

## Your views on our proposal to change the way we work out how much people pay towards the cost of their non-residential care services

### Respondent information

#### Respondent Numbers

There were **906** responses received for this proposal. Of these, the majority (96.47%) replied as individuals, members of the public or a family.

Responding as:			
An individual / member of the public	852	94.04%	<b>96.47%</b>
A family	22	2.43%	
On behalf of a voluntary or community group	5	0.55%	<b>0.88%</b>
On behalf of a statutory organisation	3	0.33%	
On behalf of a business	0	%	
A Norfolk County Councillor	0	%	<b>1.1%</b>
A district or borough councillor	0	%	
A town or parish councillor	7	0.77%	
A Norfolk County Council employee	4	0.33%	
Not Answered	13	1.44%	<b>1.44%</b>

#### How we received the response

Email	11	1.2%	<b>1.2%</b>
Letter	4	0.4%	<b>0.4%</b>
Easy Read consultation feedback form	39	4.3%	<b>83.2%</b>
Consultation paper feedback form	715	78.9%	
Online submission	137	15.1%	<b>15.1%</b>
<b>Total</b>	906	99.9%	<b>99.9%</b>

Of the 906 responses received, the majority (83.2%) were paper consultation feedback forms. These were printed versions of the consultation that we sent to all service users potentially affected by the proposal and includes both standard and easy read formats.

In total we sent out 3,868 paper copies of the consultation (made up of 3340 standard copies, 12 copies translated into languages other than English, 203 large print versions and 313 easy read versions). This means we had a response rate to our letters of at least 19.5%.

#### Responses by groups, organisations and businesses

**Five** respondents told us they were responding on behalf on a **voluntary or community group**. The groups are: Board of Trustees of Opening Doors, Equal Lives, Management Committee of Opening Doors, Norfolk Older People's Partnership, and one group which did not give its name.

Broadland Older People's Partnership also responded but did not identify as a voluntary or community group.

The voluntary and community groups expressed their views that:

- people with learning disabilities would be affected by the proposed change more than people with other disabilities and claiming would be especially difficult for them, requiring additional support and clear information to ensure no inappropriate loss of income and to minimise the risk of financial difficulties.
- the proposed change is discriminatory, not based on research, requires clarity around the process (particularly relating to financial assessment), will put people's wellbeing at risk restricting their access to local communities, and may result in longer term social care costs.
- there is insufficient support for people with learning disabilities to be able to claim and this could result in unfair loss of income on top of existing reductions in income which is causing anxiety.
- the proposed change could be intrusive for older people and cause them concern and recourse to additional services: people should be assessed to see if they could cope and support provided to help them claim if required. Special arrangements should be made for older people aged over 75.
- disability related costs in the broadest sense have not been considered and the proposed change inappropriately targets a vulnerable group.
- the proposed change is "too complex for us, and possibly others, to make constructive comment".

**Three** respondents told us they were responding on behalf of a **statutory organisation**. The organisations are: Snettisham Parish Council, Shipdham Parish Council, Norwich Clinical Commissioning Group. The statutory organisations expressed the following views:

- adult social care payments should "relate to the amount that people can afford ... [and] should be fair and proportionate."
- the proposed change is supported because it is an improved method of calculating DRE.
- more information about the assessment and possible impact is required to ensure additional costs are not prohibitive for people already accessing social care provision; use of Personal Health Budgets should be considered alongside the proposed change.

**Seven** respondents told us they were responding as **town or parish councillors** although five did not name the council. The only named councils are Ormesby St Margaret with Scratby, and Rollesby. Town and parish councillors expressed the following views:

- three were in broad agreement with the proposed change but gave no reason
- people may need support to complete claim forms (which should be written in an easy to understand way) and the cost of such support should not outweigh any savings made
- the proposed change is an additional reduction in income and will lead to more people seeking residential care as non-residential care becomes non-viable.
- payment of non-residential care services should be means tested against income excluding capital assets.
- no further charges should be made for social care because some older people are struggling financially.

A response by Brandon Lewis MP was also received which noted the potential impact of the proposed change and the need to keep people informed and to offer support if required.

