

Equality Impact Assessment – Care and Support Charging Policy
4 February 2016

<p style="text-align: center;">Review date</p> <p>A date for a review is required for this EIA to be refreshed and reviewed.</p> <ul style="list-style-type: none"> • This date will be captured corporately • You must ensure that this review is carried out in time to meet this date 	<p>Please indicate date below March 2017</p> <p>The EIA will be reviewed when the Care and Support Charging Policy is next amended.</p>
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The general duty that is set out in the Equality Act 2010 required the local authority to have regard to ensuring that introduction of or changes to their policies, practices and decisions are fair and eliminates unlawful discrimination.

The EIA looks at the impact of the proposed changes to the Care and Support Charging Policy, the EIA will be updated after the consultation of the revised charging policy.

Step 1 - Scope of the equality Impact Assessments about your piece of work

1. Directorate	Adult Social Care and Community Services
2. Policy / Strategy / Service to be assessed:	Care and Support Charging Policy
3. Lead Officer:	Ian Winter
4. Equality Impact Assessment Person / Team:	
5. Date of Assessment:	2 nd February 2016
6. The main purpose and outcomes of policy / strategy / service to be assessed:	<p>Background</p> <p>Barking and Dagenham have been charging for community based care and support services since October 2011.</p> <p>The introduction of the Care Act 2014 required local authorities to review their charging policy to ensure that it is Care Act compliant. The Care Act 2014 specifies the mandatory</p>

	<p>requirements of a charging policy and limits the discretion that can be applied to the charging policy.</p> <p>The Council is proposing to formalise the changes made to the areas of discretion applied to the Interim Care and Support Charging Policy (2015) to ensure that the application of the policy is fair and equitable to all users in receipt of care and support services in their own right.</p> <p>Changes to be made to the Charging Policy</p> <p><u>Disability Related Expenditure:</u></p> <p>Prior the introduction of the Care Act 2014 local authorities had the discretion to wholly disregard the disability related benefit when assessing a person's financial contribution towards their services. If taken into account, the legislation required local authorities to apply a disability related disregard in recognition of the additional cost a person may incur to due their disability.</p> <p>Barking and Dagenham disregarded 25% of the disability related benefit before assessing a client's contribution to their services.</p> <p>The Care Act 2014 requires local authorities to take into account 100% of a persons disability related benefit (with some exceptions) when assessing an individual's ability to contribute to their services.</p> <p>In taking 100% of the disability related benefit into account, the Council needs to review the amount of disregard applied when assessing how much an individual can contribute towards their care and support services.</p>
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For clients in receipt of services, those prior to the introduction of the Care Act have the previous arrangement of 25% or 35% disregard applied to their disability related benefit. New service users assessed under the Care Act 2015 have a set disregard of £5, £10, £25 applied depending on the amount of disability related benefit they receive.

Proposal

The proposal is to equalise the disregard applying £5, £15 and £25 to existing and new services users to ensure consistency in the Council's approach.

The table below shows the numbers affected by the introduction of the new disregards:

Current Disregard	Revised Disregard	Difference	No's affected
£5.38	£5.00	-£0.38	5
£13.61	£15.00	£1.39	299
£28.45	£25.00	-£3.45	500
Total			804

Those most affected will be those in receipt of the current disregard of £28.45 per week, the reduction of the disregard to £25,00 per may increase their financial contributions by £3.45 per week,

Clients in receipt of the current disregard of £13.62 per week may see their financial contribution may decrease by £1.39 per week.

