

Equality Impact Assessments

People and Communities 2020/21 budget proposals

Equality Impact Assessments

People and Communities - 2020/21 budget proposals



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PCA1 - Efficiencies from consolidation of joint finances



1. The Proposal

Service area:	Adult Care Commissioning
Budget reference:	PCA1
Budget reduction proposal:	Efficiencies from consolidation of joint finances
Budget saving for this financial year:	£200,000

Description of the proposal:

This is a technical adjustment derived from use of specific grants to address Medium Term Financial Plan balances.

Summary of changes:

Technical financial adjustment.

Is this a continuation of a previous medium-term financial plan saving?

Yes
 No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people				X			
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income				X			
People in particular age groups				X			
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				x			
Other specific impacts, for example: carers, parents, impact on health and wellbeing.							

3. Explanation of customer impact

There will not be any customer impact as a result of this proposal.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant, or filled permanently or temporarily.

5. Consolidation savings – please complete for medium or high impact areas - N/A

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager: Gerald Hunt

Date: 27th November 2019

PCA2 – Closure of Castlewood Staff Canteen



1. The Proposal

Service area:	People & Communities
Budget reference:	PCA2
Budget reduction proposal:	Closure of Castlewood Staff Canteen
Budget saving for this financial year:	£20,000

Description of the proposal:

A proposal was made that the canteen facility at Castlewood would close due to high level of unbudgeted subsidy needed to operate the facility, low usage and the cost of maintenance and replacement of essential equipment which was needed urgently. The proposal was agreed by way of a Director's Decision on 14th October 2019 and an Equality Impact Assessment was completed as part of the proposal.

Summary of changes:

It was recognised that there was a lack of financial resources to invest in new equipment, increased staffing and environmental up-grades in order to continue to provide the canteen facility. The service was subsidised by around £35,000 per annum.

Previous options considered included:

- Keeping the canteen open and providing significant investment in décor, new equipment and increased staffing levels. However, this would need to be funded from all Directorates and would require a growth in both capital and revenue budgets as the canteen cannot currently operate without subsidy.
- Invite expressions of interest from outside companies to run the canteen. This has been tried already with insufficient interest.

A consultation with staff and trade unions was run from in Sept / Oct 2019. All suggestions were carefully considered. Many of the suggestions received during consultation would require further investment to achieve and the Council is not in a position to support such investment.

Whilst it is recognised a small cold food offer could be provided at limited cost, this would have no contingency for staff leave and absence and therefore deliver an irregular service. Continuity of provision would be required to support staff effectively.

Therefore, the decision was taken and the canteen facility at Castlewood was closed on the 31st October 2019.

The Communities Meals Service operates from the kitchen at Castlewood and the oven and freezers are serviceable and so no changes were proposed to the community meals service.

Surplus and unserviceable equipment will be removed from site.

Is this a continuation of a previous medium-term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type						
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X				X
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income			X				X
People in particular age groups				X			
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:				X			

3. Explanation of customer impact

Food and drinks will continue to be available from the vending machines on site. The staff will need to bring their own food or use the local shops for other food and drink purchases. The space for staff to eat their lunch will remain available. Following the consultation with staff additional / improved facilities have been implemented to mitigate the negative impact on staff. These include:

- The location of microwaves has been reviewed to ensure they are accessible to all staff
- Procurement of higher-spec microwaves
- Retaining the cutlery
- Exploring the availability of a dishwasher
- Provision of a few condiments (tomato sauce, salt, pepper)

There will be no impact on the provision of community meals to customers.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant, or filled permanently or temporarily.

The staffing for the canteen was:

- Supervisor, 30hrs,
(substantive post, Cook, permanent, 28 hrs)
- Kitchen Assistant, 16hrs, permanent
- Kitchen Assistant 16hrs, permanent
- Kitchen Assistant, 28hrs, fixed term

These posts have been deleted. All staff were supported in line with the Council's redundancy policy. Anyone placed at risk as result of these proposals was supported in looking for redeployment in line with the policy.

5. Consolidation savings – please complete for medium or high impact areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 7th November 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager: Sarah Shaw

Date: 7th November 2019

PCA3 – Re-procurement of Health Watch Contract



1. The Proposal

Service area:	People & Communities: Adult Social Care
Budget reference:	PCA3
Budget reduction proposal:	Re-procurement of Health Watch contract
Budget saving for this financial year:	£50,000

Description of the proposal

Healthwatch was created by Part 5 of the Health and Social Care Act 2012. Healthwatch consists of a national body: Healthwatch England, and a local organisation operating in each local authority area in England with social care responsibilities.