## Summary of main themes

Overall theme	Issues raised	Number of times mentioned	Quotes
<p>Cost of items bought because of disability/age, additional expenses incurred</p>	<ul style="list-style-type: none"> <li>• Medical or age related conditions create additional costs that other people do not experience to the same extent, e.g. additional washing and heating costs, costs for household help/alarm</li> <li>• People are struggling with existing costs</li> <li>• Amount of cost for personal items is detailed - people are worried about the financial implications of the proposal for themselves and their family</li> </ul>	<p>375</p>	<p>“I think it is important that everything is taken into consideration as I do get cold and use more heating. I try to buy more fruit and veg to lose weight and heating cost are much higher now it is cold.”</p> <p>“As both of us are disabled we require a House-keeper, Cleaner and Gardener. Odd jobman which employ to assist us. We have an alarm system fitted. No family live close. I wash and tumble dry the bedding often. I use more water because of this. My husband is never hungry so I have to buy favourites to tempt him. He is always cold so the heating is on continuously. I feel that the amount we pay is adequate.”</p> <p>“At the moment I pay for a community alarm system, more for heating as I get cold easily (I am on warfarin which thins my blood) and I pay for 4 carers a day to meet some of my personal care and feed me.”</p> <p>“I have been unable to gain a reduction in my water bill as I am not in receipt of any benefit, although I use the washing machine 4 or 5 times a week due to my 'accidents' due to my imobility. Heating on 24 hrs a day as cold causes pain in my parallised left side. Purchase of 'Tena Lady' pants (2 a day) not supplied by incontinence service.”</p> <p>“I spend a considerable amount each month on products directly related to my disability. Whilst they can easily be shown via my receipts/bank statements, the N.H.S. will not put into writing what I need. Therefore I am continually facing the choice of paying for products I cannot afford, or having personal hygiene problems on a daily basis.”</p> <p>“I think the proposal is wrong, isn't it bad enough that people are ill and cant manage for themselves + need a careworker to come in and help, without having all the worry of where the extra money to pay them is</p>

			<p>going to come from. Having a care worker come in the mornings to get me washed + dressed is the only help I have, and my wife do everything else for me, and if the price of having a care worker went up any higher I think I would have to consider stop having them come, &amp; I really don't know how we would manage without one.”</p> <p>“People should be listened to on a personal basis. A lot of things I wouldn't buy if I werent disabled ie incontinence pads, pre chopped veg cos I cant prepare Food. etc Non of this was taken into account and I struggle to pay for my care. It should go on everything not just the amount of money someone gets.”</p> <p>“I currently pay approx £320 per month for carers to visit me for about 1 hours every morning. I need extra support provided by my son and partner for other daily tasks eg preparing meals etc. I also pay non-professional people for the following, £21-75 per week for meals from local [address], £15.00 to launder bedding. £20.00 per week for a cleaner, £20.00 per two weeks for gardening. All tasks I cannot do myself as I suffer from severe arthritis. I cannot stand for very long and cannot walk unaided. Because I do not use professional companies then my outgoings are 'non-receiptal'. Many pensioners will not be able to afford non residential care if costs go too high!”</p> <p>“I am Diabetic I have to have special food and care alarm. Also I wear pads/special knickers. And my care charges have gone up from £11.00 a week to £45.[illegible]9 a week. This is a very big increase if it goes up any more I will not be able to afford it. Yes if goes up too much I could not afford it.”</p> <p>“I understand you need to make savings but why is it always at our cost. I couldn't afford to pay anymore towards the cost of my care and feel this unjust if I have to!”</p>	
Ensure people can claim	<ul style="list-style-type: none"> <li>• People may not be able to manage to complete forms without support</li> </ul>	140	<p>“What happens if people's care related expenses vary from week to week? How long will it take the council to sort it out, and what happens if they don't sort it out for years - as has happened to me - and a huge overpayment results? I am concerned that many people who are entitled to such payments will</p>	

