

# Telecare Charging Consultation Feedback Report

May 2025



# 1 Background

Shropshire Council undertook an engagement project to consult on proposals to charge for Telecare in January 2025 and the feedback obtained is covered in this report. Telecare is a service that helps to support people to live independently. It provides reassurance that Telecare clients and their carers can access and receive emergency support 24 hours a day. A standard telecare alarm package usually comes with a base unit. This either plugs into the telephone line or connects to the internet. It also comes with a call button, which can be worn as a pendant around the neck, wrist strap, and sometime includes falls detectors worn on the wrist and sensor mats. The call button is the part used call for help when needed or some equipment can generate automatic alerts in the event of particular issues arising such as a fall. When activated the call will be picked up by a Response Centre which operates 24/7. The response centre assesses the situation and makes a decision about the help needed. This might be to call an emergency contact such as a family member or friend, call a service listed on the person's record or to call emergency services.

In some areas, the Telecare Responder service provides assistance and home visits to check on clients' wellbeing. While this service is not currently available in Shropshire, the consultation included a request for feedback to determine if it would be beneficial.

Budget constraints and the financial context for local councils has led Shropshire Council to explore ways of recovering some of the costs associated with running Telecare services. cost of social care services. Around £4 in every £5 the council spends is on social care, looking after the most vulnerable people in the county. More people than ever now need this support, which the council must provide, while costs to do so are rising. Central Government funding restrictions mean that the Council has been looking at alternative ways to recover some of the costs of running some services. One of the options is to introduce charges for some of the services that were previously free.

Shropshire is currently one of very few councils that do not charge any residents for the Telecare service. The typical charge for Telecare services in other councils ranges from £1.50 to £19 per week. Introducing a charge in Shropshire would bring the council in line with other areas and allow Shropshire Council to sustain and develop the service.

The Telecare service is a non-statutory service (services which the council is not obliged to provide) and often used as part of a person's Support Plan to meet their eligible care needs; however, there are currently examples of people with no eligible needs receiving these services who are not being charged. For people with lower-level needs or as a preventative measure, the proposal being consulted on is to ask for a payment towards the service.

The proposal is to ensure the following principles are applied consistently to non-statutory services:

- If a person receives a non-statutory service to meet their eligible needs, this would form part of their overall Support Plan and financial assessment.

- If the council chooses to provide a non-statutory service to a person who doesn't have eligible needs or their eligibility has not been established, we would charge the actual cost of that service.

Features of the charging proposal are:

- Shropshire Council is proposing to introduce a charge for Telecare of £3.45 a week. This charge would apply to both existing and new users of Telecare.
- Residents who receive a package of care from Shropshire Council or those entitled to after-care services provided under Section 117 of the Mental Health Act will not pay for telecare.
- New users will be asked to cover a one-off start-up fee of £35.00.
- New users would have a free 6-week trial of the service as part of the proposals, under a reablement package as per the legislation.
- The charge would be the same no matter how little or often the alarm system is triggered
- All Telecare equipment remains the property of the Council
- The charge will be reviewed annually when the Council sets its budget, fees and charges.

An online survey was promoted widely as a method of gathering views, and users of the Telecare service received a letter and copy of the survey to enable them to share their views. To obtain feedback the consultation advertised through Shropshire Council's newsroom, through survey and consultation email alerts on GovDelivery, and was hosted on Shropshire Council's Get Involved consultation and survey pages.

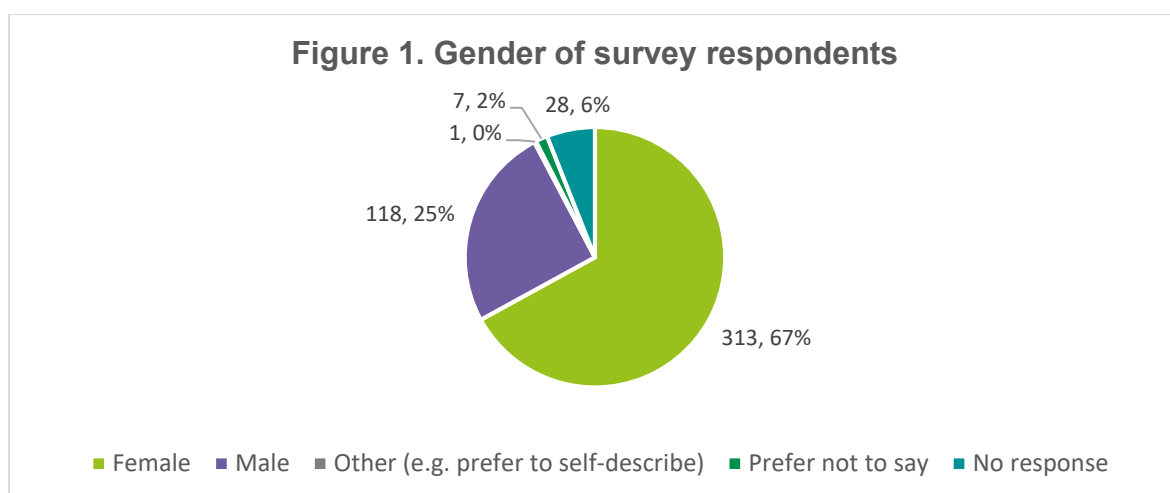
The survey ran from 20<sup>th</sup> January to 10<sup>th</sup> March 2025. Alternative options were offered to encourage as many people as possible to share their feedback. Those unable to complete the online survey were offered email and postal feedback options and alternative versions of the survey were also offered for anyone who may have found standard options difficult to complete (e.g. large text or telephone were offered). An easy read briefing paper, easy read survey and printable survey form were made available in addition to ensure as many people as possible felt able to participate.

The consultation survey resulted in 467 responses. Additional analysis is possible with the data gathered but the main results of the survey are set out within this report under the following sections:

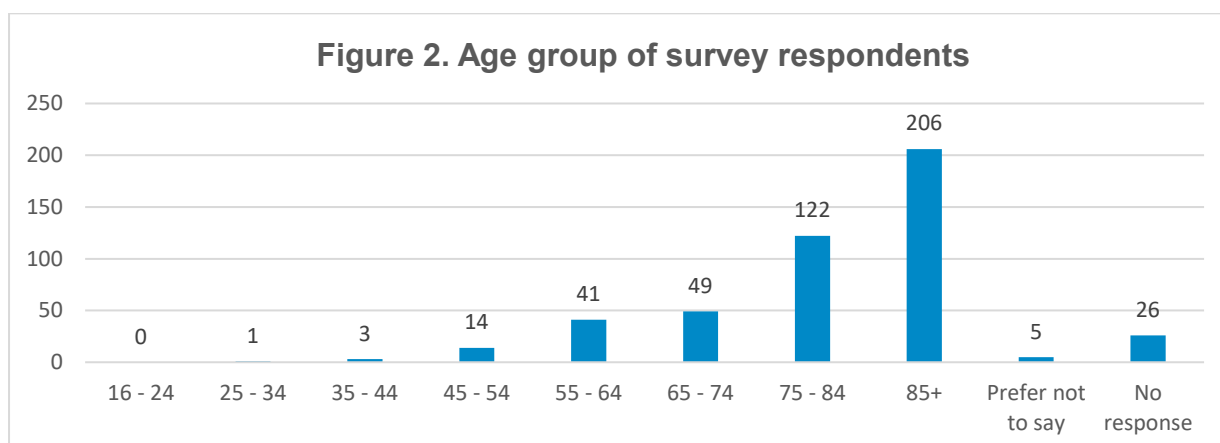
- **Section 1: Background** (this section) provides an overview of the consultation and how it was promoted.
- **Section 2: Respondents** presents the number and types of responses to the survey.
- **Section 3: Current Use of Telecare Services** explores current use of telecare services among the consultation respondents.
- **Section 4: Future Use of Telecare Services** analyses survey results for questions exploring respondents' views on the proposals for changing, and charging for, Telecare services.
- **Section 5: Overall Feedback** covers an overview of positive and negative views on the proposals and any ideas and suggestions.
- **Section 6: Summary and Conclusion** provides a brief summary and conclusion based on the overall analysis of the feedback received.

## 2 Respondents

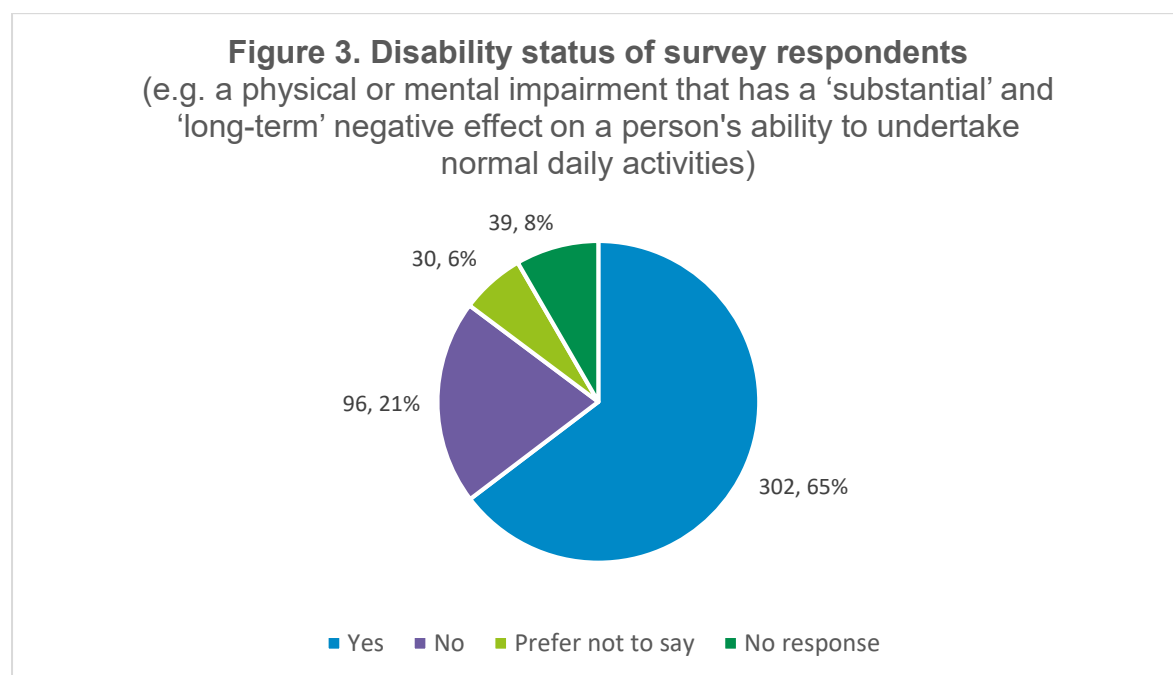
In total 467 people responded to the consultation and a significant proportion of respondents accessed the survey through the postal information sent to existing Telecare service users (91% of all survey responses were postal and 9% were online). To understand the sample of respondents a section was included within the survey to explore respondent characteristics. This can determine whether those responding to a survey are representative of the target audience and whether there are any gaps that need to be addressed. The charts below illustrate the nature of the survey sample. Figure 1 shows that 67% of respondents were female, 25% male, 7% didn't respond or preferred not to say. It is common to see more female respondents than males generally across all surveys (this is a local pattern but also one reported nationally). It is also common to see more female respondents because females will often reply to a survey on behalf of a household, among carers there is a higher proportion of females (as reported in the census) and life expectancy is longer for females within an older age group of survey respondents. Respondents were asked if their gender identify is different to the sex assumed at birth and 85% responded 'no', 1% 'yes', and 14% preferred not to say or didn't respond.



