

PART B – Equality Analysis Form

As a public authority we need to ensure that all our strategies, policies, service and functions, both current and proposed have given proper consideration to equality and diversity.

This form:

- Can be used to prompt discussions, ensure that due regard has been given and remove or minimise disadvantage for an individual or group with a protected characteristic
- Involves looking at what steps can be taken to advance and maximise equality as well as eliminate discrimination and negative consequences
- Should be completed before decisions are made, this will remove the need for remedial actions.

Note – An Initial Equality Screening Assessment (Part A) should be completed prior to this form.

When completing this form consider the Equality Act 2010 protected characteristics Age, Disability, Sex, Gender Reassignment, Race, Religion or Belief, Sexual Orientation, Civil Partnerships and Marriage, Pregnancy and Maternity and other socio-economic groups e.g. parents, single parents and guardians, carers, looked after children, unemployed and people on low incomes, ex-offenders, victims of domestic violence, homeless people etc. – see page 11 of Equality Screening and Analysis Guidance.

1. Title	
Equality Analysis title: Adult Services non-residential care charging policy	
Date of Equality Analysis (EA): 10/10/19	
Directorate: ACH&PH	Service area: Independent Living & Support
Lead Manager: Ian Spicer – Assistant Director	Contact number: 01709 334062
Is this a:	
<input checked="" type="checkbox"/> Strategy / Policy	<input type="checkbox"/> Service / Function
	<input type="checkbox"/> Other
If other, please specify	

2. Names of those involved in the Equality Analysis (Should include minimum of three people) - see page 7 of Equality Screening and Analysis Guidance

Name	Organisation	Role (egg service user, managers, service specialist)
Mark Scarrott	RMBC	Finance Officer
Gerry Gillen	RMBC	Solicitor

3. What is already known? - see page 10 of Equality Screening and Analysis Guidance

Aim/Scope (who the Policy/Service affects and intended outcomes if known)

This may include a group/s identified by a protected characteristic, others groups or stakeholder/s e.g. service users, employees, partners, members, suppliers etc.)

Aim/Scope (who the Policy /Service affects and intended outcomes if known) See page 7 of guidance step 1

The council's current non-residential charging policy has been in place since 2016 and has not been reviewed in that time. There is an expectation that all council policies should be reviewed in a timely fashion to ensure that they are fit for purpose and in line with legislation and statutory guidance.

To be eligible for services from the council requires a statutory assessment under the Care Act 2014 and those who will receive such services must meet an eligibility criteria set out in the legislation.

The council delivers these services to groups who have protected characteristics under the Equality Act 2010 namely older people, people with a disability and carers.

The services referred to in this assessment are home care or supported living services, day care and transport to day care, tele care services and services delivered through direct payments. Note: Reablement services are free of charge and not affected.

As a result of funding reductions from Central Government along with a growing demand for services has led to a need to manage finite resources more efficiently and equitably including the potential to reduce subsidies for services provided to current service users. This has resulted in a number of proposed changes to charging for non-residential adult social care services as set out below.

Any changes to the charging regime must comply with statutory guidance as set out below

An initial review of the Council's current non-residential care charging policy has been carried out, the outcomes of which were presented to Cabinet in a report on 17th December 2018, resulting in the identification of five key areas for proposed changes in order to update

the non-residential charging policy and financial assessment service provided by the Council. In turn these proposals would seek to ensure that there is equity and clarity in how this policy is applied across all the people that receive non-residential services as well as giving consideration for those not currently users of the service.

The Care Act 2014 focuses on improving people's independence and wellbeing. It makes it clear that it is the duty of the Council to provide or arrange services that help prevent or delay people developing eligible needs for care and support. The council must maintain a service for providing advice and information relating to care and support. It states that a Council may make a charge for meeting needs, covering the cost that is incurred by the Council in meeting the needs to which the charge applies. In order to do this, a financial assessment is required to determine an individual's ability to contribute to their care cost.

