



**Healthwatch Gateshead
Social Care Consultation Event
'Have Your Say' on
Gateshead Council Budget
Proposals 2016 - 2018**



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HEALTHWATCH NATIONALLY AND LOCALLY

Healthwatch Gateshead was established under the Health and Social Care Act 2012 and came into existence on 1st April 2013.

Healthwatch Gateshead is the independent local consumer champion across Gateshead for health and social care.

Healthwatch's role is to provide an opportunity for local residents and minority groups to have a stronger voice to influence and challenge how health and social care is provided locally.

Our role is to bring together residents' views and experience of local health and social care services and use this feedback, to build a picture of quality services and where they can be improved.

Our role is also to provide residents with information about the choices they have and what they can do if the service provided is not up to standard

Nationally the Healthwatch Network is made up of England in place to offer leadership, guidance and issues with the government.



Gateshead Council's Proposed Social Care Budget 2016 – 2018

Context

Healthwatch Gateshead 's primary role is to provide the opportunity for local residents to have a stronger voice to influence and challenge how their health and social care is provided locally. Residents need up to date information on any proposed changes to health and social care services to enable them present constructive and informed comments to Gateshead Council and have the chance for their voice to be heard.

Gateshead Council issued budget consultation papers, covering Adult Social care, Children Services and Public Health. Healthwatch Gateshead (HWG) decided that it would communicate the council's proposed consultation, but in the time available and within its limited resource it could only concentrate on one of the consultations and on this occasion choose the Social Care Budget proposals. HWG did offer all those organisations and individuals the opportunity to provide feedback to Healthwatch on their concerns and that these would be included in this report.

The council basis for this latest budget review is as follows;

- Gateshead Council has £300 less per person on which they have to spend on local services
- A reduction in work force of over 2,000 jobs.
- Estimated funding gap of around £50.6m over the next 2 years (2016 – 2018)
- An increasing population and a growing number of vulnerable residents requiring complex health and social care support
- New Council Plan 2015- 2020 focus' on working with partners and others, to deliver positive outcomes for Gateshead residents

Gateshead Council proposals are to prioritise the spend on Adult Social Care in order to;

- Meet their obligations to support adults and their carers, keeping people healthy, safe, equal and feeling good about living in Gateshead, including the most vulnerable adults.
- Meets the needs of residents in the most efficient way and keep vulnerable people as independent as possible.

The consultation document for 2016 – 2018 was launched by Gateshead Council on 2 November 2015, available via their website. Responses to the proposals have to be submitted by the 31st December 2015.

The Social Care budget consultation in summary covers the following draft proposals;

- Re-commission Independent Supported Living Schemes
- Increase income to Care Call
- Re-commission Learning Disability care packages
- Review of support for people to live independently
- Reduce domiciliary care packages by enhanced early intervention
- Reduce residential care admissions
- Reduce housing adaptations work
- Re-provide extra care schemes
- Re-commission day services
- Revise demand management model for adult social care

Methodology

Fact Finding

Healthwatch Gateshead contacted key stakeholders in the Voluntary and Community Sector to ensure that they were aware of the consultation and to understand what action they were undertaking or considering in response to the consultation. This was to establish whether they were aware of the proposals, the consultation timescale and whether they had initiated or had planned to initiate an organisational response. Healthwatch Gateshead also wanted to establish whether they had passed on information regarding the consultation to their service users and service users' families. In-addition Healthwatch Gateshead wrote directly to those individuals whom it knew are receiving the potentially affected services.

In summary there were three major concerns: -

Firstly

- Of the 20 proposals listed across Adult Social Care and Children's Services there was serious concern and worry that 16 proposals would directly impact on carers making their caring role more intensive and increasing the length of their caring role.
- Initially the proposals did not include any impact statements, Healthwatch Gateshead did raise this with Gateshead Council. The lack of impact statements made it very difficult for any reader to understand what the proposals would actually mean for them or for those that they provided care. Subsequently impact statements were added to the proposals.
- Significant numbers of individuals receive care via third parties and because of the manner in which the council has advertised these proposals, are unaware of what impact it may have on the provision of their third parties' services to be able to comment. They are relying on the organisation who provide their third parties to put forward views which support their needs.

Secondly

- Limited availability of paper copies of the proposals, therefore those able to respond to the consultation restricted to those residents who have the necessary skills to access the Council website and the appropriate technology to read and/or print the proposals. The manner in which the documents have been put on the website makes the printing of the full set of proposals difficult.
- The tight financial climate prevented charities from bearing the cost of reproducing much needed hard copies for their clients.

- Expecting all residents of Gateshead to access the council website to gain access to the consultation document has disenfranchised those sections of society who due to their limited abilities may be constrained from feeding into the consultation, such as people with sensory impairments, people with learning disabilities, older people who have no access to the internet.
- Concern that the approach to publishing the consultation was deliberately kept low keyed and potentially will not be seen and fair and equitable to all Gateshead residents.
- Concern that the lack of inclusivity for all sectors of society seems contrary to the council's responsibility to ensure that there is the opportunity for all sections of the community to have the opportunity to comment on all proposals.

Thirdly

- In the current tight financial constraints charities will not be able to respond to any cuts in service.
- Any change that increases the social isolation of vulnerable individuals will have impact on their health and wellbeing leading to greater demands on both the health and social care services. There have been a number of studies on the detrimental impact of social isolation e.g. The Social Care Institute for Excellence, BBC all identifying the increased cost in healthcare which could have been alleviated by relatively small sums of money invested appropriately. There has been similar research into the importance of respite care for families whose home care saves the council substantial sums.