	<p><u>Charges to Carers:</u> The Care Act 2014 carers have the right to an assessment in their own right as a carer, and if, eligible, the right to receive care and support services directly.</p> <p>The Care Act 2014 gives the local authorities the discretionary power to charge the carer for the services they receive in their own right.</p> <p><u>Proposal</u></p> <p>It is proposed that the Council establishes the principle to charge carers so that they make a contribution to their care and support services provided in their own right in line with the principles set out in the Care and Support Charging policy.</p> <p>The local authority currently has 2,600 registered carers in the borough of which 54 have been assessed and provided a carers service in their own right.</p> <p>Placing a legal charge on the property of those awarded a Disabled Facilities Grant</p> <p>The Housing Grants, Construction and Regeneration Act 1996 gives Councils the power to provide a disabled facilities' grant. The grant is awarded to enable individuals to undertake necessary adaptations to enable the disabled person to continue to live in their own home.</p> <p>The local authority has the power under sections 34(6) (b), 46, 52 and 94 of the Housing Grants, Construction and Regeneration Act 1996 to place a local land charge on a person's property.</p>
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	<p>A charge on the property can be placed where the grant award exceeds £5,000 and the recipient of the grant has a financial interest in the whole or part of the property to which the adaptation is being made.</p> <p><u>Proposal</u></p> <p>It is proposed that the Council exercises its power and places a legal charge on the property of those awarded a Disabled Facilities Grant of £5,000 or more.</p> <p>How will applicants be affected?</p> <p>The legislation limits the amount a Council can recover. The Council can recover from a minimum of £5,000 but only to a maximum of £10,000.</p> <p>The recovery of the grant is up to a period of 10 years after the grant has been awarded. If the disabled person still remains in the home after 10 years, the legal charge is removed and no further action of recovery is taken.</p> <p>No recovery action will be taken where the disabled person is no longer in resident in the property but the remaining spouse/ dependent is over 65 years old or there is a young person or adult in residing in the property with a disability requiring the adaptations to the property.</p> <p>Example:</p> <ul style="list-style-type: none">• The local authority awards a grant of £22,000 to an applicant to complete adaptations to the home. The Council will place a legal charge for the maximum amount
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	<p>the Council can recover of £10,000 for a maximum of 10 years.</p> <ul style="list-style-type: none"> • The placing of a legal charge cannot be applied for grant awards under £5,000.
<p>7. Groups who the piece of work should benefit or apply to, for example:</p> <ul style="list-style-type: none"> • Service users • Staff • Other internal or external stakeholder <p>(Will the piece of work be delivered in partnership with another agency?)</p>	<p>Residents assessed as eligible for care and support services within the borough.</p> <p>Residents (homeowners) who apply and awarded a Disabled Facilities Grant of £5,000 or more.</p>
<p>8. Any associated strategies or guidelines i.e. legal / national / statutory</p>	<p>To ensure vulnerable groups are protected from financial hardship the Care Act 2014 sets out the underlying principles of a local authorities charging policy must follow. The policy has to ensure:</p> <ul style="list-style-type: none"> • contributions are determined by reference to both level of service and the service users' means and will be levied after a means tested financial assessment; • the application of individual financial assessments to ensure that services users and carers are only charged what they can reasonably afford to pay • contributions from service users and carers will be transparent and fair • contributions will not exceed the costs of providing the service • after charges have been applied, service users will retain at least their basic income support or pension credit plus 25% as protected income.

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	<ul style="list-style-type: none"> • Legislation limits the amount and over what period of time the Disabled Facilities Grant can be recovered.
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Step 2 - Gathering Information

1. Who should be served by the policy / strategy / piece of work?
The main stakeholders are local residents who are eligible for care and support and as such require a financial assessment to determine their contribution toward the costs of these services.

2. What relevant information do you have about the people who this piece of work is aimed at? (please complete the boxes below)		
Equality Groups	Information (research / data)	Known or potential inequalities
Ethnicity	2011 Borough Community Mapping	Community Mapping shows that residents of the borough consider themselves as; White - 65.56%; Asian - 15.26%; and Black – 17.63%.
Gender (including transgender)	2013 Population Mid Year Estimate	In 2013 there were approximately 95,000 males and 99,000 females in the borough showing that females make 51% of the population.
Disability	Annual population survey (Jul 2010-Jun 2011)	27,300 residents have a stated disability representing 23.5% of the population. This is higher than the London-wide figure of 17.4% of the population.
Age	2013 Population Mid Year Estimate	The 5-19 age group represents 22.1% of the population (London average 17.2%); 20-64 year olds represent 57.7% of the population (London average 63.9%); 65+ represent 10% of the population (London average 11.4%).

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Religion and Belief	2011 Borough Community Mapping	Christianity is the predominate religion of the borough covering 69% of residents. Muslims make up 4.4% and Sikhs and Hindus make up 1.1% each. 15.3% state they have no religion while 8.4% did not say.
Sexual Orientation	2011 Borough Community Mapping	It is estimated that between 5-7% of the population identifies themselves as lesbian, gay, bisexual or transgender.
Maternity and Nursing Mothers	2011 Borough Community Mapping	The borough had 3,729 pregnant or nursing mothers in 2010 representing 2.07% of the population.
Carers	CARING TOGETHER: A Carers' Strategy for Barking and Dagenham 2015 – 2018 2011 Census	The 2011 Census showed that there were 16,201 unpaid carers in Barking and Dagenham of 2,600 are registered as carers in the borough.