A person who receives care and support in their own home will need to pay their daily living costs such as rent, food, utilities, and must have enough money to meet these costs. Under the Care and Support Statutory Guidance 2018 their income must not be reduced below a specified level after charges have been deducted. This is known as the 'Minimum Income Guarantee' and is designed to promote independence and social inclusion. The Minimum Income Guarantee ensures income equivalent of Income Support or Guaranteed Credit element of Pension Credit plus a minimum buffer of 25% is maintained by service users.

The proposals are detailed below:

- 1.1 Proposal 1: To remove the current maximum charge, and to charge those people who can afford it, the full cost of the services they are provided.
- 1.2 Proposal 2: Under the new framework those who can afford it would be charged for the total number of carers attending and providing services, which would mean introducing a charge where more than one carer is provided at the same time.
- 1.3 Proposal 3: That the liability for charges will be from the date on which the service commences and not from the date that the financial assessment is completed.
- 1.4 Proposal 4: To include the full value high rate Attendance Allowance or Disability Living Allowance or the enhanced daily living component of Personal Independence Payments, when carrying out non-residential financial assessments.
- 1.5 Proposal 5: To introduce a standard allowance of 30 per cent of disability benefits for Disability Related Expenditure (DRE) as part of the financial assessment.

What equality information is available? (Include any engagement undertaken)

Rotherham has a steadily growing population which reached a record level of 263,400 in 2017. The population is growing as a result of natural increase (more births than deaths), net inward migration and increased life expectancy. Rotherham has 161,400 people of working age (61%). This is slightly lower than the English average. Rotherham has an ageing population not only in absolute terms but also as a proportion of the total population

and their health and social care needs place increasing pressure on care and support services. There are 51,000 people aged 65+ including 6,000 people aged 85+ whose numbers are projected to increase by a third over the next 10 years. ONS data shows that as a person ages their need for support grows. (<https://tinyurl.com/yywje8ha>).

The population is increasingly diverse, with around one person in 10 from a minority ethnic group. The largest BME group is Pakistani and Kashmiri who numbered 7,900 in 2011. At the time of the 2011 Census, there were 13,147 people born outside the UK and living in Rotherham or 5.1% of the population, compared with 6,473 in 2001. The number has since increased further through migration, especially from Slovakia, Poland and latterly Romania.

Health in Rotherham has long been poorer than average with life expectancy below that in England as a whole, although rising. Life expectancy for males in Rotherham is 1.4 years below the national average and for females the gap is greater at 1.9 years. Health inequalities within the Borough are illustrated by the 9.5 year gap in life expectancy for men living in the most deprived areas and the least deprived, and a 7 year gap for women.

Particular health and lifestyle concerns in Rotherham are obesity, alcohol and smoking related illness, cancer, smoking in pregnancy and low breastfeeding initiation. Older people in Rotherham are far more likely to be disabled and be in poor health than average. The 2011 Census showed that 56,588 (21.9%) of Rotherham's population had a long term health problem or disability and 11.3% said their day-to-day activities were limited a lot by long term conditions (8.3% nationally).

The current policy applies to all groups of people aged 18 and over who have been assessed as having eligible needs under the Care Act 2014 and requires commissioned non-residential services.

The current policy applies to all of the current 2,700 people who are in receipt of non-residential services and any new people who require such services. Any amendments to the policy will affect the current as well as future users of the service from the date of implementation.

Any changes to service user contributions which are implemented will be carefully monitored. Adult Social Care has procedures in place to systematically monitor the use of services and follow-up individual customers to ensure that their eligible needs are met and welfare needs addressed. For all customers who cease or reduce their service when any new charging arrangements are introduced, a risk assessment will take place. An initial screening will be undertaken by the service provider and if any risks or potential risks to the customer or their carer are identified the case will be referred to care management for a review. Previous changes to charging policy or to the financial assessment methodology have resulted in only a very small number of customers seeking to stop or reduce their service, all of whom have been risk assessed and dealt with appropriately. No-one with eligible needs will have their service ceased or reduced due to the impact of any policy changes if this would put them at risk of harm. In such a situation the care manager will carry out a review and consideration will be given to how support can be effectively delivered to meet their needs to keep them safe.

