families who are wise to the system safe guard money and assets in advance to avoid paying for care and then receive their care free of charge. Who is chasing them to re coup money?? People who have not saved or gifted property in advance receive their care free of charge. This is a minefield and Kirklees probably don't have the funds to investigate and chase the avoiders, so keep hitting the easy option the honest hardworking people.
15. It feels like self-funders are being penalised yet again for having worked hard and saved. Many have lived a thrifty life, however, the message seems to be to squander all you have and let the Council pay. Do you know what it feels like paying hundreds of pounds each week for a service that is not very good, where relatives have to be on constant watch to make sure that the service meets an acceptable standard, i.e. numerous different carers, having to repeat information over and over and over again to new carers.
16. When someone has worked all their life, why should they have to pay extra after having contributed all their lives, why should they have to pay again?
17. I feel that people who have paid into the system and then have to effectively sell their house to fund their care is something that we find hard to accept, the flip side being people who have not strived or put into the system are getting the same care free, hope this doesn't can be rectified.
18. People who generally use /need / don't want health and social care later in life, was they were told to be covered by their National Insurance Fees paid during their working life. That those funds were misappropriated by various Governments over their lifetime should not now mean that they should have to in effect pay twice for their care. Perhaps carer's /family /friends/ neighbours should charge the going rate that care workers are paid per hour and bill the Council or Government per month plus admin fees.
19. I feel that people who have saved to finance their old age should not have to pay more than necessary just because they have savings. Also some people who are in this situation are often supported by family members so there is no cost to the council for the services that they receive. Surely it is better for an older person to stay in their own home than to go into residential care so why should they be given much higher costs for services.

20. It seems you save for your late years and if you need help you are penalised. Spend up don't pay up. I feel aggrieved that the council wants to know all my business. It's not a criminal offence to save up. Yet forms make you appear so. I saved that money for later I get nothing for caring for a loved one only grief for officialdom!!!
21. I acknowledge funding has dramatically reduced to local councils but I also think where people have worked all their lives they should be allowed to retain their finances for their own personal use - NI is for that!! For people who have contributed all their lives! We need more reliable, well run, comfortable care homes in this country!
22. There should be no charge at all for those who have paid into the NHS all their working life. Make people who have not paid and are exploiting the system be the ones to pay for their requirements.
23. I have read the proposed changes to Adult Social Care and from my own experience and local knowledge do wonder why there are cuts for this service, and yet seemingly not cuts for providing for single parents, who use having a baby as a meal ticket to a better life. Adults who have worked hard all their lives, should not be means tested for any service whatsoever - they have paid their taxes and contributions yet some of these single parents have never, or will never have to work at all, because everything is found for them. IT IS DISGRACEFUL.
24. This paper is the worst I have ever seen presented at the mental health partnership board. It means if you have a house you have to pay the full cost of social care. It is not worth working all your life to buy a house as the council can take it all away if you need care. No-one knows if they're going to need care.
25. I think it is wrong to charge for certain services. If someone in a bed next to you receives the same treatment as you and you have to pay, probably because you have been more careful throughout your life financially, then that seems wrong. It might as well be a "come day, go day" attitude to everything.

Theme: Problems come from central Government:

1. I think more emphasis should be made on putting more pressure on government as councils as a whole across the country to provide adequate budgets and stop squeezing local councils and local health services dry. It's another case of those with money win out and those without get hit harder again.
2. While I understand the need for councils to reduce their costs due to less funding from central government I feel it is grossly unfair to penalise the most vulnerable. I am concerned about the knock on effect meaning more people will end up in A&E departments and hospitals thus stretching our health services which are almost at breaking point. I do support some means testing, but only as an absolute last resort. I think local authorities should look elsewhere to make savings.
3. No hospital no robust infrastructure no care in the community now more cuts to vulnerable. Unacceptable really.
4. This proposal is hitting some of the most vulnerable members of our community. Just like the demise of the NHS those who can least afford it are being made to pay, if not financially then emotionally. If you asked the public I am sure they would pay an extra 1p per £ on their Council Tax to ensure the people who need it get a good service.
5. I really don't think that the government is helping the old age & should be supporting us instead of penalising us all .just because we live longer. I myself am a pensioner & I believe that we all should get these services for free.