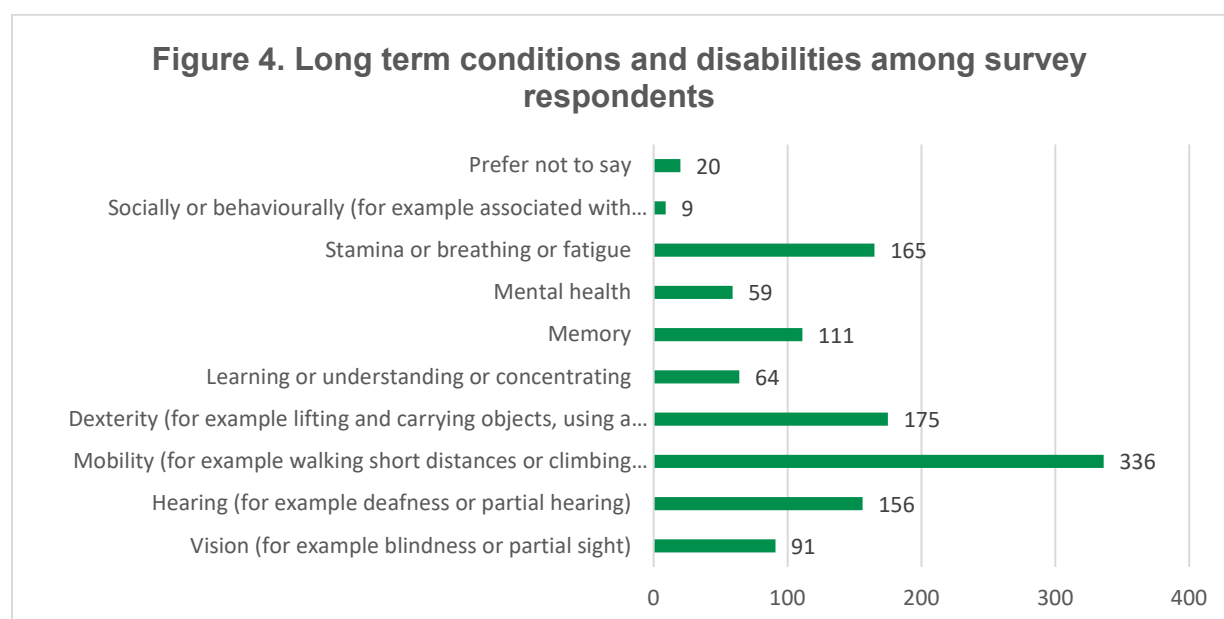
Survey respondents were asked for their age group and the responses are shown in figure 2. As anticipated, there were more responses from the older age groups. 44% of respondents were in the 85+ age group, 26% aged 75-84, 10% aged 65-74 and 9% aged 55-64. In total 90% of respondents are 55 and over, 4% under the age of 55 and 7% preferred not to say or didn't answer the question.



The survey included a few questions on disability due to the nature of the proposals and the importance of understanding whether the consultation had reached the target audience and the potential impact of proposals. Figure 3 shows that 65% of the respondents are disabled, 21% are not and 14% did not answer or preferred not to say. It should be noted that there is more information of relevance later in the report because families, carers and other representatives were encouraged to respond to the survey beyond Telecare users themselves.

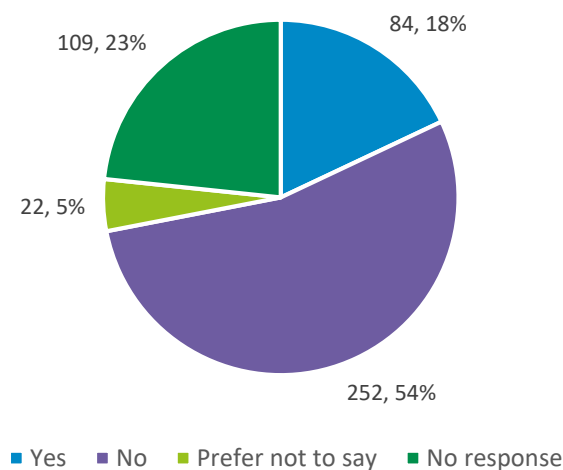


Survey respondents were asked to provide information on the type of impairments they experience. Figure 4 is valuable information for the Telecare consultation. For context, 350 of the 467 survey respondents are telecare users and 246 of the 350 described having a disability. The most common concern was mobility followed by dexterity, stamina/breathing/fatigue and hearing loss. From inputting paper surveys, it was possible to see that many people experience multiple challenges.



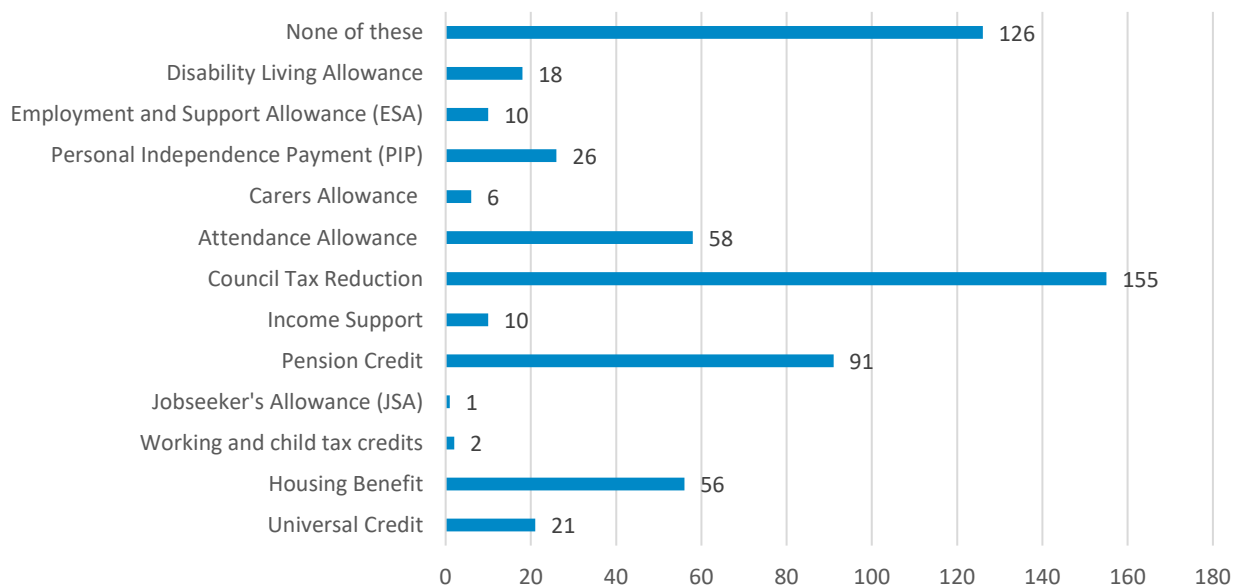
Some of the survey respondents are carers and the information gathered on survey respondents highlighted that although only 42 respondents (9%) responded to the survey in the capacity of a carer of someone accessing telecare services, 84 people (18%) are carers (see Figure 5 below). A proportion did not answer the question or preferred not to say.

**Figure 5. Proportion of survey respondents who are unpaid carers** (someone who spends a significant proportion of their time providing unpaid support to a family member, partner or friend who is ill, frail disabled or has mental health or substance misuse)



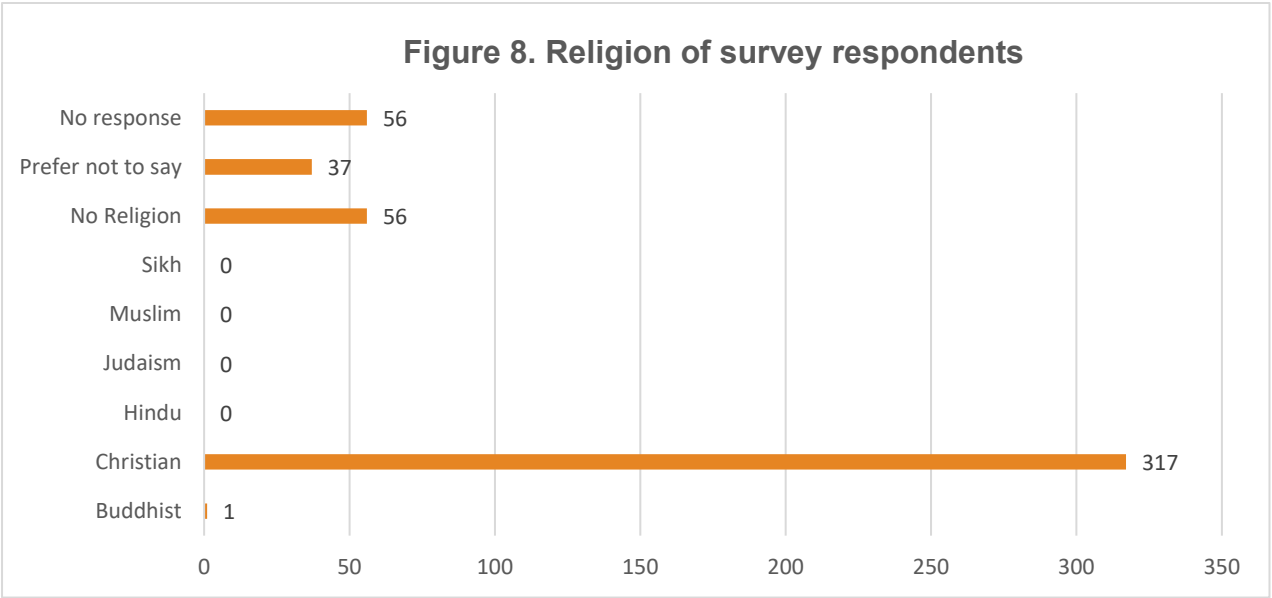
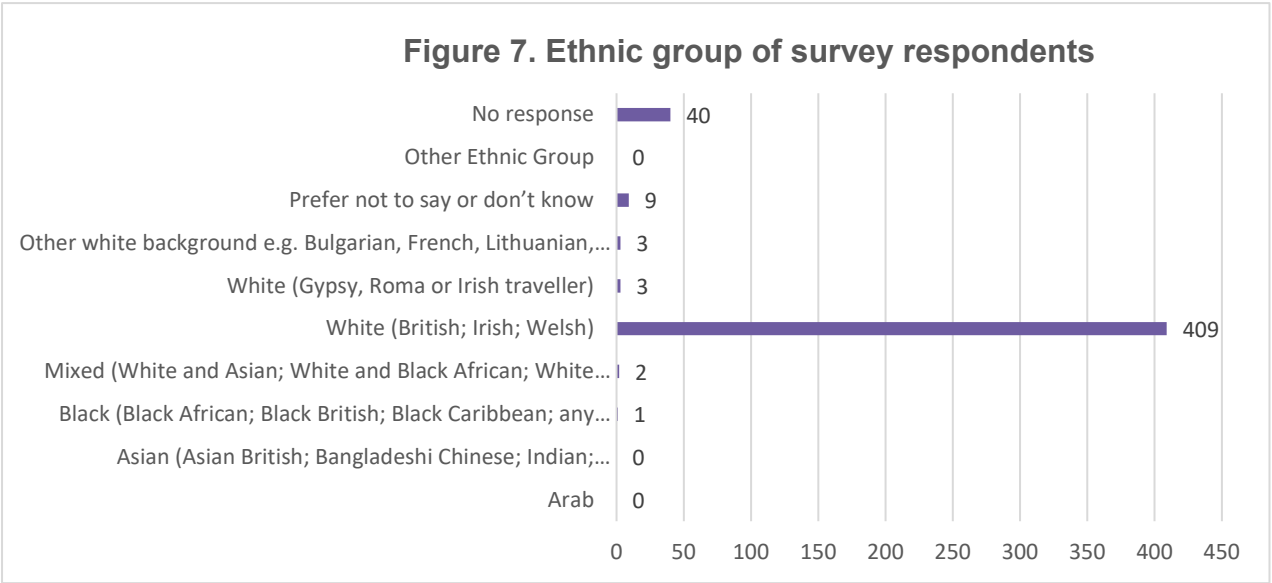
Survey respondents were asked about benefits in order to assess potential affordability of Telecare services. A list of main benefits was provided within the survey and respondents asked to describe any other benefits they receive within an open comment box. The information has all been collated and the responses are shown in Figure 6 below. 126 survey respondents indicated that they do not receive any financial support but there were some respondents who skipped the question.