Do you have enough information about the different groups to inform an EIA? If not, this area should be addressed in your action plan.	Yes
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<p>3. Do you have monitoring data or consultation findings specific to your area of work? If yes, list the sources of evidence here & go to Step 3. If no, list the actions required to get more data (which should be included in the action plan).</p> <p>2011 Borough Community Mapping 2011 Population Mid Year Estimate 2013 Population Mid Year Estimate Service User Caseload data (08/01/2015)</p> <p>The consultation:</p> <p>a) Invited all service users, their carers and residents of Barking and Dagenham to participate in the consultation. Participants</p>

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<p>were able to express their views by:</p> <ul style="list-style-type: none"> • Completing the online survey • Speaking directly to an officer • Formal written responses • Contributing to a consolidated response as part of any wider consultation group. <p>b) Officers attended the following forums/ meetings where the proposed changes to the Care and Support Charging Policy and the placing of a legal charge on the property on those awarded a DFG was discussed:</p> <ul style="list-style-type: none"> • Carer’s Strategy Group: 23rd November 2015 • Healthwatch: 1st December 2015 • Health and Wellbeing Board: 8th December 2015 • Carers of Barking and Dagenham: 9th December 2015 • Health and Adult Social Care Select Committee: 14th December 2015 • CSV Equalities Forum: 14th December 2015 • Learning Disability Partnership Group: 15th December 2015 	
<p>What consultation activity has taken place / will be taking place on this piece of work and the EIA?</p>	<p>Consultation commenced on the 23rd November 2015 and ended 17TH January 2016.</p>

Step 3 - Assessing Impact

1.	<p>What does your monitoring data on your service users tell you? Are any groups under or over represented compared to what you would expect to see. Please give details below.</p>	
	<p>Ethnicity</p>	<p>The number of service users declining to give details of ethnicity is fairly low at 18.61%. Those that did indicate an ethnic origin were; White 65.12%; Asian 6.07%; Black 8.11%; Mixed 1.09% and 0.99% stated their ethnicity as Other</p>
	<p>Gender (including transgender)</p>	<p>There are 21,937 recorded service users in total. Females</p>

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		representing 60.15% of the total user caseload. This is 9.15% higher than the population average of 51%. The 2011 Census shows that 58% of unpaid carers in the borough are women. The majority of unpaid carers providing 50+ hours of care per week are women (60%).
	Age	Age ranges were recorded as follows: 18-40, 41-65, 66-80 and 80+. Service users ages between 41-65 represent the highest caseload at 34.32% with the next being 18-40 (25.89% and 66-80 (20.01%). Those above the age of 80 still represent 19.79% of the caseload.
	Disability	More than half of service users have a disability of some type; this is estimated to be close to 57% of service users.
	Sexual Orientation	The majority of service user's (75.16%) either refused to give this data or this data was not collected. Almost all that did answer (24.84%), 24.76% stated they were heterosexual.
	Religion and Belief	A large portion of service users did not give their religion or belief (47.52%). However, 37.44% gave their religion/belief as Christianity, 8.11% said they had no religion or belief, 4.16% stated they were Muslim, 2.77% gave other answers.
	Pregnant and Nursing Mothers	There is no monitoring data available to distinguish claimants by pregnant and nursing mothers however those receiving family services make up 2.95% of service users.
	Socio Economic	The information shows there are 804 service users in receipt of care and support services who are charged for their services. Most will be in receipt of some form of disability related benefit.
	Carers	Most carers receive services in the form of information and advice with less than 3% currently in receipt of services in their own right.
2.	Based on the evidence gathered have you identified any potential differential impact for any of the equality groups? Step 2. What are the potential access issues or barriers for people in each of the equality groups	
	Group	Positive
	Negative	
	Ethnicity	The changes to the Care and Support Charging Policy will bring no positive changes for this group.
		The changes to the Care and Support Charging Policy should have no disproportionate impact on this group.