Healthwatch is a statutory service and must be delivered by an independent social enterprise. The law also describes what each local Healthwatch needs to do, a summary of which includes:

1. Promoting and supporting the involvement of local people in the commissioning, provision and scrutiny of local care services.
2. Enabling local people to monitor the standard of provision of local care services and in deciding how local care services could and ought to be improved.
3. Obtaining the views of local people regarding their experiences of local care services and making these known.
4. Making reports and recommendations about how local care services might be improved and informing commissioners and providers of care services about these reports, which are also shared with Healthwatch England.
5. Providing advice and information to the public about access to local care services so that they may make informed choices.
6. Formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England.
7. Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively
8. Making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations

The current arrangement for the provision of this service ended on the 30th September 2019 and was replaced by NSC contributing to a jointly-commissioned Healthwatch service with our neighbours in South Gloucestershire and Bristol, aligned to the new Bristol, North Somerset & South Gloucestershire CCG. This option was considered the most appropriate as it will ensure that a sustainable and cost-effective service can continue to be provided locally it will also provide effective representation at a strategic level across the new CCG Health area. This joint procurement was awarded to Healthwatch.

Local Authorities receive money from the Government to pay for their Local Healthwatch schemes via the Local Reform & Community Voices Grant. The Department for Health & Social Care allocated £53,490 within this grant to North Somerset Council to provide a local Healthwatch scheme in 2018/19. Other forms of funding available to North Somerset to add to this grant have reduced considerably over the last few years.

These options were presented to respondents in the consultation exercise.

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X				X
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income				X			
People in particular age groups			X				X
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify: People who are socially or geographically isolated.			X				X

Explanation of customer impact

Healthwatch is effectively an open-access service with no requirement for users of the service to be referred via a statutory agency. Many of its activities involve delivering reports, documents or engagement events and the Service Level Agreement with the current provider does not require the production of attendance statistics which support a clear understanding of how widely the service is used by protected groups.

Given the limited data available on use of the service, a consultation exercise was undertaken which allowed both individuals and local organisations to tell us:

- How well informed they felt by the current Healthwatch arrangements?
- How they felt the options presented above might affect them?
- How vulnerable and protected groups might be affected by each of the options?

There were 40 fully completed response to the questionnaire, 36 from individuals and 4 on behalf of organisations working in North Somerset. The consultation was also discussed and promoted

at a range of meetings including the Local Area SEND Programme Board, the People & Communities Board and the Older People's Champions Group.

Protected Groups

Very few responses addressed the issues which might be faced by protected groups, with most respondents offering no comment. Colleagues in the Strategy & Policy Development Team conducted a range of targeted interviews with groups including local Patient Advice & Liaison Services, Supportive Parents, North Somerset LGBT Forum, North Somerset Older People's Champions Group etc. using the published questionnaire as a guide. Many of these groups indicated that the options presented would have little or no impact on the protected groups they represented or worked with specifically but shared the more general view that a locally focused service was important.

Accessibility/Local Service Delivery

Respondents felt very strongly about ensuring that Healthwatch services should retain a local, North Somerset focus and that events and activities should be available within the district. They were also broadly positive about the current provision.

Key themes in responses included:

- A concern that there would be no local Healthwatch service in North Somerset future.
- A concern that an arrangement commissioned across the BNSSG CCG footprint would see a reduction in local activity to support users of health services in North Somerset
- A concern that the current provider of Healthwatch in Bristol and South Gloucestershire operated differently to the current North Somerset provider
- A concern that there were individuals in North Somerset who may not be reached by an organisation not perceived to be locally focused, either due to geography or social isolation.
- A concern that not all users had access to digital publications and that printed materials remained important to some users.

These comments provide useful guidance to commissioners in drafting a specification which meets these local needs.

