



**Elders Council of Newcastle**  
2nd Floor  
Biomedical Research Building  
Campus for Ageing and Vitality  
Nuns Moor Road  
Newcastle upon Tyne  
NE4 5PL

**Patron John Grundy**

To: Lets Talk Newcastle

17 January 2025

[www.elderscouncil.org.uk](http://www.elderscouncil.org.uk)

[info@elderscouncil.org.uk](mailto:info@elderscouncil.org.uk)

0191 208 2701

## **Elders Council of Newcastle Response to Newcastle City Council's Budget Proposals 2025-26**

### **Council Tax and Adult Social Care Precept**

Whilst none of us welcome increases in the Council Tax, we understand the need for the Council to raise funds through the increase in Council Tax and the Adult Social Care Precept in order to balance the budget. However, support does need to be in place for those people for whom these increases are unaffordable, wherever possible avoiding the need for court orders, which incur additional expense for those who are already in financial difficulties.

## **Reablement**

The main focus of our response is on the Reablement proposals as set out in the Integrated Impact Assessment (IIA).

Elders Council welcomes the focus on prevention and supporting people to maintain their independence by providing appropriate support, advice and information at an early stage and to avoid crises.

## **Terminology**

We suggest that absolute clarity is needed in relation to terminology, not just for the benefit of older people and carers but also for staff from other organisations in the system e.g. NHS, voluntary sector. Our understanding of 'Reablement' has been that it is a free service for up to 6 weeks aimed helping people to maintain or regain their independence, either avoiding hospital admission or recovering following hospital discharge ([Role and principles of reablement - SCIE](#)). The proposals set out in the IIA suggest that you are now using the term reablement more broadly to cover the preventative approach and that this is a short-term response may only be offered for 2-4 weeks. Does that mean that if people still require further input after 4 weeks they will be charged for the service they receive? How do you distinguish between the two different types of reablement?

We are unfamiliar with the term 'Home First' but from the context we are assuming that this is the hospital discharge process. Is that correct? Will Home First therefore be seen as a completely separate service. How will this be communicated to and understood by users of the service?

## **Adult Social CarePoint (Front Door)**

We are pleased that the work Elders Council undertook with Ways to Wellness on Front Door has been taken into account and found to be useful in the re-design of services. However, we are disappointed that we were not invited to be part of the process of developing Adult Social CarePoint and to continue to share our views and insights.

One of the key features/pluses of the Front Door model in Torbay is that it was developed and delivered by the voluntary sector. The solution you have developed in Newcastle is an in-house Council service which does not appear to be strongly linked to the voluntary sector.

Will Home First therefore be seen as a completely separate service and how will this be communicated and understood by users of the service?

## **Prevention and Rehabilitation**

We welcome the focus of the service on prevention and rehabilitation working with multi-disciplinary teams. We have always received very positive feedback from older people on their experiences of the Reablement service, which they often contrasted sharply with their experiences of ongoing home care support. A stronger focus on reablement, including training of staff from private providers seems a good way forward in consistently encouraging and supporting older people to maintain as much independence as possible. Our concerns, which you have already raised in the IIA, is whether there are adequate resources to implement this new model consistently across services.

When applying this new approach to the review of existing care packages, especially if it results in reducing the care package, it will be really important to be very clear with people about the reason for the change. Elders Council recently participated in research with the University of York regarding the importance of explaining Reablement well and of ensuring the engagement of family and carers with the service. ([Reablement: Supporting client and family engagement - SCIE](#)) We also have to recognise that for some people there are limits to their ability to regain skills and maintain their independence so on-going care and/or support is what is needed. We see clarity of communication and understanding of terminology as key factors in ensuring motivation and participation.

We also welcome the references to home adaptations, particularly in the light of the Government's announcement of more funding for Disabled Facilities Grants. Given the wealth of experience which Occupational Therapists and Social Workers have of trying to overcome the challenges of unsuitable housing, we would also like to see their views influencing the development of new housing in the city and championing the need for accessible homes for all, regardless of age or disability.

## **Assistive Technology**

Assistive Technology has its place, but we are concerned at the statement that it can 'negate the need for care packages'. Greater use of technology and especially Passive Remote Monitoring will result in more data being available, which requires analysis and a human response. If used well, this could result in the need for more support rather than less. We would welcome the opportunity to engage with the Council as the digital offer is developed.

## **Newcastle Neighbourhoods**

Elders Council is a strong supporter of Newcastle Neighbourhoods and the ABCD approach. Being able to access quality activities in the local neighbourhood which motivate people to get out and about and sustain their local connections are essential for people's quality of life. Most of this type of activity is provided by the voluntary sector, so it is important that Council also continues to support the VCS in its work, so that it has a firm foundation on which to base its neighbourhood work.

## **All Adults vs Older People's Services**

We can appreciate the rationale for bringing all adult services together under one umbrella, but given the complexity of the demands on services, we have some concerns that this may result in reduced services for older people. We note that less money was spent on older people in the last Adult Social Care report compared with learning disability and autism. There were also 190 fewer people drawing on long term care and support. This is of concern given the increase in the number of older people (65+) in the city (ONS Census 2021).

## **Consultation Period**

We appreciate the extension which you have given the Elders Council to enable us to compile this response as the consultation period for the budget has been very short, especially as it has fallen over the Christmas and New Year period.

**The Elders Council also endorses budget submissions made by Connected Voice on behalf of the VCSE sector.**

**Elders Council of Newcastle**

**17<sup>th</sup> January 2025**