**Figure 6. Benefit support accessed by survey respondents**



Council tax reduction was the top benefit mentioned by respondents (33% of all respondents, 9% of current service users) followed by Housing Benefit (12% of all respondents, 4% of current service users). Of the 350 telecare users 149 didn't select any benefits or describe any other benefits, suggesting 43% of current telecare users do not receive benefits and 57% do receive one or more benefits and are therefore very likely to be on lower household incomes (and could be more impacted by any charging proposals).

Ethnic group and religion were also included within the survey in order to understand if the sample is representative of the wider community. Figures 7 and 8 display the results below.



The 2021 census highlighted that 96.7% of Shropshire local authority's population are white (greater than the 81% national average) and the results to the survey align with this. 96% of the question respondents selected White British, Irish, Welsh. Only 9 respondents selected ethnic groups other than White British. Similarly, a lack of diversity is demonstrated in the question on religion. 317 of respondents (77% of question respondents) are Christian and 56 (14% of question respondents) have no religion. This is helpful contextual information, but it should be noted that any religious and cultural needs may not be considered in the feedback and results.



A question was included in the survey which read ‘There are nine Protected Characteristic groupings currently defined in the Equality Act 2010. In alphabetical order, these are: Age; Disability; Gender Reassignment; Marriage and Civil Partnership; Pregnancy and Maternity; Religion or Belief; Race; Sex; and Sexual Orientation. Thinking in more detail about these and the proposed service redesign, is there anything you may wish to add?’ This question was split up in the paper survey into 3 questions. Combined there were very few responses to the question itself, but some did respond, and others used the available comment box for other, more general responses.

The table below displays the feedback received in summary format. 111 comments were provided. 33 comments related to one or more of the protected characteristics. 22% of comments were linked to disability and 8% to age. In addition, 26% related to being alone or rurally isolated, 10% to transport access concerns and 5% to internet access concerns. Some example comments on the theme of equality are shown below. The other comments are used later in the report under the relevant sections.

**Table 1 – Comments on equalities and 9 protected characteristics**

Theme	Count	%
Live alone/ rurally isolated	29	26%
Disabilities present challenges (e.g. concerns communicating with responders)	24	22%
Age (e.g. feeling discriminated against due to age)	9	8%
Access to services and transport/travel concerns	11	10%
Access to internet concerns	5	5%
Importance of Telecare service	7	6%
Comments with more general dissatisfaction	15	14%
Negative comments about the question itself	2	2%
Other	9	8%
<b>Totals</b>	<b>111</b>	<b>100%</b>

#### **Example comments – equality considerations**

- *“Loneliness, especially in Winter months.”*
- *“Live in rural location which brings all the usual problems and difficulties.”*
- *“My home is isolated and along a farm track. It would be by chance if people heard me if I fell. Rural Isolation is a huge problem now I have become disabled.”*
- *“I live rurally with very poor signal service. I’m on a low income, live in a rural village 3 miles from the nearest amenities.”*
- *“Living in isolated area, alarm is essential.”*
- *“I live in a remote location, so the service is essential to me.”*
- *“I live alone, husband in nursing home. I have osteoporosis and history of falls.”*
- *“Profoundly deaf. I live alone and need to be able to summon assistance if required Telecare is vital part of me being able to continue to live independently and or my peace of mind and general mental health.”*
- *“My balance is very bad, I use crutches. I am 78 years old, I live alone in a very rural area few houses around, and everyone is elderly.”*
- *“Old age brings with it additional costs such as all the aspects of garden maintenance, minor items of property maintenance and repair, transport These are often overlooked or ignored but can amount to a considerable amount during the year.”*
- *“I am 90+ years blind veteran, disabled, deaf with several disabilities.”*
- *“Blue badge holder. People with a disability would be negatively impacted by having to pay for this service. Age discrimination for pensioners who need this service. No consideration for*

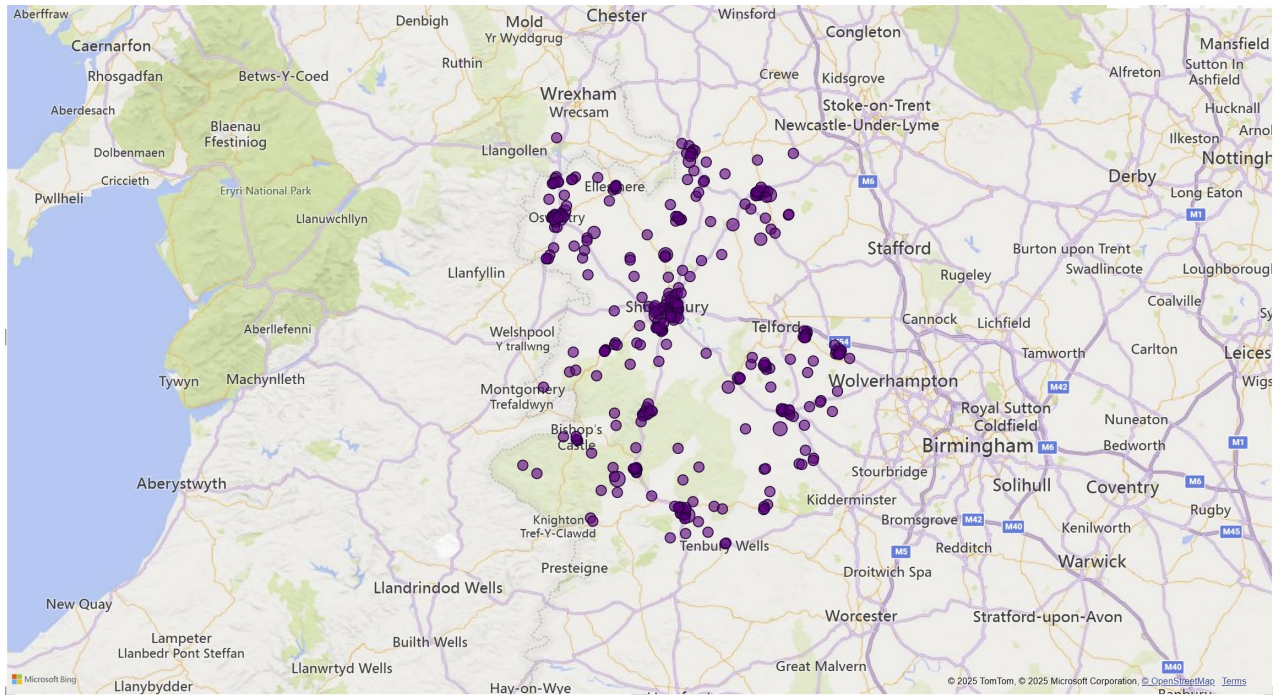


*those living alone particularly in times of illness.”*

- *“Struggle to get to GPs, hospital appointments as no longer driving.”*

Many of the comments relate to home locations being very isolated and rural. The postcode of respondents was requested. Not all completed this question, but Map 1 provides the information gathered to show the approximate location of survey respondents.

### Map 1 Approximate location of survey respondents



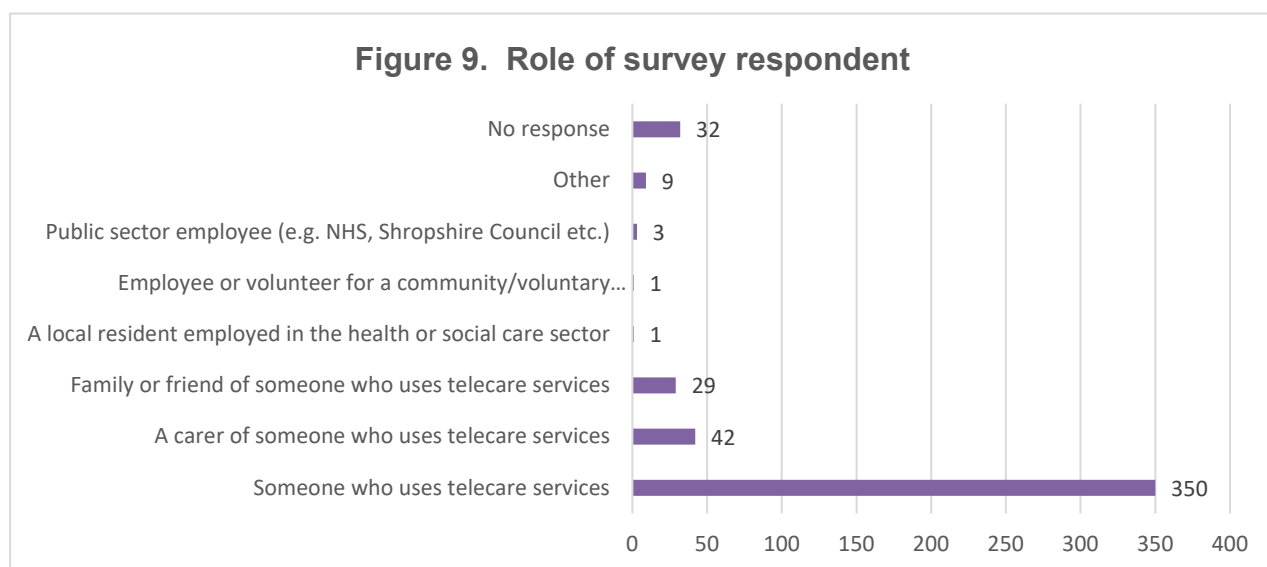
Map 1 shows that respondents were located throughout Shropshire local authority area with smaller numbers located just over the county borders. The map does highlight the rural locations of some respondents with concentrations within the later settlements as would be expected. It is encouraging to see that the county is well represented without any significant geographical gaps in representation.

