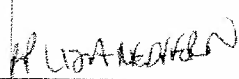


Haringey Council

Report for:	Cabinet 20 th December 2011	Item number	
-------------	---	----------------	--

Title:	Proposed Closure of Alexandra Road Crisis Unit
--------	--

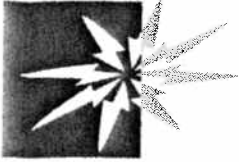
Report authorised by :	Mun Thong Phung, Director of Adult and Housing Services 
---------------------------	---

Lead Officer:	Lisa Redfern, Deputy Director, Adult and Community Services
---------------	--

Ward(s) affected:	Report for Key Decision:
All	Key

1. Describe the issue under consideration

The purpose of this report is to inform Cabinet of the outcome of a process of consultation in relation to the future of Alexandra Road Crisis Unit and to give Cabinet sufficient information to enable it to make an informed decision about the future of the service. The recommendation is for Cabinet to close Alexandra Road Crisis Unit. This decision is being taken in the context of decisions in principle taken on 21st December 2010 at Cabinet and the wider context of the Haringey Efficiency Savings Programme. The net saving that would be achieved from 2012/13 would be £138k per annum. It is important for Cabinet to note that Alexandra Road receives approximately 60% of its funding from NHS Haringey, who confirmed their decision to de-commission this service on 1st December 2011 and this unit was also part funded by the Area Based Grant, now ceased by Central Government.

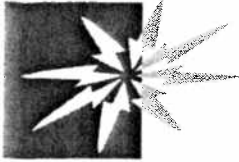


2. Cabinet Member Introduction

- 2.1 Adult Social Care has been judged as **Performing Well** over the last three years by the Care Quality Commission (CQC). Nationally we have performed in the top quartile over the last year in terms of the residential and non-residential care that we commission and our services are quality rated as excellent or good.
- 2.2 As we are all aware, we face a very challenging budgetary framework in which to operate and a number of Adult Social Care service efficiencies and cuts to consider. In order to ensure that we continue to offer the highest quality of service we can to support some of Haringey's most vulnerable people we need to be satisfied that we deliver good quality services but in the most efficient and value for money way.
- 2.3 There is no doubt this service is valued by those who use it, many of whom I have met and listened to very closely during the recent consultation meetings; our consultation report reflects this. However, it is because of the current budgetary challenge that I am asking Members to consider the very difficult decision of the closure of Alexandra Road Crisis Unit. This crisis service for adult with mental health issues is almost 60% funded by the NHS Haringey (£377k), who made the decision on 1st December 2011 to cease funding of this service and will fund until 31st December 2011; part funded by the Local Authority and it was also part funded by the Area Based Grant (£128k) funding withdrawn by Central Government. Whilst I am recommending closure those who need such a service will continue to access services and receive appropriate support, from the NHS, (Barnet, Enfield and Haringey Mental Health Trust, or purchased in the voluntary and independent sector.

3. Recommendations

- 3.1 It is recommended that Cabinet agree the closure of Alexandra Crisis Unit, producing a net saving of £138k per annum from 2012/13.
- 3.2 The proposed date of closure, if agreed at Cabinet, will be by spring 2012 and all current users of the service will have received a review of their needs well before this date and alternative care identified; all people needing such a service will continue to receive one from the appropriate service provider.
- 3.3 Alexandra Road Crisis Unit is a service for people with mental health issues, based in a residential care setting. It has a capacity of 8 beds and offers temporary, crisis and respite admissions for short periods, to



Haringey Council

support users and their carers through periods of mental ill-health. There are no individuals permanently admitted to the Unit. Alexandra Road Crisis Unit also offers a 24 hour crisis telephone line.

- 3.4 It is recommended that Cabinet Members confirm their decision in principle, taken on 21st December 2010, to close this service, having taken into account the outcome of the consultation process as detailed at section 8 of the report, including the outcome of the consultation with trade unions and staff (appendix 5) and the attached Equalities Impact Assessment (Appendix 1).

