

<b>BRIEFING</b>	<b>TO:</b>	Overview and Scrutiny Management Board
	<b>DATE:</b>	16.01.2018
	<b>LEAD OFFICER</b> <i>(Full name, title and Directorate)</i>	Shokat Lal, Assistant Chief Executive Assistant Chief Executive's Directorate
	<b>TITLE:</b>	Budget Consultation 2019-20 & 2020-21

## Background

- The scale and breadth of the budget proposals for 2019-2021 will impact the whole of Rotherham and its residents. For the first time, Rotherham Council intends to set a two-year budget in order to help deal with a further £30 million of required savings.

A number of proposals (ASRs) have been put forward from all services in order to help achieve these savings. A public consultation on the specific proposals took place from October 26<sup>th</sup> and closed on November 30<sup>th</sup> 2018.

As part of this consultation process, there was also a need to inform the public about the necessity of working in a different way and the scale of the challenges faced due to ongoing Government reductions, particularly, the cost of social care (one of the most expensive aspects of the budget) which helped to explain some of the difficult decisions faced by councils like Rotherham.

After reviewing budget consultation approaches from other areas, digital channels and social media proved more effective than public consultation events. Therefore a reduced number of face-to-face sessions were held, with the main focus on online engagement through the following channels:

  - Online questionnaire
  - Social media engagement – Facebook and Twitter
  - Short videos of the Leader answering budget related questions
  - Web content on Council website

A total of 1,181 people participated in the consultation overall, through online engagement, face-to-face sessions, letters and emails. The majority of the comments were made on social media. A breakdown of the responses follows.

## Online Consultation

- The online consultation was open for 4 weeks from the 26<sup>th</sup> October to 30<sup>th</sup> November and consisted of 5 questions relating to the budget proposals and the proposed rise in Council Tax. A total of 76 people completed the online consultation, the main responses to the questions are as follows:

**Q1. What Council services do you think are most important to the borough?**

Adult Social Care – 43%  
 Children's Services – 41%  
 Disability Services – 20%  
 Transport and Highways – 16%  
 Waste Management – 16%  
 Rotherham Sight and Sound – 16%

**Q2. Are there any particular savings proposals for 2019-20 and 2020-21 that you would like to comment on?**

Not to cut funding to the following:

- Sight and Sound – 20%
- Adult Social Care – 13%
- Learning Disability Services – 12%
- Children's Services – 12%

**Q3. After reading our proposals are there other areas you want to see further reductions to?**

Reduce Councillor Allowances – 20%  
 Reduce Mayor's Expenses – 7%

**Q4. What do you think would most improve the quality of life in your local community?**

Community Hubs and services – 22%  
 Reduced ASB and Crime – 20%  
 Rotherham Sight and Sound – 17%  
 Improved waste management – 17%

**Q5. Given we are getting less funding from Government, would you prefer a Council Tax increase of:**

Three per cent and protect £3 million of services – 26%  
 Five per cent and protect £5 million of services – 18%  
 A different increase – 26%  
 No response – 29%

**At what level would you prefer to set any increase of Council Tax?**

Nil/none – 30%  
 One per cent – 7%  
 Any increase as long as public can see the benefit – 10%

Overall, 44% would agree to some increase in Council Tax, provided they could see the benefit.

**Social Media Engagement**

- 3.** Social media posts on the budget have included information, promotion of the drop-in sessions and online questionnaire and short video interviews with the Leader in which he answered pre-submitted questions from the public. The videos were hosted on the Council website and shared on social media. The number of people engaged are as follows:

No. of	Comments	Likes/	Shares/	Video	Total
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	Posts		Reactions	Retweets	Views	Reach
Facebook	17	809	134	142	1,928	51,992
Twitter	42	195	47	62	4,698	100,046
YouTube	20				177	
<b>Totals</b>	<b>79</b>	<b>1,004</b>	<b>181</b>	<b>204</b>	<b>6,803</b>	<b>152,038</b>

Comments on the posts have generally been about:

- Councillor's allowances
- 'Free lunches' / 'free trips'
- The cost of the Mayor
- Number of councillors
- Leader's wages
- Senior Management wages
- Management/ staff wages
- Number of Managers/ staff
- Free car parking
- Road resurfacing
- Cost of recent waste changes
- Cost of interpreters
- Increases to Council Tax
- That decisions on the budget have already been made and the Council won't listen

The funding of Healthwatch, and cost of social care and children's services have been mentioned by one or two users, but they aren't common themes of the comments received on social media.

