

Equality Impact Assessment

Proposal name	Revision of Charging policy	
	Name of person completing this form	Lauren Rochat
	Team/Service Area	Interim Assistant Director - Adult Social Care Operations
	Email	lauren.rochat@kingston.gov.uk
	Project Lead name	Lauren Rochat / John Smyth
Key contacts Email Social Cal	Adult Social Care Operations / Adult Social Care Finance	
	Email	lauren.rochat@kingston.gov.uk john.smyth@kingston.gov.uk
	Senior Responsible Owner name	Lauren Rochat
	Project Lead Team/Service Area	Interim Assistant Director Adult Social Care
	Email	lauren.rochat@kingston.gov.uk
	HR Contact (if relevant)	Shona Mason Interim AD HR

Document control - completion timeframes, version history and review dates

Development Stage/Planning	Target Date	Author(s)	Notes (ie committee dates etc)
V1	May 5th 2023		November 2023
Version	Date	Author(s)	Summary of changes/review
V1	May 5th 2023		Initial draft
V2	May 23rd 2023		Protected characteristics added - local data to be analysed Engagement details added
V3	16th June 2023		Impacts and mitigations of the proposals added

Contents

Section 1: Relevancy form

Section 2: Proposal description

Section 3: Key Stakeholders

Section 4: Equality data

- 4.1 Key findings
- 4.2 Protected Characteristics

Section 5: Consultation and engagement

- 5.1. Statutory Consultation
- 5.2. Wider engagement

Section 6. Impacts and barriers

- 6.1 Protected characteristics
- 6.2 Description and mitigation of impact and barriers
- 6.3 Justification

Section 7. Action planning

1. Relevancy form

	Yes or No?
Relevancy test completed?	Yes

2. Proposal description

Adult Social Care provides care and support for people with disabilities and older people who meet the eligibility criteria. Any services provided are subject to a financial assessment and an individual is assessed on their income and expenditure for their ability to pay towards these services. Our aims are:

- To ensure that care and support needs are assessed separately from a person's ability to pay.
- To support carers to look after their own health and wellbeing and to care effectively and safely
- To be clear and transparent, so that people know what they will be charged and how their client contribution is calculated.
- That all efforts will be made to provide accessible information for every individual.
- To be fair and equitable to all

We also need to be mindful of our Public Sector Equality Duty and our duties as a public sector body to protect the human rights of people who use services within the remit of our functions – ie. the span of our regulations.

3. Key Stakeholders

Name of Stakeholders	Role of Stakeholders	Stakeholder Engagement
Adult social care service users	Residents using Council services	Consultation events being scheduled
Carers of service users	Carers of residents using Council services	Email and portal mechanism to feedback. Open invitation to consultation events for service users
Providers of social care services and voluntary sector organisations	Request for feedback on revised charging policy proposals	Email and portal mechanism for feedback

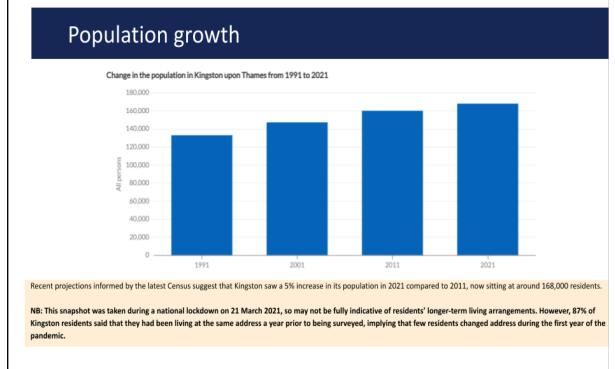
supporting Kingston service users		
-----------------------------------	--	--

4. Equality Data

4.1. Key findings

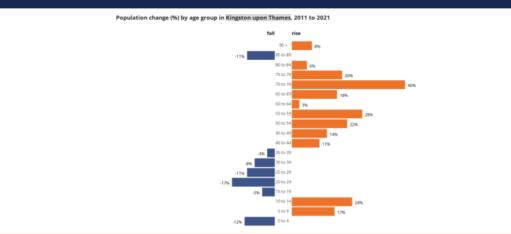
Useful data links: <u>2021 Census maps</u> <u>Kingston Dashboard - Protected Characteristics</u> <u>Kingston Data Observatory</u> <u>London Mayor's Equality and Inclusion Dataset</u>