6. While I understand that it is this vile government and not the councils per se, which is dramatically reducing or cutting care for the most vulnerable in our society. As a full time carer, the very first time my husband and I are subjected to a financial strip search in order to ascertain our ability to pay for services to help us in the care of my mother, I'm done. It is stressful enough being a full time carer and we receive very little help as it is and a nominal amount financially.
7. We haven't needed to access the above services as yet but I can see we might in the near future. We would be prepared to pay for some services as we have private pension. But I strongly feel that the Government is letting us Senior Citizens down when we are at our most vulnerable.
8. The government will do what it likes. Do they consider we are all wealthy?
9. The reason the council's funding is being cut is that none of the political parties on the council would if in national government, divide all taxes evenly between national government and local government. No local councillor threatens to leave their party if it doesn't depoliticise council funding.

Theme: General positive:

1. I use the care phone service, I am happy the way things are.
2. Our experience shows that when originally assessed for at home care attendance, our Mothers finances attracted Pension Credit Guarantee which effectively cancelled out the expense of the Council's care package. She owns her own home and at 96 pays no rates. Many of the elderly I would guess are in similar positions and so could afford to pay more of what is a subsidised service. The age old argument of people who do not own their own homes get all for free due to no asset value accrued, will always figure in people who do have to pay. The current generation of "renters" will in future, present the councils with severe funding problems and with their debt levels being high, difficult to see how they will be able to afford insurance etc. Personally and with experience, I believe that "receivers" in some cases have a high expectation of what their entitlements are and not matched by what is either required or affordable. Discussions with carers employed would highlight these areas.
3. What has to be will be [signature] 94 years
4. I would like any changes to be genuinely thought through as the possible negative effects for people who use services can be enormous. Many people have grown used to a culture of "services free at the point of delivery", and any move away from that is difficult for people to cope with. The idea of "paying your way" is anathema to many people and this should be taken into consideration and time needs to be spent explaining in a positive way why these charges are necessary. Staff will need training in this so as to avoid the "well you know what councils are like", conversation which does not help anyone.
5. We feel that the proposals made are fair to everyone. It is a good principle that those who can afford to, pay, and that those who cannot afford it should have the same services free. We are the joint Managers of "Batley Care and Drop-In" a voluntary organisation that helps the homeless and those on benefits and with various social and personal needs.
6. I agree that the council need to look at their overall budget and for some who can pay but won't; there should be a charge and for them to provide all of their assets as I know of people who receive a service and can afford to pay do not and pay exactly

the same as someone who has nothing - it is not fair so all I ask for is a fair system where everyone is treated the same.

7. If you can afford to help towards your circumstances, then you should, yet if taking all of someone's money would result in other family members relying on social services, then it is not beneficial to anyone.
8. Personally I feel the Local Authority should do more to recoup debts and not be so quick to write off debts.
9. Debt recovery should be robust.
10. Where service users have sufficient funds to contribute or pay for the services they benefit from, then they should pay.
11. I think Kirklees do very well for us, and these changes are very reasonable.
12. I consider my husband's care each morning of 25 minutes for personal care important to both of us. I do require someone who has been before and for this I would pay a little more in effort to give the carers extra pay and thus make the standard of care improved.
13. The proposed changes are very sensible to my mind. I have one suggestion: monthly letters are sent to me regarding my mother's payments towards her care home fees; would it not be more cost-effective to send emails where appropriate?
14. I think the council and government should instil that everyone pays into an insurance policy from an early age and from now on no matter what their circumstances. The premium could be based on income and for some people be a very low amount. That way it would fall fair for all, as all will have contributed and the council will benefit from more funds and thus care for all.
15. From each according to ability to each according to need K Marx.
16. This is a timely survey where I feel that any charges or costs borne by the council must become recoverable from the means tested.
17. Make sure that only those who can afford to pay are asked to pay. But I believe that those who are on low income at state pension and income support should not be asked to pay.
18. I am all in favour for those who have the ability to pay to be charged for the services outlined. However there must be protection for those who are less able to pay.
19. Adult Social Care services should become funded by lifelong Insurance policies paid by all. Until the State sets up such systems, the responsibility for support and its payment should move towards the service user and their family. These proposals are a small step in the right direction.
20. I think you should increase your standard charge which should be paid by all, except the obvious person (assessed by you) as people don't really like or respond to enquiries as to their financial position. Unless they wish to make a contribution. It is very difficult to be precise, particularly as older people want to be independent, and also everyone should be treated alike, as without this - people can feel unhappy and this causes resentment. You need to show you are being open - as people talk amongst each other and so definite charges are better and then people feel that everyone is being treated fairly.
21. I understand the need for the council saving money wherever it can and thus support all of these proposals.
22. I agree that people should pay what they can afford for services.
23. We like any change by the council which goes in favour of the public. Thanking you.
24. People should pay as much as they can.