### Face-to-face Consultation Sessions

**4.** In addition to the online engagement, three informal drop-in sessions were held in north, south and central locations in the borough. These sessions provided an opportunity for people that may not have been able to engage online to ask questions about how the Council is funded and how we will work in future.

- Monday 12<sup>th</sup> November, 4pm-6pm, Wickersley Library  
Cllr Chris Read and Sharon Kemp attended
- Wednesday 21<sup>st</sup> November, 4pm-6pm, Rawmarsh CSC  
Cllr Chris Read and Sharon Kemp attended
- Wednesday 28<sup>th</sup> November, 3pm-5pm, Riverside House Café,  
Cllr Chris Read and Shokat Lal attended

A total of 32 people attended the 3 sessions in Wickersley, Rawmarsh and Riverside House, with 21 attending the session at Riverside House. The consultations in the other two areas were not well attended, with only 4 people attending at Rawmarsh and 7 people at Wickersley.

The main themes from the discussions were as follows:

- Adult Social Care
- Council Tax (willing to pay more for better services)
- Services need to be more joined up, move to digital services (but vulnerable people still need face-to-face assistance)
- Litter/fly tipping
- Grounds maintenance
- Concerns regarding the proposed cuts to Healthwatch
- Effect this will have on the deaf community who rely on Healthwatch for translators
- Need to look at the turnover of apprentices (and how the Council needs to do more to keep them)

#### **Letters and emails:**

A number of letters and emails were received from community organisations, prominent figures and service users opposing the proposed cuts to the following services:

- Healthwatch – 45 letters (including one with 28 signatures in support)
- Rotherham Sight and Sound – 24 letters

The letters regarding Healthwatch were all about how valuable people found the service and how much they had helped individuals in terms of advocacy, advice and support for vulnerable adults and families.

The letters in support of Rotherham Sight and Sound also mentioned how invaluable the service was in providing information, peer support and social activities for people with sight and hearing loss to enable them to remain independent and prevent loneliness and isolation.

Of particular concern for both organisations was the number of people they currently support and the impact on service users (particularly the deaf community in Rotherham) if there was nothing to replace them.

### **Recommendations**

- |    |  |
|----|--|
| 5. | 1. To note and consider the findings as part of the overall budget discussions |
|----|--|

## Appendix A – Letters from Organisations

Dear Anne-Marie

Cuts to prevention services for blind and partially sighted people in Rotherham:

We write concerning the decision taken by the Council to end a range of prevention services including the service supporting blind and partially sighted residents of Rotherham.

About RNIB:

We are the largest organisation of blind and partially sighted people in the UK. RNIB's Connect network is a growing community that brings together over 27,000 people across the UK affected by sight loss, including blind and partially sighted people, their friends, families and carers. More than 80 per cent of our Board of Trustees are blind or partially sighted. We support, empower and involve thousands of people affected by sight loss to improve lives and challenge inequalities.

As a campaigning organisation, we defend the rights of blind and partially sighted people to receive the vision rehabilitation/prevention services that they are entitled to and that meets their needs. We also campaign to ensure that those responsible for commissioning prevention/rehabilitation services adequately resource these services to ensure that they meet the needs of blind and partially sighted people and those at risk of sight loss.

The issue:

The proposal to not renew the funding for sight loss provision (page 21 of the Budget Options 2019/20 and 2020/21 paper presented to the Overview & Scrutiny Management Board on 24th October).

Living with Sight Loss:

There are an estimated 8,330 people living with some degree of sight loss in Rotherham. Of this total, 5,360 are living with mild sight loss, 1,870 are living with moderate sight loss and 1,100 are living with severe sight loss.

Cost of Sight Loss:

There are a number of different costs associated with the provision of eye health services, such as direct costs which includes inpatient procedures, outpatient procedures, residential and community care services and the ongoing treatment of eye conditions. There are also indirect costs caused by sight loss, including the provision of unpaid care by family and friends to those with sight loss, lower employment and absenteeism.

In NHS programme budgets, the combined spend on problems of vision in NHS Rotherham is £10.7 million pounds, or £39 per person in the general population. The proportion of overall programme budget spent on problems of vision is 3.3%.