The next section of the report explores the feedback obtained when survey respondents were asked about their current use of telecare services.

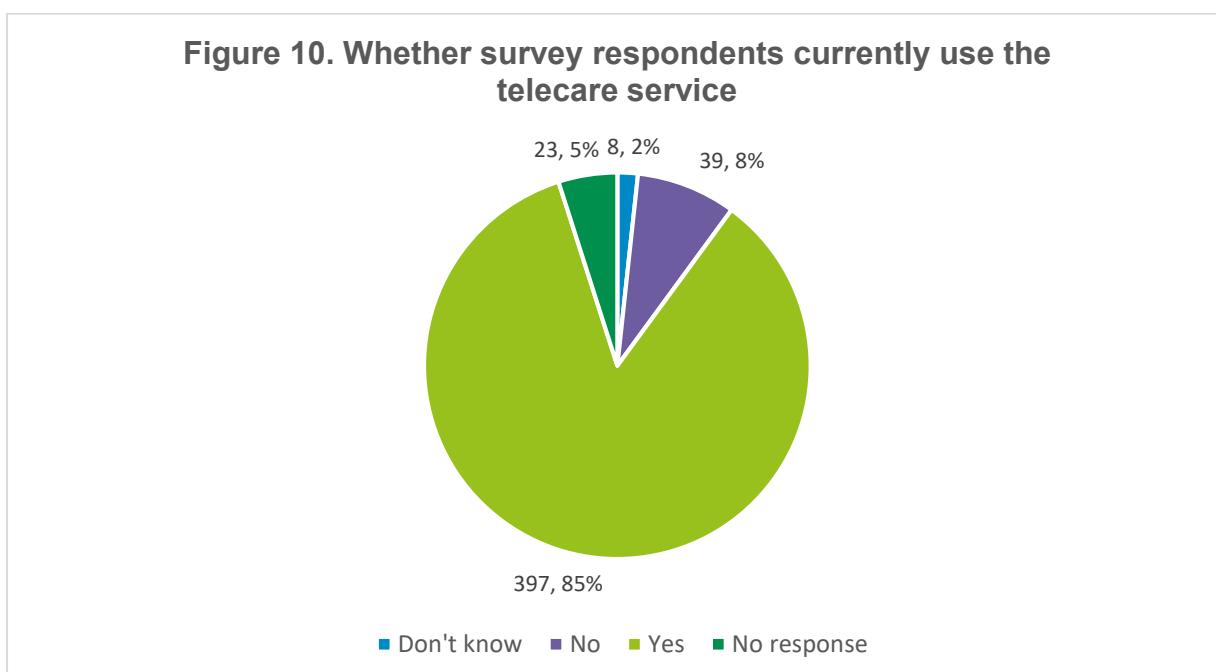


### 3 Current Use of Telecare Services

The 467 consultation respondents reported a variety of different roles in relation to the Telecare charging consultation. 75% of respondents are users of current Telecare services, 9% are carers of service users, 6% are family members or friends and 1% (5 respondents) have a professional interest in the proposals. Responses from organisations were more limited than expected given the connections to the wider health and social care system. 9 respondents set out other roles and these included members of the public, and people who have telecare equipment at home but do not use the service for a variety of reasons. Figure 9 below sets out the response.



A secondary question was used to confirm the data. The question read ‘Do you currently use the telecare service?’. 397 people said ‘yes’, more than the 350 in the previous question (39% responded ‘no’, others don’t know or did not respond to the question).



36 people added a comment about their use of the telecare service. A summary response is shown in Table 2. Most commented that they have the equipment but haven't needed to call the response centre to organise a response (44%). 25% use and value the service. A few example comments are shown below:

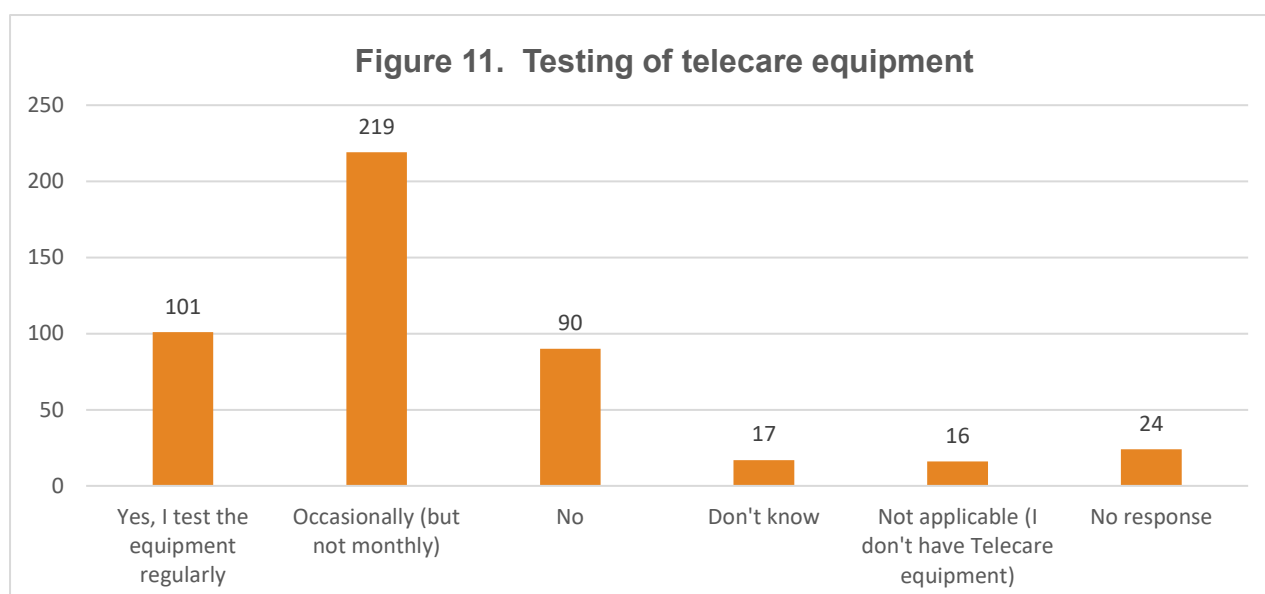
**Table 2 Use of the telecare service**

Theme	Count	%
Not yet needed to use it	16	44%
Have used the service / service is valued	9	25%
Family member uses the service	6	17%
Don't want / need the service	1	3%
Other	4	11%
<b>Total</b>	<b>36</b>	<b>100%</b>

#### Example comments – Use of the telecare service

- *"Have not used it since it was installed."*
- *"Only to test."*
- *"I have it but haven't needed to use it yet."*
- *"I haven't used it only accidental touching of equipment."*
- *"We have it in place in readiness and have not used it in more than 12 months."*
- *"I have not requested any help so far."*
- *"It is there if I need it."*
- *"My Mum uses the service."*
- *"I have had quite a few falls and as I am in my 90s it's been invaluable."*
- *"Telecare needed after having a stroke and the risk of falling but cannot communicate over the phone due to speech."*

The next question about current use of telecare equipment asked users whether they have remembered to test their equipment by pressing the trigger button. A reminder was included that this should be carried out monthly. The response is shown in Figure 11.



50 survey respondents added a comment about testing. The comments are summarized in table 3 with examples also provided.

**Table 3 Testing of telecare equipment**

Theme	Count	%
I was unaware I needed to test monthly / not told I needed to do this	31	62%
Carers / family do this for me	7	14%
System is sensitive / has been accidentally activated	3	6%
It is tested infrequently	5	10%
Don't know / Other	4	8%
<b>Total</b>	<b>50</b>	<b>100%</b>

**Example comments – testing equipment**

- *"I did not realise I should test that often, but I will try from now on."*
- *"Did not realise I was supposed to. Will now do so on a regular basis."*
- *"Will do so in the future."*
- *"Didn't know this was a requirement - not informed."*
- *"I didn't know until today that I had to."*
- *"I didn't realise I should test it. I'm a bit afraid to touch it."*
- *"Suspect not but will ask for it to be done in future."*
- *"Thank you for this reminder to test monthly."*
- *"It is easily alerted if the tablet is banged which is quite often."*
- *"Any time there is a power cut."*
- *"Several accidental triggers proves system works."*
- *"Son tests system but not monthly."*
- *"User has dementia and has to be prompted to test equipment."*
- *"I believe the care company tests this."*
- *"My carers test it."*
- *"Carer tests it every Friday."*

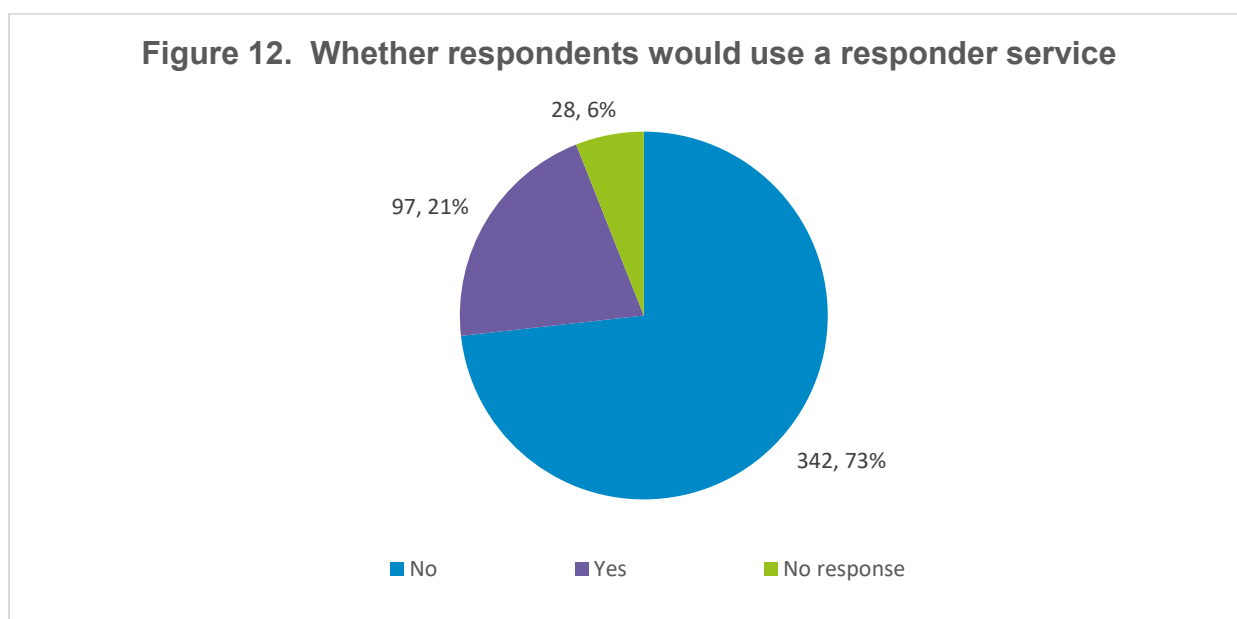
The next section of the report considers the consultation proposals and future use of telecare services.