The 2021 Census-based population projections demonstrates that both Kingston and England as a whole have an ageing population; this is likely to result in demand for Adult Social Care services exponentially growing, with a projected 39,000 over-65s living in the borough by 2043



Source: ONS Census 2021, graph via Kingston Data website

Population change

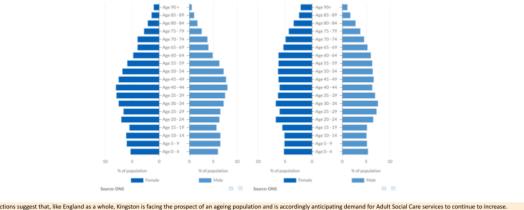


This graph, taken from the Office for National Statistics' interactive Census website, explores the changes in Kingston's population by age group between the 2011 and 2021 Census collections. As indicated, our population in almost every age banding between 40 and 90+ has increased in those ten years, with the sole exception of 85 to 89-year-olds. Over the decade, Kingston saw an **18.9%** increase in the number of over-65s living in the borough, with a recorded total of **24,323** over-65s in 2021.

Source: ONS Census 2021, graph via Census website

Population projections

Percentage of population by age and sex for Kingston upon Thames (2021) (2043)



ONS projections suggest that, like England as a whole, Kingston is facing the prospect of an ageing population and is accordingly anticipating demand for Adult Social Care services to continue to increase. As of 2021, an estimated 15.3% of women and 13.6% of men in Kingston are aged 65+. These figures are expected to rise significantly in the next two decades if current trends continue, reaching 23.4% and 19.3% respectively by 2043; a projected total of some **39,000** over-658 living in the borough in 20 years' time. This will come with many associated challenges including meeting and financing an increased demand for care provision. We are already beginning to gradually see this effect.

Source: ONS Census 2021, graph via Kingston Data website

The major protected characteristics impacted by these changes will be by age and disability

Borough Protected Characteristics Profile

Across Adult Social Care, 58.00% of service users are women and 41.70% are men.

The highest proportion of service users are white British (58.60%), with the second highest any other white (Under 10%) and third Indian (Under 10%). Service users

from Black, Asian and minority ethnic (BAME) communities, when counted together, are the second largest proportion (22%). However, just under 10% of service users have no ethnicity data recorded.

With regards to primary support, the proportion of service users with physical support (32.6%) is the highest, followed by social support (15.8%), learning disability support (14.50%) and mental health support (14.50%). There is 14.20% of missing data.

The largest number of service users have the Church of England (15.10%) as their religion, followed by Christian where a denomination is not specified (Under 10%), no religion (Under 10%), Muslim (Under 10%) and Hindu (Under 10%). Although, for 52.90% of service users, their religion is not known.

With reference to the sexual orientation of service users, the highest proportion are heterosexual (33.40%), but this is not known for 65.90% of service users.

The age band with the most service users is 18 to 64 (42.10%), followed by 75 to 84 (19.20%), 85 to 94 (18.50%) and then 65 to 74 (14.60%).

As for marital status, most service users are single (24%), followed by married (14%) and then widowed (10.20%). However, the status is not known for 45.70% of service users.