The total indirect cost of sight loss is estimated to be £22,760,000. million pounds.

The indirect cost of sight loss per person is £90 in the general population.

Support:

The provision of emotional and practical support at the right time can help people who are experiencing sight loss to retain their independence and access the support they need. Patient experience in the eye clinic is crucial. It is here that people receive their diagnosis, undergo treatment and potentially go through the process of receiving a Certificate of Vision Impairment (CVI). Equally, when someone experiences sight loss it is vital for them to have support in their homes and communities. This could include social care paid for and provided by local authorities.

Falls are more common, and also more likely to have serious outcomes, amongst older people. In some cases, falls can lead to serious medical problems and a range of adverse outcomes for health and wellbeing. In Rotherham, as of 2015, it is estimated that:

1,045 people with sight loss aged over 65 experience a fall per year.

Of these falls, 494 are directly attributable to sight loss.

80 people aged over 65 with sight loss experience a severe fall per year (here, a severe fall is defined as a fall that results in hospital admission through A&E).

Proposal:

Whilst RNIB appreciates the very severe budgetary pressures on the Council at the present time, it is still under an obligation to ensure that spending decisions affecting vulnerable customers are made in a lawful manner.

We would like to appeal to the council to take the following steps:

Undertake a full assessment of the Council's obligations in respect of the Care Act and the impact that any proposed cuts to preventative services provided by voluntary organisations are likely to have on the discharge of these obligations.

Ensure that any decision taken by the Council in respect of preventative services is taken lawfully including a full Equality Impact Assessment.

RNIB would welcome further conversations with RMBC around support for people living with sight loss across the area, as we have had (successfully) in the past.

With thanks

Scott

Scott Jobson

Network Manager Yorkshire & Humber

RNIB (Royal National Institute of Blind People) Fairfax House Merrion Street Leeds

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30 November 2018

Mrs S J Keene  
Independent Chair  
Rotherham Safeguarding Board,  
Riverside House,  
Rotherham

Dear Sharon,

Budget 2019/20 - consultation response.

Many thanks for the opportunity to contribute to the consultation in respect of Rotherham Metropolitan Borough Councils budget proposals, for your letter and the helpful meeting this week.

The proposal to achieve a two year budget is very positive and will assist in providing for stability and certainty, especially with those services most influenced and affected by demand management pressures. The work to benchmark expenditure and service outcomes will inform service transformation to achieve budget balance in the future. The commitment to Adult Services stability and sustainability in this and previous year's budget process is recognised.

In the context of the near impossible demands from Central Government for budget reductions in Local Authorities, the approach set out in Rotherham is welcomed. The Adult Safeguarding Board has seen at first hand the consequences of limited budget provision and has been only been able to develop in the last three years as a result of the determination, dedication and commitment of staff in Rotherham Metropolitan Borough Council and partner agencies.

As with other services, progress has been limited by the resource envelope. You are aware from our ongoing, regular and valued discussions that the absence of dedicated policy, performance and administrative support has meant that developments in the Adult Safeguarding Board have been slower than anticipated, slower than officers would want and arguably slower than should be the case.

As Independent Chair, my perception is that staff from Adult Services have endeavored to deliver the change necessary within the resources available and in the context of significant staffing change in the service. Their commitment and support has been appreciated. Thanks are also due to wider RMBC staff and partners in other agencies, particularly the Health Service, who have enabled specific developments to take place.

In the next two years it is crucial to build on existing developments and create additional momentum in order to keep pace with the requirements and standards of a modern Adult Safeguarding Service.

The Board has identified significant areas for development which include:

- Service user and carer engagement
- Prevention and early help
- Policy and procedure development
- Quality and assurance
- Multiagency training

The pace of change and ability to deliver on these priorities will be influenced by the resources available. Ongoing review will be required in order to be satisfied that the work of the Board and multiagency responses remain appropriate and safe.

It is fully recognised that financial responsibility for safeguarding is not the sole responsibility of RMBC and other Statutory Agencies have a part to play. I look forward to ongoing discussion and engagement as the detailed prioritisation of budget, partnership and service development takes place.

With Best Wishes

Yours sincerely,

Sandie Keene CBE  
Independent Chair  
Rotherham Safeguarding Adult Board.