Approach

In response to concerns regarding the lack of knowledge of the proposed consultation, Healthwatch Gateshead took a four-step approach to informing Gateshead residents;

- Evaluate the information available to residents on the Gateshead Council made the proposals, make the council aware of any early concerns such as lack of impact assessments, limited paper copies, restricting access to IT literate residents. These factors would decrease the quality of responses received by the council.
- Communication exercise to make Gateshead residents, carers and local organisations (voluntary and private) delivering health and social care services aware of Gateshead Council's budget proposals timescale and consultation on Social Care services for 2016 to 2018.
- Organise an event for local residents, organisations and professionals to make them aware of the consultation. Provide transport for those residents who wished to attend but due to their particular disability would find it difficult to attend. Liaise with Gateshead Council to provide a speaker to present the proposal, the presenter was the Service Director for Social Care and Independent Living.
- Encourage residents to respond to the consultation either as individuals directly to Gateshead Council or as part of a Healthwatch Gateshead's formal response.

Raising Awareness

Details of the consultation and links to the Gateshead Council web pages were publicised through our own networks, our partners and stakeholders' networks. We used a variety of social media to advertised our event locally via; -

- Healthwatch Gateshead's (HWG) E news circulation list
- Healthwatch Gateshead Website
- Postal invites to local residents who have registered on HWG database
- Social Media (i.e. Twitter, Facebook)
- Local networks and community groups
- HWG stakeholder and partner networks
- Targeted providers of services i.e. Community and Voluntary Sector organisations delivering Health and Social Care services in the Borough.
- Circulation to all Local Authority Partnerships: Carers, Learning Disabilities, Older Persons, Mental Health, Physical Disability and Sensory Impairment Partnership and the Diversity Forum.
- Gateshead Council agreed to send our mail shot to service users and carers that access Local Authority services

Copy of event flyer is [Appendix 1](#).

Planning the event

The event was held on 3rd December 2015 at Gateshead Masonic Hall, Alexandra Rd, Gateshead. NE8 1RE, from 10am until 1pm.

Copy of event agenda is [Appendix 2](#).

Attendance

The event was attended by a diverse cross section of residents and stakeholders.

Total attendance	78
Evaluation forms completed	57
Individuals	58
Organisations	13

The event was opened by Healthwatch Gateshead to set the context followed by an overview of the consultation by Michael Laing Service Director for Social Care and Independent Living. There was then the opportunity to ask initial questions or gain clarity on any aspect of the proposals.

Workshops

Workshops were then set up to look at specific proposals in relation to specific communities of interest. Workshops were divided into two groups:

Group	Proposal for discussion
1. Residents with Learning Disabilities and their Carers:	Proposal 1 – Re-commission of Independent Supported Living schemes Proposal 3 – Re-commission of Learning Disability Care Packages Proposal 9 – Re-commission Day Services (Marquis Way, Wrekenton Hub, and Winlaton Community Centre)
2. Residents who are Older People and their Carers	Proposal 5 - Reduce domiciliary care packages by enhanced early intervention Proposal 6 - Reduce Residential Care Admissions

Healthwatch Gateshead provided facilitators and scribes for each workshop. The facilitator's role was to encourage residents and carers to discuss the budget proposals and highlight any potential concerns and impact service users and carers may identify for themselves and/ or others should these proposals be implemented.

The *scribe* noted the discussion and put the agreed key points onto a flipchart.

At the end of the workshop, facilitators were provided with the opportunity to feedback to everyone in the room, covering one key point from each table.

Snap Shot of Comments

A full breakdown of all comments made on the day, which form part of this report and will be fed into the Councils consultation are at Appendix 3.

A snap shot of some key comments are;

Group 1 - Proposal 1 Re-commission of Independent Supported Living schemes

“How can you make the consultation meaningful, some vulnerable adults don’t understand the proposals”

“If day support is reduced, respite is going to be an issue for carers/families”

“Why push people into independent living from shared lives in the community?”

“These are our choices, our feelings, our opinions, wants and wishes of how we want to live our life. Are these not valid now?”

Group 1 - Proposal 3 - Re-commission of Learning Disability Care Packages

“If an individual was assessed as needing a service before, they are still going to need that service and have the same or sometimes more needs?”

“Conflicting information, staff don’t understand what was going on”

“I have a trusted relationship with current provider. This is very, very important to me and my family. This has taken years to build. You can’t replace this in weeks – it’ll take years – how do I cope in the meantime”

Group 1 – Proposal 9 – Re-commission Day Services (Marquis Way, Wrekenton Hub, and Winlaton Community Centre

“More able people should be able to choose alternative types of provision i.e. Harvest and Help for gardening”

“I am scared the quality of provision might be poorer”

Group 2 – Proposal 5 Reduce domiciliary care packages by enhanced early intervention

“Short term assessment critical in preventing long term care needs”

“Early intervention and reducing domiciliary care is preventative and therefore costs less in the long run”

Group 2 – Proposal 6 Reduced Residential care admissions

“Increased demand and increased cost of living will put more pressure on the 3rd Sector”

“What will be done to support carers?”

Summary of Key Concerns

The feedback to Healthwatch Gateshead from engaging with residents, carers and stakeholders regarding Gateshead Council's Budget Proposals on Social Care covers the following areas:

- Impact on the voluntary and community sector,
- Impact on carers and
- Impact on service users

Impact on the Voluntary and Community Sector

In this economic climate there is concern from the voluntary and community sector that the major impact of the cuts in service will fall on them and in the current economic climate they are already struggling to meet increased demands and are having to make hard decisions regarding whom they can help. These proposed cuts will make matters worse.

