

## Adult Social Care Charging Changes: Equality Impact Assessment

### Detail of Assessment

- The Care Act (2014) sets out guidance for how Councils may charge people for the social care services they receive.
- In Autumn 2018, HAS officers undertook a benchmarking exercise with other London boroughs and found that in some cases, Greenwich Council charges less than other boroughs for comparable services.
- A consultation was undertaken during April to July 2019 on proposals for changes to certain social care contributions. Following the consultation, the proposals were amended to reflect some of the feedback from disabled people.
- In January 2020 Cabinet agreed to make changes to the way the Council charges for care and support services at home or in the community, to position Greenwich alongside other comparable London Local Authorities in respect of the levels and types of charges that are levied.
- The purpose of this equality impact assessment is to identify and mitigate against existing or potential inequalities that would arise from the proposed changes to Adult Social Care charging in Greenwich. This document has been reviewed and amended in July 2020 to reflect the pause in implementation due to the coronavirus pandemic.
- The 2011 Census estimated that there were around 255,000 people living in Greenwich. It is predicted that by 2025 the population of Greenwich will increase to 312,000 and to 360,000 by 2035.
- The population of people aged 65+ in Greenwich is expected to rise from 26,000 in 2011 (10% of the borough's pop) to 35,500 in 2025 (11% of the borough's population) and to 48,000 in 2035 (13% of the borough's population).

### What is its purpose?

This EIA is in response to proposed changes to the Council's social care charging arrangements. This EIA covers changes to

1. Home care charges
2. Charges for arranging care for full cost payers
3. Charging for client support
4. Disability Living Allowance / Personal Independence Payment/Attendance Allowance disregards
5. Charging for care and support in Supported Living Accommodation
6. How savings are classed as income using a Tariff
7. Removing the weekly cap on costs
8. Exemptions from charges for Disability Related Expenditure
9. Changes to charging for Telecare.

**What are its main objectives (of the new/revised service or policy)?**

1. Close inequalities in our current charging approach for users of different service types and make it fair and equitable for all
2. Position Greenwich alongside other comparable London local Authorities in respect of the levels and types of charges that are levied
3. Raise revenue to enable us to sustain the current level of service to all who need it.

**Change to service delivery in order to:**

- Have a fair and easy to understand charging policy

**Context**

- The Care Act (2014) enables Councils to charge people, following a financial assessment, for the social care services they receive. The Act creates a single, consistent route to establishing an entitlement to public care and support for all adults with needs for care and support
- Under the current charging arrangements Greenwich Council charges less than the Care Act permits for some social care services, and disregards some benefits or savings when calculating the charge
- Recommendations put to members deliver objectives as detailed above.

**Criteria**

*Is this function designed to meet specific needs of groups with protected characteristics?*

The charging policy applies all adults in Greenwich with care and support needs where the Council is funding providing or arranging social care services. Those affected are eligible for social care under the Care Act (2014) and will, by definition include a higher proportion of older adults, adults with disabilities and people with long term conditions than the general population.

The new charging policy and its implementation will aim to ensure a consistent approach to charging service users across all groups. There are currently some inconsistencies in how we charge users of different service types and the new policy will ensure these inconsistencies are minimised or eliminated.

**Outcomes of Assessment**

*Identify which, if any of the protected groups will be affected, including likelihood of impact*

**EQUALITY IMPACT OF EACH PROPOSAL BASED ON OPTIONS****Home Care charges**

<b>Options</b>	<b>Impact</b>	<b>Mitigation required</b>
1-Continue at current homecare charge rates	Leaves inequity between home care charges and direct payments who are paid on actual costs.	Yes-Consider option that enables equity in charges across all service users
2-increase the hourly charge rate to £14.10 for non preferred homecare providers and £15 for preferred providers.	This option provides equity in Greenwich's charging policy for all fee payers but 275 people would have to pay more. Of the 275 people, 250 would be over the age of 65 (90%)- this is in line with demographics of everyone using Homecare	No equality issue – in line with service user demographics