3.5 Reason for recommendation

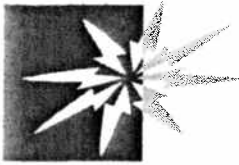
- 3.5.1 Cabinet is asked to note the Council has no statutory obligation under Section 29 of the National Assistance Act 1948 to directly provide residential care services. This includes the service provided at Alexandra Road Crisis Unit.

- 3.5.2. Cabinet Members are asked to note there is no change to the Council's eligibility criteria. In 2003, Adult Services set its eligibility threshold under the then Fair Access to Care Criteria at Critical and Substantial. Fair Access to Care Services has been replaced with Guidance on Eligibility Criteria for Adult Social Care (2010) from the Department of Health, with the guidance retaining the four eligibility bands set out in Fair Access to Care Services – that is, Critical, Substantial, Moderate and Low. Haringey Adult and Community Services will continue to provide services to individuals who are assessed as having needs that are substantial or critical.

- 3.5.3 Cabinet will be asked to consider and note Adult Services plans to mitigate against the closure of Alexandra Crisis Unit, should members agree that the proposal should proceed. All current users are being reviewed and alternative care plans being drawn up with them; all people needing such a service will continue to receive one by an appropriate provider, i.e. the Mental Health Trust, or an appropriate voluntary or independent sector care provider.

4. Other options considered

- 4.1 There is no obligation for the Council to directly provide residential care services. Alexandra Road offers only temporary stays, usually no more than a week or ten days and is not registered for permanent residential provision; this is not its remit. In respect of the crisis and respite admissions that currently are admitted to Alexandra Road Crisis Unit, adult services is already working closely with independent sector providers, both in the residential care and supported living provider



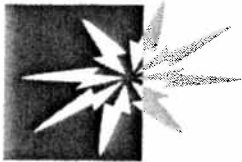
Haringey Council

market, in developing care pathways that support the recovery of mental health service users back into independent living. New schemes have been developed with providers to support key stages in the recovery pathways, including accommodation based and floating housing related support services, funded by mental health commissioning budget. There is interest in the independent sector market in developing a 'respite' service that fits more seamlessly into the overarching model of support and recovery that offers individuals a range of accommodation options to support them, depending on the level of need – including short term residential care, supporting living, or floating support for a fixed period of time. Appendix 3 gives a list of independent and voluntary residential care homes for people with mental health issues in the borough that the Council could commission alternate emergency residential provision from.

- 4.2 The telephone crisis help-line will continue to be offered through Barnet Enfield and Haringey Mental Health Trust as this is in line with its role and function and this is part of its current service offer (the duty service). The Council operates a 24/7 365 day a year out of hours emergency duty social work service.

5. Background information

- 5.1. As part of a range of proposals to achieve a balanced budget, Cabinet made a decision in principle on 21st December 2010 to close Alexandra Road Crisis Unit, following notification from NHS Haringey of their intention to withdraw health funding from the service. A period of consultation (90 days) was undertaken which ended on 30th April 2011.
- 5.2. Alexandra Road Crisis Unit is a Council run service for people with mental health issues, based in a residential care setting. The home provides a service for people who are experiencing mental distress in need of short-term, 24 hours support as an alternative to hospital admission. The home also provides short-term respite stays for people with mental health issues or whose carers are in urgent need of respite. The ethos of the service is therapeutic in nature. The service has been jointly funded by health (NHS Haringey) for a number of years.
- 5.3. The service is accessed by users directly (via self referral), or referrals received from care coordinators and other mental health professionals.