	<ul style="list-style-type: none"> <li>• Burden of proof is on individual to claim and providing receipts for some items (e.g. utilities if online) will be problematic</li> <li>• Concern that claims may take a long while to process leaving claimants worse off</li> <li>• Claiming can be very stressful, aggravating some illnesses</li> <li>• Additional costs hard to calculate as dependent on factors such as building size, insulation etc.</li> <li>• The claims process is invasive</li> <li>• The claims process is most likely to be beneficial for those who are organised and able to do the necessary administration</li> <li>• People may be too proud or embarrassed to claim</li> </ul>		<p>miss out because they fail to make a claim, this is the case at present with a number of benefits available.”</p> <p>“I think the extra work for claimants is not a good idea, for the small sums involved.”</p> <p>“Won’t affect me, but people will need help to fill out form and warning in advance to save receipts”</p> <p>“For this to be fair the Council might have to ensure that older people receive some help in completing the assessment forms, e.g. will you provide extra money to AgeUK Norfolk to do this?”</p> <p>“How you can charge for needs that vary considerably, some days, months and years requiring more care than others by expecting a disabled person to keep you posted with bills and receipts...? And not rack up a huge debt waiting for you to catch up with them.”</p> <p>“Your demand for proof of DRE is unfair and unreasonable. Heating, electricity and water usage is affected by many factors, size of property outside temperature how do you quantify or separate out the costs.”</p> <p>“My husband is writing this response to your consultation as due to my condition I find it very difficult, many disabled suffer the same problem an inability to cope with forms, causing stress which itself exaggerates their condition.”</p> <p>“However, last year I found it very difficult to put together a list of bills which I know took me over 7.50. So I didn't do it. We also live in a paperless society so obtaining bills is difficult. I found particular difficulty in getting fuel bills. ... So I would welcome the change but NCC need to make it easy for me to get all the costs together in a way that will be acceptable.”</p> <p>“It sounds very complicated especially for the elderly and anyone with Dementia that still lives at home or is cared for at home by their family. Having to send receipts, invoices, bills and bank statements is really</p>	
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			<p>confusing and must cause an awful lot more work for someone, which will lead to more errors.”</p> <p>“The £7.50 barely defrays expenses over the course of a year as it is. To be put in a position of having to prove these on a regular basis is invasive and dehumanising.”</p> <p>“My other concern is that proud and vulnerable people may be too embarrassed to want to claim, giving the breadth of detail you will be seeking - invoices etc. A round sum allowance enables, for instance additional laundry and electricity, to be covered without additional administration time being necessary by staff, who already are working to capacity.”</p> <p>“Asking someone who is vulnerable e.g. mental health, elderly or infirm for who life is already a struggle to provide receipts etc. is putting too much pressure on people, it’s not realistic to expect people to cope with yet more admin. You might save money but I think you will also spend more on admin/cause suffering to people already beleaguered by forms. Also the amount spent on heating etc. is hard to quantify and based on subjectivity. You will end up subsidising only those who are most capable of organising themselves and fighting for their welfare - ie - NOT the most vulnerable. Think again”.</p> <p>“Because of crises, emergencies and changes at N&amp;SMH Trust I have been waiting since April 2017 for a letter to claim back the amount £7-50 per week extra charge.”</p> <p>“It is ridiculous to expect people in receipt of money to do all this paperwork. They will just get confused and distressed and social workers offer no help. I have a brain injury and cannot do paperwork.”</p>	
<p>General agreement with proposal</p>	<ul style="list-style-type: none"> <li>• Agree because proposed change is right or reasonable</li> </ul>	<p>108</p>	<p>“I agree with your proposal to pay only those people who have additional expenditure because of disability needs.”</p> <p>“Looks fair to me”</p>	