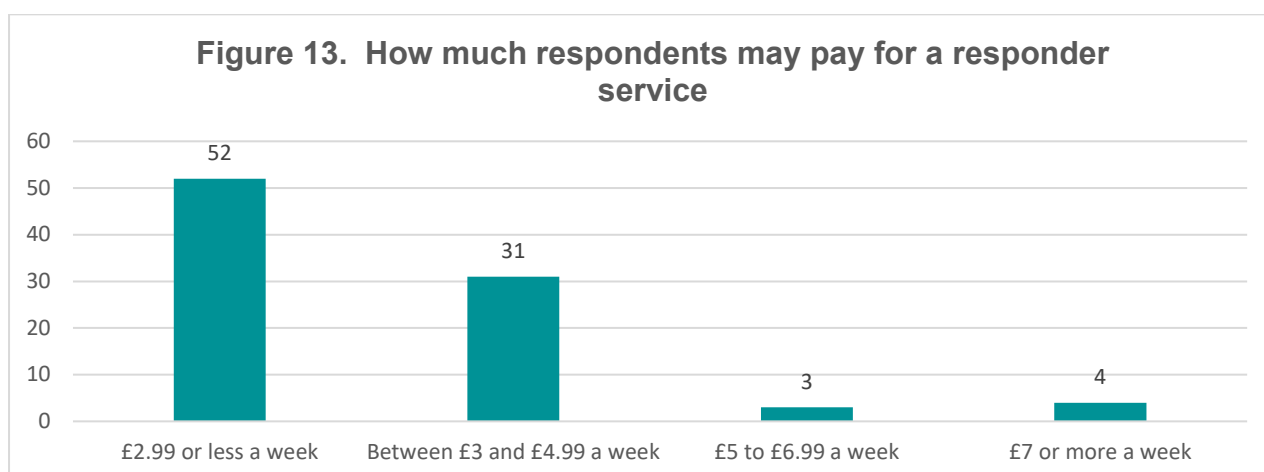


## 4 Future Use of Telecare Services

All respondents to the consultation were asked for their views on the telecare charging proposals and the future of telecare services in Shropshire. Questions were included within the survey to obtain views on key features of the proposals. The first question sought to obtain feedback on whether respondents would use a responder service if introduced by Shropshire Council. The question read ‘Some local authorities offer a Responder service. Trained staff, called responders, can visit your home to provide practical, emotional, planned, or emergency support to minimise risks and promote independence. Would you be interested in this service?’ The response to the question is shown below in Figure 12.



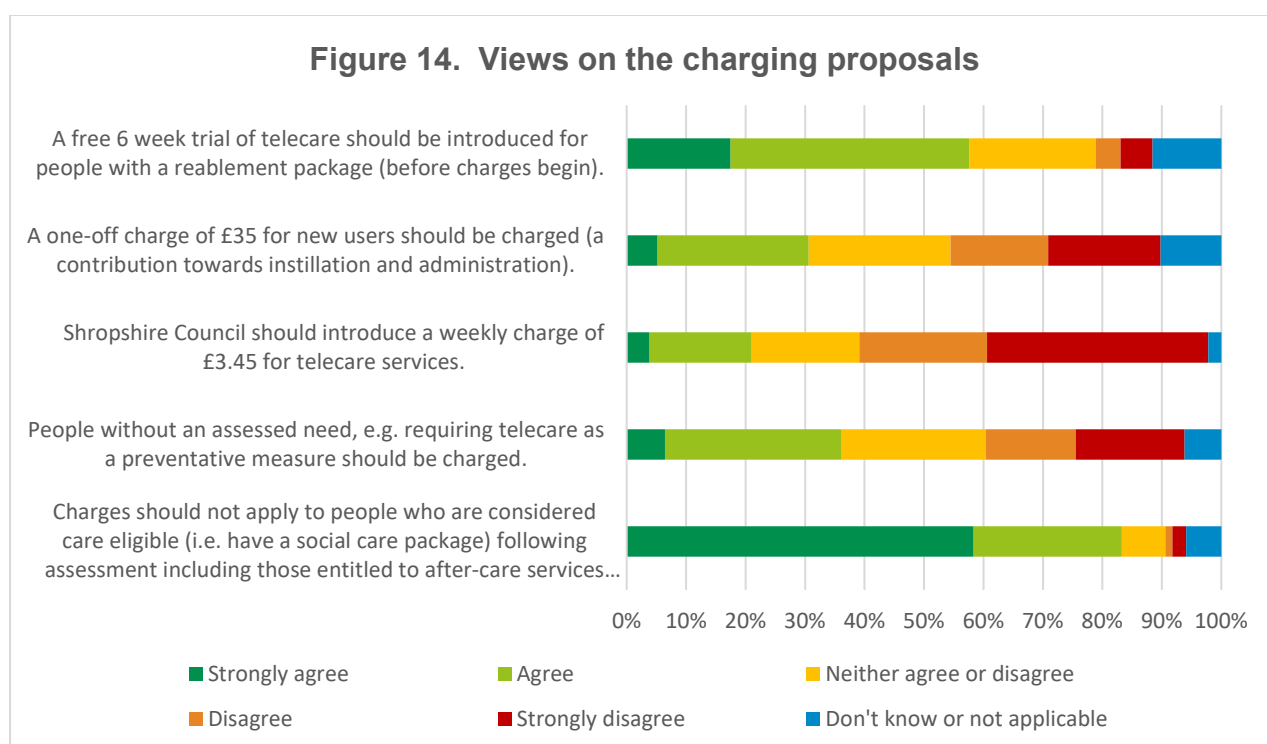
A majority of respondents indicated that they would not be interested in use of a responder service if introduced locally (342 people, 73%). 90 of the 97 people who may be interested in such a service were asked how much they would be willing to pay. The results are shown in Figure 13 below. Of those who may be interested in the service most would be willing to pay £2.99 or less a week (58%), followed by between £3 and £4.99 (34%). Only 7% would consider paying £5 a week or more.



Survey respondents were asked to provide a view on 5 key statements:

- Charges should not apply to people who are considered care eligible (i.e. have a social care package) following assessment including those entitled to after-care services provided under Section 117 of the Mental Health Act.
- People without an assessed need, e.g. requiring telecare as a preventative measure should be charged.
- Shropshire Council should introduce a weekly charge of £3.45 for telecare services.
- A one-off charge of £35 for new users should be charged (a contribution towards installation and administration).
- A free 6-week trial of telecare should be introduced for people with a reablement package (before charges begin).

Figure 14 displays the response and shows that most people agree or strongly agree that charges should not apply to people who are considered care eligible (76% of all respondents). There is also a lot of support for a free 6-week trial for those with a reablement package (48% agree or strongly agree). The majority disagree or strongly disagree that Shropshire Council should introduce a weekly charge of £3.45 for telecare services (52% of all respondents). There are more mixed views for the other proposals. For the proposal that people without an assessed need should be charged, 31% agree/strongly agree and 29% disagree/strongly disagree. When asked if a one-off charge of £35 for new users should be introduced, 26% agree/strongly agree and 30% disagree/strongly disagree.



An open comment box was added to allow respondents to add any views and 162 comments were provided. Table 4 below summarizes the themes from all the responses provided (some comments included multiple themes). 19% provided positive comments about the value and importance of the service, 16% express views that they cannot afford to pay, 13% comment that the service should remain free to all and 10% suggest the service should be free to the most vulnerable. Example comments are used to illustrate the feedback further.

**Table 4 Comments on the responder service proposal and charging**

Theme	Count	%
The proposed amount is too much/ should be less	15	8%
The service should be free to all users	25	13%
The service should be free to the most vulnerable (e.g. disabled, living alone, frail etc.)	20	10%
Users lives will be put at risk if they will cancel the service	9	5%
Users will stop using the service due to costs	10	5%
Charges should be based on individual circumstances/ means tested	16	8%
I cannot afford to pay the charge/ limited income	31	16%
The system is valued and appreciated/ provides peace of mind	37	19%
Increased pressure on other public services/ preventative service	17	9%
Other	15	8%
<b>Total</b>	<b>195</b>	<b>100%</b>

**Example comments – Views on charging for telecare**

- *"We are very grateful for this reassuring service. When used, the staff have been excellent. The Engineers have also been superb and any new equipment/updates/repairs etc. have been undertaken efficiently and professionally."*
- *"I strongly disagree to anyone having to pay for this service as already a lot of people don't have it due to price or knowledge and the people who do are those in need and it is a must not a choice."*
- *"Old and vulnerable people seem to be the target of recovering cash lately. With the government now basically means testing the winter fuel payments, the state pension now exceeding the personal tax allowance meaning some pensioners are now paying income tax, pensioners are losing cash and becoming worse off."*
- *"I understand that costs of services are going up for everything, but I think pensions are already suffering this service should be free to us."*
- *"I would be interested in the service it is was free."*
- *"This is bringing a lot of reassurance for me when on my own but financially I cannot afford to pay."*
- *"£35 could be a barrier to a lot of people. Need more information regarding what a reablement package is/does."*
- *"These answers are based on thoughts of an elderly lady living independently. With the one-off charge of £35 it does seem acceptable, but the suggestion of a contribution leaves the charge very open to large increases."*
- *"I think £1 or £1.50 a week as £2 is £104 a year and a lot out of one pension."*
- *"A weekly charge of £3.45 is a lot from a pension. Suggest a nominal charge of £10 per month would be more appropriate."*
- *"Where there is a preventative need such a high charge seems to be out of proportion."*
- *"I think this should be part of the means tested benefits. Those who can afford it should help pay for the service. If, however there is a question re whether the service can continue without income then maybe the charge be levied accordingly depending on the income."*
- *"The one-off charge should be means tested. The 6-week trial - the telecare might not even be required within this time frame depending on the nature/situation of the resident so this 6 weeks administration cost could be saved by removing this option. A person could go months or even a year before needed to use telecare and because they haven't used it in 6 weeks might feel there is no need to have it whereas in fact telecare is a very useful and essential service for our elderly population and helps them feel more secure in living independently."*
- *"Social care needs to be capped at 50-60% of overall budget to be fair to those who do not*