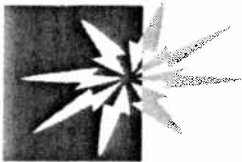


5.4. Funding for Alexandra Crisis Unit for the financial year 2010/11:

Table 1

Adult Services provider services revenue budget	£136,800
Area Based Grant	£128,200
Adult Services Mental Health Commissioning	£11,800
NHS Haringey	£377,700
Total Budget for Alexandra Road Crisis Unit	£654,500

- 5.5. Cabinet members will be aware that the Area Based Grant terminated as from 31st March 2011 and that savings agreed from Area Based Grant included the removal of this funding from Alexandra Road Crisis Unit (£128,200).
- 5.6. Cabinet members will also be aware that NHS Haringey will cease funding Alexandra Road Crisis Unit by 31st December 2011.
- 5.7. On 21st December 2010, with the agreement at Cabinet of the Council's Medium Term Financial Planning 2011/12-2013/14, Adult and Community Services began a period of consultation on the proposed closure of a number of Council run services, including Alexandra Road Crisis Unit. The consultation period ran from 30th January 2011 until 30th April 2011, with both users of the service, as well as affected staff.
- 5.8. Haringey Adult Services has strong commissioning practice in terms of residential care placements; in early 2011, the Care Quality Commission judged Haringey's commissioning practice, in terms of the quality of residential care for adults, to be the best in London and we have performed in the top national quartile for the quality of residential care that we commission for the last two years.
- 5.9. In terms of the care home market for mental health, there are 38 Care Quality Commission registered residential care home services in the independent sector in the borough offering a total of 224 residential beds. There are also a significant number of residential care homes close to the borough boundary. The Council currently commissions all mental health residential care in the independent sector, both within the borough and out of borough, for example where a person prefers to live in another area to be closer to family, or where specialist provision is required.
- 5.10. Within mental health services, there is clear ethos of recovery and move on from residential care, and the providers within the market are used to working with people who are in crisis.



5.11. In addition, Haringey Adult Services have a proven track record of good, well-embedded commissioning and contracting practice, on a solid foundation of strong management of the social care market. Within this context we anticipate no apparent difficulties in working with the private and voluntary sector in being able to provide an appropriate intervention/placement where the primary need is social care, such as respite and dealing with crisis situations.

5.12. Indeed the range of options available for users is anticipated to increase. As per 8.19 below, consultation respondents indicated clearly that should the proposal to close Alexandra Road Crisis Unit be agreed by Cabinet, there is a strong preference for a mental health charity (or voluntary organisation to be involved in any re-provision. It is anticipated that where alternate provision should be provided by social care, there is a strong provider base available already to ensure the Council is able to respond to this user preference.

6. Comments of the Chief Financial Officer and Financial Implications

6.1 The Council contribution to Alexandra Road Crisis Unit in 2012-13 would be £138k. However, the full cost of this service is £655k. The balance of funding was from Area Based Grant £128k (saving offered through ABG reductions), Adults Commissioning £12k and £377k from NHS Haringey which ceases on 31st December 2011.

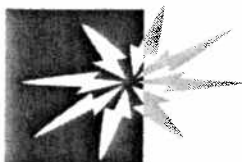
6.2 The Medium Term Financial Plan as presented to Cabinet on 8th February 2011 included the proposed savings of £138k to be achieved in 2012/13.

7. Comments of the Head of Legal Services and Legal Implications

7.1 A decision by Members to Close the Alexandra Road Crisis Unit is recommended by the Director of Adult and Housing Services, following confirmation of the removal of NHS funding on 1st December 2011.

7.2 The decisions of the Cabinet concerning the recommendations set out in the report needs to be taken in line with legislative requirements and must be informed by and take into account the outcome of the consultation with service users, providers and other stakeholders, which is available at <http://www.haringey.gov.uk/budgetconsultation> "Final closure report Oct 2011". A summary of the findings is provided at section 8 and Appendix 4 to this report.

7.3 In reaching their decisions the Cabinet must also have specific regard to the authority's public sector equality duty and thus should take into account the attached full equality impact assessment included at

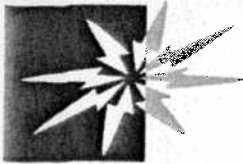


Appendix 1 to the report. Members should note in particular section 3 of the attached equality impact assessment.

