

Sustainability and new charge to the Carr Gomm Responder Service

About the Proposal

Title of Proposal:

Sustainability and charging for the Carr Gomm Responder Service

Intended outcome of the proposal:

To generate income from this service to partially offset the cost of the contract to support budget constraint and long term sustainability

How does your proposal align with strategy?

This proposal is aligned to the HSCPs requirement to provide sustainable and affordable services and to deliver a balanced budget. There are a number of services which the HSCP applies a charge to, particularly those services which it does not have a statutory requirement to provide

Description of proposal.

It is proposed that the HSCP introduces a £5 per week charge for access to the responder service which is provided by Carr Gomm 24/7. This is a non-statutory service which was originally designed to provide an urgent response to clients activating their telecare alarm, and who had no named key holder who could respond to their needs. There are currently around 2500 telecare clients of whom around 800 have no identified key holder, but in the vast majority of cases it is the responder service who are tasked with responding to client's requests for assistance. Clients will be given the option of opting out of the responder service if they have a nominated key holder and in addition there will be fee waivers for those who meet the standard waiver criteria.

Fees and charges are not delegated to the IJB and would ultimately be decided by the council. A nominal charge alongside telecare which is also a chargeable service would support the ongoing sustainability of a service which has been identified through engagement as a key service for rural communities.

Lead and Appropriate Officers

Lead officer: James Gow

Lead Officer Title: Chief Finance Officer

Lead officer service: Finance

Appropriate officer: Nicola Gillespie

Appropriate officer Job title: Head of Complex Care & Registered Services

Who will deliver proposal: Simon Deveney

Signed off by: James Gow

Date: 17/03/2026

Evidence

Data - What data have you used to inform the IIA

We compared the provision of this service with the type of services being provided in other areas of Scotland, and specifically with the service being provided in Highland. In most areas responses to telecare are provided by individuals named by the client as key holders. This is how the service in

Highland operates. In those areas clients who cannot provide a named individual do not have access to telecare. In Argyll & Bute there are around 2500 telecare clients, of which around 800 have not provided a named key holder and would, if living in Highland, not receive this service. We have looked at the estimated income generated through various weekly charge options from £1/week to £5/week. We have also considered the number of current telecare clients who have payment waivers. This is generally between 15 - 25 out of 2500 clients.

Other information - This may include reference to reports by other people / organisations relevant to the impacts you identified.

No other relevant information used/identified

Gaps in evidence:

At this time we do not know how many clients (with named key holders) will choose not to have access to the Carr Gomm responder service if a payment is required. It is also not known how many of the 800 clients without a named key holder will opt out or be unable to afford the charge. Both of these gaps in evidence will be ascertained prior to implementation.

Knock on affect:

Some clients may choose to opt out of the responder service

There may be an impact on other means tested services income streams if this pushes the clients over the means test threshold.

Knock on affect details.

There will be an increase in the charge to telecare clients by £5 per week (£260 per year). This will be in addition to the £6.85/week currently charged for telecare equipment, giving a total weekly charge of £11.85

Monitoring - How will you monitor the impacts of your proposal.

All current telecare clients will be written to advising of this new charge and giving them the option to opt out if they do not wish to make this payment. The Telecare HQ team will monitor the opt out rate, and also the number of waiver requests and approvals and any risk. This will be disaggregated by equality characteristics, and will be reviewed and reported monthly. This will be reported through SLT, and the Finance and Policy Committee, and the IJB as required

Fairer Scotland

Impact on service users

Service users	Impact
Mainland rural population	Negative
Island population	No Impact
Low income	Negative
Low wealth	Negative
Material deprivation	Negative
Area deprivation	No Impact
Socio-economic	Negative
Communities of place	No Impact
Communities of interest	No Impact

Impacts details.

The impact would be financial for clients. The cost is being set as low as possible to ensure minimal impact. It is estimated that each visit by the Responder service costs the HSCP between £15-£30, based on the hourly rate for this service, so a weekly charge of £5 is well below the actual cost of a single visit. All clients will have the option to opt out and some will be covered by waivers. The majority of waivers at present are for DS1500 (terminal and end of life). Those clients would

automatically have a waiver for this new charge. There will be no charge for most island clients as the responder service is only available on the mainland (and Bute)

Impact on service deliverers

Service deliverers	Impact
Mainland rural population	No impact
Island population	No Impact
Low income	No Impact
Low wealth	No Impact
Material deprivation	No Impact
Area deprivation	No Impact
Socio-economic	No impact
Communities of place	No Impact
Communities of interest	No Impact

Impacts details.

None

Don't knows

Not applicable

Due regard

The HSCP has kept the proposed charge as low as possible to cover the additional administrative costs, and allowing for opt outs and waivers. The majority of current telecare charge waivers are for DS1500/Terminal illness, and very few for financial or other reasons. Income maximisation will still be undertaken with all clients who are concerned about this additional payment and they will be supported to apply for a waiver if necessary. Clients and their families will receive written notification and sufficient time to consider whether to opt out or apply for a waiver. They will be also supported by telecare staff during this part of the process.