The Equality Assessment has been informed by the consultation process, which has provided the opportunity to better understand the potential impact of the proposed changes

and identify ways in which these could be mitigated. A further positive impact is the financial assessment process which seeks to maximise people's income through providing benefits checks as part of the financial assessment process, including completing benefits claims forms on behalf of the customer, where necessary.

Are there any gaps in the information that you are aware of?

No

What monitoring arrangements have you made to monitor the impact of the policy or service on communities/groups according to their protected characteristics?

Closely monitor people's use of services through targeted reviews of those who are impacted upon, following the implementation of any changes to charging to ensure that customers' needs are being met.

Establish clear points of contact for those most effected.

Identify any impact on the use of services and any changes in demand curves.

Provide staff with training and support so they can confidently and clearly respond to queries and comments and challenge where applicable.

Engagement undertaken with customers. (date and group(s) consulted and key findings)

On the 17th December 2018 Cabinet approved a proposal to consult on the options available to the Council for non-residential care charges, including options for the financial assessment. An initial review had been undertaken on the non-residential adult care charging policy and had identified key areas for proposed change.

The consultation was launched on the 22nd July with an initial planned closure date of the 9th July. This was extended for a further three weeks to the 27th September to ensure there was sufficient opportunity for people to respond.

5 proposals were consulted on, as set out above, using the following methodology:

All the relevant information was available via the council's website.

Press releases sent to the Advertiser newspaper (date).

Drop-in session 1
26 July Town Hall 11am
Drop-in session 2

	<p>30 July New York Stadium 5.30pm - 7.30pm Drop-in session 3 31 July Town Hall 1pm – 2.30pm Drop-in session 4 1 August Town Hall 3pm – 4.30pm Drop-in session 5 29 August Maltby Service Centre 11am – 12.30pm Drop-in session 6 30 August High St Centre, Rawmarsh</p> <p>Arranged group meetings</p> <p>Sight and Sound 2 September Sight and Sound 12 September 4 September, Older People’s Forum 10.45am -11.45am 23 September, Stag Willow/Oak Trees ECH 1pm 24 September, Bakersfield Court ECH 2pm-4pm 26 September, Potteries Court ECH 10am-11am</p> <p>Letter mailed to people who use the service including consultation pack. Letter sent to people who use the service to remind them to take part in the consultation Announcement of consultation email to Subscribers of Adult Care, Housing & Public Health Staff, 2 July Easy Read email to support organisations 16 August. (Followed up 29 August.) Information about additional drop-in session emailed to support organisations 23 August</p> <p>Throughout this process direct contact was made with over 3,000 people.</p> <p>85 people attended the Drop in sessions</p> <p>The benefits and assessments team visited over 100 service users during the consultation period.</p> <p>50 direct enquiries received and responded to from the mail box.</p> <p>202 people completed the consultation forms.</p>
<p>Engagement undertaken with staff (date and group(s)consulted and key findings)</p>	<p>Staff briefings across the directorate held on the 16th and 30th October.</p> <p>Cross directorate working group held monthly meetings for 12 months.</p>

	<p>Reports and discussions at weekly Directorate Leadership Team</p> <p>Discussions at fortnightly Senior Managers Team Meetings</p>
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4. The Analysis - of the actual or likely effect of the Policy or Service (Identify by protected characteristics)

How does the Policy/Service meet the needs of different communities and groups? (Protected characteristics of Age, Disability, Sex, Gender Reassignment, Race, Religion or Belief, Sexual Orientation, Civil Partnerships and Marriage, Pregnancy and Maternity) - see glossary on page 14 of the Equality Screening and Analysis Guidance)

Under the Equality Act 2010 the following are recognised as protected characteristics: Age, Disability, Sex, Gender Reassignment, Race, Religion or Belief, Sexual Orientation, Civil Partnerships and Marriage, Pregnancy and Maternity.

