

Cabinet Member for Adults and Health	Ref No:
Date 12 December 2018	Key Decision:
Results of the Consultation for the Proposal for the Minimum Income Guarantee (MIG) for Working Age Adults (Appendix 2)	Part I or Part II: Part 1
Report by Executive Director Children, Adults, Families, Health and Education and Interim Director of Adults' Services	Electoral Division(s): All

Overview of the Results from the Public Consultation.

The consultation for the proposal to reduce the Minimum Income guarantee (MIG) for those of working age was held between 1 October and 3 December 2018.

All customers who may be affected by the proposal were contacted using a postal survey, with Easy Read versions for those who required them. An online version of the survey was also available in the Have Your Say area of the WSCC website.

In total, over 2000 postal surveys were issued with a strong return rate of 25%. 727 responses were received in total, of which 560 were returned by post and 167 on line. In addition, a number of letters and emails were received in response to the survey and these were included in the feedback.

There was concern raised by members of the Health and Social Care Select Committee that we may not receive responses from those living in more remote areas of the county and, therefore, we issued all potentially affected people with the survey and provided pre-paid envelopes. In addition, focus groups were held with nine organisations and groups over the consultation period with a total of 11 sessions involving 189 participants, (see the table at 8.1 contained in the main body of the analysis).

Due to the strong response and engagement methodologies used we are able to combine a high level of both quantitative with rich qualitative data.

Headline Results from the Consultation

From the results of the survey the headline statement are as follows.

- The majority of respondents were not in favour of the proposal: 67% disagreed, with 10% of respondents agreeing.
- The majority of the respondents, 71% felt the impact would be negative, but 8% of respondents felt there would be no impact with 5% feeling there would be a positive impact.

Appendix 2

- At 53% the majority of respondents felt the level of impact would be serious, 27% felt there would be some impact, and 6% felt there would be a minor.
- At 64% nearly two thirds of respondents use adult social services with 73% having a disability and 33% of these people having a learning disability.

Between 14% to 20% of people who were personally affected answered that they did not know how the proposal would affect them.

For those against the proposal the following comments were repeated throughout the consultation.

- The consultation is expensive and not required as the decision has been made. Money better spent on the service.
- The wider context of the recent and ongoing national review of benefits has meant a reduction of monies for many people. This proposed reduction is, therefore, another loss of allowances or benefits experienced by the same cohort of people i.e. the disabled.
- The Disability Related Expenditure (DRE) process is not considered clear or transparent. It was also felt that the assessment process was unclear, it was not certain how long the process would take, what the outcome might be, or that the outcome would be correct.
- National research was referenced or supplied as part of the responses. This included the additional cost incurred by being disabled, the health implications, the identified needs to live a full life for those people who have learning or disability needs.
- The Healthwatch West Sussex report on the financial assessment service was also referenced as part of the response to the consultation.
- The MIG figures for the over 65 years are higher than those under 65 years and, therefore, the proposal to reduce the level, for those of working age would lead to inequality of treatment, in practice, if not in process.
- West Sussex is an expensive place to live and, therefore, any reduction in allowance was felt more by those on a low income. This cohort of people had little chance to work to improve their income and, therefore, there was a perceived increased risk of hardship and debt being incurred.
- Carers emphasised that they were providing care which already saved money for the County Council so this was seen as another saving. Due to the fragility of some carers a risk of carer break down was raised.
- Family members stated they would have to contribute more so that their relative still had the same opportunities.

- Providers observed that affected people might reduce their social activity reporting that this was already the case for some people. People also reported that they would have to cut out or reduce their social activity, such as attending groups or meeting friends, and this would potentially impact on their wellbeing and independence.
- It was reported by providers and families that people assessed with eligible social care needs were not taking up their full support because they could not afford their contribution. It was feared this would increase with any further reduction in income or allowance.
- It was reported from several group meetings that people had issues managing their budgets which was causing stress. It was felt that the proposed change may impact both people's social life and on their ability to pay living expenses.
- The draft Adults' Services Vision and Strategy emphasised the importance of community-based services for its future sustainability and it was felt that the MIG proposal could undermine people's ability to access support in the community.

For those who supported the proposal it was felt this was a modest amount to contribute towards care and reluctantly justified given this period of austerity.

Questions were asked regarding how neighbouring Councils treat those of working age when deciding what MIG they should provide. We have checked with Hampshire, East Sussex and Surrey County Council, Brighton and Hove City Council and all offer the statutory MIG for those of working age and have done so for some time.

Alternative Approaches or Mitigations

There were also common suggestions made by respondents.

- The County Council should lobby Government for additional funding for Adult Social Care
- Increase the Council tax precept for Adult Social Care.
- Cut waste within the Council
- Greater flexibility in support planning and funding in order to increase/reduce levels of support over time, as necessary, to avoid providing more support than a person's assessed need. Linking this with financial assessments to ensure care contributions were accurate.
- More advice about benefits, budgets and savings and debt recovery could be helpful, as would information about the benefits process.
- Information upfront as to the level of evidence required to support DRE claims would be helpful.
- Work with local business to create more job opportunities or work experience.
- Implement a transition period if the proposal is agreed.