Consumer Duty

Does your proposal affect individuals, businesses or both?

This proposal affects individuals

On the basis of your assessment, what are the likely impacts of your proposal?

Consumer Impact	Rating
Choice	Positive
Fairness	No Impact
Redress	No Impact
Safety	No Impact
Information	No Impact
Access	No impact
Representation	No Impact

Positive impacts you have identified:

This proposal for the first time gives clients the choice of how their unplanned care needs are met. Currently the default outcome of a telecare call activation is for Carr Gomm to be contacted and requested to visit. Clients will now have the option of only having their named key holder(s) visit

when unplanned care is required. For the 800 clients without a key holder, they will be asked/ encouraged to provide one.

Negative impacts you have identified:

Additional cost to clients of £5 per week (£260 per year) which is in addition to the £6.85 per week payment for telecare (£357 per year). Total annual cost of £617. There is therefore a risk that some low income clients will opt out despite not having an alternative key holder who can respond

What alternatives have you considered which can improve outcome for customers and/or reduce harm?

We had considered reducing the operating hours of the responder service. Prior to 2022 the service was provided over 20 hour per day with a 4 hours gap from 8pm to midnight. We have looked at various options to spread that gap over the day rather than as a block. This would have had a similar financial benefit to the HSCP but would have increased risk for clients. A small weekly payment should have the least impact on clients. We considered various lower weekly rates but concluded that to meet the administrative costs and to ensure a reasonable income allowing for opt out that £5 was the lowest level we could set the payment at. We ruled out means testing as this charge is directly aligned to the telecare charge which is not means tested.

How have you reduced harm to consumers through the development of your proposal?

As mentioned above we had considered reducing the operational hours of the Responder service. This would have increased the risk of harm

If you have not been able to reduce harm to your consumers, why not?

Children Rights and Wellbeing

Are there any aspects to your proposal which directly impact on children?

We have screened this proposal for relevance and concluded that a Children's Rights and Wellbeing Impact Assessment is not required because this proposal will not obviously impact, directly nor indirectly, children under the age of 18.

Direct impact on children details.

None

Are there any aspects to your proposal which indirectly impact on children?

No

Indirect impact on children details.

None

Children rights

Children rights	Impact
Article 2: (non-discrimination) The Convention applies to every child without discrimination, whatever their ethnicity, sex, religion, language, abilities or any other status, whatever they think or say, whatever their family background.	No impact
Article 3: (best interests of the child) The best interests of the child must be a top priority in all decisions and actions that affect children.	No impact
Article 6: (life, survival and development) Every child has the right to life. The council must do all it can to ensure that children survive and develop to their full potential.	No impact
Article 12 (respect for the views of the child) Every child has the right to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously.	No impact

Have you identified any other article as being relevant to your proposal?

No

Children's wellbeing

Children wellbeing	Impact
Safe	No Impact
Healthy	No Impact
Achieving	No Impact
Nurtured	No Impact
Active	No Impact
Respected	No Impact
Responsible	No Impact
Included	No Impact

Island Community

How many islands does your proposal affect?

One

Which islands are affected by your proposal?

Bute. None of the other island are covered by the responder service and therefore no charge would be applied to those telecare clients. During engagement Bute has noted this service as a key part of the infrastructure of safe care on island.

Does your proposal impact on Island communities?

Island community	Impact
Demography	No Impact
Economy	No Impact
Society	No Impact

Equality Impact

Equality impact on service users

Service users	Impact
Disability	Negative

Race	No Impact
Marriage and civil partnership	No Impact
Religion or belief	No Impact
Sex	Negative
Pregnancy and maternity	No Impact
Age	Negative
Sexual orientation	No Impact
Gender reassignment	No Impact

Impact on service users:

The main impact on any service user will be an additional weekly payment of £5. Older people and people with a disability are more likely to be users of this service than other groups in the community. Additionally as females make up a higher proportion of the older age group they are also more likely to be affected

Don't knows identified.

We do not know: how many service users will chose to opt out of having access to this service; how many will apply for a waiver; and how many will exceed the means test threshold for other paid for services

Equality impact on service deliverers

Service deliverers	Impact
Disability	No Impact
Race	No Impact
Marriage and civil partnership	No Impact
Religion or belief	No Impact
Sex	No Impact
Pregnancy and maternity	No Impact
Age	No Impact
Sexual orientation	No Impact
Gender reassignment	No Impact

Impact on service deliverers.

None

Don't knows identified.

None

Due regard.

The majority of current telecare charge waivers are for DS1500/Terminal illness, and very few for financial or other reasons. Income maximisation will be undertaken with all clients who are concerned about this additional payment and they will be supported to apply for a waiver if necessary. Clients and their families will receive written notification and sufficient time to consider whether to opt out or apply for a waiver. They will be also supported by telecare staff during this part of the process