- 7.4 The extent of the public sector equality duty on the Council, enforced by the Equality Act 2010, is set out in Appendix 2 to this report. As the attached equality impact assessment highlights the effect of proposals on a number of specific groups within the community, defined as those with protected characteristics under the Equality Act 2010 (by reason of their ethnicity, sex, age, or disability), particular consideration must be given to those effects and to the proposals made to reduce or mitigate them.
- 7.5 A decision to close the Alexandra Road Crisis Unit will have specific consequences for the staff who are employed by the Council within the unit. The Council's Corporate Committee or, alternatively, officer delegation arrangements under the remit of the Corporate Committee, retains responsibility under the terms of the Council's Constitution for decisions regarding changes to the staffing establishment. However in view of the implications of the recommendations contained in this report, the Cabinet should, before making any decision concerning the closure of this unit give due consideration to the completed consultation with staff and trades unions (at Appendix 5) while taking into account the outcome of the consultation with service users and other stakeholders.

8. Equalities and Community Cohesion Comments

- 8.1 An Equalities Impact Assessment has been completed in respect of the proposed closure of the Council's crisis unit for people with mental health problems, which is joint funded with NHS Haringey.
- 8.2 The proposed closures of these services, if agreed, are likely to increase barriers for service users from groups with protected characteristics.
- 8.3 The key findings from the EQIA on the funding proposals are as follows:
- Age - well over half of users of Alexandra Road Crisis Unit are aged between 31 and 50 (with 21.4% aged between 31 and 40; and 36.8% aged between 41 and 50), indicating a disproportionate impact when compared with the borough profile of age;
 - Sex - there is a high proportion of females who use the crisis unit as compared to the general population/profile of females in Haringey. The proportion of Alexandra Road Crisis Road who are female is 62%, against the general population of females in Haringey of 49%.
 - Race - there is no disproportionate impact in terms of race, when comparing the race of users of Alexandra Road against the general



population. It should be noted however that the highest proportion of users come from a White background (65.9%);

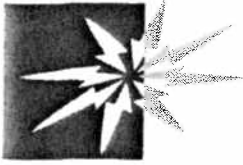
- As regards 'Disability', all older people in Council funded residential care services (including Council's Inhouse services), have meet Council eligibility criteria (critical and substantial); For users at Alexandra Road Crisis Unit, they may also be under CPA of the Mental Health Act 2007.
- No other particular disproportionate impact has been identified for any of the other equalities strands.

8.4 To mitigate these impacts Adult and Community Services will:

Issue	Mitigating Actions
People aged 31-50 / females accessing appropriate social care residential care and crisis/respite services	<ul style="list-style-type: none"> • Ensure care management staff plan with service users, families/carers and providers that the specific needs of user can be met when making placements.
Risks of higher need for other forms of support and care services in future	<ul style="list-style-type: none"> • Identifying non-traditional crisis/respite options and improving take-up of personal budgets • Commissioning more services in the independent sector • Developing a diverse market in services
Risk of insufficient capacity in care home market to meet demand	<ul style="list-style-type: none"> • Commissioning and Market development work with existing and potential new providers in ensuring the right level of capacity (of the right quality) • Ensure capacity for specific disabilities requirements – dementia care, and learning disabilities
Improve equality monitoring in relation to transformed services	<ul style="list-style-type: none"> • Ensure that all services users in transformed services are fully equality monitored against the Equality Act 2010 categories

8.5 It is advised that Adult and Community Services should:

- Ensure that equalities information continues to be collected by providers and analysed
- Continue to monitor the impact of the changed services to maintain good quality of provision and outcomes for all service users.
- Review the equalities information required from providers within the contract and specification documentation, to increase the level of equalities information provided to the Council.