Impact on carers

Carers are concerned that some of the budget proposals may have a massive detrimental impact on their lives. Carers stated change is often traumatic, particularly for vulnerable people and their carers. Carers need to be re-assessed to ensure that they and those they support are able to live a full life in the local community. Carers have raised concerns around the quality of care that could be delivered in the future, in the light of the proposals to re-commission services. Carers have raised concerns around ensuring robust safeguarding is in place in the event Local Authority services are re-commissioned. Some of the proposals are unclear and carers are unable to make an informed decision on the impact of the budget proposals for them.

Impact on service users

Service users want the focus to be on preventative services and interventions. The Winlaton, Wrekenton base and the Promoting Independence Centres were quoted as examples of good preventative services. In the event proposals go ahead around changes to services, service users

that live independently are seriously concerned that they may have to travel further or move to access services. This can be particularly difficult for those who heavily rely on public transport.

Residents with learning disabilities and their carers

Service users and carers still need to have an element of independence, choice and have a voice in the services they receive. Arrangements need to be put in place for service users and carers making them aware of support that is available as services go through transition. Having plans such as this in place will ease the worry for service users and carers. It is vital to ensure that the current level and quality of care continues.

Residents who are older people and their carers

Service users and carers are worried about changes in re-assessments and eligibility criteria of services and the cost of contributing to services. Carers of older people believe that putting services in place earlier is more cost effective in the long-term i.e. early intervention services.

Appropriate support needs to be made available as services go through transition. Having plans such as this in place will ease the worry for service users and carers. The lack of information on the proposed changes to services is causing serious concern.

Comments from external organisations

Two organisations contacted HWG with feedback from their consultation process

'Involvement Now Team from Gateshead People' who specialise in supporting individuals with learning disabilities. Their findings are at Appendix 6.

Labriut Healthy Living Centre has contacted HWG to express concerns that the review of public health may negatively impact on the services they provide to the local Jewish community which compliments local and wider regional NHS and Public Health services. These include childhood immunisation catch up programmes to disease screening, from Health Awareness Events to home safety campaigns, from educational school visits to local VCS collaborations, from NHS CVD Health Checks to Hospital Advocacy, and from Parenting Groups to Pilates.

NEXT STEPS

Healthwatch Gateshead will send in a consolidated response in the form of this report directly to Gateshead Council in time for the consultation close on 30 December 2015.

This report from the day will also be circulated to all participants and made available on our website at www.healthwatchgateshead.co.uk to download. Paper copies of this report can be requested by contacting us. Healthwatch Gateshead commits to send out information relating to Gateshead Council's Budget Proposals as and when it is received and updates will be on our website.

The budget consultation will close on 30 December 2015. It is possible to contribute and feed in any concerns and thoughts on the proposals direct to Gateshead Council using their website or completing a paper copy of the consultation prior to that date.

<http://www.gateshead.gov.uk/Council%20and%20Democracy/consultation/Budget/Adult-Social-Care.aspx>

In the New Year, the Council will be considering all of the feedback received as part of its budget consultation, in order to shape the report which will go before the full council on 25 February 2016.



Event Evaluation

Methodology

Healthwatch Gateshead evaluates all its activities as part of its quality assurance process to understand the value to Gateshead residents where improvements need to be made to its processes.

Attendees were asked to complete an evaluation form after the event [Appendix 4](#). There was a 73% return rate.

Findings

Out of those who returned responded to the evaluation:-

- More than 80% of attendees rated the event good to excellent.
- Prior to the event 37.5% of people said they were reasonably to fully informed of the subject.
- After the event 78% of people said they were reasonably to fully informed of the subject.

A break down of the full statistics from the evaluation can be found at [Appendix 5](#).

Thanks

Healthwatch Gateshead would like to thank everyone who attended to make the event such a success particularly all attendees on the day, facilitators, scribes, venue and catering staff.

Thanks also to Gateshead Council staff who posted the event information to service users and carers receiving social care in Gateshead.

Thanks to Michael Laing, Service Director for Social Care and Independent Living for providing an overview of the budget consultation.

If further information about this report, the activities of Healthwatch Gateshead, volunteering opportunities or to tell us of your experiences regarding health and social care services please contact us on:

Healthwatch Gateshead
Davidson Building, Swan Street

Gateshead, NE8 1BG

Telephone: 0191 477 0033
Freephone: 0808 801 0382

Email: info@healthwatchgateshead.co.uk
www.healthwatchgateshead.co.uk



Come and join us to discuss the proposed changes in Social Care for Gateshead residents

Thursday 3 December 2015

10.00am start

12.30pm lunch

Gateshead Masonic Hall, Alexandra Road, Gateshead. NE8 1RE



Who is the event aimed at?

Anyone that uses Social Care services in Gateshead and carers.



Why is this important?

Gateshead Council need to save money, we want to help find solutions to cost cutting without adversely affecting those most in need of services.

Why should I attend?

We'll explain in better detail what the proposals mean.
This is your chance to tell us what's important to you and your family.

What will happen next?

Information from the event will be fed into Gateshead Council as part of the consultation

RSVP by midday 26 November for catering and dietary. Requests for transport will be looked at on an individual basis.

Freephone 0808 8010382 or Email info@healthwatchgateshead.co.uk

Healthwatch Gateshead Social Care Consultation Event to discuss Gateshead Councils proposed Budget Consultation for 2016 to 2018

To be held on Thursday 3rd December 2015

Venue - Gateshead Masonic Hall, Alexandra Rd, Gateshead. NE81RE.