Protected Characteristic	Data provided - yes or no? If no, please explain why
Age A person belonging to a particular age group (e.g. 22 year olds) or age range (e.g. 20 - 25 year olds). Children, young people, adults and older people.	Yes demographic data and adult social care data
Disability A person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities	Yes demographic data and adult social care data
Gender Reassignment A person who is proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning their sex by changing	Demographic data

4.2. Protected Characteristics

Protected Characteristic	Data provided - yes or no? If no, please explain why
physiological or other attributes of sex.	
Marriage and Civil Partnership A person who is married or is a civil partner. Marriage in England and Wales is legally recognised in the form of both civil and religious unions and is open to opposite sex and same sex couples.	Demographic data
Pregnancy and Maternity Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave. It provides protection against maternity discrimination for 26 weeks after giving birth.	Demographic data
Race Refers to a person defined by their colour, nationality (including citizenship) ethnic or national origins.	Yes demographic data and adult social care data
Religion and belief Religion refers to a person's faith or lack of faith. Belief includes religious and philosophical beliefs including lack of belief. Generally, a belief should affect your life choices or the way you live for it to be included in the definition.	Yes demographic and adult social care data
Sex This refers to whether a person is a man or a woman.	Yes demographic and adult social care data
Sexual Orientation Refers to whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.	Yes demographic and adult social care data
Other important priority groups and iden Active or veteran armed forces personnel, c Irish traveller communities, homeless house experience of the criminal justice system, re socio-economic status	hildren in care and care leavers, Gypsy and eholds and rough sleepers, people with

Protected Characteristic	Data provided - yes or no? If no, please explain why
All data	https://docs.google.com/spreadsheets/d/1n 2JY_j6daUfFENNPFI-yI6KkNPUQ-ghcICIR stFJf1g/edit#gid=1923830214

5. Consultation and Engagement

5.1. Record any statutory consultation plans and/or outcomes.

Statutory consultation is planned between July to September 2023, with the affected groups of service users.

5.2. Record any wider engagement or consultation plans and/or outcomes.

Consultation on the four proposals will take place between Monday 3rd July to Monday 25th September 2023.

The following approach has been agreed:

- Consultation survey
- Adult social care will send letters to all service users or their nominated representatives.
- A survey will be made available on the Let's Talk Portal and consultees are invited to complete this or attend drop in consultation events to give feedback.
- Letters are available in an easy read format and other formats are available on request.

Consultation events

Consultation events have been scheduled between July to September at the following locations:

- Richard Mayo Centre, Kingston
- Surbiton Library Annexe, Surbiton
- Hook Centre, Chessington
- Christ Church, New Malden

These events have been arranged across the borough, at different times of the

day, using accessible venues to enable as much feedback as possible.

A dedicated consultation event has been set up for people with Learning Disabilities to ensure that voices of people with learning disabilities using services are heard. This will take place on Wednesday 19th July at Surbiton Library Annexe.

Meetings with Kingston Citizens Advice, Kingston Carers Network, Kingston Centre For Independent Living, Staywell and KIA are taking place between June and July to gather feedback on the proposals.

The Contact Centre is going to be briefed on the consultation and will be given a Frequently Asked Questions document to answer initial queries and will redirect calls to specialist finance officers if required.

6. Impacts and barriers

6.1 Complete the table to show which protected groups are impacted

Protected Characteristic	Were impacts identified? - yes or no?	Positive or negative impact?
Age	yes	both
Disability	yes	both
Gender Reassignment	no	no
Marriage and Civil Partnership	no	no
Pregnancy and Maternity	no	no
Race	As cross cutting	both
Religion and belief	As cross cutting	both
Sex	As cross cutting	both
Sexual Orientation	As cross cutting	both
Other important risk groups and identities you may have identified impact for		

<u>Active or veteran armed forces personnel</u>,children in care and care leavers, Gypsy and Irish traveller communities, homeless households and rough sleepers, people with experience of the criminal justice system, refugees and asylum seekers, socio-economic status

6.2 Describe in full any impacts or barriers that have been identified. Ensure you consider multiple identities where relevant.

The Adult Social Care Charging Policy explains what care and support services a person may be charged for and how we calculate what is reasonable for a person to pay.

Age

- 1. As a person gets older, they are more likely to develop a disability or long term condition, so more likely to be impacted by this policy. They are more likely to have higher living costs and disability related expenses than younger generations which will need to be taken into account to be fair.
- 2. For younger generations who have an ongoing disability or long term conditions. They are impacted by the charging policy for a longer period of their lives.