Rotherham also includes Carers as a specific group. Other areas to note are Financial Inclusion, Fuel Poverty, and other socio-economic factors. This list is not exhaustive - see guidance appendix 1 **and** page 8 of guidance step 4

Adult Social Care through their duties under the Care Act 2014 provides services to eligible individuals following an assessment of need. These individuals are older and disabled people and so it is known that these groups will be affected by the proposals. The proposals may also have an impact on carers, both as people who may use services and as people who provide unpaid care and support to service users. The provision of any service is related purely to identified or assessed need and as such, religion, sexuality, culture, ethnicity should not impact upon the provision of services however it may impact upon how and where those services are provided.

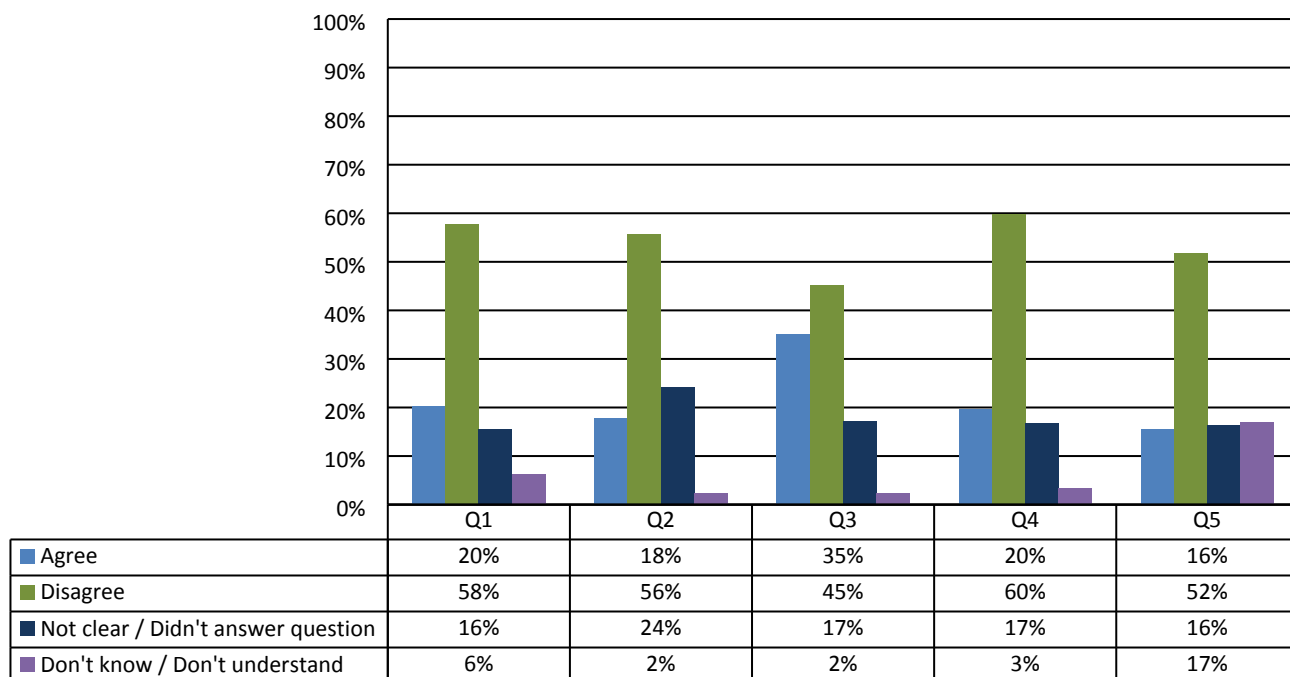
The equality assessment has identified that the people that the proposals will affect will all be older and/or disabled but that no other equality characteristics will be impacted upon disproportionately. A range of actions are included to mitigate the impact of the proposals recommended.