Starts: 10:00 am to 12:30 noon

- | | |
|---|---|
| 10:00 am | Registration and refreshments |
| 10:30 am - 10:40 am | Housekeeping & introduction to Healthwatch Gateshead - Andrew Moore Healthwatch Gateshead Development Officer |
| 10:40 am - 11:10 am | Overview of Budget Consultation - Michael Laing Service Director for Social Care and Independent Living |
| 11:10 am – 11:20 am | Questions from the public |
| 11:20 am – 11:30 am | Break for refreshments |
| 11:30 am – 12:15 pm | Group Discussion |
| Group discussion for 45 minutes | |
| Group 1 – Residents' with Learning Disabilities and their Carers. | |
| Group 2 – Residents' who are Older People and their Carers. | |
| 12:15 pm – 12:25 pm | Feedback from groups on each proposal |
| 12:25 pm – 12:35 pm | Roundup, Conclusion and close |



Group 1 – Learning Disabilities

Proposal 1 – Re-commission Independent Supported Living Schemes

- Vulnerable People at risk
- Need 24/7 support
- Staff concerns job loses - Who would provide service for tenants
- How do ensure service users have advice?
- Will services users still have choice in who cares for them 1 support if private
- Change of staff-staff turn over.
- Built up relationships with services users
- Mutual respect
- Don't know what is being proposed
- How can you make the consultation meaningful-some vulnerable adults don't understand proposal?
- Taking away peoples rights
- Promises made – having a say in their own life
- Legal rights as a tenant-could be at risk
- Threatens independence of service users if less support to find jobs/involvement in community
- Staff proud of what they have received
- Staff already lone working
- Care packages already reduced
- Safety concerns if reduced more
- Upsetting settled in the community
- Friends /support/feel safe
- If day support is reduced, respite is going to be an issue for carers/families
- More shared lives services – it's an excellent service
- Impact on family members to work and who will have to offer more support at home
- Cuts cause increase in ill health for carers/stress/financial problems
- Restriction in use of mobility cars which also has effect on ability for carers to work
- If carers have to do more this will impact on outcomes for carers under care act
- Reduction of wages of workers as decrease of care packages therefore quality of care will suffer
- Change of service provider could cause higher instances of abuse and poor quality care
- Stress as service users has to adapt to new carers and surroundings
- Private sector staff quality of provision may be poorer
- I don't want to move home
- I would feel sad to move
- I would like to continue living with my house mate as I see her as family
- Ensure residents have a voice
- How is this consultation valuable when vulnerable people don't get listened to? Or get what they want? Or get what they need?

- Please promote Shared Lives
- How does this correlate with the Care Act?
- Bound by law “v” persons need
- Why push people into independent living from shared lives in the community?
- How does this fit into the Councils overall strategy on independent living and choices?

Re Assessment

- It taken seven years to achieve a quality of life- to trust my staff team and manage my mental health. To move home, change staff or routine, would be highly detrimental to my health
- Supposed to have a review every year – this doesn’t happen – now it seems it’s looking at penny pinching rather than need.
- How will assessments change?
- Social worker is preferred assessor rather than an assessment officer
- If they change the assessments to meet criteria this is not safe and definitely immoral
- Service currently has robust strategies in place to provide good quality of care
- How will we know this will continue under private care? I know CQC have standards but the service I have goes above that - who will provide this? Who will care?
- Private companies that pay minimum wage have large staff turnover, so consistency of care is threatened
- Who is going to reassess? It will take too much time and money to re-train other staff and to have fully vetted
- This affects service users trying to build trusting relationships with staff providing care as this can take years
- May be re-provisioned out of area away from family/friends and everything we know.
- Will severely affect someone with a learning disability and/or mental health
- When we moved into our own home (Bowness) it was part of the “in control” scheme where we had “control” of choosing where we lived, who we lived with and we choose our own staff.
- These are our choices, our feelings, our opinions, wants and wishes of how we want to live our life. Are these not valid now?
- How can it be OK for someone to sweep in and change my life when I’m happy with it and don’t want it to change
- Reduction in independent living may not give access to wider life choices available
- My Niece couldn’t cope on her own
- Bowness Road is running at capacity could increase more money if all three rooms were occupied
- Need to ensure placements are appropriate putting people in places with more extreme needs, makes them de skilled
- Work with families to find the appropriate placement and decent distance don’t change what works
- How much money will it cost to repair damage of failed placements
- Must listen to carers
- Families must be included at every step of the way, not just informed

- Need to know as soon as possible
- What happens to people in private home but using LA day services? Who will make up the differences in provision?
- What about people who need 2:1 care?
- People will end up sitting alone at home 7 days a week
- What are the transition arrangements? Continuity of staff? Meltdowns! People need consistency of staff
- Who is looking at the background of the potential private providers?
- Safeguarding!
- What safeguards are in place for people with high levels of need?
- Staff must understand the needs of the residents, this can only happen with consistency of staff and care.
- Blaydon Lodge is currently underused because it's receiving no new referrals. 120 days short of being cost effective. Why isn't this properly used? Why are we sending people out of the Borough when BL would be better for them?
- Would not want to move
- I have support to have good holidays
- My home is a good place
- Staff support me to be as independent as possible
- Tenants in own home – not a service – part of community
- I would feel upset if I get new staff, my staff are my friends
- Not new staff
- We all get on with each other I would be so upset to be split up from my friends
- We have good friendly neighbours at Fell Close
- People need independent advocacy to support them to understand and get their views across in this process