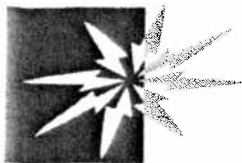


8.6 The key findings from the staffing EqIA for Alexandra Road Crisis Unit are as follows

- This assessment considers the impact on staff of the proposal to cease the delivery of services at Alexandra Road Crisis Unit in relation to the protected equalities groups of ethnicity, gender, age, disability and maternity. It does not consider issues relating to sexual orientation, gender reassignment, pregnancy and religion or belief, as the relevant data is not available for these groups.
- Staffing profile data used in this EqIA for comparison purposes is from December 2010.
- If the unit is close these proposals will displace 16 members of staff. Analysis of the characteristics shows the following.
- Ethnicity – 44% of the staff are of a BME background as compared with 54% across the Council and therefore the impact is not disproportionate on this group of staff. 38% of staff are white and 19% are white 'other' so these groups are disproportionately affected when compared to the Council generally.
- Gender – 63% of the staff are female as compared to 67% across the Council generally and therefore the impact is not disproportionate on this group of staff when compared to the Council generally. Females are disproportionately affected at the PO1-3 level (100%) and males at the Sc6-SO2 (45%) level when compared to grade ranges across the council generally (62% and 26% respectively).
- Age – Overall there is a disproportionate impact on the 45-54 age range (56%) as compared with the Council generally (35%)
- Disability – Overall, there is a higher level of staff with a disability in this staff group (19%) as compared to the Council profile (7%).
- The proposal to close this service is based on the need to make financial savings. If the proposal is agreed the service has taken all necessary steps to consult with staff and to mitigate against compulsory redundancies by identifying volunteers for redundancy and applying the councils redeployment procedure to avoid making compulsory redundancies if possible.

8.7 Consultation

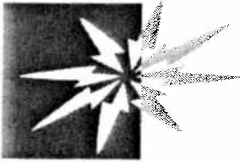
There has been a complex and wide-ranging process of consultation over the period between 31st January 2011 and 30th April 2011 in relation to the proposals to close Alexandra Road Crisis Unit. It is clear how much the service provided at the unit is valued by those who use it and their wider family networks. The consultation has raised concerns in relation to the loss of service because of its uniqueness, with a social care model of supporting people who are in crisis favoured over a medical/psychiatric model. It has also raised concerns about the negative impact on admissions to psychiatric care. The consultation respondents appreciated that the NHS had precipitated the proposal for



Haringey Council

closure of the unit, but felt that the Council should be doing more to save the place from closing.

- 8.8 Our consultation sought to reach a wide-ranging audience and we received a significant number and varied set of responses.
- 8.9 There were over 400 direct responses to the overall consultation including over 200 letters and emails and, at the time this report was produced, 191 completed surveys. On average, between 200 and 300 users, relatives and carers a month attended the various meetings that we held. There was also a comprehensive web page where people could find up to date information, including feedback; this has received over 2100 viewings.
- 8.10 In the case of Alexandra Road Crisis Unit, there were six meetings with users, relatives and carers; 53 questionnaire responses, a further 21 written responses and 263 specific viewings of the webpage.
- 8.11 We received a number of petitions including one with 169 signatures from the group 'Save Alexandra Road Crisis Unit', another from the Liberal Democrat Group in Haringey (586 signatures) and a further 99 signatures from a joint campaign to defend all adult social care services in the Borough.
- 8.12 A full report of the consultation and online survey results are available at <http://www.haringey.gov.uk/budgetconsultation> "Final closure report Oct 2011".
- 8.13 **Comments on the consultation from users, relatives, carers, providers, voluntary sector, advocates and others**
The Alexandra Road Crisis Unit was seen as an extremely important part of both mental health provision and preventative services in Haringey providing a positive pathway to avoiding hospital admissions, pressure on GPs and providing people with a short period of support away from home.
- There was high user satisfaction with many who attended Alexandra Road Crisis Unit doing so because of its ethos and first class service. Alexandra Road Crisis Unit "treated service users like human beings" according to one respondent and, according to another, helped users 'to keep it together'.
- 8.14 **Effects of the cuts**
Closing Alexandra Road Crisis Unit would, it was argued, be short-sighted and high in both financial and human terms with some saying the cuts were reckless, unfair and disproportionate. People with mental