25. Any person needing extra care is normally awarded extra money to help pay for it. So this should be used to pay for the services.

Theme: Unhappy with charging and/or increases for social care

1. As a relative newcomer to the world of care and those in need of the services provided by Kirklees I find these changes in the whole a complete insult, while on one hand you want to take away an invaluable asset of care in the community you are also talking about spending millions on new developments like the HD1 project, and closing down A & E departments and throwing money into a practically useless new hospital when we already have one that with a little tender care and attention works perfectly well the whole idea of cutting care for the elderly many of whom like my elderly mother who have paid their way all through their lives should now face the fact they are about to be stabbed in the back by their care in the community providers through no fault of their own.
2. Charging people for these kinds of services makes them less likely to ask for help. They try to cope on their own for longer, putting themselves at risk.
3. Means testing is not the best way to assess someone's ability to pay - a person may have savings but be using the income to survive and pay current essential bills. A better use of money would be to ensure that services offered are efficient, i.e. focused, useful and not duplicating what someone else may have committed to do, although it is rare that anyone of these follows through. Duplication is a waste, so is insisting that e.g. social workers cannot keep a case open for more than one incident. And it would certainly save the council money if a social worker or care navigator were actually able to do the job. Some can but many neither have a clue nor know how to find out what they don't know.
4. If people are struggling to pay for the services they get they should not have to pay set charge as well. Where is the support to old and vulnerable / disabled we have been promised? Not only do we have to worry and have health problems from looking after our daughter for 37 years but we are having financial problems as well as everyone seems to think her benefits will pay for everything she needs. What about the extra living cost due to been severely disabled. Extra pads, clothes, bedding, washing, incontinence pads. You try to buy anything for a disabled person and companies add a couple of £00's on to the bill. And we are worried about services being cut. We are nearly at crisis point and all this stress is making us think of residential place for our daughter before we drop ourselves but oh I forgot your closing residential homes as well!! We have no future to look forward to and it will be social services picking up pieces when we end up in hospital. Apart from services we have no one to help us. Would you change places with us for DLA and her income support. I think not. But you're all going to do the cuts so just get on with it. I just give up.
5. My Mum lived in a council property for most of her life until able to buy her house. She has always been frugal and a saver. She is self-funding because she has sold her house and lives with me and my husband. Her care costs are already £700-£800 a month for about 11 hours a week. We already pay full whack for respite care as we haven't used the local services.
6. Once again the elderly and vulnerable are targeted, and not in a good way.
7. We think that the changes of payment are not welcome to the users. It is not right that if you have funds then they can get help what about the poor pensioners.