Social and Geographical Isolation

Ensuring the delivery of a locally focused Healthwatch which challenges the provision of both Health and Social Care provision in North Somerset is a statutory duty, and any arrangement made to commission the service differently will need to ensure this duty is discharged fully. To that end, we will ensure that specifications for any new service:

- Require providers to delivery services including public events, enter and view visits and other activities across North Somerset.
- Ensure that they identify means of ensuring that Healthwatch North Somerset's work and activities are available to groups which are 'hard to reach' because of geography, social isolation or because they are protected groups identified below

It is also important to note that the procurement process undertaken will be compliant with European Union Public Tendering Regulations and will thus open to all qualifying providers. Therefore, it should not be presumed that the current provider in either Bristol, North Somerset or

South Gloucestershire will deliver this service, and all bids will be subject to stringent scrutiny based on a locally developed service specification.

Healthwatch North Somerset currently shares information very effectively via a website, mailing lists and social media alongside more traditional print publications (86% of respondents recognised the Healthwatch logo, and 78% regarded themselves as well-informed or quite well informed about their activities). It is anticipated that the specification will assure these forms of communication continue to facilitate access for those who cannot physically attend meetings or events, and for those without access to digital formats.

34 respondents provided a postcode or part-postcode in their response. These reflected, broadly, the spread of population across North Somerset (Weston-super-Mare 35%, Clevedon 18%, Portishead 18%, Yatton 12%, Nailsea 6%, Banwell & Sandford 6%, Other areas 5%)

Age

Healthwatch North Somerset provides opportunities for membership of the organisation and for local people to volunteer. 7 respondents to the survey identified as members or volunteers, indicating in their responses that they were retired people and valued the opportunity to participate in the work of Healthwatch either by supporting its activities to monitor the provision of health and care services directly, or by attending events and meetings. Volunteering is more common in this age group, and there is a concern that any new arrangement may curtail these opportunities. It is our view that these volunteering opportunities are extremely important to local Healthwatch delivery, and we would expect the specification for a new service to ensure that local volunteering was a key aspect of future delivery.

Disability

Organisations representing people with disabilities remarked that people with sensory impairments or disabilities found local events accessible, and that the website and reports offered by Healthwatch North Somerset were available in suitable formats for all users. It is essential that the specification for future services assures this level of accessibility is retained.

Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

There are no staffing implications for North Somerset Council. However, there is potential that TUPE may apply between providers should Healthwatch be recommissioned. Any procurement process undertaken will provide further details on the responsibilities of parties to the transfer and the rights of individuals affected.

Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? November 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager:

Mike Newman, Strategy & Policy Development Manager

Date:

21 February 2019 - Updated November 2019

PCA4 - Supporting People - Restructuring of Housing with Support contracts



1. The Proposal

Service area:	People and Communities - Adult Social Care
Budget reference:	PCA4
Budget reduction proposal:	Supporting People - Restructuring of Housing with Support contracts
Budget saving for this financial year:	£50,000

Description of the proposal:

To re-commission the existing Supporting People accommodation based, support service contracts with 8 Housing providers. The proposal will focus on ensuring greater use of these resources are made with those with greatest need and ensure that all eligible housing benefit exceptional costs associated with delivering housing support to vulnerable individuals are maximised.

Summary of changes:

As a result of close co-ordination between commissioners and Housing Benefit, the existing Supporting People based support grants are being funded predominantly through housing benefit as opposed to direct council funding.

The proposed changes will reduce direct spend on the existing accommodation-based support contracts, as well as generating opportunities to reducing future complex care packages for adult and children's social care. Successful implementation will demonstrate opportunities to reinvest in supported accommodation through reducing the need for high cost out of county placements, by providing local support services to meet higher support needs. The savings generated will lead to no reduction in the units offered or the care and support delivered.

Additional resources will be released as a result of these changes to support younger adults with housing support needs.

Is this a continuation of a previous medium-term financial plan saving?

Yes No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.					Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people				X			
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			

Lesbian, gay or bisexual people				X			
People on a low income				X			
People in particular age groups				X			
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:				x			

3. Explanation of customer impact

The recommission will not change North Somerset's position under legislation to provide accommodation for those where the council has a duty under homelessness legislation. The current Accommodation based Support providers will continue with their accommodation-based offer but funded solely through housing benefit for those with low support needs and people with medium and high support needs will continue be funded through Supporting People.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily - See above.

5. Consolidation -savings – please complete for medium or high impact - areas - None

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? November 2019

Yes

No

Is a further detailed equality impact assessment needed?

If 'yes', when will the further assessment be completed?

Not at this time, more detailed EIA will be completed as a part of the re-commissioning process.