RECEIVED

21 NOV 2018

Rotherham MBC

Ms Sharon Kemp  
Chief Executive  
Rotherham Metropolitan Borough Council  
Riverside House  
Main Street  
Rotherham  
S60 1AE

Our Ref: SC5580

16 November 2018

Dear Sharon

I am writing to you regarding the proposal to withdraw funding from Rotherham Sight and Sound, which is contained within RMBC's recently published budget proposals.

As you will be aware, I have expressed concern for several years about the support for and services made available to Rotherham's sensory disabled community.

It is therefore of significant concern that the very service RMBC has frequently pointed to as an example of the support it does provide is itself facing being defunded, only a relatively short time after its initial commissioning.

Sight and Sound provides a variety of services to the community, many of which had previously been provided by the council directly, but which are no longer viable to be performed in house. Services such as helping sensory disabled people to read and understand letters, assisting with arranging medical appointments and ordering repeat prescriptions are absolutely essential for many with sensory disabilities.

Furthermore, sensory disabled people are particularly vulnerable to isolation, loneliness and marginalisation. Social and support groups

**Sarah Champion**

Member of Parliament for Rotherham

Moorgate Crofts Business Centre, South Grove, Rotherham, S60 2DH

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facilitated by the Sight and Sound Service provide a vital link for the community. Should they be ended, I am troubled that deeper marginalisation may be the inevitable result.

I am aware that the proposals within the budget suggest that the service will transition to being self financing. However, I also know that media reports quoting sources from the service suggest this approach was not previously discussed with them, nor is it deemed viable.

I therefore consider it likely that the withdrawal of local authority funding may result in the ending of the service altogether. Given the paucity of alternative services for the sensory disabled community in Rotherham, the effects of this could be devastating.

Whilst I of course recognise the extremely challenging financial situation the council faces as a consequence of massive cuts in central government funding, I would urge RMBC to consider all options to ensure the Sight and Sound Service remains viable and that the Rotherham's sensory disabled community continue to be able to access the services and support on which they depend.

I would be grateful if you could ensure my comments are considered as part of the public consultation on the budget proposals and for any reassurance you may be able to provide.

I look forward to hearing from you.

Yours sincerely

A handwritten signature in blue ink, appearing to be 'Sarah Champion', written over a faint horizontal line.

Sarah Champion MP  
Member of Parliament for Rotherham

Direct Dial: 01709 302702  
Our ref: CE/JR  
Email: [Christopher.edwards7@nhs.net](mailto:Christopher.edwards7@nhs.net)  
Date: 28<sup>th</sup> November 2018

**Oak House  
Moorhead Way  
Bramley  
Rotherham  
S66 1YY**

By email to: [Sharon.kemp@rotherham.gov.uk](mailto:Sharon.kemp@rotherham.gov.uk)

Sharon Kemp  
Chief Executive  
RMBC  
Riverside House  
Main Street  
Rotherham  
S60 1AE

Dear Sharon

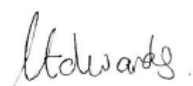
Thank you for your letter dated 17th October 2018.

NHS Rotherham CCG understands the significant budget pressures you face and welcomes the chance to respond to your consultation.

We will need to work closely with you on your plans for Adult and Children's services to ensure we maximise the benefit of the Rotherham Pound. We also need to ensure that we fully understand any changes to services that will impact on the services commissioned by NHS Rotherham CCG.

We have already started to work even closer together with our joint Rotherham Health and Social Care Place Plan and our joint Better Care Fund. It is important that we continue to implement our plans as the budget reductions are implemented. We look forward to continue working closely with you over the coming years to jointly meet this significant challenge.

Yours sincerely



Chris Edwards  
Chief Officer NHS RCCG



Dr Richard Cullen  
Chair of NHS RCCG

Nathan Atkinson  
Assistant Director Strategic Commissioning  
Adult Care, Housing and Public Health  
Rotherham Metropolitan Borough Council

24 November 2018

Dear Nathan,

Many thanks for the opportunity to discuss the funding and contract situation regarding Healthwatch Rotherham services.

Among its duties under the Health and Social Care Act 2012, Healthwatch England has a legal requirement to provide general advice and support to local authorities and have an opinion on the effectiveness of Healthwatch services.