8. Where I appreciate the need for guidelines and a code of practise, adult social care is a legal requirement and any administration charges should be absorbed by the Council. I totally agree that people who are in a position to pay for care or will not reveal the financial situation should pay for costs. Maybe some further education for older people about the need to be honest and reveal their finances should be started as a method to allow people to make an informed choice.
9. I think the problem with charging for services means that those who are just out of the benefits range on low incomes but not low enough are the ones who suffer most. I am also suspicious of what can amount to a tax on illness or infirmity.
10. I am a full time carer for my wife, who is bedridden, my 17yr old infirm cat, and an old dog Arthur who has just been diagnosed with kidney failure. Anything the council, government or any other body of people do to make it harder for carers should include the price of a rope noose. And a check on living pensions we get.
11. It seems that proposed changes always target individuals whom have some money which they have most likely worked for. It is not a person's choice to be disabled especially as a young person and charging young adults with disabilities for care often means they will go without this does not mean a need has been met just because an assessment has been carried out.
12. I find it sad a low income aged person has to pay for these services.
13. Once again this is a way of persecuting the disabled and ill people, people who because of their disability/illness cannot get a job to earn money you are taking from them. How are they supposed to live without money? Your care costs are far too high as it is given the standard of care given by some care companies you use.
14. Charges should not act as a deterrent when wishing to purchase services. Decline in purchases may lead to rapid deterioration of health which will put extra burden on other services including A &E and Home Care. Trying to save monies in the short term could be outweighed by the long term costs.
15. It seems as though these changes will lead who are most vulnerable with adverse effect on the financial control they have. It is like a penalty for being vulnerable from the council.
16. I have been cautious with my answers because having need of your service means a household is already living in a stressful situation and I feel that, though I realise cost to the council have to be kept to a minimum, you are not adding to that stress in recovering charges. Stones do not bleed and most people have paid taxes to cover these things.
17. You have already increased the amount we pay for my mum's care by 5.5% (since April). I will be extremely annoyed if I find that Kirklees are considering another increase on top of this. I was prepared to let it go in April without objection as I know the minimum wage has been increased. However I will not stand by and take another hit on charges if that is what you are saying. I find it most offensive to think my mum and dad worked all their lives paying all their dues and not taking a penny out of the system but when it comes to them needing care in old age because they have scrimped and saved all their lives and have some savings they are penalised. Quite disgusting and wicked.
18. We feel we pay enough Carephone charges now. We have not used the facility since it was installed.
19. The people carers I look after spend their money on themselves then on the person who needs the care. Then they ask friend to look after their love one. It's a joke. The money is for care not presents and meals.

20. It is my opinion that there is no justification whatsoever to increase, or newly introduce, charges for any aspect of care.
21. As with most government/council consultation proposals I feel that the option to comment is a waste of time as I feel that the council has already decided what to do whatever the feelings of the public are concerned. Yet another cut to people's rights. If you fall in the bracket between wealthy and poor you will be penalised.
22. I expect the charges going up but not by the rate they have charged me.
23. As a self-funding service user, I am not wealthy by any means. I object to having to pay more for my care etc. purely and simply to make up for the cost of care for those who access their care for free. Years ago when I worked for KMC, care was free for all. Why should I subsidise those who have been proliferate or sponged off the state for years.
24. I don't think these proposed charges are fair at all, why should we make the most vulnerable people in society pay the bill!??!
25. I see again due to government/ Kirklees cost cuts and trying to make savings, the proposed changes to adult social care services will hit those who need/ are vulnerable/ old who have saved all their lives and now in err to more costs.
26. I just think I pay enough. I have had two holidays in the last 26 years. I looked after my husband for 11 years. He had dementia and was incontinent all that time. I also had breast cancer twice. The last time I had a double mastectomy. I took him with me to [hospital] every day for a month while I had my radio therapy. I had to take 2 changes of clothes in case he had an accident. I have had 2 hips and 1 knee replacements. These are the reasons I have over the limit because I can't get out. I have fallen twice and that hasn't helped my hips. I think I am being penalised.
27. I believe the carers in this community and service users need all the money they have and by introducing charges for all these things in this survey would mean carers are not as willing to assist in helping those who need it. Also, the service users will be more demanding upon the council for additional care and why do you not get the funds you need to recoup from such things as wasted money i.e. red tape charges make things more simple cut out all the extra departments who us as carers cannot get in touch with for advice.
28. If these proposals are carried out it may well help the council to balance its books in the short term but they will significantly increase the hardship for a client group who are by definition extremely vulnerable and for whom life is already difficult enough. It will have the effect intended or otherwise of putting the people off who need these services the most and could potentially cost the council more in the long run and people struggle more and end in even more unwell/ vulnerable than they already are due to the increased poverty this will create. This will have a knock on effect on other services and could therefore become self-defeating.
29. It is a very good service that we currently have. However it is important that all services are not allocated on the basis of ability to pay. It would appear from these questions that in future this could be tainted in this way. Fairness for all. Do not be seen as robbing the slightly better off to pay for those not so worse off.
30. Service users who are only just above the self-funding threshold find it both difficult and very worrying to meet the consistent increase in charges - not only in respect of Adult Social Services but also in respect of their other on-going costs - especially keeping warm. I am 89 years old, totally housebound, registered blind, live on my own and have very limited mobility. I therefore have a very large gas and electric bill (in relation to income) in addition to paying over £650 per month to Kirklees Adult