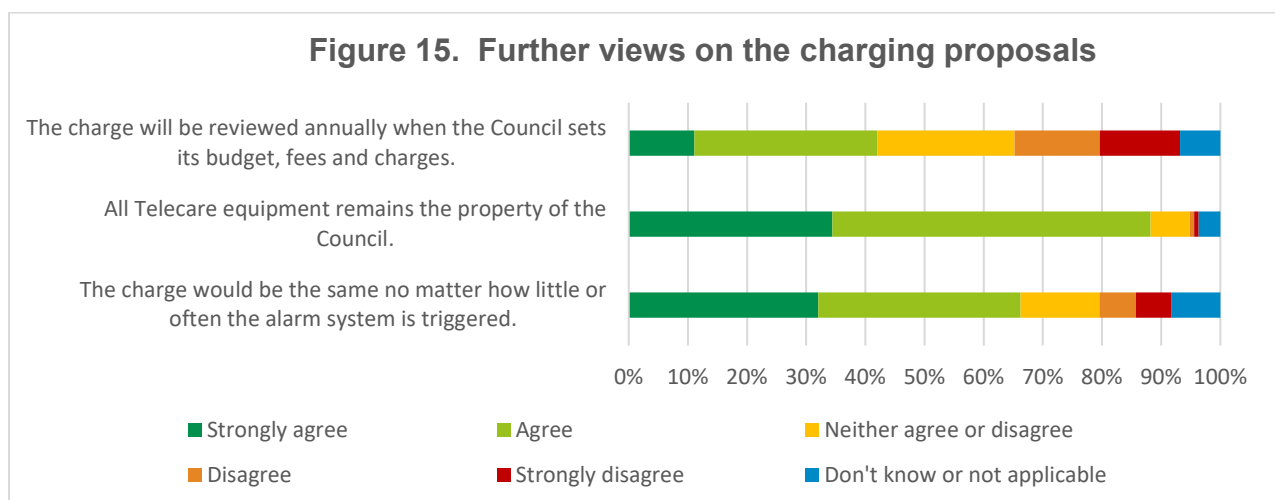
use social care. We will all end up classed as "vulnerable" at the rate the council is cutting services as the expense of vulnerable people."

- "While a few pounds a week may be affordable for some the setup fee is too much. Is that payable before the 'free' trial? If so, is it refunded if the service is refused?"
- "If I was charged, I would not want to keep the telecare. It is currently there for emergencies."
- "This system has saved my life on 5 occasions. If I can't afford this what do I do?"
- "This service could save an ambulance being sent out multiple times surely it should be a free service."
- "Telecare services are potentially life-saving so should not come with a charge."
- "If people are elderly and have opted to live in assisted living accommodation, their safety depends on this service and they should not be charged. With staffing/manager hours drastically reduced it is an essential lifesaving service."
- "I would like to see a further exemption for all those telecare users with an unpaid carer registered with Shropshire Carers Team. These are Shropshire residents already saving the Council significant sums of money, whilst many telecare users are relying on the service because their families/friends and those who might be sharing the overall care burden have decided to move away from Shropshire leaving their vulnerable elderly relatives as a 'care burden' on the rest of the Council tax payers. There are currently 3,000 unpaid carers registered with Shropshire Council's care team but a further estimated 27,000 could come forward with this kind of money-saving incentive."
- "As a non-statutory service it should be fully charged for."

The example comments illustrate the concerns among respondents. A smaller proportion accept some charges but many of the comments are focused on views that the service is preventative and so valuable to individuals and the wider healthcare system that it should be free. Some of the respondents highlight that if charges are introduced, they will need to reconsider use of telecare equipment. To understand views further, respondents were asked to give a view for three statements set out within the charging proposals:

- The charge would be the same no matter how little or often the alarm system is triggered.
- All Telecare equipment remains the property of the Council.
- The charge will be reviewed annually when the Council sets its budget, fees and charges.

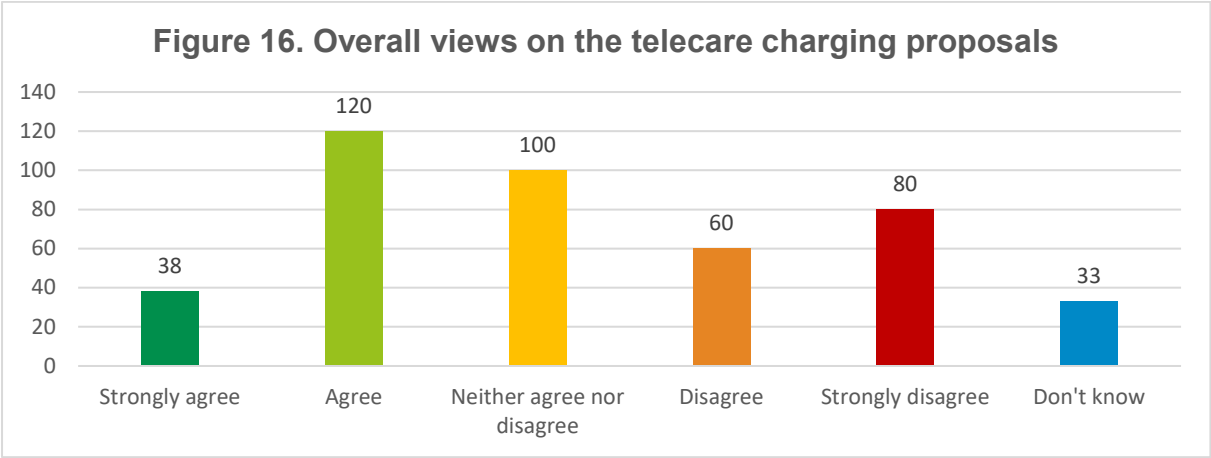
Figure 15 displays the results and shows that the survey respondents are happy for the equipment to remain the property of the council.



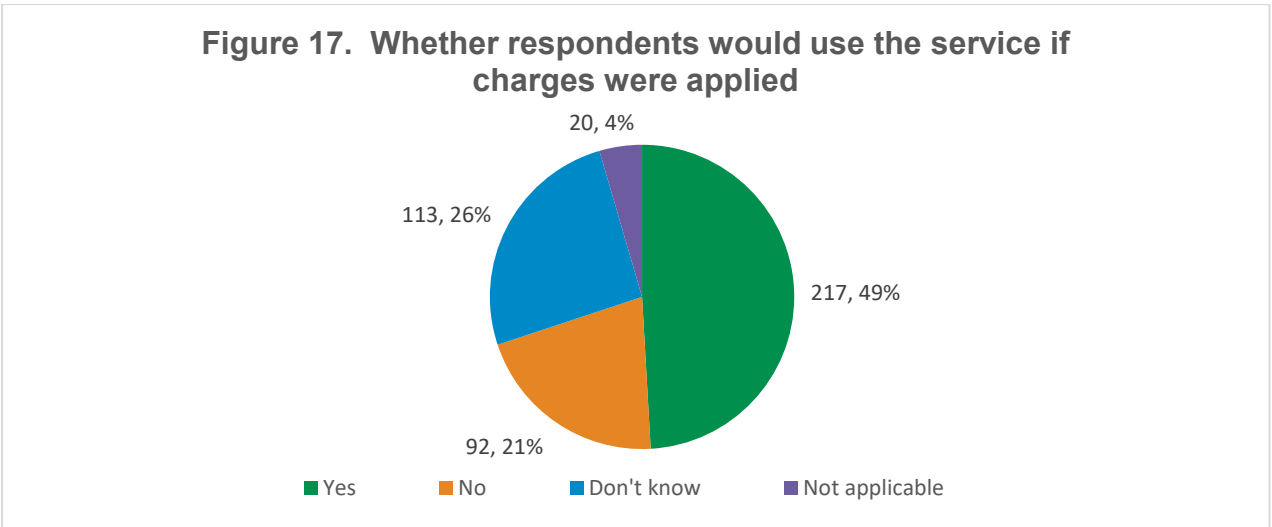
60% agree or strongly agree that the charge should be the same no matter how little or

often the alarm system is triggered (11% disagree or strongly disagree and others don't have a view). The element of the proposal with more mixed views relates to whether the charge should be reviewed annually when the Council sets its budget, fees and charges. 36% agree or strongly agree that would be appropriate whilst 24% disagree or strongly disagree. A few of the respondents commented that they were concerned that costs would rise on each review.

The survey also included an overall question to assess views, in addition to the statements for each element of proposal. The question read 'Shropshire Council's current proposal is based on evidence from other local authority areas where charges are made for telecare. The proposal considers needs and ability to pay (i.e. excluding people with a social care package). To what extent do you agree or disagree with this proposal?' Figure 16 displays the response.



Overall 34% agree or strongly agree with the telecare charging proposals overall, 21% don't have an opinion (some made comments at the side of their surveys to say they required more information or were unclear of the impact of charging) and 30% disagree or strongly disagree (7% don't know and 8% didn't answer the question). All respondents were also asked if they would use the service if charges were applied. Figure 17 displays the results. 49% would continue use, 21% wouldn't and others don't know, or the question wasn't applicable.



The next section of the report looks more closely at the comments and wider feedback.

## 5 Overall Feedback

The previous section of the report focused on some of the specific charging proposals set out within the consultation and sought to understand where there is support or where concerns exist for those proposals using predominantly multiple choice and check box survey questions. The survey was also designed to capture comments and the more nuanced feedback possible from qualitative data collection. The responses to 4 main questions are covered within this section of the report, these questions focused on anything respondents like about the charging proposals, anything respondents don't like or are concerned about, alternative suggestions and any ideas for service improvements.

When asked for comments on anything that respondents like about the charging proposals there were 157 responses (a few covered multiple themes). Each comment has been considered and categorized to highlight the themes present within the responses. Table 5 displays the results. As the table highlights, 91 of the 164 responses (55%) highlight that they do not like anything about the telecare charging proposals (a significant number simply responded "No"). 11 respondents (7%) highlighted that the service should be free of any charges.

There were 62 other comments, some were positive, but many were neutral. Other respondents highlighted the value/importance of the service (17 comments, 10%), that the charges seem fair (14 comments, 9%), and that charges should be based on means testing/ability to pay (13 comments 8%). In addition, Example comments help to illustrate the responses further.

**Table 5 What survey respondents like about the proposals**

Theme	Count	%
No/ Nothing	91	55%
Proposed charges for the system seem fair	14	9%
Charging will ensure Telecare service is still available	10	6%
Assess the need of users for the Telecare service	5	3%
Telecare should be free of charge for users	11	7%
Telecare is a valued service / provides reassurance and safety	17	10%
Telecare should be means tested / charges based on ability to pay	13	8%
Other	3	2%
<b>Total</b>	<b>164</b>	<b>100%</b>

### Example comments – What people like about the proposals

#### Nothing/ disagree with the proposals

- *"I strongly disagree with this proposal."*
- *"I do not agree that we should be charged."*
- *"Many users may cancel their equipment if charges are introduced, causing problems and lack of confidence and possibly damage to their independence and safety."*
- *"No - The cost of being disabled or vulnerable is considerable anyway."*
- *"No, I know its hard times, but this is a great service and don't think people who already use it should have to pay."*
- *"No, it's awful. If the council managed their finances the elderly, the sick, vulnerable would have all the help they need. We are already paying for the Wi-Fi I don't need it for anything"*

else.”