**Arrangement fees for full cost payers-**

<b>Change proposed</b>	<b>Impact</b>	<b>Mitigation</b>
Option 1- Continue not to charge for arrangement and admin for full fee payers.	No equality impact	n/a
Impose a new one off arrangement charge and weekly administration fee for all packages arranged for full cost payers based on the actual costs to the Council	No equality impact identified. It could be that there may be variations in impact depending on what ethnicity and gender people are that this would need to be monitored as we don't currently collect this information as this would be a new charge. 98% of 157 effected clients are aged 65+ (98%).	n/a

**Introduce Charging for client support**

<b>Change proposed</b>	<b>Impact</b>	<b>Mitigation</b>
Option 1- Continue to exempt client support from charges	No equality impact	n/a
Option 2: Remove the exemption, and charge for all services delivered	55 people would be affected. This would impact more on men than women and would be slightly higher than gender split in overall demographic. 89% of effected clients would be in the age bracket 18-64	

**DLA/PIP/Attendance Allowance (higher rate)**

<b>Change proposed</b>	<b>Impact</b>	<b>Mitigation</b>
Option 1- Continue to disregard DLA, PIP and AA	No equality impact	n/a
Option 2- include 50% of the higher amount of Disability Living Allowance, Personal Independence Payment and Attendance Allowance	338 people will be affected. Risk of impacting on income of most severely disabled people who may already have been impacted by changes to welfare benefits. There is a higher percentage of ethnic minorities accessing AA/ DLA/PIP when compared to overall borough demographics.	Produce and implement a transparent process for responding to cases of hardship  Provide more accessible and detailed information about Disability Related Expenditure  More communication around disability related expenditure may offset the impact on this group.

### Charge for Care and Support in Supported Living Accommodation

Change proposed	Impact	Mitigation
Option 1- Continue not to charge people in supported living for all their care services.	n/a	n/a
Option 2- To charge those in Supported Living 8 hours of care and support and in the long term Financially assess Supported Living clients and charge them for all care and support services, based on their assessed ability to pay.	Many supported living clients are eligible for free social care. 110 people would be affected and 80% of this group of people have a learning disability-this is in line with numbers of people in supported living	Ensure people are supported to engage in their financial assessment. Provide easy read formats for guide to charges and letters

### Tariff Income

Change proposed	Impact	Mitigation
Option 1- Continue maintain old tariff for 11 individuals	Small number of people would continue to benefit from old tariff, with inequity for others	n/a
Option 2 - Bring all service users onto the same tariff	Will affect ??k people in some cases, substantially	To enable people to plan, we would assess those affected as soon as possible, and delay or taper the increase by up to 6 months, using the time to assist people to maximise benefits.

### Remove Cap on weekly costs

Change proposed	Impact	Mitigation
Option 1- Continue to have a cap on care costs	n/a	n/a
Abolish the cap on care costs	This is currently limited to fewer than 5 individuals.	At financial assessment will review the impact on any individuals to whom this will apply, consider support under hardship section of the Charging Guidance and use of Disability Related Expenditure rules.

### Reduce the minimum flat rate exemption for Disability Related Expenditure

Change proposed	Impact	Mitigation
Option 1 – no change	n/a	n/a
Option 2- Reduce DRE flat rate from £15.30 to £10 per week for those on lower or medium rate of DLA/AA or PIP	Would impact on 63% of older population-roughly in line with borough demographics By definition, disabled people will be most affected.	Provide more accessible and detailed information about Disability Related Expenditure  Charge based on declared disability expenditure for 3 months to allow time for people to gather receipts/bills etc

### Charge everyone for Telecare

Change proposed	Impact	Mitigation
Option 1- Continue to not charge people on Housing Benefit	n/a except that an inequity is perpetuated	n/a
Charge everyone a flat rate of £6.00 per week (1200 people are already paying this)	2633 Telecare users would be affected. 82% of Assistive Technology users are aged 70+ Currently very few people pay for Telecare and there is not enough demographic data to enable us to understand impact of change in policy on populations from equality point of view.	Benefit maximisation –they may be to afford or budget to pay for client. Telecare is considered disability related expenditure (DRE) Monitor impact on populations and take corrective action. Charging Guidance has a section on identifying and preventing financial hardship

**What other risks/factors will be taken into account in the decision making?**

*These might include national/regional/local factors.*

Cumulative impact of welfare benefits changes on people receiving social care  
Impacts of lockdown on mental health and wellbeing, particularly for those who were shielding.