Services. Please strive to keep any increase in charges to the same percentage annual increase in the basic state pension.

31. This will hit carers as well as the cared for even if they have some savings this will be eroded due to the small interest being paid over the last 3/4 years. They could be the only honest ones around but seem to be targeted once again. Most carers will have joint incomes linked in some way to the cared for so what you are proposing is to take away some of the carers savings as well. You acknowledge carers carry out a vital service but in the case of self-funders you will hit them just as hard when they are already struggling in very difficult conditions. Not only taking away respite for the cared for, but also charging for services they do not receive, and if that's not enough charging them for this. Self-funders are struggling as we seem to have taken the brunt of all of the cuts up to date.
32. I understand Cllrs have been aware of failings in charging only for care provided for a long time and still the Council is failing in its duty of care to residents. Sort out the provision of care, how much private for profit companies are being paid for care not provided, this is a waste of public money and look at poor performing management within the Adult Service who sacked council care staff stating they could provide better care for less but now show they can't manage contracting with private providers. Charges paid to care providers I understand are more than the published £12.50 per hour rates quoted by the Council which is resulting in client who manage their own care receiving less funding that they should. Let's see some reduction in top management and well paid project officers that don't help residents and collect the mountain of debt I have been told Adult services have not collected. Truly a disgrace in Public Service! How can Cllrs sleep at night when the most needy in our area are being cheated, while council staff get very well paid for repeated failure? I am informed that currently Kirklees Council is failing to meet Care Act regulations too!
33. Not satisfied with cutting the carers respite, but also proposing charging for services not received, and a management fee on top. This will affect carers just the same as the cared for as in most cases they will have joint finances. This will take them just one step nearer breakdown.

Theme: Unhappy with the use of social care money:

1. I do not understand why the council is still struggling when Council Tax bills were put up by 2% specifically to help funding for social care and the government says they are adding in more money as well. Where is all this money being spent???
2. It would appear that those most needing some assistance are now being seen as a source of income by the council. I'm sure a lot of people think that the taxes they are forced to pay should be used for the benefit of those in the town. Not for stupid schemes dreamt up by councillors and their overpaid executive officers.
3. You ought to be thoroughly ashamed of yourselves! Get rid of the top earners or cut their pay. Leave the sick and vulnerable alone!
4. If the council stopped paying the people at the top more than 5 times the minimum wage, there would be more money to spend on social care. If the council made the able relatives of people who rely on social care services meet the costs of those services partially or fully instead of charging the service users, and if the money the council spends on a person's social care came from the council taxes of their able relatives, their able relatives may do more, enabling the council to do less.

