

## Equality impact, needs and requirements assessment form

Please use this form to record your findings, proposed actions, equality objectives and targets. Use the guidance notes to help you do the assessment or contact the Equality Standard Project Manager if you need some advice

### About the policy, practice, service or function you are assessing

Name of policy, practice, service or function: **Fairer Contributions Cabinet Proposals 23 November 2010**

Assessment team leader name: **Simon Fogell**

Department responsible: **Adults, Health and Housing**

Service Area: **Adult Social Services**

Other members of assessment team:

Name	Position	Area of expertise	Comments
Sarah Swindell	Voluntary and Community Sector team	Health and social care grant funding	
Edith Storer	Diversity forum member	Disability equality	
Jo Moody	Collections Team Manager	Charging	
Nasreen Iqbal	Derby Race Equality Council	Race	
Jennifer Holmes	Action Deafness	Sensory – Hearing	Fairer contributions – it is believed that the policy regarding fairer contributions is fair, transparent and takes future demographics into account.
Ian Chennery	VCS Team Manager	Council wide grant funding	

This assessment was completed in February of the financial year 2010 to 2011

Question	Response/ findings
<b>1- What are the main aims and objectives or purpose of the policy, practice, service or function that you are assessing?</b>	<p>Main aims of the Fairer Charging Proposals are to:</p> <ul style="list-style-type: none"> <li>• comply with the new Department of Health Fairer Contributions Guidance 2010</li> <li>• create an equality of contribution to the cost of care services following a financial assessment for all service users</li> <li>• ensure the continuity of care services for those with the greatest risks to independence</li> <li>• maximises its income from discretionary charging given the austerity measures the Council is facing</li> </ul> <p>In addition the introduction of personal budgets in adult social care requires Councils to amend their charging policies to fit into the new system of delivering care services. All councils offering Personal Budgets are expected to implement the Department of Health's Fairer Contributions Guidance 2010. The way an individual's ability to pay is calculated will remain the same but instead of charging for each individual service, the guidance requires that the new charge will be a single contribution towards the Personal Budget.</p>
<b>2- Who implements, carries out or delivers the policy, practice, service or function?</b>  Please state where this is more than one person, team, department, or body – and include any outside organisations who deliver under procurement arrangements	<p>Derby City Council Staff.</p> <p>Staff from the Resources Department will carry out the assessments and staff from Corporate and Adults Services will administer the financial side.</p>
<b>3- Who is affected by the policy, practice, service or function, or by how it is</b>	<p>All the current and future service users, including their family members and other informal carers, of non-residential services.</p>

Question	Response/ findings
<p><b>delivered?</b> Such as, who are the external and internal customers, groups, or communities?</p>	
<p><b>4- What outcomes do we want to achieve, why and for whom?</b> For example, what do you want to be providing, how well, what changes or improvements, and what should the benefits be for customers, groups or communities?</p>	<ul style="list-style-type: none"> <li>• Comply with the new Department of Health Fairer Contributions Guidance 2010</li> <li>• Customers to pay a fair and equitable contribution towards their care costs based on an individual financial assessment</li> <li>• The continuity of care services for those with the greatest risks to independence</li> </ul>
<p><b>5- What existing or previous inspections of the policy, practice, service or function are there?</b> For example, Best Value Inspections, policy reviews, research into the effects of a policy or practice.</p> <p>What did they tell you?</p>	<p>An Equality impact, needs and requirements assessment undertaken on a new Fairer Charging policy in September 2008. It told us that there was no evidence to suggest that a particular group was negatively affected by this policy or that there was higher or lower take up of services.</p> <p>There were no comments that stated the policy would create inequalities for any one group. It was suggested that it could disadvantage disabled and elderly people but did not expand further. There was a similar comment in the consultation that was carried out in 2003 when Fairer Charging replaced the then Home Care Charging policy in that disabled people would be disadvantaged.</p> <p>Within the Fairer Charging regulations there is scope for Councils to take account of Disability related issues. The government wishes to encourage and enable those who wish to take up employment, including disabled people and their carers, to do so and that charging policies should avoid creating disincentives to work.</p>

