

1. Do you support the principle that non-residential social care services should be available free at the point of delivery to those who have been assessed by a relevant professional as requiring them (as is the case within health care)?

- 9/9 people in group voted yes
- Means testing for those with gross ability to pay? Or should everything be free?
- Some people are paying excessive care charges
- Should there be a cut off? Or keep the principle of free care for all.
 - Pros – there are people who can afford this with large incomes or savings
 - Cons – people who are rich game the system to avoid paying , other services free – libraries, GPs.
- DLA is meant to be used for the additional cost of disability – Where does it say this is to cover cost of charging?
- Need to make the point the DLA covers all aspects of people's lives – not just period receiving support
- On balance against means testing – charging for social care has cost implications for health
- It should be free for disabled people
- Human rights are meant to enable disabled people to be included in society
- You don't pay for NHS at point of need – why for social care?
- It may be a council service but it is not a choice.
- Disabled people are not 'subsidised' to get equality of life!
- What I pay for 7 hours of support is too expensive - £96/wk! only £4 left for everything else
- Geographical differences are really bad
- Why not free?
- In terms of equality and human rights legislation paying for charges is unfair – it' like a charge on existing.
- Local Authorities are not in a position to do end charging unless compensated
- Not all health services are free – opticians, dentists and so on
- No social care equivalent for HS2

- Why are the disabled means tested for social care but not for health services? In the same way that people need social care because they are disabled, then why don't disabled people have to pay for health care if they need more than non disabled people?
- Some care charges would be means tested but we feel that no one should have to pay for the support they need to participate as citizens

2. Do you agree that legislation is a necessary and appropriate means of addressing the issues identified?

- It was help address an inconsistency – where some people are charged and others are not even in same local authority
- Some laws not implemented. So a new law would need resources to make it work. For example SDS needed resources to make it work.
- We do need legislation – too much scope for LAs to continue with some practices even if they stop or change others.
- It is simpler if it is either charge or not.
- It would be harder to avoid law. People wouldn't just feel hard done to in a subjective way. They would have a means to challenge.
- It is difficult to know what resources are needed
- A law might mean unintended consequences – it could be harder to get services therefore avoiding issue of charging by simply not providing services.
- LAs need resources so they have confidence to provide services
- Portability of care – A law would solve part of this issue. Varying charges can cause a blockage of housing where people don't know if they can afford to move home.
- Free personal care for the over 65s only is a form of age discrimination.
- It may be we would need to bring ILF under legislation for parity or treatment
- **Yes – we need a new law**

- I don't feel qualified to answer
- Would a new law make a difference?
- Legislation needs to be explicit about what it stands for.
- Anyone who needs social care should get it!
- More disabled people should stand for office – local and national
- As the Scottish Government already have the power do we need to legislate?
- Yes. We should have a new law in the same way as H & SC integration or SDS
- No– I don't want a new law. It makes it happen but doesn't solve issues for individual LAs and erodes Council's democratic flexibility
- Legislation would effectively impact on council's already restricted budgets
- A long as local government properly resourced they'll prioritise care for those that need it
- Government make choices and keeping free prescriptions is a choice
- Emphasis needs to be on the consumer not the provider. Why do councils seem so concerned about their money and not the money disabled people have to live on.
- Social care services should be free and paid through the tax system in the same way that health services are free

3. The current system has resulted in varying charges in different areas for the same level and quality of service. Do you agree that there should be consistency across Scotland? What do you think the advantages and disadvantages would be?

- Pros –
 - The cost of collection high in some areas as high as the actual care charging income,
 - It would be easier to understand for people paying,
 - It would be equal and fair – unfair if some people paying more than others

- Cons –
 - some people could lose out if charging is standardised,
 - if new laws introduced people could be reassessed and lose services,
 - some benefits DLA/PIP there to pay for care and disability Related Expenditure even if care charges scrapped
- Charging should be consistent across Scotland
- Services may cost different amounts in LAs but it is up to LAs to manage this and sort out why
- Confusing for people who use services to know what they are paying
- Yes they should be the same because effectively means that disabled people can't move
- Even if can't move to a position where free can we move to a position where at least charges are consistent?
- Councils enjoy flexibility in how income comes in but also how it's spent
- Charges should vary as councils have different priorities based on local population, demographics etc.
- Yes I agree with greater consistency but I also recognise uniqueness of LAs
- Is variation between LAs in relation to age okay?
- What impact will changing age of retirement have – Should this have an impact on bus passes etc.?
- Means testing is differentiating between who can and can't pay – but doesn't apply on prescriptions, bus passes etc. council tax
- Should home owners take deferred payment on property when they go into care?
- LAs can also use their discretion to waive charges but it is not clear how many do this. Or if they only do this when people are in debt.
- The support we have is to help us live independently in the community in an equal way with other citizens

4. Should all social care related services be free at the point of delivery? If you answered Yes, please explain your reasons. If you answered No, please explain which services should be

excluded, and why. (Please refer to the services set out on page 7)