5. I think it's ridiculous. Yet again the council are just finding money making ways and preying off the vulnerable.
6. I don't feel the proposed charges and changes have been fully thought through, some of these options are just moving the debts from the service onto the user.
7. People with severe disabilities are very vulnerable; your actions will make these people who are already worried about their futures more anxious. Why don't the people on big salaries who work for Kirklees council take a pay cut and leave the vulnerable people to try and live their lives without the extra stress you're trying to impose on them.
8. I would assume that all the changes in administration of the proposed cuts to funding will mean a similar reduction to staffing costs.
9. Look elsewhere for savings i.e. print all paper work in English not in umpteen languages. you are going to have to come to terms with the fact that older people need looking after at some time in later life and it is becoming more obvious that the N H S cannot .Social Care should mean Social Care not can you pay CARE.
10. All the 60% budget you are going to use on golden handouts to management. Very very large checks when they leave. When cuts come in next year for management. That is why you are saying you have a reduced budget. Pack Lies. So you are going to charge service users for care. SHAME ON YOU UNCARING NAZIS. THIS NOT THE CASE THE 60% KIRKLEES BUDGET WAS TO IMPROVE CARE TO ADULT SOCIAL CARE. Not to line pockets of management. Thousands of Kirklees staff have been made to leave their jobs with no large golden handouts, to help funding to Social care services. To help service users. Waste of time.
11. If Kirklees stopped wasting money on other things these charges would not have to be charged, some older people may be left unable to manage.
12. If you need to put the services up now just consider you will have even less cash after paying for yet another survey. That is what I think!

Theme: Comments about Service quality:

1. If we as the recipient did receive good caring in the community it is right we pay for it but so often the time allocated to give care is cut to the bone (pay for 45 min call and am lucky if my husband gets 8 mins) this leaves me the carer to prop the system up yet still pay full whack. I prefer to have control of our bills which unfortunately for care costs more than we can afford, i.e. at the moment I have had to subsidise the cost so have no savings left. What we will do now I do not know.
2. The Services should be enhanced at a time when people are living longer and some with complex health/social care needs.
3. I would be concerned that the focus is on finances and not care! It needs to be clear that delaying the execution of care in favour of filling out additional admin is not ok!
4. I am concerned that these proposals target those least able to speak out for themselves. I feel that the council has a responsibility to provide a high standard of care for vulnerable adults. These proposals would jeopardise that and I feel that would be extremely detrimental.
5. We currently have a major issue with invoices having 3 and 4 stays in respite which are quite a considerable amount, which covers possibly a period of 3 months but there appears no such delay in sending out reminders. If someone can explain the difference between receiving one and the other I would appreciate any feedback. In any other transaction a bill/invoice would be produced per item.

6. Personally speaking you could save a lot of money by having a more efficient finance dept. They send inaccurate invoices out to consumers who then have to waste precious time on the phone every month trying to rectify the mistakes which are then still repeated nearly every month. Costly and time consuming.
7. It is now the end of October and we have not received an invoice since March.
8. I think when a client needs social care services they are usually at a low point. I personally have found the system very difficult to navigate and after 7 months the financial situation is still not sorted, causing me a lot of stress. Staff do as much as they can within the constraints of policy and procedures. A streamlined system, more working together of the various departments is necessary to speed up the process.
9. It seems that to obtain care services for our 96 year old mother, we had to complete comprehensive proformas which is understandable. But having to fill in the same questionnaires THREE times for three different organisations seems a bit silly. Can we not just fill it in once and share the information. We also seem to be speaking to several different offices - Kirklees, Dewsbury Hospital and the Health Centre at Dewsbury / Heckmondwike. Often we are confused as to who it is we are speaking to and we are the carers. How elderly people manage this on their own I have no idea.
10. I am not opposed to you making changes or charging but the quality has to match and in my experience the quality of services is lacking- I understand this is often due to limited time and funds, but if we are going to pay more this needs sorting out.
11. Proposed changes?? I was informed on 21 set that my daughter [name] day-care charge was being increased and dated back to 1st June. I am curious as to why it took such a long time to let me know?