The main points of our discussion and issues we covered are summarised below:

#### **Proposed level of funding for Healthwatch Rotherham**

The proposal document presented to Rotherham Borough Council is to reduce the budget from £156,735 to £90,000 i.e. a 40% reduction in funding. This will be the second reduction in two years for Healthwatch Rotherham and appears disproportionately high relative to the overall cuts Rotherham Borough Council has to make.

Central Government provides funding for local Healthwatch through two routes: 1) the Local Government settlement and 2) the Local Reform and Community Voices section 31 Grant (LRCV). The Local Authority Social Services letter (LASSL) sets this out and also explains that the LRCV grant is in fact the smaller element of these two Healthwatch funding streams with the larger element having been rolled into the Local Government Settlement.

An indication of the balance of funding between these three different activities can be gauged from Annex A of the LASSL, which sets out a national LRCV grant of £33m with £13.8m (41%) allocated for local Healthwatch. Using this as a guide it would suggest that the funding for Healthwatch activity in Rotherham would fall in the region of £80,000, with an additional higher amount allocated for Independent NHS Complaints Advocacy. Comparing this with the £90,000 budget proposed for Healthwatch Rotherham (which would be funding both the Healthwatch Rotherham service and the Independent NHS Complaints Advocacy service) this indicates that in reality Rotherham Borough Council is making around £45,000 available for the Healthwatch activity which is significantly lower than the indicative LRCV allocation of around £80,000 (and even lower when taking into account the additional funding for Healthwatch activity that is allocated in the Local Government Settlement).

### **Healthwatch Viability**

Healthwatch England has serious concerns that an effective Healthwatch can be delivered on the proposed budget. This would place Rotherham as possibly the lowest funded

Healthwatch in England and a significant outlier compared to Healthwatch serving a similar population size. The concern is that this level of funding would not allow sufficient staffing to deliver a full time and effective service, including advice and information which is one of the statutory activities of Healthwatch. It could also result in reduced leadership function which is a key ingredient in Healthwatch being able to convert evidence into insight for the health and care system. Furthermore, the National Committee of Healthwatch England would need to consider very carefully if such a proposal jeopardised the reputation of Healthwatch before issuing the brand licence.

### **Prospective market**

With the proposed level of funding we question whether there is a market to deliver an effective Healthwatch service. This could jeopardise continuity of service, lose the knowledge and expertise built up through the current staff and volunteers and could result in further costs incurred through the procurement process itself.

Healthwatch England recognise the financial pressures and difficult decisions facing local authorities in the current climate. However, the vast majority of councils have chosen to recognise the importance of giving their community a voice by maintaining their investment in their local Healthwatch in the context of other, very difficult decisions.

We are working closely with commissioners and providers of Healthwatch across England to develop a new quality framework to help commission and deliver an effective Healthwatch which we very much hope will assist local authorities going forward.

Healthwatch England are committed to working with Rotherham MBC to support the commissioning and delivery of an effective Healthwatch. We will await the results of the consultation on the current proposals to see how we can best support Rotherham MBC and Healthwatch Rotherham.

Kind regards

Gavin Macgregor  
Head of Network Development

## **Submission to Rotherham MBC relating to the proposal not to renew the current contract funding Rotherham Sight & Sound**

### **Background**

We were originally approached in late summer 2016 by RMBC to partner with them to provide a range of services to support people with a sensory impairment in Rotherham. Initially this was offered as contract until 31<sup>st</sup> March 2018 but SRSB stated that it would not be practical for in effect a 1 year contract and eventually a 2 year contract to 31<sup>st</sup> March 2019 was agreed, the variation to 2 years being done under “officers delegated powers”.

The proposal to not renew the funding (page 21 of the Budget Options 2019/20 and 2020/21 paper presented to the Overview & Scrutiny Management Board on 24<sup>th</sup> October) states “The new service called Rotherham Sight and Sound, located at Ship Hill in Rotherham town centre commenced in October 2017. It is delivered by Sheffield Royal Society for Blind. Funding for the project was agreed for a two year period and the provider agreed that it would be a time limited investment to pump prime their Rotherham offer, with a view to the service being self-financing from there on in.”