- “It seems unfair that I will be charged for ensuring my safety.”
- “Seems a reassuring service a lot of people rely on is yet another fundraising thing to address councils budget problems. It would be interesting to know how much charging for this will raise for the council?”

### Other comments and support for the proposal

- “The service is excellent so if the payment allows the service to continue or expand then that is good.”
- “If it ensures a more efficient service, it would be a good thing.”
- “If people have sufficient income then fine, but don't set the bar stupidly low.”
- “Makes it fair for everyone and payment is reasonable, as private companies charge more.”
- “If the charge helps to keep telecare running efficiently 24/7 then I agree with the charge as it is a useful and possibly lifesaving service.”
- “Yes, it's not going to be done away with altogether so must be kept as it is a lifeline for many. I know cost comes into everything.”
- “It recovers costs for non-statutory services which the council taxpayer should not be funding.”
- “It would be great if the care line could be extended beyond one's house and garden. I would be willing to pay if that were so.”
- “I understand the need to charge but being someone who was assessed as needing social care but was unable to afford the weekly sum they wanted me to pay will be unable to access any help in an emergency!”
- “I feel that it is very fair that we should contribute to the service. To me it is very important contact to have knowing that help is at hand if needed.”

There were 214 comments when asked ‘Is there anything you dislike about the proposal? Please explain any concerns you may have including any negative impact the proposal could have.’ Table 6 displays the results. Some comments covered multiple themes. There were a number of key themes within the comments made. 20% disagree with charging for the telecare service generally and 14% disagree with charging due to the service's preventative nature. 14% are concerned about affordability and 17% discuss that the charge will add to existing financial pressures for users of the service. The example comments shown on the next page further illustrate the feedback received.

**Table 6 What survey respondents dislike about the proposals**

Theme	Count	%
Disagree with charging for the system/ It should be free	48	20%
Disagree with charging for a system that is an essential/ preventative service	34	14%
Will not be able to afford to pay for the service	35	14%
Will put additional pressure on limited budgets	41	17%
Potential impact on health and wellbeing if remove the free service	21	9%
No choice/ will have to pay for Telecare	13	5%
Service needs to be improved	4	2%
Positive comments about the Telecare service	29	12%
Negative comments about Shropshire Council/ financial management	14	6%
Other	7	3%
<b>Total</b>	<b>246</b>	<b>100%</b>

## Example comments – What people dislike about the proposals

- *"I am in no position to pay anything. I have a social care package in place."*
- *"I am concerned about having to pay for the services that I already receive for free."*
- *"£3.45 a week on the face of it doesn't seem a lot however, that's £13.80 per month or £179.40 a year! doesn't sound so cheap now does it."*
- *"I feel it's concerning that my 89 year old father has been given this equipment free of charge following a fall and now you are considering charging him for this vital emergency lifeline. I feel the equipment is appropriate to his care needs and therefore should remain FOC. He has had 2 falls since and this has given him and his wife the confidence that he will be helped when in need."*
- *"I would be concerned that some people may opt out yet still require this service. My mum is on a pension."*
- *"Would have no choice to keep telecare as mobility poor and have had several falls in the past. Believe it should be means tested if charges apply and people receiving pension credit should be exempt from charges."*
- *"I was given this for protection from falls and no one knowing. Doctors arranged it. It makes me feel safe. I can't afford to pay for it. Perhaps you should put me in a home."*
- *"An eternal state of financial embarrassment leaves us in despair and the prospect of paying for another service fills us with dread. Surely the aim to provide safety for individuals and also reduce unnecessary hospitalizations by having a falls team etc. assist."*
- *"As this service could be the difference in life or death when someone is in need of help. I don't think this should be charged."*
- *"I've had Parkinson's for 25 years. I have had frequent sudden falls in the past few years. I am very grateful for this service."*
- *"I feel this is a lifeline service and should not be charged for. People that use the service are on fixed incomes and money is very tight."*
- *"I have no choice as I am 24/7 bed bound."*
- *"To bring in a cost for a service that was insisted upon to enable hospital discharge seems counterintuitive."*
- *"I feel that in the long run it will save money for me to have one so if I need help, I can press the button. If I don't have it, I may cause more trouble and money."*
- *"My concerns are for those in greatest need and with the lowest ability to pay - they must not be left without a telecare package: it is essential and not a 'luxury'. Sadly, purely on an economic basis, the cost of not doing so is likely to be higher for the NHS and Shropshire Council and be reflected in hospital admissions and greater social care needs in the shorter and longer term."*
- *"Should be a free service as this reduces the number of ambulance call outs and hospital visits."*
- *"I rely on the telecare for peace of mind knowing that if I fall, I can contact others. I cannot afford to pay for this service so would have to do without."*
- *"As a preventative measure it is valuable. I don't actually use it at the moment but accept that it must save the council and the NHS money in the long run. But people in need of it may opt out. Make it free to those over 85?"*
- *"People in need not using the service due to price. Result could be someone in need not accessing help when needed."*

A quantitative question was included within the survey which asked for views on the likely impact of the telecare charging proposals. It was very clear from the responses to the survey that many people misunderstood the question. Many respondents expressed their fear and concerns within a written comment and then suggested the proposal would have a positive impact on them. Had confusion arisen among only a few respondents then the results would have been shared but given the very high numbers of contradictory responses this question has been omitted from the report. Another reason for the

decision not to include the question links to the fact that many individuals gave a view on organizational impact when they were not responding as an organisation. There were very few responses from representatives of organisations within the survey sample so the assessment of impact on individuals, families and local organisations has not been possible. It is recommended that this is noted and considered by decision makers prior to any decisions and next steps.

The question on impact did include an 'other' comment box and these comments are helpful and can be used. Table 7 displays the results. 75 survey respondents commented on impact and as the table highlights. A few covered more than one theme in their comment. Most comments described negative impacts with only 4 comments (5%) setting out that a positive impact of charging would be allowing the service to continue. The negative impacts described included financial impact and affordability, needing to end the service due to costs, impact on personal safety and wellbeing.

**Table 7 Potential impact of the proposals**

Theme	Count	%
Negative impact - financial impact on limited household budgets	19	23%
Negative Impact - Unable to afford the service	6	7%
Negative impact - Will cancel the service	10	12%
Negative impact - Impact on personal safety e.g. risk of falls	15	18%
Negative impact - Impact on wellbeing/ removal of reassurance	18	22%
Neutral impact - Affordable charge/ agree with the proposed charges	5	6%
Positive impact - Continuation of a valued service	4	5%
Negative comments about Shropshire Council/ financial management	3	4%
Other	3	4%
<b>Total</b>	<b>83</b>	<b>100%</b>

### Example comments – Potential impact of the proposals

- *"This would impact carers. My anxiety would be worse."*
- *"Very worrying for me to be without."*
- *"The Telecare service provides peace of mind both to me and my family. the impact will be huge."*
- *"Financial impact as stated. Almost guaranteed you will increase charges every year."*
- *"It would make my Mother reconsider her alarm and if she rejected it that would put more pressure on me to check in on her several times a day. This has a negative impact on my life health and family."*
- *"We cannot afford this service so would therefore have to forfeit it. My mother has a significant falls history and needs help each time she does fall."*
- *"I am elderly and live alone, this service reassures me and my family as I can get help if required by pressing the button. It helps me remain independent in my home."*
- *"At the moment my wife can leave me to go shopping. Knowing I can summon help if needed means she can go out without worrying. Luckily, I have not needed to summon help but as my condition is progressive, I have to be forward thinking. We are pensioners already struggling with winter fuel bills. We will have no choice but to stop this service should you ask us to pay."*
- *"I could be in danger without it. I have falls and cannot get up on my own due to my disability."*
- *"I would feel isolated."*
- *"As a worker who arranges Telecare, I feel there may be some clients who wish to complain to me. I feel the guidance on eligibility should be very clear so that it can be applied"*



*consistently and fairly. I have no issues with the Council making a charge for the Telecare equipment and service - it is no different to paying for any other service we choose to use, but I feel as I said above that eligibility needs to be clear e.g. those on certain benefits, or with life limiting conditions for example should not have to pay."*

- *"I work in Public Health and I am concerned re retaining the highest level of service for those who are most vulnerable (including economically), in Shropshire."*
- *"The use of telecare should be expanding, not reducing; look at the wider socio-economic and care benefits that come from early intervention provided by this service."*
- *"Viewing the financial state of the council I think it is reasonable."*
- *"I can afford this without serious problems. Is that what you mean?"*

The next question within the survey read 'Do you have any alternative suggestions that could be introduced to raise income and cover the costs of the service other than the proposal outlined?' There were 94 alternative suggestions made and some comments covered multiple themes. Table 8 summarizes the feedback provided. 27 comments (26%) related to concerns that Shropshire Council's financial management is not effective enough and should be improved to prevent decisions like this impacted on people who are vulnerable and in need of telecare services. 13% of the comments suggest means testing; 13% suggest raising income or making cuts elsewhere, and 13% repeat requests highlighted in previous responses to ensure the service remains free of charge. The example comments better help to show the type of comments made by the survey respondents.