Question	Response/ findings																									
Identifying potential equality issues and factors																										
6- What do you already know about the equality impact or need? For example, from research, feedback, consultation or any performance monitoring	<p>The fact that this impacts on disabled people or people with life limiting illnesses and does not impact on non disabled people or people without life limiting illnesses is simply because disabled people or people with life limiting illnesses are the customer base of adult social services and non disabled people or people without life limiting illnesses are not.</p> <p>The same stands for older disabled people, or frail older people or older people with life limiting illnesses. Also the higher the age band the more women there are than men that receive services. This is because women have a greater life span on average than men.</p>																									
7- Is there any evidence of higher or lower take up under the policy or practice, or of the service or function for any particular groups? For example, who uses the service, who doesn't and why not?	<p>When charging was reintroduced on 04 Jan 2009 there were concerns raised in the Equality impact, needs and requirements assessment that we would see a marked drop in the number of people using the service due to the charges. Using the period December 2008 as a benchmark and then September 2009 as a further benchmark the following statistics are:</p> <table><tr><th>Home Care</th><th>December 2008</th><th>September 2009</th><th>Difference</th><th>Percentage</th></tr><tr><td>Total Clients</td><td>1962</td><td>1887</td><td>-75</td><td>-3.82%</td></tr><tr><td>Average monthly figure for clients 1904</td><td></td><td></td><td>-58</td><td>-2.96%</td></tr><tr><td>Total hours</td><td>19617</td><td>20599</td><td>+982</td><td>+5%</td></tr><tr><td>Average monthly figure for hours 20224</td><td></td><td></td><td>+607</td><td>+3%</td></tr></table> <p>The figures only show a small reduction in the number of total clients but a larger increase in the number of hours provided. The concern does not seem to be supported by the data.</p>	Home Care	December 2008	September 2009	Difference	Percentage	Total Clients	1962	1887	-75	-3.82%	Average monthly figure for clients 1904			-58	-2.96%	Total hours	19617	20599	+982	+5%	Average monthly figure for hours 20224			+607	+3%
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<p><b>8- Have there been any important demographic changes or trends locally?</b> For example is the population changing, and if so, how and what might that mean for the service or function?</p>	<ul style="list-style-type: none"> <li>• Over the next five years the forecasts suggest the over-65's population in Derby will increase by 7%.</li> <li>• In addition, those aged over 85, who require the most intensive support services from social care, will increase by 12.5% over the next five years.</li> <li>• This represents a very significant rise given that 56% of the adult social care gross budget is spent on older people's services.</li> <li>• Advances in medical procedures and health care mean that younger adults with disabilities are living longer.</li> </ul>
<p><b>9- Is there an indication that any of the policies or practices involved with the service or function creates particular problems or difficulties for any groups of customers or communities?</b></p>	<p>The use of a single means tested contribution to the overall cost of care for an individual will ensure that the process is fair and equitable for all clients.</p> <p>It will mean that people with a similar level of need for services may be asked to contribute different amounts if they have the financial means to do so. Clients will not be financially penalised for having high or complex care and support needs, and those who have relatively low needs will be no worse or better off than those with relatively higher needs.</p> <p>The proposals will have an effect on people who are currently and people who may be assessed in the future as being eligible for support from the Council. By the nature of adult social care those it may affect will be from all age groups and / or be disabled people or people with life limiting illnesses. The proposals do not intentionally target any one particular group or community.</p>