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Gender (including transgender)	The changes to the Care and Support Charging Policy will bring no positive changes for this group.	The negative impact of the changes to the policy has a greater impact on females which is over represented by 10.15%. However, the new policy does not directly or indirectly discriminate, harass and is not unequal towards any particular gender.
Disability	The changes to the Care and Support Charging Policy will bring no positive changes for this group.	Then negative impact of this change will affect those in receipt of a disability related benefit. The impact is being minimised through the application of transitional protection.
Age	The changes to the Care and Support Charging Policy will bring no positive changes for this group.	The changes to the Care and Support Charging Policy should have no disproportionate impact on this group
Religion and Belief	The changes to the Care and Support Charging Policy will bring no positive changes for this group.	The changes to the Care and Support Charging Policy should have no disproportionate impact on this group.
Sexual Orientation	The changes to the Care and Support Charging Policy will bring no positive changes for this group.	The changes to the Care and Support Charging Policy should have no disproportionate impact on this group.
Pregnant and Nursing Mothers	The changes to the Care and Support Charging Policy will bring no positive changes for this group.	The changes to the Care and Support Charging Policy should have no disproportionate impact on this group.
Socio Economic	The changes to the Care and Support Charging Policy will bring no positive changes for this group.	<p>The cost of a service user’s needs is based on their means. Changes to the way this cost is calculated will impact this group.</p> <p>Disability Related Disregard</p> <p>The table below shows the numbers affected by the introduction of the new disregards:</p>

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			Current Disregard	Revised Disregard	Difference	No's affected
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			Total			804
			<p>Transitional protection will be in place to ensure that the change in the level of disregard is in alignment with any change in disability related benefit the individual receives to help contribute towards their care and support needs.</p> <p>Example:</p> <p>The individuals has a disregard of £28.45 applied. In April 2016, their benefit increases by £1.20 per week, this will result in their disability related disregard reducing by £1.20 per week to £27.25.</p> <p>Placing a Legal Charge on the property of those awarded a Disabled Facilities Grant</p> <p>The legal charge of £10,000 will be placed where the Council can satisfy itself that there is available equity in the property limiting any financial hardship that may be caused to the applicant and disabled person resident in the property.</p>			

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	Carers	The changes to the Care and Support Charging Policy will bring no positive changes for this group.	Then negative impact of this change may affect carers in receipt of care and support services. The consultation will seek the principle to establish charging carers but the Directorate will reserve the right to review charging carers having consideration of the impact of charging a carer has on their ability to effectively continue with their carer's role.
Is the differential impact as a result of indirect or direct discrimination? No			
Can any differential impact be justified or proportionate in meeting legitimate aims, if yes, please provide details? No			

Step 4 - Promoting Equality

1.		<p>What has been done to promote equality in this piece of work? This includes measures you've put in place to:</p> <ul style="list-style-type: none"> • Improve the accessibility of your service • Improve the quality of outcomes for people from different groups • Make your service / policy / strategy more inclusive • Ensure staff are trained appropriately • Promote community cohesion or good relationships between different groups of people. <p>(Think about physical access, communications needs, staff awareness and partnership working)</p>								
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">Ethnicity</td></tr> <tr><td style="padding: 2px;">Gender</td></tr> <tr><td style="padding: 2px;">Disability</td></tr> <tr><td style="padding: 2px;">Age</td></tr> <tr><td style="padding: 2px;">Religion and Belief</td></tr> <tr><td style="padding: 2px;">Sexual Orientation</td></tr> <tr><td style="padding: 2px;">Socio Economic</td></tr> <tr><td style="padding: 2px;">Pregnant and Nursing Mothers</td></tr> </table>	Ethnicity	Gender	Disability	Age	Religion and Belief	Sexual Orientation	Socio Economic	Pregnant and Nursing Mothers	<p>There has to be sufficient information and advice available in a suitable format that service users can access. Within the government guidance and legislation, reference is made to information being Equality Act 2010 compliant. There is also an emphasis on ensuring this information covers areas such as welfare maximisation, financial instruments to pay for care and financial advice.</p> <p>The Care and Support Hub has been updated advising of the changes to assessment, eligibility and financial contributions with the introduction of the Care Act 2014 with</p>
Ethnicity										
Gender										
Disability										
Age										
Religion and Belief										
Sexual Orientation										
Socio Economic										
Pregnant and Nursing Mothers										

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	Carers	letters also sent to existing service users and their carers. The information has been reviewed following the consultation.
2.	What further actions are required?	N/A
3.	How have you consulted on this Equality Impact Assessment?	Issues of equality formed part of the consultation process
4.	How will the outcomes from this EIA be managed and monitored? All of the proposed equality outcome should be managed through the service plans.	Ongoing monitoring of service users who require a financial assessment to determine their service cost or ongoing service cost.

Summary

<p>Please provide a summary document / storyboard of the findings of your EIA (including best practice what we do well, our challenges, our opportunities and what we planned to do. This will be used for publication on the internet.</p>
<p>There is no immediate concern that the changes to the charging policy and the placing of legal charges on the property of those awarded a Disabled Facilities Grant will have any disproportionate impact on any equality groups.</p>