Proposal 3 – Re-commission Learning Disability Care Packages

- Reassessment is being carried out by assessment officers not social worker and don't know the person and rely only on paper work / documentation / care plan
- Severely disabled people who access both council and health service
- Paperwork does not match and therefore new system would need to be developed to match health and social care reassessment – eligibility criteria
- If providers cannot be identified / commissioned, then families should be able to receive direct payment to pay family member.
- Council under legal obligation but putting price on people lives
- Council at risk of losing good staff over uncertainty
- Uncertainty over time scales
- Conflicting information staff don't understand what's going on
- How can council pick up pieces if no services left
- Reassessment could result in vulnerable people being left without support
- Would impact massively on carers
- Services will be less for the carers to access with their "pot of money" leaving them unable to provide any services

- Reassessments – are they going to be different from original assessment?
- Is the assessment going to be made to match new criteria?
- How can the assessments be true?
- If an individual was assessed as needing a service before, they are still going to need that service and have the same or sometimes more needs?
- Is there any choice?
- Are the decisions being made and the individual has to “put up with it” – this cannot be safe.
- Direct payment – carer manages “pot” and buying in services (if there are any left) – will it work / does not work
- Pressure on carer increased – carers getting older, so individual needs to access more services that aren’t there
- Change over of staff means people have their home interrupted
- Who will manage the changes?
- How much does it cost to re-assess packages – these people have already been assessed
- Who will decide who is “down graded”
- How well do social workers know the people they are assessing?
- Who will be involved in this process? What about people who are adept at appearing perfectly fine? Hidden disabilities?
- Sometimes staff are not trained properly. I like the staff I have now – some private companies – the staff are not trained properly
- I would not have time to get to know them and build a relationship with people
- I find it hard to talk to new people
- I find it hard to meet new people
- My staff knows me well and listen to me. I would not want to change.
- Change of service provider very, very traumatic
- I have a trusted relation with current provider (Council). This is very, very important to me and my family. This has taken years to build. You can’t replace this in weeks– it’ll take years – how do I cope in the meantime?
- As a paid carer does this come under working time regulations?
- We must protect most vulnerable
- Environmental Changes (i.e to routines, staff, places, times etc.) results in HUGE medical, behavioural and emotional knock on effects to individuals, parents, carers and families.
- What are the alternatives to the independent sector? Personal assistants? SU / family then become employers with responsibility for pensions and all kinds – it’s just too much on top of everything else –

Proposal 9 – Re-commission Day Services

- Maintaining quality of care
- More able people should be able to choose alternative types of provision i.e. Harvest and Help for gardening work.
- Loss of social networks if people cannot access day services.
- How can private sector be cheaper with compromising standards - Staff pay? Lack of training? Quality?
- Day services are very important – friends, social networks and community acceptance

- I really look forward to going to centre
- Don't know the impact until you know what's being offered
- People build relationships with staff can be upsetting if change
- Budget proposals need to be about people
- Not about care, about profit / business
- People who use services need a voice
- Save money through early intervention by avoiding crisis
- Crisis services are very expensive
- Early intervention
- Not very successful
- Services of errors
- Needs to be implemented more successfully
- Costing council more by not addressing things earlier
- If care goes to other providers, then the individual will be unable to cope with the changes in staffing.
- Merging centres – increased number of people – some individuals would find this very difficult
- Families and carers are often not aware of services available to them
- Under private sector my fears would be all of the quality aspects would go and services diminish
- Current provider is local authority – they go way above what is required i.e. centre stage at Marquis Way, Fashion Shows; Special Olympics etc. want these to stay.
- Transition needs managed properly
- What about the carers? Stress and worry of carers - no breaks
- What happens when carer has a breakdown?
- How are the new services being assessed and managed?
- Who will decide if new services are comparable or better?
- How long would the transition period take?
- Are “shared lives” carers included in these plans? And is this reflected in the lead in times?
- How much will the changes cost?
- Carers would have no respite and some are unable to cope
- Re-assessment means that they may be assessed as not needing the service (but they did before)
- All the quality aspects will be gone
- Will become a “baby sitting service”
- Private companies with low wages, use people who's first language is not English – this causes communication problems with service user and staff and individual can result in challenging behaviour / misinterpretation
- How can carers provide more individuals if they can't work – will then in some cases take families near or to the poverty line
- If individuals lose places in day services – carers need to work in order to earn money therefore carers will also need to be re-assessed so they and the individual are able to live a “normal” life within communities.
- Getting someone else to run day services.

- Only have Marquis Way.
- Close Wrekenton and Winlaton
- Losing a LOCAL BASE in the community
- Not locked away on Team Valley
- Part of the local community, people accept people who have a learning disability
- See them every day
- I would miss my friends, staff, housing workers at Wrekenton
- Getting different providers could not do it cheaper
- Regressing into how it was years ago
- Current provider is Council – doing an excellent job
- Not convinced private sector will be better
- Fashion Shows, Special Olympics etc keep and more.
- Don't want a babysitting service I want best options for my child
- High quality of care now and valued greatly
- Shared Lives very important – keep, share, explore
- I'm scared quality of provision might be poorer
- Reduction in day service provision – impact on individuals is HUGE
- Impact on family members – has anyone thought of that?
- How does this all fit in with the Care Act / Equality Act etc. etc.
- Team Valley is too big, I prefer Wrekenton Base.
- Transition is very distressing - for both SU and carer - don't change it if it doesn't need to
- Highlands – respite is very good. Very good relationship with staff like a second home and family.
- Want continuation of care
- Seems that people are intent on change when change is not most appropriate.
- Change is very difficult for vulnerable people
- Extreme concerns over day service provision changes
- If there's to be new providers, then they MUST meet needs and quality of current service users
- Current facilities and services are available to Gateshead residents i.e. Rose Hill at Hebburn – if we start insisting on
- The Bungalow is a Beacon of Good Practice and remarkable services that other LA's and areas have tried to copy / want to copy – why change?
- More pressure on carers
- Bases are preventative – DON'T CLOSE THEM – if you do there will be more pressure on services and carers later
- Once size does not fit all
- Day centres are seen as out of date / old fashioned but only by those who don't use them – we who use them value them as part of our social life, the centres act as enablers, enabling people to participate in life, have a quality of life. It's where my son meets his friends and I feel at peace knowing he is in a safe place

Other comments

- Can we have more clarity on details please?