Disability

The majority of those impacted by the Charging Policy will have a disability or long term condition. They are likely to have extra costs associated with their disability which will need to be taken into account to be fair.

Sex

- 1. Women on average: earn less than men, are less likely to be economically active, have less savings and are less likely to be economically active.
- 2. Women are more likely to live longer than men and will be impacted for longer

Gender reassignment

No perceived positive or negative impact.

Pregnancy and Maternity

No perceived positive or negative impact.

Marriage and Civil Partnership

Cohabiting couples are treated the same as those who are married or in a civil partnership, in terms of how a client's contribution is financially assessed.

Race

1. Certain ethnic groups on average: earn less than white groups and have

higher rates of economic inactivity, therefore are likely to have lower income than white groups

2. As lower income groups, they are also more likely to experience long term conditions and so more likely to be proportionately impacted by this charging policy.

Religion or belief

No perceived negative or positive impact.

Armed forces Community No perceived negative or positive impact.

Carers and those from lower-socio economic groups (including where there are interdependencies with protected characteristics) are other groups of people that could be impacted. Provision has been made for both, i.e. Choosing not to charge carers for support received from Adult Social Care Services and means-testing service users contribution.

For example, when a person receives care whilst living at home, the amount of income disregarded to meet living expenses as part of the financial assessments is as follows:

- £214.35 for users of Pensionable Age
- £149.40 or £171.75 for users of working age over 25
- £127.90 or £150.25 aged 18-24

In addition to these amounts other allowances are also included in charge calculations to meet housing related costs and additional costs of disability. Currently 368 users claim disability related costs and 501 claim allowances related to housing expenses (e.g. council tax, service charges and water rates).

Impact of cost of living on residents

The Cost of Living Crisis refers to the reduction in actual disposable income that UK households have experienced since 2021. Households across the country have struggled to keep up with growing inflation due to unprecedented rises in everyday basics such as food and heating.

The Government has responded to the Crisis by providing several financial support packages including the Energy Bill Scheme, the Housing Support Scheme and the Cost of Living payments to those receiving welfare benefits or disability benefits. The Council has been involved in administering these payments with a proportion of these being made available to adult social care service users. The Council are aware that adult social care service users may be financially affected by any one of the proposals.

With this in mind a Financial Inclusion Health Check will be offered to the service user. This is to ensure that full welfare benefit entitlement is achieved, full disability related expenditure is claimed and advice and support to manage their household income in the best possible way, including dealing with debts, is offered.

We have identified that those with disabilities and long term conditions, and those

of an older age are most likely to be potentially impacted by the content of the policy. Several mitigations are written into the policy.

Further details and assistance for each proposal is provided below.

Proposal One: Standardise the approach to claims for night care costs for older people getting attendance allowance.

Total number of people who could be potentially impacted.

As at 8 June 2023, 87 service users of pensionable age received this allowance in their charge calculation and a further 11 users of working age received this allowance, in total 98. The largest proportion of these service users who may be negatively impacted by this require physical support (81.82%), are between 75 to 84 (44.44%), are white British (58.97%) and are female (68.69%). Service users from Black, Asian and minority ethnic (BAME) communities, when counted together, are the second highest proportion (39.74%).

Impact

Negative

A small proportion of service users may see their charge increased if they do not accept the offer of a financial health check. There remains a risk that after a financial health check that some users may still be required to pay more for their care package.

Positive

None.

Mitigation

Each user will be offered the opportunity to declare their night care costs as a disability related expense so that the charge can be recalculated. A full financial health check will also be offered to ensure each user is in receipt of their full benefit entitlement and claiming all other allowances for which they may be entitled.

Proposal Two: Introducing an Interim Funding fee.

Total number of people who could be potentially impacted.

This proposal would be prospectively applied. There are currently 13 service users in residential care. This is an increase of 9 over a two year period. Of these service users who may be negatively impacted by this, the main primary support reason is physical support (63.16%), most are between 18 to 64 (31.58%) and 85 to 94% (31.58%), are female (57.86%) and are white British (47.37%). Service users from Black, Asian and minority ethnic (BAME) communities, when counted together, are the second highest proportion (21.05%).