**Table 8 Alternative suggestions**

Theme	Count	%
Increase council tax to pay for the service	5	5%
Charge for other services/ Reduce other services within the council	14	13%
Reduce staffing/ salaries and staff benefits in the Council	5	5%
Improved management of Shropshire Council/ financial efficiencies	27	26%
Grants/ lottery funding/ charitable donations	4	4%
Means tested charging/ charge what people can afford	13	13%
Keep it as it is/ Free service	13	13%
Initial/ Installation charge	5	5%
Charge for the service as per the proposals	2	2%
Other	16	15%
<b>Total</b>	<b>104</b>	<b>100%</b>

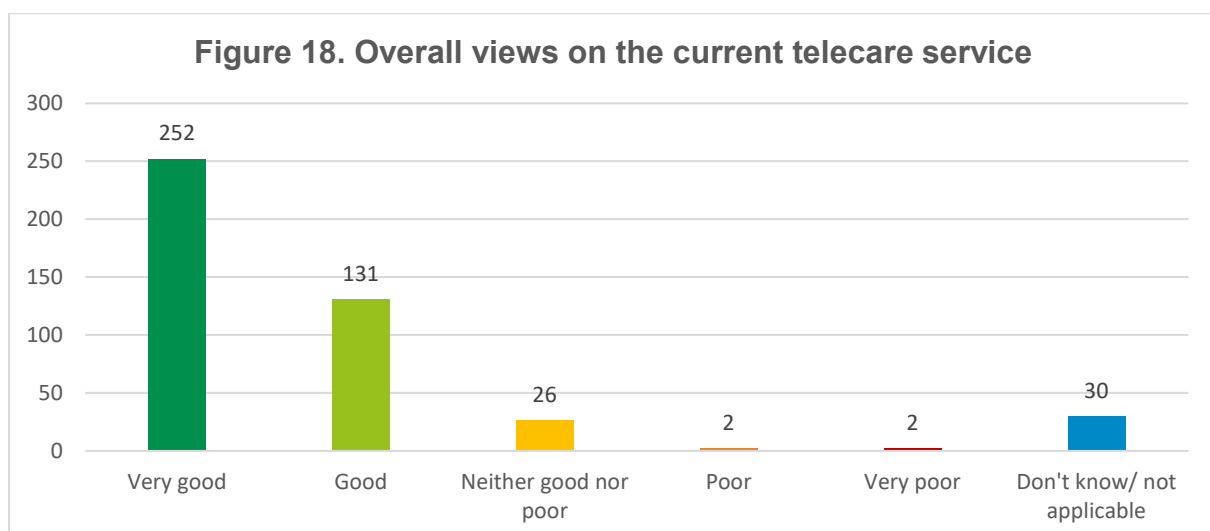
### **Example comments - Alternative suggestions**

- *"No, I think it's a big mistake you are messing with people's lives and their safety comes first. If you were disabled you would understand."*
- *"We have to pay for our carers and other help. It is just one more thing that would take us into having to depend on family."*
- *"Free for paralysed/ bed bound."*
- *"I would be willing to pay a one-off payment towards the cost but as pensioners cost of living is increasing but our income is not. I would have the alarm removed if a weekly or monthly payment were instigated."*
- *"fully charge all users."*
- *"My Mum is on Pension Credit but not eligible for the reduced tariff for her broadband. Her system is now digital. Could it not be part of her Broadband package and the provider soak up expense? Lower eligibility for reduced tariff."*



- *“Partner with the local NHS and voluntary sector to realize the full potential benefits, and factor in the savings made due to early intervention, compared to the costs of crisis intervention.”*
- *“Regular reviews of equipment provided and whether circumstances mean that items are no longer required /used by individuals would reduce cost of providing new equipment.”*
- *“I very strongly feel that money is being wasted on unnecessary care packages due to lack of monitoring and therefore not reducing packages. The 3 monthly re-assessment has never happened for me and probably others and it is now 18 months overdue and my care package is way bigger and more expensive than it needs to be. You can never get hold of a social worker. I am sure I am not the only one and it would literally save 1000s of £s – Just by monitoring regularly and carrying out reassessments on time.”*
- *“Charge for disabled parking.”*
- *“You could combine the service with the councils existing 24-hour emergency contact.”*
- *“Charge like a normal telephone service and we pay for the number of calls made. Certainly charge for instillation.”*
- *“To cut the budget elsewhere to pay for the service as it is always pensioners that seem to suffer from and price rises.”*
- *“Cut costs in other areas that are not urgent or needed or affect life and death. Probably many woke areas being funded in the council.”*
- *“Charge less and sell your shopping centres. Don't waste our council tax.”*
- *“Yes, stop paying for consultancy services. Your senior officers should be providing and don't buy redundant shopping malls.”*
- *“Reduce the salaries of the council workers and reduce waste and improve efficiency of all council departments.”*
- *“Easy stop paying such high salaries to members of the council at the top and paying towards the high cost of immigration.”*

As the comments above show, there were many helpful comments and they describe how survey respondents view the service and Shropshire Council more widely. The comments highlight some dissatisfaction with Shropshire Council generally. A question was included to obtain a clear view of the current telecare service. All survey respondents were asked to rate the service from very good to very poor. Figure 18 displays that the result was very positive. 82% rate the current service either good or very good, only 4 people selected poor or very poor and the remainder have a neutral view, didn't know or did not respond to the question.



The response to the question highlights high levels of satisfaction with the current service. This was evident from many of the questions throughout the survey, particularly within the comments where people expressed that they value the service. Many commented on the importance of peace of mind and reassurance, but others wrote how the responder service had been important following a fall or other incident at home.

The last main question within the survey read 'If you have any ideas or suggestions for improving telecare services in Shropshire please add comments below.' This question was designed to obtain feedback more generally, beyond the charging proposals. Table 9 displays the summary of the responses and themes from the comments. There were 49 comments in total (one comment covered 2 themes).

**Table 9 Overall feedback and suggestions for the current telecare service**

Theme	Count	%
Satisfied with the system / good service	16	32%
Keep it free for users	5	10%
Improved response times	4	8%
Improved communication / aftercare	9	18%
Improvements in the system required	7	14%
Criticism of the consultation / Shropshire Council	5	10%
Other	4	8%
<b>Total</b>	<b>50</b>	<b>100%</b>

#### **Example comments - Overall feedback and suggestions (current service)**

- *"Mine couldn't go digital as the signal area is poor."*
- *"When goes digital how would some older people get access to the service if no internet for it to go digital. BT keep asking when going digital takes 24 hours for change over."*
- *"They need to be added so that full fibre broadband can be used so it is compatible."*
- *"Disturbing that no one from Telecare has noticed that the system has been disconnected."*
- *"Make it known how much SC pays and how much time the provider spends per person on average."*
- *"I don't know enough about how it has been set up and cost to council etc. more information required and hope that its kept."*
- *"There needs to be a local responder on hand. My husband has dementia he had a fall in January. The call went through to Doncaster then I was told it would be hours before a medic came so I had to call a relation for help. Poor service on this occasion."*
- *"Please train more paramedics to improve response times."*
- *"Faster response times when there is a fall would be appreciated."*
- *"Giving the most vulnerable the greatest priority and introducing a first responder service may be a way forward."*
- *"Don't ever change. Your ladies and the night gentleman are very pleasant. If a score I would give them very good."*
- *"It is great! Thankyou."*
- *"Very happy with the service."*

The feedback highlights that there are good levels of satisfaction overall but a few concerns including the need to improve response times, the need to improve communication and aftercare (including concerns relating to internet provision), and concerns about the way Shropshire Council manages its services and budgets. The next, and last, section of the report summarises the feedback from the consultation as a whole.

## 6 Summary and Conclusion

Shropshire Council initiated the telecare charging consultation in January 2025 to explore ways of addressing widely publicised local authority budget constraints and the rising costs associated with providing Telecare services within the county. Currently, Shropshire is one of the few councils that do not charge for Telecare, with charges in other councils ranging from £1.50 to £19 per week. The consultation proposal included a charge of £3.45 per week to align Shropshire with other councils and ensure the sustainability of the service.

Key features of the charging proposal include:

- A weekly charge of £3.45 for all Telecare users, with a one-off start-up fee of £35 for new users.
- Exemptions for residents receiving care packages or after-care services under the Mental Health Act.
- A free six-week trial for new users as part of a reablement package.
- The charge would be the same no matter how little or often the alarm system is triggered.
- The charge will be reviewed annually when the Council sets its budget, fees and charges.

The consultation involved an online survey promoted through various channels and also a postal survey to existing users. The consultation ran from 20 January 2025 to 10 March 2025 and during that time 467 responses were provided. Responses were provided from across Shropshire, including very rural areas of the county and slightly beyond the county borders.

67% of respondents were female, and 90% were aged 55 or older. 65% identified as disabled, with mobility dexterity, stamina/breathing/fatigue and hearing loss being the most common impairments among respondents. Many of the respondents indicated fairly high levels of need and multiple impairments impacting on daily activity. Approximately 43% of the respondents currently using telecare services described receiving some form of financial support or benefits. When asked about equalities and protected characteristics main concerns were living in isolated rural areas/ living alone, having a disability and concerns around age discrimination.

Among the respondents, approximately between 75% and 85% of respondents are current users of Telecare (91% of responses were to the paper survey issued to households with telecare), with many expressing that they value the service for its reliability and peace of mind. A significant portion had not yet needed to use the service, indicating a reliance on the system for emergencies. Feedback indicated that many users were unaware of the need to regularly test their equipment, highlighting a gap in communication regarding service usage. Other survey respondents were predominantly family members or carers responding on behalf of a telecare service user. There were very few responses to the consultation from representatives of local organisations.

The survey explored whether respondents would utilize a responder service if introduced, with a majority indicating disinterest. However, there was some willingness to pay for such a service, with most preferring a charge of less than £3 per week.

The overall feedback reflected mixed feelings towards the proposed charges:

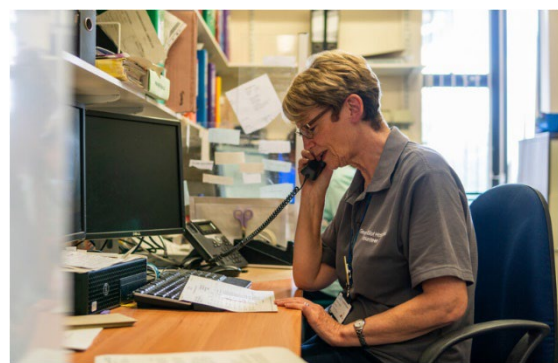
- 76% agreed that charges should not apply to care-eligible individuals.
- 52% disagreed with the introduction of the £3.45 weekly charge.
- For the proposal that people without an assessed need should be charged, 31% agree/strongly agree and 29% disagree/strongly disagree.
- When asked if a one-off charge of £35 for new users should be introduced, 26% agree/strongly agree and 30% disagree/strongly disagree.
- There is support for a free 6-week trial for those with a reablement package (48% agree or strongly agree).
- 60% agree or strongly agree that the charge should be the same no matter how little or often the alarm system is triggered (11% disagree or strongly disagree and others don't have a view).
- The element of the proposal with more mixed views relates to whether the charge should be reviewed annually when the Council sets its budget, fees and charges. 36% agree or strongly agree that would be appropriate whilst 24% disagree or strongly disagree.

Overall, 34% agree or strongly agree with the telecare charging proposals overall, 21% do not have an opinion and 30% disagree or strongly disagree (7% don't know and 8% didn't answer the question). Considerable levels of concern were expressed within comments and only 49% of respondents said they would continue with the service if charges were introduced.

Many respondents expressed concerns about affordability and the potential negative impact on vulnerable individuals. Suggestions included means-testing charges and keeping the service free for those in greatest need. Many people highlighted concerns that the loss of a preventative service such as telecare would increase costs elsewhere. Examples provided included Ambulance call outs and the need for residential care. Predominantly the only positive comments for the proposals were that charging could potentially prevent the service from being lost and allow it to continue.

## Conclusion

While there is recognition of the need for sustainable funding for Telecare services, many respondents expressed concerns that charging could jeopardize their own safety and independence or that of other vulnerable users. The council is encouraged to consider the feedback before making a final decision on the proposed charges. The results of the consultation will be presented to Shropshire Council's Cabinet for decision in June 2025. If the Council decides to introduce a charge, everyone affected will be notified in writing, and given information on how to pay and the amount they will be expected to pay.



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