- Healthwatch please guarantee to keep us up to date and the opportunity to further influence BEFORE decisions are made.
- How would the decision makers feel if I came in and disrupted their lives / routine / care and how would they cope with the consequences?
- Care, welfare and impact on individuals and carers are manageable. Safeguarding vulnerable people - Who is going to check vulnerable people, particularly for people who can't communicate themselves?
- A Personal Assistant taking 1 person to Metro Centre, for example, is not enabling a person to have a social life. If current arrangements changes to independent / PA, then we won't get to go to Metro Centre as a group.
- I have been told that a review is to take place soon with the prospect of Southernwood Care Centre being closed by March 2016. I appreciate that cut backs are necessary due to reduced support from the Government, also the reasons why but to further cut the services offered to aged folk I find absolutely appalling. Surely there must be other areas where money can be saved. My father is aged 92 and if it wasn't for this facility which he visits twice a week he would have virtually no contact with anyone other than close family. He lives on his own, is practically immobile and suffering early stages of dementia and looks forward to his visits (and respite). To remove this facility will only further enhance his isolation. After the closure of Eastwood in Felling a couple of years ago I'm told that the only centres remaining are at Ryton and Birtley but taxi fares to these places are beyond his financial means, let alone physical. In an effort to raise more cash why don't the council apply a flat 50p charge for each journey undertaken by those using bus passes. As a bus pass holder I would be more than happy to do this. It may not cover the cost of maintaining the current levels of care for the aged but I personally feel that cutting back in this area should be absolutely the last resort.

Appendix 3b

Group 2 – Older People

Proposal 5 – Reduce domiciliary care packages by enhanced early interventions

- Continuity of existing care whilst starting assessment for early intervention
- What would be criteria introduced for earlier intervention
- Impact on carers and families
- Increasing costs of contracted services
- Budgets for 3rd sector providers
- Increase need when providers sharing same funding pots.
- Not appropriate due to level of current need in some individuals.
- If Tynedale PIC in Ryton closed wouldn't be able to use it as too far away from family.
- Community could support older people with low level needs in some way if they knew who they were
- Increased responsibility on carers and other family members – who supports them?
- Without our brilliant care of Tynedale respite and Blaydon Day care centre, I could not cope so my husband could end up in full time care costing more.
- Is the individual involved in the assessment of what early intervention is needed so they can say what they need?
- Concerned about who is / who isn't eligible – who and how decisions are made
- What happens to those who don't "qualify"
- If individuals are not picked up so early intervention can be put in place, there is potential for a crisis resulting
- Not realistic for NHS to provide funding to meet shortfall
- How long would this transition in funding take?
- Regular individual needs review to ensure care package is appropriate and meets needs.
- Short term assessment critical in preventing long term care needs increasing
- Is the assessment of need holistic?
- Reduction in service / packages will be detrimental to all
- What happens to those who don't qualify for care?
- Clarity on definitions of proposals please
- Early intervention and reducing domiciliary care is preventative therefore costs less in the long run.

Group 2 – Older People

Proposal 6 – Reduce Residential Care Admissions

- Increased demand and increased cost of living will put more pressure on 3rd sector.
- Reduction in quality of provision.
- Increased responsibility on carers
- Increasingly ageing carers / with health problems and reducing support

- Which health issues are causing the poor health profile and what is being done to prevent / address these
- Carers are unpaid ---- affects their mental and physical wellbeing and all aspects of their own life
- What will be done to support carers?



Social Care Consultation December 2015

Evaluation Form

- How would you rate today's event?

Excellent Good Average Poor

- How informed were you about Gateshead Councils budget proposals on social care BEFORE this event?

Fully informed Reasonably informed Not fully informed Knew nothing

- How informed are you about Gateshead Councils budget proposals on social care AFTER this event?

Fully informed Reasonably informed Not fully informed Know nothing

- Where did you hear about today's event?

Twitter Facebook Website Word of mouth
Email from Healthwatch Mail from Healthwatch Council staff member Other – please state

Do you have any other comments?

The below questions are purely for monitoring purposes and will not be used for any publicity, therefore are optional

Which category below includes your age?

- | | | |
|-----------------------------------|----------------------------------|----------------------------------|
| <input type="checkbox"/> Under 18 | <input type="checkbox"/> 18 – 30 | <input type="checkbox"/> 31 - 40 |
| <input type="checkbox"/> 41 – 50 | <input type="checkbox"/> 51 – 60 | <input type="checkbox"/> 61 + |

What is your ethnic origin?

- | | |
|--|---|
| <input type="checkbox"/> White (British, Irish, Traveller or European) | <input type="checkbox"/> Mixed (Caribbean, African or Asian) |
| <input type="checkbox"/> Asian (Indian, Pakistani or Bangladeshi) | <input type="checkbox"/> Black (British African or Caribbean) |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Other |
| <input type="checkbox"/> Prefer not to say | |

Do you identify with any of the following religions?