There are 2 errors in this statement which we want to highlight and should be corrected:

- The service actually commenced in April 2017 with the Ship Hill Centre opening on 1<sup>st</sup> August 2017
- More importantly, SRSB were never made aware that the service was intended to be self-financing at the end of the initial 2 year term. The original proposal agreed at the Cabinet & Commissioners Decision Making Meeting on 12<sup>th</sup> September 2016 (page 173) states “The new service will be monitored for outcomes/outputs and value for money tested throughout the pilot period and a new service specified based on the findings of the review. A tender on the open market would ensue commencing September 2017 to secure services beyond the end of March 2018 – on conclusion of the pilot period.

Had SRSB been made aware that the service was to be self-financing after the initial 2 year term we would not have entered into the contract.

We know how difficult it is to raise sustainable funding – SRSB was established 158 years ago and throughout that period has been helped by numerous substantial legacies. The people that left us that money expected it to be used for the benefit of people in Sheffield so it is not available for Rotherham. It will be many years before we can expect to generate sufficient income in Rotherham to fully fund the service. The annual operating costs for Rotherham for the year ended 30<sup>th</sup> June 2018 were £194,707 as per our audited accounts, so even with £140,000 of income from RMBC we have invested heavily ourselves. We did not incur this level of costs through poor management; it was a conscious decision to develop a service for the long term, confident that the quality of our services would secure a further contract when it went out for tender.



**Impact of the decision to not renew the funding**

1. Rotherham Sight & Sound (RSS) will cease to exist and RMBC will be letting down almost 700 service users.
2. The number of people not receiving support with their disability will increase.
3. The number of people referred by RSS to social services for support will decline to nothing - This is a very big negative in terms of the council's responsibilities under the Social Care Act 2014.
4. RSS currently issues equipment on behalf of RMBC, with a home demonstration/training in the safe use of the equipment if required. Without RSS, RMBC staff will have an increased workload **OR** service users will go without equipment or training in the safe use of the equipment. Single Point of Access (SPA) were delighted when we took over from them the issuing of equipment as they felt they were not giving the service users a good level of service.
5. Without RSS some 700 service users will not have a hub for social and leisure activities. This will result in social isolation which impacts upon wellbeing in terms of both their mental and physical health.
6. The Eye Clinic Liaison Officer (we understand that you fund this service) has benefitted greatly from our service, being able to refer people to us confident in the knowledge that they will receive a good service from us. Without RSS there will be no organisation for the ECLO to refer patients to, which is the unenviable situation she was in prior to us operating in Rotherham.
7. A decline in mental and physical health will result in much more costly interventions in the future in terms of both health (hospital admissions) and social care. It is difficult to evidence what doesn't happen in the future as a result of early intervention but there is a lot of national evidence to support this.
8. Without RSS the service users will not receive any welfare benefits service, thereby reducing the "Rotherham pound" which will have a negative impact upon the general economy of Rotherham.
9. Without RSS the service users will struggle to access services from statutory organisations e.g. Disabled Parking Permits (Blue Badge), disabled mobility passes (bus pass) amongst many other services.
10. Without RSS there will not be any awareness raising of good eye health, thereby increasing the likelihood of sight loss in the future.
11. Without RSS there will not be any promotion to statutory and commercial businesses around accessibility of information or training for the staff of those organisations in visual and hearing impairment awareness. This will result in more isolation for service users with all the associated negative impacts.
12. Without RSS the "Living with Sight Loss Course" will not happen. This introduces people who have started to lose their sight to the various support services they can expect to receive, technology etc., enabling them to live as independently as possible.

13. Many local sight/hearing impairment support groups meet at our Ship Hill Centre (free of charge) and without that facility they will struggle to exist. These groups include the Rotherham Hard of Hearing Group, Rotherham Macular Group, Cochlear Implant Group and Tinnitus Support Group.
14. RSS operates the “Hear to Help” scheme on behalf of Action on Hearing Loss providing a drop in service for hearing aid battery, tubes and minor repairs. Without RSS the town centre drop in, Monday to Friday 9:30am to 3:30pm, will no longer be available for people who are hard of hearing.

The above points are endorsed by a statement from Visionary -

“Visionary is the membership organisation for local sight loss charities throughout the UK. We are concerned that the proposed changes to the services provided by Sheffield Royal Society for Blind will have a significant negative impact on blind and partially sighted people. People living with visual impairment are at risk of isolation and loneliness which can have a long term detrimental impact on mental and physical well-being; therefore it is crucial that these factors are considered in any decisions taken which will increase risk factors already present for blind and partially sighted people.”