Haringey Council

health issues, it was said, needed a secure and stable environment. A short stay at Alexandra Road Crisis Unit could, it was argued, prevent some people from needing to go onto more serious units for more serious conditions, make a real difference and save lives and was preferable to locked wards and a hospital setting which were not viewed as viable or preferred alternatives and about which there was genuine anxiety.

8.15 Comments on the future

As one of the most deprived boroughs in London, people said more not less support was needed in Haringey; it was felt provision was already “stretched” and disadvantaged people were entitled to as much choice and independence as others.

Some were extremely concerned that no viable alternative, as they saw it, was being offered. Some Mental Health respondents did not have high hopes for future of crisis services in Haringey, being unconvinced that the private and independent sector could be relied upon to fill the gap.

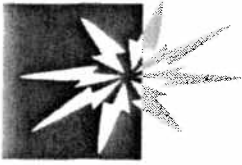
Others worried for self-referrals and for those below the threshold of recovery houses and that even if crisis services still existed that the threshold to access them would be much higher such that the only Mental Health services available would be for those who were seriously ill. Others worried about the future of respite for carers.

8.16 Comments on the proposal

Some people were uncertain of the strategy behind the closure of this ‘person-centred’ service arguing that the replacement(s) as they saw it being advocated would be very different to now and based on a medical model that services users did not want. Recovery Houses, it was said, worked along different lines such that Alexandra Road Crisis Unit’s demise would not pick up on the need for a community based crisis and respite unit with 24hr telephone support leading to gaps in crisis services, make it difficult for services users to move quickly from a crisis back into normal life, and result in increased out of hours contact with GPs and other health professionals.

Others said that the proposed savings were a false economy and/or that it would cost more in the long run and/or even lead to longer waiting lists. Some were concerned that the NHS and Council had not renewed longstanding agreement in 2011/12, of which Alexandra Road Crisis Unit formed part.

Some felt that the Alexandra Road Crisis Unit should close as it did not benefit service users in the long run, with some users, as they saw it, using the service as a hotel with no lasting improvement in their situation



Haringey Council

afterwards. Other people said that the Council ought to distinguish between “drug induced and genetic or inherited mental illness” with users being asked to pay rather than receive publicly-funded support for the former.

Those in favour said by all means close centres but provide a safety net for emergencies and ensure that concrete alternatives were in place before changes should be considered.

Other people said they appreciated that NHS rather than council cuts had precipitated the closure of Alexandra Road Crisis Unit but felt the Council should be helping to save the place from closing. Others said that if the closure were to go ahead, the experience for people who have to be admitted to hospital in a crisis needed to improve. Others wanted help with setting up Alexandra Road Crisis Unit as a social enterprise and further information on costs and demand levels in order to do so. This information was provided during the consultation period.

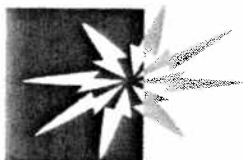
Haringey Users Network, having consulted users as part of its work in supporting service users, said there was a clear conclusion that the service was beneficial to the mental well being of service users, that Alexandra Road Crisis Unit was popular and effective and that service users would be most concerned about the loss of respite care; the skills and empathetic support of staff and the loss of the 24 hr support phone line.

8.17 Comments on the consultation

There was a concern that plans for a new service would appear to have reached a fairly advanced stage, requests for the proposal not to be looked at in isolation and claims that the facts and strategy had not been set out at the beginning, making it difficult to consider the proposal properly.