	<ul style="list-style-type: none"> <li>• Agree because people should only be reimbursed for what they use</li> <li>• Agree because it is fair for everyone - nobody who needs the allowance will lose out</li> <li>• Agree because it could save money</li> <li>• Agree because some people can afford to pay more</li> <li>• Agree because it is understood that savings have to be made</li> <li>• Agree because it will help people retain their independence for longer</li> </ul>		<p>“It is fairer to reimburse people for their actual expenses.”</p> <p>“It seems fair and balanced. However I will not be affected.”</p> <p>“I think the proposal is in line with the increases the rest of us are facing. I am aware that this disability allowance is not the only assistance available.”</p> <p>“Seems logical you should have to prove the costs before they are taken into account”</p> <p>“Now you have the technology and systems available make use of them. What is the point of paying for new software if you don't take advantage of the features. Make the changes it make sense.”</p> <p>“The new proposal seems perfectly fair and reasonable.”</p> <p>“This seems a fair way to assess people. It is not right to allow a standard exemption when some people are simply not using it. Nobody is really losing out, only those receiving something they are not entitled to.”</p> <p>“I agree with your proposal. Just because someone has a disability, doesn't mean they are on a low income/have no savings.”</p> <p>“This sounds like a sensible idea, to only pay for what people are spending, it could save a lot of money, which could be used elsewhere.”</p> <p>“This proposal does not currently affect me. It seems a fair proposal to ensure that those who need the assistance get it, those whose savings exceed the limit pay for themselves, and those who need a little help will be making a contribution.”</p> <p>“I think it's a good idea and would fairly means test individuals. Personally it would help me with all that I pay out for to enable me to stay in my own home plus keep my independence for as long as possible.”</p>	
General disagreement with proposal	<ul style="list-style-type: none"> <li>• Disagree without giving reason</li> </ul>	105	<p>“I think it is disgusting. It puts people in the position of having to JUSTIFY their disabilities and puts the council in a position of POWER over them rather than working as an equal partner to help them.”</p>	

	<ul style="list-style-type: none"> <li>• Disagree because proposed change is 'wrong', a bad idea, shameful, disgusting</li> <li>• Disagree because older people should not have to pay for care</li> <li>• Disagree because it makes people with disabilities justify their spend</li> <li>• Disagree because the money should be ring-fenced and/or invested in, not cut</li> <li>• Disagree because older people/people with disabilities have little choice but to pay other people for day to day care</li> <li>• Disagree because definition of DRE costs are not correct</li> <li>• Disagree because it disadvantages people already facing financial hardship</li> </ul>		<p>"I think this funding should be ring-fenced and social care should be invested in."</p> <p>"Do not agree, as I am reliant completely on other people as I am housebound and need their help"</p> <p>"am completing this for my daughter [name] with learning disability. We are encouraging her to live as independently as possible. She has multiple small expenses related to her disability but is unable to record these, or retain receipts for these. Such a change, requiring receipts to avoid the £7.50 reduction in benefit would be punitive to her and others like her. I strongly oppose this change"</p> <p>"Absolutely appalled at this proposal. Example of broader logic applied to disability related costs. If someone has total incontinence it is not just perhaps disability expenditure on products such as pads, special bed/furniture covers; but also the extra home fuel used. More washing/showering equals more water use and more electricity/gas use." "If someone has a form of arthritis it is the extra heating they need during the colder months. If someone as limited mobility, lives alone and still able to drive an adapted vehicle; that vehicle is there independence ability to move around and therefore extra cost on fuel. The above are just a few examples of the broader nature of disability related expenditure that i don't think you have even thought to consider."</p> <p>"I think it's mean minded of NCC to have reduced the allowance from £15 to £7.50 in the first place and doubly so to remove the allowance completely. These are vulnerable people we're talking about, people whose only real company during the week might be the folk they see at a day care centre, which they may end up not being able to attend because they can't afford it any more. It is also seriously disadvantageous to people who are already struggling with rising prices and reducing public services."</p> <p>"I think I would be paying more as I have an alarm when its cold the heating is on longer as I feel the cold dew to my stroke so I don't agree with the changes"</p>	
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	<ul style="list-style-type: none"> <li>• Disagree because of (perceived?) negative personal financial impact</li> </ul>			
<p>Proposal is an additional cut on top of previous cuts</p>	<ul style="list-style-type: none"> <li>• People with disabilities have already experienced cuts to services</li> <li>• Cuts are experienced by those least able to afford them</li> <li>• Cost of living and care costs have risen but not matched by income</li> <li>• The cumulative effect of cuts has left little room for further savings to be made</li> </ul>	<p>85</p>	<p>“I have to pay the full amount which the law says each month towards my care. last year it went up by another 37 pounds per month. I have to pay towards community alarm. My utility bills are higher than normal because of the need to use more water for washing clothes every day which increases my water bill and having heating on I believe the bill for social care should stay the same each month. everything is going up in price due to inflation and benefits are being freezed not increasing.”</p> <p>“Not happy about the changes as my care costs are going up constantly.</p> <p>“Very concerned my mother is 95 years old and her disability costs keep going up. The costs for carers alone have going up 35% her allowance has gone down 10% which means we now have a defecit of nearly £700 and you are now looking to increase her charges?”</p> <p>“[Name] has already had a 50% rise in his care charges. He also pays privately for a day centre all day and pays the carers petrol. He also pays for a bedroom tax. Please think about the people who need this service.”</p> <p>“As I had my allowance cut last year my disability is worsening I feel any further deductions would be facing me with more hardship.”</p> <p>“I am not allowed DRE as, although I am severely disabled I found this very difficult to apply for and prove . Your last change in April 2017 devastated me financially together with reductions in benefits both of which reduced my weekly income considerably. I am already heavily in debt with [care provider] and social services for the newly improved care charges. I have never before in my life been in debt. I would certainly be unable to pay out any extra as my household budget has already been cut down as much as possible. 2017 has been a nightmare to me financially and I have only got through this with outside help. I live alone with my dog.”</p>	