- Financial hardship due to increased care costs, decreased quality of life and impact on wellbeing due to financial hardship.
- Individuals refusing services all together or opting for a lower level of service due to cost increases which could put their health and/or wellbeing at risk
- This could lead to an increase in requirements for higher cost services for the local authority as a result of, for example, individuals falling, as well as potentially greater social isolation
- Fear/reluctance of approaching Adult Social Care early due to a perceived inability to be able to afford services until a crisis has been reached resulting in either admission to hospital or higher cost services.
- A small number of current users may decline council services and purchase support from other providers

- Residential care may become a financially more attractive service

Graph 2: % Summary of response for each question

(Of those who completed the question)



Does your Policy/Service present any problems or barriers to communities or Groups?

Individually, there may be a perception that those who have worked and/or saved over their lifetime and being disadvantaged compared to those who have chosen not to save. However, any amendment in the council's policy follows the statutory guidance issued by the Department of Health and Social Care. The decision to levy charges has been brought about by policy decisions by Parliament that care services would not be free at the point of use and therefore must be paid for by those that can financially afford them. Additionally as demand grows the money available to local authorities diminishes as a result of reductions in funding from central government therefore requiring a realignment on how services are charged

Does the Service/Policy provide any positive impact/s including improvements or remove barriers?

Although it is recognised that by increasing charges this will impact adversely on a number of current users it will have the effect of reducing the subsidy provided for delivered support and move it closer to the real cost of services to the local authority. This will allow the council to manage its budgets in such a way as to ensure that the growing older and frailer population will receive a service which has the greatest possibility of keeping them safe and well as they become more vulnerable due to illness and disability.

Under the Care Act the local authority must meet eligible unmet needs and therefore has to use its finite resources to deliver and/or commission appropriate services for the identified group. It

is important that members of the community receive sufficient information to understand what services are available and that decisions regarding assessments of need and ability to pay and

Explain the Council's legal duties to provide care and support for people from all communities. Ensure that we share clear and transparent information about the entitlement to services with all communities' in particular new migrants. In addition provide open and transparent information on how such entitlements are calculated that challenge inaccurate perceptions and prejudices with one aim of dispelling some of the present myths around what migrants are entitled too and replace those myths with clear and accurate understanding.

This could be achieved by providing staff with training and support so staff can confidently and clearly respond to queries and comments and challenge where applicable.

What affect will the Policy/Service have on community relations? (may also need to consider activity which may be perceived as benefiting one group at the expense of another)

Conversely individual perception of others getting services free that they have to pay for may cause a decrease in social cohesion. Mitigate by the dissemination of clear unambiguous information regarding who receives social care and how what they are asked to contribute is calculated.

Closely monitor people's use of services following the implementation of any changes to charging to ensure that customers do not become socially isolated.
Carry out work to identify the impact on the use of services and any changes in demand curves.

Please list any **actions and targets** that need to be taken as a consequence of this assessment on the action plan below and ensure that they are added into your service plan for monitoring purposes – see page 12 of the Equality Screening and Analysis Guidance.

5. Summary of findings and Equality Analysis Action Plan

If the analysis is done at the right time, i.e. early before decisions are made, changes should be built in before the policy or change is signed off. This will remove the need for remedial actions. Where this is achieved, the only action required will be to monitor the impact of the policy/service/change on communities or groups according to their protected characteristic - See page 11 of the Equality Screening and Analysis guidance