Others thought it vital that there were sufficient supply/quality/ alternative provision and overlap between the existing and any new provision before any changes took place. Others wanted greater certainty about Recovery House(s) and other alternatives before any firm decisions were taken on Alexandra Road Crisis Unit.

With equalities at the heart of its policies, it was, it was argued, contradictory for the Council to be targeting the most deprived and went against the ethos of equal opportunities the council claimed to support.



8.18 User Survey Questionnaires:

A total of 53 responses were received about proposed changes to Alexandra Road Crisis Unit.

Detailed results are attached as Appendix 5 to this report.

8.19 Responses to specific questions:

Asked to what extent they supported the proposal, overwhelmingly Alexandra Road Crisis Unit respondents either opposed (6%) or strongly opposed (94%) the proposals. This emphatic view is attributed to the fact that most wanted or strongly wanted a safe place to go when unwell or in crisis, one which did not remind them of hospital and provided respite.

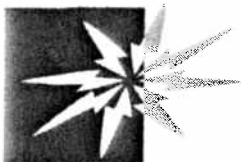
Over half of respondents appear to have understood why Haringey Council was proposing to close Alexandra Road Crisis Unit. Of the 41% who were unsure or said they did not understand, this had as much to do with the fact that people wanted things to stay the way they were than that they did not understand the proposal or what lay behind it.

Asked what factor(s) councillors should take into account when making their final decision, over two-thirds of those commenting on Alexandra Road Crisis Unit felt a mix of psychiatric, user-led self help social groups and adult social care would best help support their futures rather than anyone service on its own.

Asked which of the services currently provided at Alexandra Road enabled people best achieve recovery and return home, respondents considered accommodation (74%), the support of others with similar experiences (74%) and meals (62%) were the top 3 most important things to people in crisis. Social and creative activities scored 53% apiece, physical activities 38%, housing benefit and debt advice, education for training, helps to stay in or get back to work was important to roughly a third of people or under.

For Alexandra Road Crisis Unit respondents, the key services they think must be provided in the future are a safe place to go (over 80%); helping those in a crisis to manage their own mental health (79%); and information and advice (53%) followed by the support of other users/survivors (42%).

Asked if the service or activity currently provided by Alexandra Road Crisis Unit were to cease, the most favoured alternative, should the Council-run centre close, was a local mental health charity; the least



Haringey Council

favoured option was a clinic/ward within a local hospital. See Table 2 below.

Table 2

Alexandra Road Crisis Unit

1 (47.2%)	A local mental health charity
2 (39.6%)	Alexandra Road run by someone else
3 (34%)	A national mental health charity
4 (26.4%)	Other
5 (18.9%)	A local survivor/user-led group
6 (15.1%)	Clinic/ward within a local hospital

9. Head of Procurement Comments

9.1 N/A

10. Policy Implications

10.1 Links to Council Plan Priorities. Adult and Community Services Council Plan Priorities are:

- Encouraging lifetime well-being at home, work, play and learning;
- Promoting Independent living while supporting adults and children in need; and
- Delivering excellent customer focused cost effective services.

Full Council Plan Priorities can be found on the left hand side of the page at www.haringey.gov.uk/index.htm

11. Use of Appendices

- 11.1 Appendix 1 - EqIA: Withdrawal of funding from Alexandra Road Crisis Unit;
- 11.2 Appendix 2 - The public sector single equality duty;
- 11.3 Appendix 3 - List of care homes who work with people with mental health problems;
- 11.4 Appendix 4 - Summary analysis of consultation questionnaire; and
- 11.5 Appendix 5 - Trade Union Comments and the Staff Consultation Report for Alexandra Road Crisis Unit.

12. Local Government (Access to Information) Act 1985

- 12.1 Local Government (Access to Information) Act 1985;
- 12.2 January 2011, "Think Local, Act Personal", Cabinet Office; and
- 12.3 No reason for confidentiality or exemption.