- Depends on need – all needs should be covered – social care needs.
- Meals – there is an argument for contributing to meal costs
- SDS provides budget rather than service – but couldn't use for purchasing food but can use it to help you to cook.
- Should additional cost of disability be covered e.g. higher meal costs
- All costs should be covered
- All additional DRE costs
- **Discrimination – needs to be fair**
- **Meals on wheels should be charged for**
- **Should people have to pay increased charges due to LA mismanaging contract awards**
- **People pay for cost of food and so charge is valid**
- **Geographical anomalies – historic issues**
- **What about mobility charges?**
- **No i.e. meals on wheels**
- **What about coeliacs having access to free gluten free food if they get it on prescription from the NHS?**
- **Charges for meals on wheels but free meals are provided for people with drug and alcohol issues without charging. This is a lack of equality.**
- **Why should people with learning disabilities have to pay for meals when addicts and drug users don't?**
- **Does transport constitute a social care service – many LAs charge for transport**
- **Should be based on ability to pay**
- **Outcomes for meal service more complicated than just meal provision. People benefit from social contact when meals delivered.**
- **Cost of alternative services may be higher if people don't eat properly.**

- Making us pay for support means we are having to pay for the right to equal lives in the community. No other citizen is being charged for that

5. What are the likely financial implications (if any) of any proposed Bill to you or your organisation? What (if any) other significant financial implications are likely to arise?

- There would be less money in the social care pot and there would be less to go to providers
- Any bill needs to come with an idea of replacement income for LAs and not just from the current pot. This has happened in other new laws and changes.
- There might be other options for increasing income – e.g. increase in council tax
- How would you actually replace the lost income – replace what they have lost on per head of population per basis?
- On an individual level, there would be less resources for SDS support services – only the bare minimum of support would be given.
- People losing value of homes when moving into supported accommodation as they have to sell to pay the bill.
- Long term care insurance – good example from other countries – similar to “Health Insurance”
- People having to give over large percentage of wages or pensions to pay for their care.
- No fairness in system
- I would get my support restored.
- I would have the choice to add more support
- Training could be invested in by people who get support to make sure support worked really well
- You would have more freedom to choose how you use support
- It would be a better financial situation for whole family
- This money would be spent and would benefit local economy

- Reduction of administration would free up social workers to be social workers
- Do LAs manage demand implications of services by the use of charges. If they have to find other ways of doing this it could damage their reputation.
- Will there be a knock on impact on disability benefits – so people think DLA and PIP should go straight into providing care services.
- Councils might do less income maximisation if we weren't doing financial assessments
- Public agencies need to prioritise and without charges you stimulate demand
- Less people get free personal care than in 2003 so maybe demand won't go up.
- There are different ways of managing demand rather than charging
- Eligibility criteria has been arranged through local authorities and the national government.
- The current charging system is overly complex and costly
- There is also a questions about what do we mean by social care. We may need to manage expectations about what's included.
- There is a danger that broadening the definition makes it harder to prioritise those in greatest need
- Charging for care means asking vulnerable people to pay to get equal rights

6. What do you think the implications of the proposed Bill are for equality? (Positive/Negative/No significant implications/Undecided). Please explain your answer. If you answered Negative, please suggest any ways this impact could be minimised or avoided.

- Positive for Equality – people are able to access services they need without worrying about financial consequences
- DRE often greatly underestimated e.g. additional service charges
- Positive for Equality - Society should share the cost of disability and old age – not leave burden on a few

- Positive for Equality - Open to all – not discriminating
- Question – at what point discrimination – when get service (open to all) – pay for it (based on means testing)
- Means testing – high income?
- Some services still charged – meals
- Where will additional money come from?
- Will there be an impact on other service
- Needs additional investment
- Principle undeniable – fair and equitable
- Look to other ways to fund social care
- Yes – choice on how you use your money
- Positive for Equality - Lack of stigma – no longer seen as sponger
- Equality of people who are in work since it is difficult to assess charges
- Disabled people don't have the same choice to use their money for their 'wants'
- Unfair tax on disabled
- Bureaucracy will be reduced
- Are we creating inequality by not charging for care for people receiving benefits?
- Changes to benefits create inequality
- Ending care charges would create equality with other people
- Proposals will promote equality as long as costs not found from other areas therefore disadvantaging them
- Impact of SDS
- Positive for Equality - Human rights should not be affected by which organisation, NHS or local authority social care, gives you the help or support
- People with disabilities will be able to access services that they need to live good lives in the community without having to worry about the financial consequences
- People with disabilities will have the same ability to live in the community as people without disabilities
- People with disabilities will be able to get clear information that they can understand about what their social care services will cost.

7. Are there any other comments you would wish to make that are relevant to this proposal?

- Human rights and equality issues
- Charging puts people off getting support
- Law needs to be very clear about what it will do
- Current system is confusing
- The law will benefit people who use services, families, workers, local economies
- Why are social care services not free?
- All agreed should be free (but some felt proper resourcing would be essential)
- Mixed view on law – local democracy is part of Scottish approach – law should be designed from bottom up
- Variation could be ended but there might be a need for hard choices about what else to prioritise
- Meals could perhaps be charged for but even they can have more complicated outcomes for people
- Any distinction between “health” and “social” care is false. Poor social care will lead to poor health. Poor health care will make good social care very hard. The distinction is based on outmoded values and approaches