

## **TELECARE – CONSULTATION INFORMATION**

This document gives details on a proposal to revise the current scheme of charges for Telecare (also known as Assistive Technology). It explains the reasons why we are proposing the change and the other options we have considered.

### **About Telecare**

Telecare consists of a range of devices (such as a pendant alarm or lifeline) which aim to keep people safe and independent in their home.

It works in combination with a call centre which checks that people are safe when telecare devices trigger alerts. The call centre can also contact a family member or friend if they need help. Additionally, the service can send a mobile response team to visit someone in their home, if someone does not have other support available. A common reason someone might need help is because they have fallen and cannot get up easily.

### **The Consultation Proposal**

Currently, people getting telecare from the Council pay £5 a week. However, an exception is made for those who are aged 85 and living alone for this service, who are not charged.

The proposal is that these individuals would pay the same charge as all others users of telecare.

All those affected would be offered a financial assessment. This would be used to check that an individual could afford to pay. Anyone who could not afford the charge would not have to pay this.

## **Reasons for the Change**

There are a number of reasons why we are having to consider a change to the scheme of charges for telecare.

Firstly, there is a need to expand the service to better meet the needs of service users. This will allow a greater number of people to access the service in the future; and will mean new devices can be introduced to provide more support.

Additionally, like most other Local Authorities, Cheshire East Council is facing significant pressures on its budget over the medium term. This has been caused by reductions in the level of the grants that it receives; as well as an increase both in the size of the population, and the make-up of the population (for instance, there are more people with complex needs). The COVID-19 pandemic has also created additional cost pressures which were not expected.

A further consideration is the policy seems to be benefitting people in some areas and not others. This is because more people have the opportunity to obtain the service for free in those areas where life expectancy is higher. This conflicts with the Council's aim of reducing health inequalities, which is part of its Corporate Plan.

## **QUESTIONS AND ANSWERS**

### **Which other Councils apply the 85+ living alone charging policy?**

The Council is not aware of any other Local Authority which applies this rule.

### **Will the change definitely go ahead?**

No decision has been taken on the proposal. This decision will be made in autumn 2021 by the Council's Health and Social Care Committee (which is made up of Councillors) having taken due regard of comments received in the consultation.

## **What other options have you considered?**

There are a range of other options that we considered when looking at the Telecare Service. We have listed these below together with the reasons for why we have chosen not to do this.

### **i) Increasing the charge for those who do pay**

Increasing the flat rate charge from £5 (for instance, to £8) would also generate increased income for the service. However, it would mean that those paying would in effect be subsidising those who weren't more. This could be seen as unfair.

### **ii) Funding telecare by finding savings from other social care services**

The problem with this option is that it would take a significant reduction in another service to produce the same level of savings. It is not clear how we could do this without this having an even greater impact on service users. An additional problem is the increased financial pressures on Councils due to the COVID-19 pandemic.

### **iii) Removing the physical response part of the service to produce the saving**

Another option considered was to no longer provide the response service where people are visited at home if they need help (e.g. due to a fall which does not require medical treatment). This support would either need to be provided by family/ friends or the Ambulance Service.

The problem with this option is that it would result in increased pressure on the Ambulance Service. It would also mean that the individual received a slower response. This could mean for instance, if someone had fallen, that they spent a longer time on the floor before getting help.

## **How would the financial assessment process work?**

A financial assessment is used by Councils to work out how much someone should pay towards their care. This will depend on the type of care and

support services they need and the savings and income that they have. People with income and savings of more than £23,250 pay the full cost of their care. These rules are set by national legislation.

### **Doesn't telecare prevent someone from needing more expensive support in the future?**

There are complex arguments over how good telecare is at preventing or delaying people going into hospital or residential care. Current research is mixed over the impact it can have on these things. However, we do know that people value telecare because it helps give them reassurance that quick support is available, for instance, if they have a problem at home.

### **How does the Council provide telecare at the moment?**

The Council commissions telecare from an organisation known as Welbeing. They provide each element of the service such as supplying the equipment, installing it, the call centre and the mobile response service.

### **How is the contract funded?**

The contract is funded through a combination of payments from telecare users and additional funding provided by the Council. On average the cost of the service would be far more without the Council's contribution. This contribution will remain substantial even if the consultation proposal was applied.

### **How many people would be affected?**

There are currently around 1,234 people receiving telecare for free. This compares with a little over 2,400 people receiving Assistive Technology in total. We expect a proportion of these people not to have to pay for telecare due to their financial circumstances (no one who cannot afford to pay will be made to pay the charge). However, without conducting the financial assessment of these individuals, we do not know what proportion this will be.