Theme: General unhappiness

1. Talk about kicking people when they're down.
2. This is getting silly now.
3. The ones we don't agree with leave them alone, don't touch them at all.
4. You are a bunch of overpaid idiots.
5. Stop lying to your service users. Stop lying and cheating the people you are there to help. You are a complete waste of time let's hope you don't lose your job and get thrown out of your mortgage homes.
6. Some of your questions are loaded and contain bias. Please ensure that in future when you design a survey you take advice from researchers. A council is there to represent the whole community, it is not a political platform for neo - left or right wing fascists to impose their political bias. Please remember that the people who pay for "your" services are tax payers who expect you to behave in a responsible and fair manner.
7. All it means is you bleed them dry till they are dead or paupers.
8. Can't see the point of this survey as it has already been decided to implement these changes. Don't think what people say here is going to make any difference.

Theme: Other Social Care related comments:

1. Care phone system needs complete overhaul - we have been called 100's of times to check on our mother when she pays for a carephone service. We have also been in the position of having a paramedic respond to mum as there was no Rapid Response Team available - a service which is paid for as part of the carephone service. Most

phone operators are friendly and efficient; some however, are downright rude especially when for what is a legitimate reason e.g. childcare issues they are asked to send the RRT instead of a relative attending. I also have issues with the response times of the RRT - one call was logged at 8.30pm - the RRT log logged attendance in response to this call over 6 hours later - this in no way can be called rapid!!

2. You may already offer this but could you offer an 'added value' package of products and services to unpaid carers? E.g. respite could be a trip out for a meal at lunchtime or a service delivered to the house e.g. foot massage etc. A welcome to the club approach. Links to other organisations, charities, private sector and promoting social responsibility etc.
3. Perhaps take more action to chase payments from people who refused to pay their assessed charge/debtors/abuse direct payments /personal budgets?
4. Although I understand the proposed changes I do object to the council proposing charges when providers are condemned and penalised for charging a third party top up. When a social worker rings a service the first question they ask is 'do you charge a top up?' If the response is yes, the phone is put down, depriving the service user of a potential bed and the service from potential client. Funding is not sufficient to meet the required standards. Adult Social Care teams need to be understanding of this and, if they are unable to increase revenue, should not block providers from charging a third party contribution.
5. Will there be changes to the financial assessment criteria?
6. It is very important that whoever is paying for a service has enough left to pay for taxis, a social life and good food as required - without a reasonable standard of life they and their carer's health will suffer.
7. I am in the early stages of Alzheimer's. My support of these measures is 'measured' and thus, cautious. Something is missing from this questionnaire - that is, any enquiry as to a person's needs, situation and condition - and whether these aspects are reviewed on a regular basis. In my own case [I have a Care Phone and I'm being monitored by the Memory Service at Folly Hall [FH] - now transferred to my GP - who will not I suspect provide FH's specialist services - we shall see] my current situation is manageable. But I suspect that with 6 monthly monitoring via FH + plus the Care Phone - I am adequately covered. I suspect that the outcomes of this questionnaire will be aggregated - providing a useful, but 'broad-brush' picture of the general situation. Ergo - personal circumstances are not specifically recorded. How will these be covered/monitored over time? Annually? Or is this a one-off exercise? I would be grateful for your response to my queries in due course.
8. There should still be an amount of flexibility in difficult circumstances.
9. Direct payments should be completely overhauled as so much money is paid out unnecessarily and not clawed back. DP accounts should be monitored a lot more closely and any issues about over / under spend not left until a review takes place to correct this.
10. The domestic rates demand for 2016/2017 included a 2% increase in the level of rates in respect of Adult Services Care - this would bring in in broad terms an extra £16,000, 000 - does this mean you are not only wanting everyone to pay more up front but also to make added possible added payments re the content of the survey - I make no further comment.
11. I am not impressed with your processors, having been involved now for a few years. You need to provide people with all the information so they can make the right choices and you should turn up to meetings. In my opinion from what I have