<p>Challenge to the thinking behind the proposal</p>	<ul style="list-style-type: none"> <li>• Proposal won't save money as administration costs will increase</li> <li>• Definition of a 'disability related cost' is too narrow</li> <li>• Finances have not been thought through</li> <li>• People require support for the system to work</li> <li>• The proposed change will not deliver the anticipated savings</li> </ul>	<p>72</p>	<p>"Will the cost of administering the change significantly negate the savings? / would policing the claim costs increase?"  "Flawed thinking in the narrow perception of disability related cost"</p> <p>"Just do your sums"</p> <p>"NCC need to make it easy for me to get all the costs together in a way that will be acceptable."</p> <p>"From the information I have just read, I am not convinced the additional work involved to individually calculate each person's contribution would necessarily save the sums mentioned."</p> <p>"Once you take into consideration all of the above for people and how the decision making process will have to be assessed I wonder how the additional staffing cost can be considered negligible. If you say an average of 10 hours a decision on 3,800 people that's over 38,000 hours a year that aren't currently assessed. That's about 19 people full time a year on salaries of £20k that's nearly £400,000. That's without costs of letters, developing systems for people to complete returns, appeals, complaints, managers for the staff, pensions, holiday pay and so on. This will have to be reassessed annually and I question what the difference in cost and saving will be. I have said 10 hours a decision as a conservative estimate as given my own related expenses I know they will be time consuming to calculate the above-mentioned without even touching on the easy to track cost of medications one for example. I dare say there are some disabled people without additional expenses although I question where saving the money they get will create vast savings overall."</p>	
<p>Description of medical condition or disability</p>	<ul style="list-style-type: none"> <li>• Description of a medical condition or disability only. Implies that the condition or disability results in additional</li> </ul>	<p>64</p>	<p>"I have now been diagnosed with lung, liver and kidney cancer. I think I will have to cancel 1 carer during the week because of chemo and radiation treatment."</p>	