Service Manager: Gerald Hunt, Head of Commissioning

Date: 2nd December 2019

PCA5 - Adults Continuing Health Care contributions

1. The Proposal

Service area:	People and Communities - Adult Care
Budget reference:	PCA5
Budget reduction proposal:	Adults Continuing Health Care contributions
Budget saving for this financial year:	£175,000

Description of the proposal:

We now have a small, dedicated resource to support front line staff to identify when an individual has a primary health care need and is therefore eligible for Continuing Health Care (CHC) funding.

Summary of changes:

Clients whose primary needs are in regard to their health care needs are entitled to CHC funding, this is paid by the Clinical Commissioning Group (CCG). Accessing this funding can be difficult and requires knowledge and expertise of negotiating the pathways and National Framework. It is beneficial for people to access this funding firstly because it is not subject to a client contribution and secondly it ensures that their care (of a complex health nature) is co-ordinated by the relevant health care professional. Where care needs were being met by the Local Authority there is a saving.

This proposal includes:

- Identification of individuals from all areas of adult social care who may be eligible for CHC funding and completing required 'checklists' for their applications.
- Continue to increase knowledge of staff to identify when CHC checklists need to be completed.
- Build expertise and knowledge in staff to ensure they are well equipped to negotiate the pathways and secure CHC funding where appropriate.
- Identify when it is appropriate for Adult Social Care to challenge decision making and ensure joint funding options are also considered.

The resource was made available in July 2019 and has proved very successful in raising awareness of CHC process and supporting applications.

Is this a continuation of a previous medium-term financial plan saving? PCA9 – 2019/20 budget proposal

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X		X		

People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income				X			
People in particular age groups			X		X		
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing.				X			
Please specify:							

3. Explanation of customer impact

The decision for either an individual to be CHC funded, or joint funded should not affect their care delivery, it is clear in statute that no funding can be withdrawn by either party without clear agreement and that any disputes over funding cannot interrupt or delay care provision. It is not envisioned to have any impact on the care received.

Individuals who are deemed eligible for CHC do not have to pay a client contribution to their care; this is of particular benefit to people who self-fund their care because they have savings over £23,250 and this is the threshold when the Local Authority assess and establish their client contribution.

Additionally, people who have care and support needs arising from a primary health need will benefit from having their care coordinated by a health care professional rather than a social care professional due to the nature of their needs; this is provided when CHC eligible.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

As part of the workforce proposals for adult social care a part time role has been created from existing resources to work on CHC cases as part of a restructure. This role will be extended.

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily. No overall changes to staff Full Time Equivalent.

5. Consolidation savings – please complete for medium or high impact areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Not applicable	
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 7th November 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed? N/A

Service Manager: Kathryn Needham
Date: 7th November 2019

PCA6 - Reduced use of home-care pending beds following building of domiciliary care capacity



1. The Proposal

Service area:	Adult Social Care
Budget reference:	PCA6
Budget reduction proposal:	Reduced use of home-care pending beds following building of domiciliary care capacity
Budget saving for this financial year:	£50,000

Description of the proposal:

North Somerset are continuing the development and delivery of Domiciliary care in North Somerset to meet the rising demand on current resources.

Summary of changes:

North Somerset is working with all framework providers to create/ use links between health and social care to develop arrangements whereby local services compliment one other. A key strand of working differently is the use of technology enabled care, delivered in a way that enhances independence and maximises individual independence e.g. medication prompting by utilising reminders on Alexa.

North Somerset is also looking to move some of its services to Direct Payments, including shopping and priority cleaning visits, this should release at least 100 hours of domiciliary care support enabling additional people to live at home with appropriate support. Through the release of capacity from both direct payments and using technology these services can be delivered at a lower price and release capacity this represents a potential saving of circa £50,000 per year.

Is this a continuation of a previous medium-term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X		X		X
People from different ethnic groups				X		X	
Men or women (including pregnant women or those on maternity leave)				X		X	
Lesbian, gay or bisexual people				X			

People on a low income			X		X		X
People in particular age groups			x		x		X
People in particular faith groups				X		X	
People who are married or in a civil partnership				X		X	
Transgender people				X		X	
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify: Health			X		x		X

3. Explanation of customer impact

A significant impact of this proposal is an increased number of people working within social care resulting in an enhanced number of care hours available alongside improved consistency for our service users. We expect to see an improved flow between support services ensuring that residents of North Somerset can receive the right support at the right time in the right place.