Question	Response/ findings				
10- What information or data exists? For example statistics, customer feedback, complaints, research, monitoring – who keeps it and can you get hold of it?	A number of questions were asked during the consultation. Here are the details				
	4 Fairer Contributions questions – total response				
		Agree	Neither agree or disagree	Disagree	Don't know
	The charge for care should be entirely based on a person's ability to pay?	53.4%	12.8%	29.6%	4.2%
	The proposed charging policy for community based services should not provide a subsidy for people who can afford to pay.	48.4%	18.3%	26.7%	6.6%
	People with more than £23,250 in savings should pay the full cost of their care.	38.4%	17.8%	38.7%	5.1%
	People with less than £23,250 in savings should pay no more than £125 for their care after an income assessment.	50.7%	18.1%	21.4%	9.8%
	Where charges for people currently receiving care increase by more than £20 per week they are offered transitional protection for a period of 3 months, except those with savings in excess of £23,250.	45.1%	22.9%	17.9%	14.1%
	Do you agree that people who require the support of two support workers should pay a double charge?	11.2%	12.0%	69.9%	6.9%
The reablement service should stay as a free of charge service for all eligible service users up to a maximum of 6	63.0%	12.9%	10.4%	13.7%	

Question	Response/ findings
	<p>weeks.</p> <p>Carers services should remain free of charge.</p> <p>64.5%      13.7%      13.5%      8.3%</p>
<p><b>11- Does any equality or diversity objectives already exist?</b> If so, what are they and what is current performance like against them?</p>	<p>Derby City Council's Equality and Diversity Policy November 2009. The Equality and Diversity Policy underpins all other policies, service plans, procedures and systems. The Chief Executive has lead responsibility for implementing and monitoring this policy, but all employees have a responsibility to work from it in all areas of their work.</p> <p>All Local Authorities need to be aware of the Equality Act 2010 and make sure their services comply with it.</p> <p>Equality and diversity are very important to us at the Council because it means we try to do our best to make sure people are treated fairly and given fair opportunities. We value the cultural diversity of all Derby people as this adds richness to our city, which we are very proud of. Everyone has different needs and equality is about meeting these different needs. We also realise that we need a diverse workforce so we can provide the best possible services to all our community. We are very proud to have achieved the Equality Standard for Local Government Level 3 Equality Mark and now we are working to achieve excellent in the new Equality Framework for Local Government, which has now replaced the Standard. This is a main objective in our Corporate Plan. This new framework is based on three levels of achievement – '<b>developing</b>', '<b>achieving</b>' and '<b>excellent</b>', rather than the five levels of the old Standard. There are five areas for us to work on and these are:</p> <ul style="list-style-type: none"> <li>• knowing your communities and equality mapping</li> <li>• place shaping, leadership, partnership and organisational commitment</li> <li>• community engagement and satisfaction</li> </ul>

Question	Response/ findings
	<ul style="list-style-type: none"> <li>• responsive services and customer care</li> <li>• a modern and diverse workforce</li> </ul> <p>Corporate Equality and Diversity Plan 2009 - 2012. It covers the work we plan to do on equality for the next three years. Having an equality and diversity policy is not enough on its own and it is important that we have a plan to make our policy come to life. So, we have a three-year Equality and Diversity Plan, which all council departments have signed up to.</p> <p>Staff Code of Conduct and Customer Care Strategy sets out how staff should act when dealing with service users.</p> <p>Adult Medication Policy sets out how people should be supported in that service users are all individuals and as such this policy must be applied with regard to the individual's beliefs, wishes, experience and ability. Employees should be aware of the individual's cultural background and other factors that impact on their lives and incorporate this into the way in which they work with individuals. This policy helps to protect vulnerable people.</p> <p>All policies are printed and produced in English. There are facilities to provide the policy in any other way, style or language that will help people access it, should they request it.</p>
<b>12- Is the service having a positive or negative effect on particular people in the community, or particular groups or communities?</b>	<p>When people have the financial assessment it will include a benefits check up so should make sure peoples' incomes are maximised by them being able to claim for the benefits they are entitled to under law. This will be positive for all people as there are still reports of under benefits take up for many reasons.</p>

### Collecting the information and data about how the policy, practice, service or function, impacts on communities

Please record your information and data in this table and think about:

- § what information or data you will need
- § using both quantitative and qualitative data
- § making sure that where possible there is information that allows all perspectives to be considered



§ Identifying any gaps in the information/ data and what it can tell you

<b>Data or information</b>	<b>When and how was it collected?</b>	<b>Where is it from?</b>	<b>What does it tell you? You need to consider all six equality strands where you can</b>	<b>Gaps in information</b>
Customer feedback and complaints				
Consultation and community involvement			To be based on consultation feedback	
Performance information including Best Value				
Take up and usage data			<p>The use of a single means tested contribution to the overall cost of care for an individual will ensure that the process is fair and equitable for all clients.</p> <p>It will mean that people with a similar level of need for services may be asked to contribute different amounts if they have the financial means to do so. Clients will not be financially penalised for</p>	

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			<p>having high or complex care and support needs, and those who have relatively low needs will be no worse or better off than those with relatively higher needs.</p> <p>The proposals will have an effect on people who are currently and people who may be assessed in the future as being eligible for support from the Council. By the nature of adult social care those it may affect will be from all age groups and / or disabled people or people with life limiting illnesses. The proposals do not intentionally target any one particular group or community.</p>	
Comparative information or data where no local information				
Census, national or regional statistics	Census 2001	Census 2001 and mid term estimate	Our mid year estimate is that we have a population of 240,100. The Census told us we have	We have no accurate statistics for the number of

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			nearly 19% disabled people living in Derby and nearly 16% minority ethnic people. Main religions in Derby are 67.4% Christian, 4.5% Muslim, 3.2% Sikh and nearly 16% no religion. The main languages are English, Punjabi, Urdu and Polish, followed by French Our mid term estimate tells us that our population will increase by 17% by 2030 with the 70 plus population increasing by some 41%	lesbians, gay men and bi-sexual people living in Derby, although the National Audit Office suggests the represent 6.6% of the population, which is 15,846 people
Access audits or assessments such as DDA assessments				
Workforce profile			The current workforce profile is available from Derby City Councils website <sup>1</sup>	
Where service delivered under procurement arrangements – workforce profile for deliverers				

Reference:

<sup>1</sup> Working for the Council – employment statistics April 2006 – March 2007. Available from <http://www.derby.gov.uk/NR/rdonlyres/9829CEB7-4FB9-4419-8515-9420DFAA01D5/0/20062007employmentstatistics.pdf>

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Monitoring and scrutiny outcomes				

## Analysing the information and data and setting equality objectives and targets

Please give your detailed findings in this table

Service or function	Policy or practice	Findings	Which groups are affected and how	Whose needs are not being met and how?
Adult Social Services	Fairer Contributions	The use of a single means tested contribution to the overall cost of care for an individual will ensure that the process is fair and equitable for all clients.	All groups	

## Objectives - process, impact or outcome based

Please give your proposed objectives/ targets in this table

Objective/Target:	To see if any specific particular groups do experience a negative impact by the Fairer Contributions Cabinet Proposals 23 November 2010.
Specific	Use the current recording systems to collate outcomes for all adult service users who having been assessed as having eligible needs then have the financial assessment.
Measurable	Can be measured against the baseline snapshot of all service users taken in February 2011
Achievable	Reports can be generated to compare against the baseline snapshot.
Relevant	Yes will allow an analytical comparison to be competed.
Timed	12 months from introduction

Monitoring and reviewing - incorporating into performance management

Please summarise your objectives and targets in this table with your proposed monitoring and reporting arrangements

Objective	Planned action	Target performance			Responsible lead officer	Reporting cycle, for example, quarterly
		2011/2012	2012/13	2013/14		
<b>To see if any particular groups do experience a negative impact by the introduction of Fairer Charging.</b>	Use the current recording systems to collate outcomes into a report for all adult service users who having been assessed as having eligible needs then have the financial assessment. Reports that are generated can be compared against the baseline snapshot of all service users taken February 2011		April 2012	April 2013	Perveez Sadiq	Annual