- experienced, your system is badly run and waste money and resources. If you want to save money you need to look at your own processes first and apply the same principles as a private company would. Your process should be clear and simple for the client to understand and the client and relatives should be kept up to date.
12. The emphasis should always be placed on the treatment of the disabled and support for the carer, not on the administration of those services.
 13. I would like to see people who are fit and healthy both physically and mentally not taking benefits and services that are much needed by the people who really need them.
 14. Carers should be given petrol and snack allowance to spend on service users within limits. Service users should have the freedom to choose whether they want female or male carers and what hours and days they are allocated.
 15. Financial circumstances - does this include savings or income from savings b) How often are a person's financial circumstances checked c) Do you consider - a single person living alone in a house has to pay full rates, whereas 2 persons living in a house each pays 50% of rates d) This proposal would be costly for the council to operate, particularly with regard to elderly people who often need hospitalisation for a few days or weeks. Hospital visiting is costly and could be a drain on a partner's finances (or members of the family) I support this just a little because following an emergency accident the council can, almost immediately, arrange care for one week. From my own personal experience it cost me over £800 for 8 days 24 hr care. I do not know who arranged this, after 8 days I had a stroke and was hospitalised. It is cheaper to arrange domestic help personally.
 16. I am quite independent. Only thing is a carephone which was put in for my late husband. I don't know if this applies to me or not.
 17. Genuinely disabled people shouldn't or wouldn't mind helping financially towards their care, however this amount should represent their financial status and charged accordingly (e.g. a homeowner is charged more than a council tenant).
 18. Once the person has either gone into residential care or died. It is up the family to return. Equipment I made sure that her wheelchair and other equipment went back to supplies.....but how many people don't return these products. No one was aware mum had died until I informed them.....so how much equipment goes missing??
 19. I strongly feel that the Council would save a tremendous amount of money in paper and postage if they sent out clearly detailed invoices for services instead of reams of unintelligible terms and calculations that do nothing but confuse elderly people.
 20. Changes to services cause difficulty to carers and care users.

Theme: General Council comments:

1. We value the Carephone and the care my mother receives, for which she pays. We do hope that the council considers carefully its priorities in future, as it seems to be making some questionable decisions of late, viz bus gates and loans for hotels and ski slopes. The care of the vulnerable must remain a priority.
2. Like all your cash cow speed cameras in Huddersfield this is also a cash cow job.
3. Kirklees needs to prioritise its spending on people who need support and not vanity schemes like bus gates, HD1 loans, etc.
4. Kirklees residents already pay a yearly charge through council tax for adult services so would this mean it reduces.

5. You need to cut out silly costs, like putting flowers on the ring road in Huddersfield and silly projects and use the money you get more effectively, a crackdown needs to be made on vanity projects.
6. If the Council want to save money, maybe more thought should have been given on some of the town centre 'improvements' on High Street, with raised pavements that are a risk to many and a dodgy cycle lane, signs all over which I believe are encouraging people to exercise. Also, less senior managers etc.
7. My partner as my carer could do with a bus pass, as he got refused when he applied. Why I am asking is as it is expensive going into town when he does shopping if and when then someone comes and sits with me while he comes back home (respite period).
8. Use the cheapest methods of communication wherever possible. Letters cost more than text/email and most people can use these/have access to them.

Theme: Comments about the survey itself:

1. Where there is mention of introducing administration fees, it is hard to make an informed decision on my level of support without knowing the details of how the admin fee will be calculated and at what level the charges will be set.
2. There is no mention in these questions of how much the charges are likely to be. It's difficult to know whether to support something or not if you don't know the cost, even approximately.
3. It is difficult to be completely confident with my answers as you do not give any indication of charges/interest to be charged.
4. The questions in this survey are very broad ranging and to give specific answers to such questions is very difficult without more information being made available.
5. This is too complicated for me.
6. I wonder why you have chosen 5 different options for these proposals. Surely you either support a particular proposal or you don't support it. What is the difference between 'don't really support' and 'don't support at all'.
7. It is not possible to give an informed opinion about these proposals because details of the impact these proposals will have on the people affected are unknown. No indication of the increase in costs to those people affected is given. And no indication of the savings the Council expects to make is given. If an impact assessment was carried out on the effect of these proposals then why were the details of the assessment not given in this survey?