

Proposed Bill to abolish charges for non-residential social care

Page 2: About you

Please provide your name and other contact details. Please provide at least one means of contacting you (address, e-mail or telephone) - e-mail is our preferred option. (NB: you will be given the option shortly to specify whether it is your name or your organisation's name that is to be used, and you may also request anonymity or confidentiality for your response.)

Your name (mandatory)

alan brown

Name of your organisation (if applicable - otherwise leave blank)

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Your Job Title (if applicable - otherwise leave blank)

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Contact details (please provide at least one of: email, telephone number, postal address) (mandatory)

[REDACTED]

Please indicate below whether you are content for your response to be attributed to you by name (either your name or that of your organisation)

I am content for my response to be attributed to me (as an individual)

Page 4: Your comments on the proposal

Q1: 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)?

Yes

Please explain your answer

At present there is a disparity between age where those presently under 60 subsidise those over 60 who get free personal care. So someone who's needs are 10 times worse but say 30 has to fully contribute. This shows that it has nothing to do with need. There is a large chasm between what health should provide which is dumped upon Local authorities and therefore ultimately on the service user. There is extremely devise and negative phrase from Local Authorities. In East Lothian the corporate charging policy states that all cost should be recovered and stated that, " disabled people are subsidised." No mention is made of housing tenants being subsidised or that parents of school children should pay full costs.

Q2. Do you agree that legislation is a necessary and appropriate means of addressing the issues identified?

Yes

Please explain the reasons for your response

Local authorities accept guidance from Cosla as if it is in fact the law. For example, the 'misunderstanding' over meal charges or that it is apparently to difficult to understand the basis that no charges maybe made if additional resources are provided to allow the carer a break. So Cosla wants it changed to they can charge,

Q2. Do you agree that legislation is a necessary and appropriate means of addressing the issues identified?

this is allegedly easier to understand !!!

Q3. 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?

Yes

What do you think the advantages and disadvantages would be?

Lack of capacity within differing authorities may mean that the eligibility criteria will be tightened and restricted even more than at present.

Q4. Should all social care related services be free at the point of delivery?

Undecided

Q5. What are the likely financial implications (if any) of the proposed Bill to you or your organisation? What (if any) other significant financial implications are likely to arise?

That, there will be cash to spend on our children.

At present, despite gerfec, no local authorities accept dependent children (non disabled) as part of their financial assessment. They are quite happy to place children into poverty contrary to their own existing policies.

Q6. What do you think the implications of the proposed Bill are for equality? If it is likely to have a substantial negative implication, how might this be minimised or avoided?

Positive

Please explain your answer. If you answered Negative, please suggest any ways this impact could be minimised or avoided.

Anti age legislation is in force, and yet if you are at present 59 and 300 days you will be required to pay for any personal care, however when you are 60 and 1 day, you do not. This is nothing less than discrimination, and if it was the other way around, I have no doubt that this inequality would have been resolved years ago.

Q7. Are there any other comments you would wish to make that are relevant to this proposal?

That the implications for under 60 charges for community care are at best being given a low priority within HSc integration, this needs to change urgently along with removing the piecemeal approach from health towards meeting their duty to fund continuing care.