The three strategic domiciliary care providers support adults with varying care and support needs from age 18+, with the majority of their support recipients aged 65+. North Somerset expect an increase of 52% in population aged 65+ by 2041 and as such the three strategic providers will be vital in meeting the increased demand.

However, there are other adults who are supported via Mental Health and Learning Disability contracts and we will be continuing development with them to ensure that their service users needs are also met.

As part of this work we will be ensuring that our service users are receiving their support from the most appropriate service and as such we may see a reduction in the average service delivery (hours) per person as some support is moved away from traditional care methods.

Moving the shopping and priority cleaning visits to Direct Payments should not have a negative impact on those already receiving services and is designed to ensure the support is being delivered in the right way. TEC will empower service users to maximise their independence. Direct payments offer service users more involvement with their care plans, but may not be suitable for all, but ensuring they are as accessible as possible will improve overall capacity.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily - See above.

5. Consolidation -savings – please complete for medium or high impact - areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 3rd December 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager:

Gerald Hunt

Date:

11th November 2019

PCA7 - Reduced residential placements following increased Shared Lives capacity



1. The Proposal

Service area:	People and Communities - Adult Care
Budget reference:	PCA7
Budget reduction proposal:	Reduced residential placements following increased Shared Lives capacity
Budget saving for this financial year:	£180,000

Description of the proposal:

Growing the Shared Lives scheme to provide more placements across adult care as an alternative to residential options.

Summary of changes:

Clients with a learning disability are accommodated wherever possible within the Shared Lives service, this service is similar in nature to a fostering arrangement, providing long term and short term, placements as well as some day care. Cost and volume work indicates that shared lives placements are more cost effective than traditional residential based services, and provide excellent outcomes for service users, often leading to greater independence and life opportunities.

The aim is to ensure that we: offer shared lives wherever appropriate, increase the number of carers recruited, and; expand into other client groups (including people with poor mental health and older people). This will be a very positive initiative and will offer a viable alternative options to residential care.

Is this a continuation of a previous medium-term financial plan saving? PCA5 2019/20

X Yes
 No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people		X			X		
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income				X			

People in particular age groups		X			X		
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:				X			

3. Explanation of customer impact

Overall clients will benefit from an increase in choice and independence; the service is registered by Care Quality Commission (CQC) and all carers are vetted and commissioned by Social Services. It is anticipated that these changes will result in a positive impact for service users.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

The additional Shared Lives Coordinator post to continue for a further 12 months to ensure there is sufficient capacity in the service for recruitment, training and support of new carers.

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily. 1 FTE 12 Month JG6 Shared Lives Co-ordinator post

5. Consolidation savings – please complete for medium or high impact areas

None

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 22nd October 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager:

Martin Hawketts

Date:

17th October 2019

PCA8 and PCA9 - Accommodation Solutions (Extra Care & Supported Living)



1. The Proposal

Service area:	Adult Social Care
Budget reference:	PCA8 and PCA9
Budget reduction proposal:	Accommodation Solutions (Extra Care & Supported Living)
Budget saving for this financial year:	PCA8 Reduced residential placements following new / increased Extra Care capacity - £225,000 PCA9 Reduced residential placements following new Supported Living schemes - £100,000

Description of the proposal:

To continue the development and delivery of additional Extra Care and housing with support for vulnerable groups.

Summary of changes:

North Somerset Council have developed a working partnership with 3 extra care providers. Housing 21, Alliance Homes and Shaw Healthcare. Each partner brings their own strengths and expertise, and by utilising these strengths, NSC will hope to expand the Extra Care Housing development.

The council is also working with a developer on a new supported living scheme which will provide a mix of accommodation Mental Health and Learning disabilities.

The council is working to look at alternative approaches to the development of Extra Care and supported living.

Is this a continuation of a previous medium-term financial plan saving? PCA1, PCA4 2019/20 budget proposal

Yes No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people		X			X		
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income		X			X		

People in particular age groups		X			x		
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify: Health		X			x		

3. Explanation of customer impact

There is a strategic aim to increase the total Extra Care capacity by over 120 places, and to increase the supported living capacity for people with learning difficulties by 40 units within the next 5 years. Extra Care is usually aimed at people who are over 55 and require some form of social care support.

Supported Living is usually accommodation specifically designated for a specific client group, usually for people with Learning Difficulties.