- | | | |
|---------------------------------------|--|----------------------------------|
| <input type="checkbox"/> Buddhism | <input type="checkbox"/> Hinduism | <input type="checkbox"/> Muslim |
| <input type="checkbox"/> Christianity | <input type="checkbox"/> Judaism | <input type="checkbox"/> Sikhism |
| <input type="checkbox"/> No religion | <input type="checkbox"/> Prefer not to say | |
| <input type="checkbox"/> Other | | |

What is your sexual orientation?

- | | |
|--|------------------------------------|
| <input type="checkbox"/> Heterosexual-Straight | <input type="checkbox"/> Bi sexual |
| <input type="checkbox"/> Gay Woman – Lesbian | <input type="checkbox"/> Gay Man |
| <input type="checkbox"/> Prefer not to say | |

Do you consider yourself to have a disability?

- | | |
|--|---|
| <input type="checkbox"/> Physical disability | <input type="checkbox"/> Learning disability |
| <input type="checkbox"/> Sensory Impairment | <input type="checkbox"/> Mental health impairment |
| <input type="checkbox"/> Dementia | <input type="checkbox"/> Acquired brain injury |
| <input type="checkbox"/> Long term condition | <input type="checkbox"/> Multiple disabilities |
| <input type="checkbox"/> Other | <input type="checkbox"/> No |

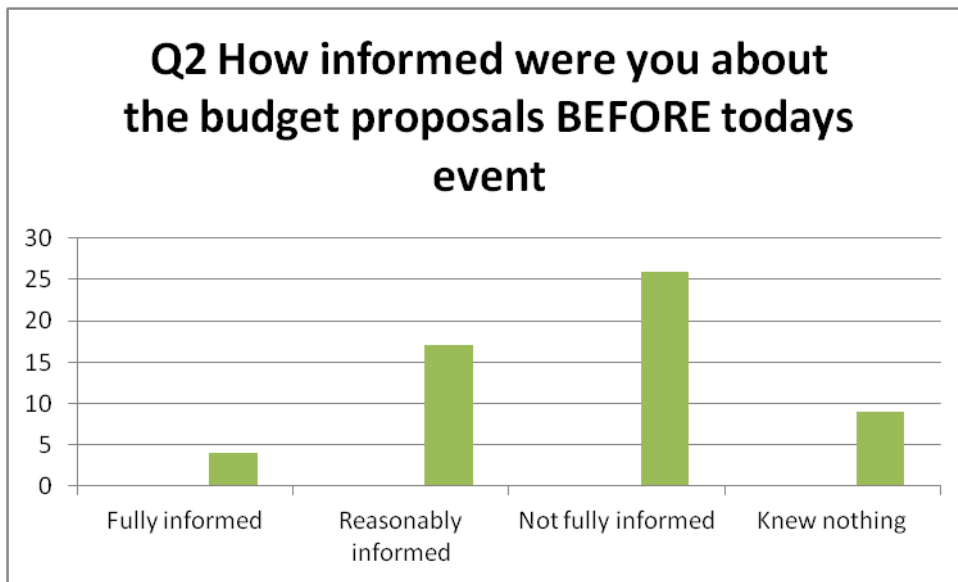
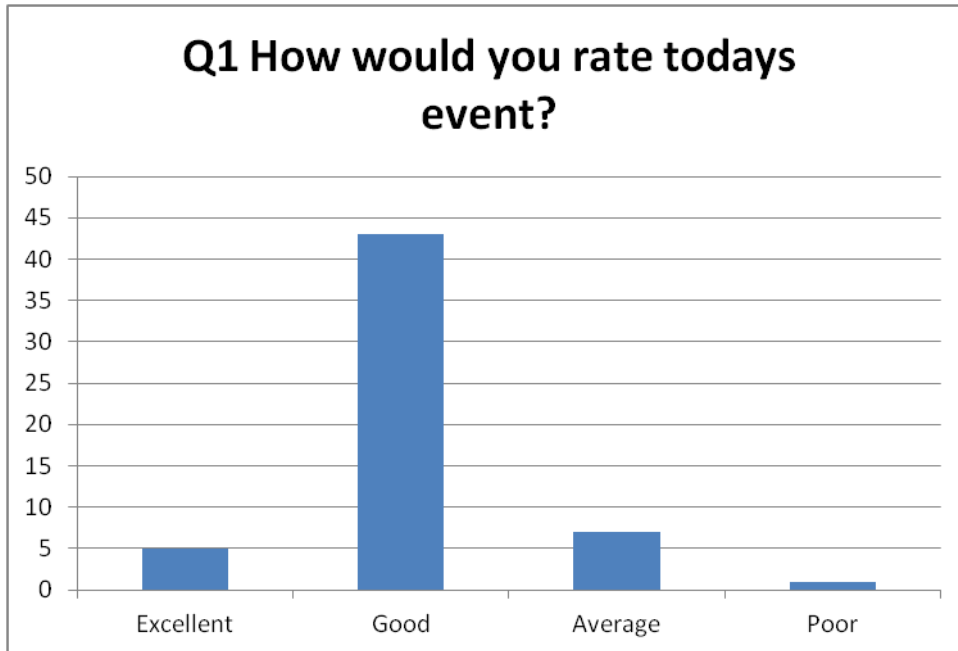
What is your employment status?