Impact

Negative

Those impacted may be required to pay a charge for arranging interim funding. The impact is low as anyone required to pay the charge will have a relatively high level of savings above £23,250.

Positive

None.

Mitigation

Potential applicants who do not wish to receive interim funding arrangements as a result of the introduction of this charge will be signposted for independent financial advice. In addition, the charge and accumulated interest will be due only at the time the designated third party is appointed to manage the service users finances.

Proposal Three: Setting the maximum amount of Disability Related Expenditure at the level of Disability Benefit claimed.

Total number of people who could be potentially impacted.

As of 8 June 2023 there are 19 service users who may be impacted by this change. Those who may be negatively impacted have the highest primary support reason for physical support (74.91%), the majority are between 75 to 84 (38.46%) and 85 to 94 (38.46%), most are White British (84.62%) and are female (76.92%)

Impact

Negative

A small proportion of service users may see their charge increased if they do not accept the offer of a financial health check. There remains a risk that after a financial health check that some users may still be required to pay more for their care package.

Positive

None.

Mitigation

A full financial health check will be offered to ensure that income is being maximised and where lower rates of disability benefits are claimed assistance can be offered to claim for the higher rate. We will ensure that each service user is claiming their full entitlement to housing costs. Where claims for individual items of disability expenses are deemed to be excessive, advice and support can be offered from the financial inclusion service to assist with household budgeting and seeking cheaper alternatives to items already claimed.

Proposal Four: Introducing a charge for Assistive technology (including Telecare).

Total number of people who could be potentially impacted.

As of the 14th June 2023, there are up to 502 individuals altogether with some element of assisted technology. However, not all 502 individuals will be affected by the charge, as some will already be contributing towards their package of care. It will only be the proportion of users who are paying for all of their care and those that have no other service apart from a falls pendant that could be affected. The service users who may be negatively impacted have physical support (58.41%) as their primary care need, are between 75 to 84 (30.39%), are female (35.13%) and are white British (67.46%). Service users from Black, Asian and minority ethnic

(BAME) communities, when counted together, are the second highest proportion (20.91%).

Impact

Negative

Those individuals who currently pay for the full cost of their care may see an increase in their costs and those that do not have any other package of care apart from assistive technology.

Positive

None

Mitigation

The range of assistive technology that is now available on the market will further improve the opportunities for people to remain in their own home and delay or prevent home care increasing or residential care being required where the costs to the individual (where applicable) will be greater than the proposed charge.

The content of the Charging Policy appropriately minimises the risk of protected characteristic groups being adversely impacted by what we charge clients and how we assess their financial contribution to the cost of their eligible care and support needs. The Council has a financial inclusion service which supports service users to maximise their disability benefits and to claim disability related expenditure when eligible.

Throughout the consultation, we will be reviewing the impact of the proposals on the groups who will be most impacted, and will update the impacts section accordingly.

6.3 Describe below any negative impacts and barriers that cannot be addressed and provide justification for this

All negative impacts identified are addressed through the mitigations and support from the Financial Inclusion Team. The Council's Financial Inclusion officers will offer a financial health check to all service users impacted by these proposals on request once charges are finalised. This will include benefit maximisation (including household income where this is deemed necessary) together with assistance with claims for disability related expenditure. Financial Health checks are also available on an ongoing basis and are are a mandatory part of the Annual Care needs review for each service user

Assistance with claiming additional benefit income is also available. The Council works with Citizens Advice Kingston where service users require specialist support with claims for disability benefits such as Attendance Allowance and Personal Independence Payments.

7. Action planning

Action Plan

Recording the actions that will be taken to mitigate any negative impact, remove barriers, amplify positive impact, monitor data, review the EIA, and outlining the anticipated outcomes.

8. Informed decision making

Decision	Reason
Change the work to mitigate against potential negative impacts found	
Continue the work as is because no potential negative impacts found	
Justify and continue the work despite negative impacts (please provide justification)	
Stop the work because disproportionate impacts cannot be mitigated and are considered unjustifiable	