**Mitigating risks**

*How will any identified risks be mitigated against?*

**As shown in the table above.** *In the case of each change proposed and the options available, we have detailed what we will do to mitigate against these risks by changing practice and procedures.*

**Impact Assessment**

Include different outcomes for all the groups identified as being affected. If there are difference, are these justified?

Protected Characteristic	Potential for negative impact	Reasonable mitigations
Age	58% of people who currently require social care are people aged over 65 This cohort of people may be disproportionately affected by the changes proposed by the Charging Policy review	The revised policy will still ensure that people do not pay more than they can afford to pay and will continue to ensure that charges allow residents keep the guaranteed minimum income stipulated by DWP.
Disability including physical and learning disability	<p>Overall, 78% of the total group that may be affected by the proposed charging policy will have a learning or physical disability however this high incidence of disability is expected in adult social care</p> <p>The incomes of people with disabilities are already impacted by welfare reforms. The Council has obtained numbers from HB claimants also claiming DLA or PIP that shows that 6,336 people with a disability or long term condition have lost income following reforms.</p> <p>Low impact (reduction of £15 per week or less) 20%, or 2,802 people claim DLA or PIP</p> <p>Medium impact (reduction of £15-30 a week) 25.5% or 3,300 claim DLA or PIP</p> <p>High impact ( £30 a week or more) 14% of this group, or 234 people claim DLA or PIP</p>	<p>Better and more accessible information about Disability Related Expenditure, plus 3-month grace period for people to collect required evidence for DRE.</p> <p>The revised policy will still ensure that people do not pay more than they can afford to pay under the minimum income guarantee. This will be increased for working age adults affected by proposals around DLA, PIP and AA.</p> <p>The new charging policy will make clear how appeals can be made and how we will make discretionally decisions to assist those in hardship</p> <p>Financial assessment officers will be familiar with Live Well Greenwich and Welfare Rights team and how and when to make an appropriate referral for additional support.</p>
Race	<p>There is a higher percentage of BAME people accessing AA/ DLA/PIP when compared to overall borough demographics. In addition, 31% of the 173 affected in all 3 areas are from ethnic minorities. This is slightly higher than the overall percentage of BAME in the overall cohort (difference of 6%)</p> <p>BAME people may not have equal access to advice and support services.</p>	<p>The new charging policy will make clear how appeals can be made and how we will assist those in hardship.</p> <p>Make information about the exemptions available for additional Disability-related expenditure more accessible including translating this information into other languages where required</p> <p>Engage with local community and faith groups to ensure they have contact details to the financial assessment team in order to alert us to cases where more support or advice is needed.</p>
Gender reassignment	It is not anticipated at this stage that the proposal will disproportionately affect people who undergo gender reassignment. However, we do not collect this data, so this is not currently known.	

Pregnancy and maternity	It is not anticipated at this stage that the proposal will disproportionately affect pregnant women and new mothers.	
Religion or Belief	It is not anticipated at this stage that the proposal will disproportionately affect religious people or anyone with a specific Religion or belief	
Sex	The gender split between Females and Males is 59/41. Overall changes may affect more females than male. Of the 2% affected by all 3(HC, DRE and DLA/AA/PIP) the Female to Male split is 66/34 which means women will be disproportionately affected by these changes	The mitigations proposed in these areas will help reduce the impact. We will monitor the impact of changes by gender.
Sexual Orientation	It is not anticipated at this stage that the proposal will disproportionately affect sexual orientation. We don't currently keep data on sexuality as a routine, so determining any unfair impact is difficult.	
Marriage and Civil Partnership	It is not anticipated at this stage that the proposal will disproportionately affect either people who are single, married or in a civil partnership. We do not keep reportable data about the marital status of service users although we may need to update systems around civil partnership status.	
<b>Monitoring of Impact</b>		
We will monitor discretionary reductions of charges under the charging guidance- specifically the section on financial hardship, reviews and appeals. and claims for Disability Related Expenditure to ensure there is no bias and these are accessed by all parts of the community equally.		