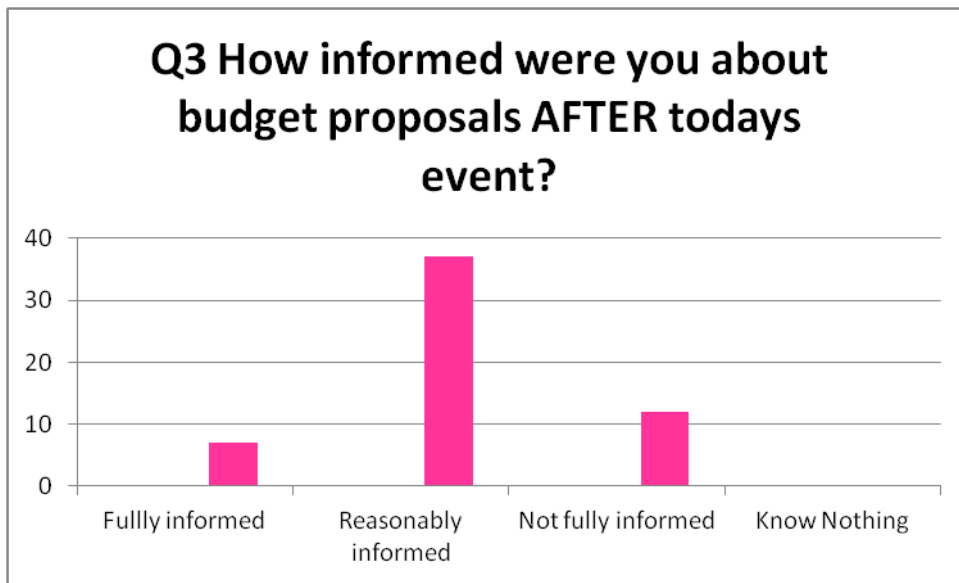
- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Employed | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> Self employed | <input type="checkbox"/> Retired |
| <input type="checkbox"/> Student | <input type="checkbox"/> Other |

Have you ever served in the Armed Forces?

Yes No

Evaluation Statistics





Day services proposals

The Involvement Now Team from Gateshead people carried out a consultation with 22 service users who attend its Marquis Way, Wrekenton and Winlaton centres and copied their findings to HWG. They have been included for completeness.

a) Feedback from Wrekenton and Winlaton service users.

The activities people enjoy/things people would miss about going to Wrekenton and Winlaton Base:

- Drama
- Training
- Friends
- Staff
- Going out on trips
- Gardening
- Boyfriends/girlfriends
- I would miss seeing my daughter
- Being part of the community and accepted by the community. The people in Winlaton know us ; they are friendly and helpful
- Making friends
- Making crafts – doing cards
- I like being independent. Living in my own house but going to the base (Winlaton) as well to see my friends
- Friendly staff
- The disco
- Doing the recycling job as Shadon House
- Singing
- Swimming
- Walking
- Rebound
- Doing Harvest and Help (social enterprise)
- Cat cuddling
- Meeting friends. Mixing in with the others (people in the community)
- I like working with the other services at Wrekenton (e.g. Housing service)
- I like getting out of the house. The Base (Winlaton) is a friendly place

What people think about the proposed changes to day services:

- We need to know what's happening
- Are people going to have advocacy support?

- Will I know who's coming to see me to talk about it? (Who will do the assessing?)
- One woman has been told Winlaton Base will close and is really upset about this : "I haven't been given long enough to understand. I will miss it. I won't know what to do without it... I'll miss my keyworkers and my friends. I want to tell the council I am so unhappy. I think it's all wrong"
- I don't like that. I don't want to think about it
- Makes me feel sad
- Unhappy
- upset
- I want to see my friends
- I like going and all the things I do there
- Who would run the Guideposts. Where would they be based?
- Will the Guideposts still be supported by Council staff?

b) Feedback from Marquis Way service users.

The things people enjoy/things people would miss about going to Marquis Way

- I would miss football
- Seeing loads of people – my friends
- Bocha
- My job at the tuck shop
- Zumba
- Makaton
- Gardening group
- Cooking group
- Drama
- Marquis Way blog
- Makes me happy to come to Marquis Way centre
- Wheelchair dancing
- Special Olympics
- Internet café
- Activities, like going out and about
- Singing group: we go out and about and sing in older people's homes, and to children. We get paid for it
- Lovey staff and lovely friends
- Friends
- Wendy is a nice boss. I love her
- Dancing and disco
- Communication groups
- Trampolening – rebound therapy
- Trips out – summer trips
- Pantos, seaside, meals out

- Bowling, shopping
- Garden centre trips
- Film group
- Sound beam room
- Arts and crafts
- Photo group
- Nice food. You can't beat it
- I feel safe at Marquisway
- I love coming here to see my friends
- The staff listen to you

What people think about the proposed changes to day services:

- Stop spending money on things like the Angel of the North
- We've got a right to come here
- We pay tax. We need these services
- They can't stop me going (to Marquis Way)
- I would feel sad or lonely if the centre closed or if things changed
- Don't dare change anything
- It's important to have someone to do activities with
- We haven't got enough space for more people to come (to Marquis Way)
- Health and safety is important
- The staff look out for us at the centre
- The cuts are shocking
- People are worried about not being able to get around. Making spending cuts on transport is a worry for some people. I need taxis. I can't get around otherwise
- I would have nowhere to go if I didn't have the centre. I would be bored

Some Key themes emerged in terms of the importance of day services for people with learning disabilities in Gateshead

1. People feeling safe
2. People feeling included in the community
3. The valuable friendships and relationships people have built up with other service users and staff
4. The activities that people are supported to do through day services that improve their health and wellbeing
5. The roles/jobs people have as part of day services (e.g. social enterprises) and how this makes them feel valued

Review of care packages

There have been real concerns expressed that if support gets stopped for the more independent people with learning disabilities they will have nothing and their situation will get worse. Without any support (emotional and practical) problems may escalate and people might reach crisis point.