Title of analysis: Adult Services non-residential care charging policy
Directorate and service area: ACH&PH – Independent Living & Support
Lead Manager: Ian Spicer – Assistant Director
Summary of findings:
<p>The current policy applies to all of the current 2,700 people who are in receipt of non-residential services and any new people who require such services. Any amendments to the policy will affect the current as well as future users of the service from the date of implementation.</p> <p>The equality assessment has identified that the people that the proposals will affect will all be older and/or disabled and carers but that no other equality characteristics will be impacted upon disproportionately. A range of actions are included to mitigate the impact of the proposals recommended.</p> <p>Adult Social Care has procedures in place to systematically monitor the use of services and follow-up individual customers to ensure that their eligible needs are met and welfare needs addressed.</p> <p>No-one with eligible needs will have their service ceased or reduced due to the impact of any policy changes if this would put them at risk of harm.</p> <p>The Equality Assessment has been informed by the consultation process, which has provided the opportunity to better understand the potential impact of the proposed changes and identify ways in which these could be mitigated.</p>

Although it is recognised that by increasing charges this will impact adversely on a number of current users it will have the effect of reducing the subsidy provided for delivered support and move it closer to the real cost of services to the local authority. This will allow the council to manage its budgets in such a way as to ensure that older people, those with a disability and carers will receive a service which has the greatest possibility of keeping them safe and well especially as needs may increase.

Action/Target	State Protected Characteristics as listed below	Target date (MM/YY)
The Council has a legal responsibility to meet identified eligible need under the Care Act and will continue to meet this duty by ensuring no one is asked to pay what they cannot reasonably afford. This will be done through the application of the financial assessment and through looking at individual circumstances where customers are facing difficulties.	A, C and D	Starting with the notification of the decisions arising from this review and ongoing
Signposting and support to access financial advice and advocacy in its broadest sense is one of the key mitigating factors we have identified to the issues raised in the consultation. Work with appropriate commissioned services and third sector organisations to promote further exposure of the support services.	A, C and D	Ensure any commissioned and Voluntary support services are informed of any policy changes in advance
To consider how all communication, web, written and spoken is presented in a simple easily understood way and it is carried out in a manner, at a pace and where necessary with appropriate support that allows service users to understand and question the information they are being given, seek clarity and decide how to proceed.	A,C and D	Develop Comms plan covering accessible information pending any Policy changes
There are continuing programmes including ‘Thriving Neighbourhoods’ looking to develop new and innovative ways of providing support through mobilising community resources to address social isolation.	A, C and D	As part of comprehensive Comms plan to include all related support programmes.
Look at the possibility of identifying funding to either commission new or extend existing services to address any access equity issues by providing	A, C and D	Inform lead commissioner of the proposals and work

Borough wide proactive advocacy/support services for individual's facing financial difficulty or material deprivation.		up plan to address this concern.
Consider with members and senior officers the level and degree of the changes we are proposing in light of the concerns raised and look to identify any potential changes to the proposal that could reduce anxiety or actual financial hardships.	A, C and D	Discuss with Cabinet member for Adult Social Care

*A = Age, D= Disability, S = Sex, GR Gender Reassignment, RE= Race/ Ethnicity, RoB= Religion or Belief, SO= Sexual Orientation, PM= Pregnancy/Maternity, CPM = Civil Partnership or Marriage. C= Carers, O= other groups

6. Governance, ownership and approval

Please state those that have approved the Equality Analysis. Approval should be obtained by the Director and approval sought from DLT and the relevant Cabinet Member.

Name	Job title	Date
Anne Marie Lubanski	Strategic Director	25.10.2019

7. Publishing

The Equality Analysis will act as evidence that due regard to equality and diversity has been given.

If this Equality Analysis relates to a **Cabinet, key delegated officer decision, Council, other committee or a significant operational decision** a copy of the completed document should be attached as an appendix and published alongside the relevant report.

A copy should also be sent to equality@rotherham.gov.uk For record keeping purposes it will be kept on file and also published on the Council's Equality and Diversity Internet page.

Date Equality Analysis completed	10/10/19
Report title and date	Adult Services non-residential care charging policy 18/10/19
Date report sent for publication	
Date Equality Analysis sent to Performance, Intelligence and Improvement equality@rotherham.gov.uk	10/10/19