	<p>charges but does not explicitly say so.</p>		<p>“It would Affect me As I Have LONG TERMED Illnesses Arthritis, Diabetes, Bend spine, Had A Stroke 6 or 7 years Ago. Walk Only A Few Steps With Difficulty.”</p> <p>“I have Type 2 Diabetis. I have ostriar arthritis High Colestial I also have arthritis in my hands I am crippled in Both legs and I on Water Tablets every day. My sister cares for me as I am Disabled in a wheelchair. I have a lot of Long term problems with my Health.”</p> <p>“[name] is bed bound. Everyday they is sheets to wash and Blankets. The accomodation he lives in has no central heating and [name] and his son lives in one room with electric heaters on as he gets cold. [name] is 91 years of age. He has a hospital bed and careers coming in four time a day [name] also pays for a community alarm system.”</p>	
<p>Some groups will be more affected than others</p>	<ul style="list-style-type: none"> <li>• Concern that self-funders are unfairly penalised compared to people on benefits</li> <li>• Concern that people in shared accommodation may not be fairly assessed</li> <li>• Unjust – affects those least able to protest</li> <li>• Unjust – affects those who need support the most (older people and people with disabilities)</li> <li>• Unjust – physical disabilities can be more straightforward to</li> </ul>	<p>60</p>	<p>“It will take more money away from those vulnerable people who can least afford it. An example of its flawed thinking in the narrow perception of disability related cost . If someone wants to have coffee in a cafe but need the support of a paid care, they have to pay for the carers coffee too. That is a disability related cost but you make no allowance for it. As ever it is easier to take from those least able to protest.”</p> <p>“As a co-tenant with 2 other gentlemen in supported living it will be almost impossible to assess the amount of disability related expenses that apply to each of them individually so may well mean my son can't be assessed accurately.”</p> <p>“I am completing this for my daughter [name] with learning disability. We are encouraging her to live as independently as possible. She has multiple small expenses related to her disability but is unable to record these, or retain receipts for these. Such a change, requiring receipts to avoid the £7.50 reduction in benefit would be punitive to her and others like her. I strongly oppose this change.”</p> <p>“I am already paying over £180:00 a month for my care, having to do this has limited my day to day life do to financial. People with disabilities should not have to pay for care.”</p>	

	<p>recognise as a disability than a mental health issue or learning difficulties</p>		<p>“I think it is just another way of extracting funds from vulnerable people who mostly cannot stick up for themselves.”</p> <p>“I think this is once again taking money off the most vulnerable people who cannot afford it. As they are already on a substance amount of benefits. People who are disabled or have special needs should not have to pay anymore for there care!!”</p> <p>“Just as with the Government PIP forms the weighting seems to favour physical difficulties and not be aware of the needs of someone with mental health and learning difficulties.”</p> <p>“We believe that the idea will be especially bad for people with learning disabilities, more than people who have a physical disability. We feel it will discriminate against people with learning disabilities.”</p>	
<p>Individuals' wellbeing could be affected by proposal</p>	<ul style="list-style-type: none"> <li>• Proposal will cause people stress/worry/anxiety</li> <li>• People's mental wellbeing will be negatively affected if proposed change goes ahead</li> </ul>	<p>59</p>	<p>“Therefore I would not change the present system as it brings no real advantages but actually increase mental health issues through worry and paper work.”</p> <p>“Furthermore the ongoing stress of these continual assessments has a profound impact on our health.”</p> <p>“think this proposal will effect us by adding more stress, to an already stressful situation. Having to cope with yet more forms”</p> <p>“Also the mental and physical pressure of proving via receipts is both demanding and exhausting for sick and disabled people. this is another way to prevent people from claiming as many will not due to stress of process”</p> <p>“This is not good for people who have not got a lot of money my money is housebound, nearly blind, very deaf. This is just another added worry, she does not need.”</p> <p>“I do not think I or unpaid carers should be put under this level of stress, and request your help in this matter.”</p>	

<p>Criticism of DRE consultation process</p>	<ul style="list-style-type: none"> <li>• Consultation is a paper exercise</li> <li>• Consultation documentation is too long, hard to understand, not user-friendly</li> <li>• Consultation is not fair in that decisions have already been made</li> <li>• No confidence in consultation process</li> <li>• Some people completed the demographic questions but did not tell us how the proposal might affect them</li> <li>• Others told us they did not understand but it wasn't clear if they did not understand the proposal itself, or the impact of the proposed change on their lives.</li> </ul>	<p>43</p>	<p>"I think that this proposal is a sham consultation because nothing anyone says would make any difference you are going to do it anyway and you are just wasting public money to pretend that you have a mandate."</p> <p>"I also think this consultation is poorly written, overly long and not at all user friendly."</p> <p>"Pages of text left me confused."</p> <p>"Be honest enough to speak the truth."</p> <p>"Does my age, background or sexual orientation, wether I am male or female have any impact on this consultation? I think not, this just another paper exercise and is not fairly dealing with people's disability."</p> <p>"As its probably all ready a done deal he'll pay more again anyway. We don't really have a choice if again "money has to be saved", and it'll be the same in 2019."</p> <p>"I Think That Whatever I Put here You Have Already Made Up Your Minds As To What You Intend To Do Last Year You Sent Me A Similar Letter to this One And You Did Not Appear To Take Much Notice Of My Opinions."</p> <p>"No confidence! Unlikely my view matters."</p> <p>"No matter what our thoughts are you will still carry on as you see fit."</p> <p>"This "consultation" is a mockery. You do not define the questions clearly enough, are you asking about the person being cared for? or the carer filling in the form? N.C.C will reduce its help to the most vulnerable in our society anyway."</p>	
<p>Support should be dependent on need</p>	<ul style="list-style-type: none"> <li>• Support should be means tested</li> <li>• Support should be targeted to those most in need</li> </ul>	<p>43</p>	<p>"No elderly person should have to pay for care. They have paid their dues for all of their lives. Now is the time for payback."</p> <p>"I think it's a good idea and would farely means test individuals."</p> <p>"Good idea only those that need it will get financial help."</p>	