Fiona Sandford, CEO, Visionary, November 2018”

### **Reference Documents**

*Living with Sight Loss: Updating the National Picture – RNIB/NatCen Social Research 2015 (Copy attached)*

This covers many aspects of a visually impaired person's life but a few points worth picking out:

- Wellbeing - The latest figures show that USoc respondents with sight loss are nearly three times as likely as people with no impairment to report feeling depressed.
- Health - Respondents with sight loss are 24 times more likely than respondents with no impairment to report bad or very bad general health than those without any impairment.
- Work - Respondents with sight loss are less likely to be in work than respondents with no impairments.
- Finance - Respondents with sight loss are less likely to be high earners and more likely to be on a low income.
- Welfare Benefits - Respondents with sight loss are more likely than those without impairments to have had difficulties accessing benefits services.

*Depression and anxiety in visually impaired older people. - Ophthalmology. 2007 Feb;114(2):283-8. Evans JR, Fletcher AE, Wormald RP.*

Visually impaired people had a higher prevalence of depression compared with people with good vision. Of visually impaired older people, 13.5% were depressed (GDS-15 score of 6 or more) compared with 4.6% of people with good vision.



**Questions**

Have RMBC carried out an Equalities Impact Assessment on the withdrawal of this service as a consequence of not renewing the funding?

Have RMBC considered the potential for increased workload on a reducing RMBC staff with the resultant impact this will have on both service users and RMBC staff?

Have RMBC considered how much potential unidentified need there will be as a result of no referrals being generated by RSS?

Have RMBC considered how this will have a negative impact upon their prevention agenda?

Have RMBC considered that they are storing up an enormous cost for the future as a result of all the issues highlighted under the preceding Impact section? This cost will significantly outweigh the short term savings through not renewing the RSS contract.

Have RMBC considered the impact on British Sign Language users and their user-led representative organisation, Deaf Futures?

Have RMBC considered the impact of the loss of service provision in Rotherham resulting from the added value contributed by SRSB (£54k year ended 30<sup>th</sup> June 2018).

**From:** Short, Peter-Cllr  
**Sent:** 23 October 2018 09:39  
**To:** Lal, Shokat  
**Cc:** Cowles, Allen-Cllr; Kemp, Sharon  
**Subject:** Budget Savings Option/Restructure of Democratic Services

Dear Shokat,

As deputy leader of the UKIP opposition group and also a member of the OSMB I wish to register my concerns over the proposal of the reduction of the scrutiny support team by one officer, my reasons are outlined below.

Scrutiny Officers provide vital support to Councillor Members who sit on Committees, BOARDS and Commissions, I have found their involvement and commitment to be so important and I do not wish to see this good work diminished in any way in the future.

The past has shown that good scrutiny work must be “seen to be done”, in order to ensure historical mistakes are not made again. Indeed the people of Rotherham will be looking at the work that scrutiny committees do, and at this moment of our Towns progress when Commissioners have now left it will be seen as a negative move.

I do understand that budget savings must be made, however the proposed restructure of Democratic Services to include the reduction scrutiny of one officer will send the wrong message at this time. Therefore I cannot support this action and ask we think again of other ways to save money within the department.

Yours sincerely  
Cllr Peter Short Sitwell Ward

**Tony Clabby**

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**From:** phil.turner22@BTInternet.com  
**Sent:** 28 November 2018 12:00  
**To:** chris.read@rotherham.gov.uk  
**Cc:** Tony Clabby  
**Subject:** Proposed cuts to Rotherham Healthwatch budget

Sent from my Huawei Mobile

Dear Cllr Read,

Proposed cuts to Rotherham Healthwatch's budget:

Rotherham TUC was shocked and appalled by the savage cuts proposed to Rotherham Healthwatch's budget by Rotherham Council, which will have a huge impact on its advocacy service. TUC members were unanimously opposed to the planned cuts.

Representing thousands of trade unionists across the borough, trade unions see the severe daily damage to people's lives being done by Tory government cuts to health and social care. We believe a Labour council should be fighting such cuts, not implementing them.

We can see no justification for these cuts other than to weaken or remove entirely the vital voice that Healthwatch gives to the most vulnerable.

We urge the council to reconsider so that support can continue for adults and families when they need it most.

Yours sincerely,  
Phil Turner secretary  
Andy Searson, chair