

Alex Cunningham MP

Stockton North



Wednesday, 08 November 2017

Dear Sir Madam

CONSULTATION ABOUT RESPITE OPPORTUNITIES FOR PEOPLE WITH COMPLEX NEEDS, LEARNING DISABILITIES AND/OR AUTISM

Thank you for consulting me about the above provision and the options being offered to those who access them and their families.

Several parents/carers have been in touch with me and are clearly distressed about the proposals which will see at best a reduction in provision and in particular overnight respite care. The parents/carers can articulate far better than I ever could how important the provision is for their family member and I hope the many points they make themselves are considered when decisions are being made.

I acknowledge the issues raised on page four of your consultation document ranging from growing demand for services to the need for them to be fair and equitable. I also recognise the fact that costs are rising and that Government funding for NHS services has either been cut or its value diminished as inflation has gone up.

That said, I am concerned about the quality and detail of the information provided to those who need the services. There are no clear financial figures justifying the options you are making to those who need the services – ie the end of provision at Bankfields and Aysgarth or a limited provision at those two sites. I would be obliged if you would answer the specific questions – what does the alternative provision in option one mean in terms of location and number of nights/services available and what does the “limited” provision in option two mean – is it being cut by 10%, 20%, 50% or more?

Similarly, I’d be interested to know what alternative provision for day care alongside the two options is being proposed and who will be responsible for them. The provision you currently make is funded from NHS budgets. Whilst I recognise there is some related provision that may be covered by local authority budgets and even personal budgets, will the future proposed provision also be funded directly by the NHS. It would be counter-productive for the burden to shift from the NHS to local authority social care budgets as it would be the clients who would lose out.

Whilst recognising the issues raised on page four, can you confirm the extent of any “savings” or “cuts” to be made to the budgets for the provision of these services? A bubble on page eight of your document refers to a £1.5 million for services at Bankfields and Aysgarth – how much does your respective proposals save and to what would the “savings” be used for? What is the projected cost of maintaining the services at these two locations – as one option to help meet the growing needs referred to in your own document? And, having recognised increased costs to deliver what users and carers believe they need, what representations have you made to NHS England about the need to provide more resources to maintain and enhance the provision?

No-one can argue against the need to focus even more on the needs of the service users and their carers with clinically led support services – but your document fails to offer the reassurance to them all that overall provision will not be cut resulting in a heavier commitment from carers to look after their family members.

It is no good telling carers worn out by caring for some of our most vulnerable people that they will have this greater responsibility for whatever reason you want to come up with. They do a tremendous job for our community and if they didn't do so, many more vulnerable people could end up in full time care as their families may no longer be able to cope – and that at considerably greater expense than respite care.

I believe that service users and carers are being pushed into making a choice without having had the full facts spelt out for them – and they know that whatever choice they make, there will be a reduction in provision. If this is a case of a need to make cuts because of pressure on budgets, that ought to be made clear – likewise if increased demand means there is less cash to go around, again that needs to be made clear.

I am not sure of the timescale for decisions to be made in this matter but I think it is essential that the CCG pauses the process and properly addresses the issues raised by users, carers and others. Failure to do so will result in a loss of trust and confirm the impression of some carers that the consultation is nothing but a paper exercise.

I assume this response will be provided to Dan Maddison, Commissioning Lead and Heather Corlett, Assistant Director for Mental Health. I am copying this letter to both the Chair and Chief Executive of the CCG covering my area and the Chair of the Joint Scrutiny Committee which I understand is playing a key role in examining the proposals you have put to users and carers. I also plan to publish my response.

I look forward to your reply.

Yours sincerely

A handwritten signature in dark ink, appearing to read 'Alex Cunningham'.

Alex Cunningham MP

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