			<p>“Dont mind paying whilst I can afford it, as long as everybody is treated the same. I have been up front and honest about my savings, pensions ect, not everybody is.”</p> <p>“Surely the fairest way is to treat everybody individually and assess us on our income without making any "standard" deductions.”</p>	
Impact on vulnerable people	<ul style="list-style-type: none"> <li>• The most vulnerable people in society will be affected</li> <li>• Although cuts are necessary they should not be at the expense of the most vulnerable</li> </ul>	43	<p>“I understand that Norfolk County Council have to make cuts and savings but ... I personally find it disgraceful to penalise the most needy and vulnerable people in society, through no fault of their own, having disabilities.”</p> <p>“I think this is once again taking money off the most vulnerable people who cannot afford it. As they are already on a subsistence amount of benefits. People who are disabled or have special needs should not have to pay any more for their care.”</p> <p>“I think this is an absolutely immoral and heartless idea and should not be implemented. The proposal will not affect me personally, but will affect many around me – hitting the most vulnerable hardest.”</p> <p>“I do not agree with targeting vulnerable people.”</p>	
People may not be able to pay for as much care	<ul style="list-style-type: none"> <li>• People may have to stop paying for some care</li> <li>• People may have to change the type of care they receive</li> <li>• People may not be able to continue to live at home</li> </ul>	38	<p>“If you wanted more money I would not be able to afford the care I now get, and would not be able to live in my own home.”</p> <p>“I think the proposal is wrong, isn't it bad enough that people are ill and cant manage for themselves + need a careworker to come in and help, without having all the worry of where the extra money to pay them is going to come from. Having a care worker come in the mornings to get me washed + dressed is the only help I have, and my wife do everything else for me, and if the price of having a care worker went up any higher I think I would have to consider stop having them come, &amp; I really don't know how we would manage without one.”</p>	

			<p>“It will cost me extra money and I will have to give up all my social care as I cannot afford to pay anymore money.</p>	
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“May have to consider going 1 day less to day-care as this is not only thing that is costing more!”

“I am 89 years old and live alone. I wish to continue living in my own home. I have to pay for someone to do my gardening, clean my windows, come to my home to set my hair every week. I am unable to go out unless someone takes me by car + using a wheelchair. I pay for a personal alarm. My daughter - who is 64 - does my shopping etc. If I have to pay more for my care I may not be able to afford it + may have to give up my independence.”

## Additional responses

### List responses received in addition to the standard format (e.g. petitions, postcard campaigns, letters) and summarise main points

Norfolk County Council Labour Group organised and promoted their own separate consultation. They described this consultation proposal as: “increasing charge for non-residential care – introducing costly means testing and forms to complete for people with extra expenses because of their disability, illness, or mental health conditions”. Seventy one (71) of the responses contained comments relating to this proposal. In general the proposed change was opposed (31 people stated they disagreed) and the concerns expressed in the Norfolk County Council Labour Group consultation reflected those expressed in the Norfolk County Council consultation. Respondents told us they felt that the proposed change was not fair (that some people would be more affected than others - 27 mentions); that the most vulnerable people in society were being targeted (27 mentions); people’s wellbeing would be negatively affected (9 mentions); and people with disabilities already found the cost of living high (7 mentions).

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