Extra Care and Supported Living are two areas where there can be significant financial savings made whilst providing more independence for service users. The Housing with Support Strategy 2017-2027 was adopted in December 2017.

To meet these aims, we are working with Housing and Care 21 to develop a 60-unit Extra Care site in Yatton which is aiming to be complete by April 2020 and occupancy starting in May 2020. The full benefit of this site will not be felt until 2020-2021. Extra Care schemes have had numerous studies carried out on them to determine what impact they have on people's lives.

The ExtraCare Charitable Trust found a 38% reduction in NHS costs, due to Extra Care residents having reduced (46% lower) routine GP visits and less and shorter unplanned hospital admissions compared to service users living in residential care.

The study also found 19% of people who are categorised as "Pre-Frail" returned to Resilient state within 18 months of moving into Extra Care and that Extra Care service users experienced lower levels of depression.

North Somerset Council social care will have nominations to 50% of the lettings (the affordable rented homes) and as such as the development is likely to have a positive impact for the health and well-being (older and disabled) people in receipt of a low income.

A former care home that has closed down earlier this year is currently going through a planning application to convert to 13 self-contained flats. This will cater for people with a variety of mental health issues and learning difficulties. There is a care provider identified and a registered housing association signed up to the project already. The aim with this scheme is to provide suitable accommodation for people whose needs may not be that high, but would prevent them going into higher cost residential accommodation due to there being no suitable provision, so this will reduce anticipated demand for adult care and reduce the funding therefore required. This saving

is therefore achieved via cost avoidance, but will also give the tenants a much better quality of life and opportunity to gain independence.

NSC are also continuing to explore accommodation in the north of the area, as there is a high demand for supported living in the north.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily - See above.

5. Consolidation -savings – please complete for medium or high impact - areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 7th November 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager: Gerald Hunt

Date: 7th November 2019

PCA10 - Review of adult social care and support packages



1. The Proposal

Service area:	People & Communities: Adult Social Care
Budget reference:	PCA10
Budget reduction proposal:	Review of adult social care and support packages
Budget saving for this financial year:	£200,000

Description of the proposal:

It is proposed that a pilot project using a company called 'Flex 360' is continued. They were commissioned to review a set number of adult care packages that had not been reviewed for a significant time due to capacity issues. The pilot evidenced that investing a dedicated resource to reviewing packages of care will result in savings in excess of the costs of undertaking the reviews.

Summary of changes:

- The pilot reviews identified full year savings of £140,000.
- The pilot reviews have demonstrated that the key factor is 'dedicated time'. The work carried out is not dissimilar in nature from work undertaken by our own staff but has proven the value of staff who can provide focus on the review work without the pressures of the front-line demand.
- The reviews are most effective where there are packages which can be changed 'by degree' such as direct payments or domiciliary care.
- The 59 cases identified for the pilot were from the 18-65 age group and the bulk of the savings identified have been significant changes to some direct payments on cases which have not been reviewed for some time. It should be noted that most care packages have not changed, and future cohorts will have different characteristics. Caution has been exercised in assuming this sample is representative and how the results have been extrapolated to a future project.

It is planned that this project is continued and 'Flex 360' recommissioned to undertake a second and larger cohort of reviews. It is estimated the number of reviews required to achieve a result approx. £200,000 will be 250 which would require an investment of £125,000.

Is this a continuation of a previous medium-term financial plan saving?

Yes No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type						
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X		X		X

People from different ethnic groups							
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income				X			
People in particular age groups			X		X		X
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:				X			

3. Explanation of customer impact

The overall aim is for this to have a positive impact on customers, but it is recognised that some customers may consider it negative.

Reviews of packages of care will be carried out in a planned way and not at a time of crisis for the individual; this is positive and can help to ensure that the person's independence is maximised for longer and any additional signposting for support / services can be provided.

It will provide opportunities to identify where people may be able to access other funding streams for their care, for example Continuing Health Care, again positive and within the pilot 4 people were identified.

Any situations where packages of care can be reduced would be done with full consideration of the individual impact on the person and any informal carers and will still ensure that they have an appropriate level of care. From the 59 packages of care reviewed in the pilot it is noted that this only resulted in reductions for 13 customers and 11 of these people were in agreement with the reduction; 3 packages of care were increased.

Where there is a potential for reductions we work with the person, and their carer(s) to gauge the impact on them. This may include a re-assessment from an Occupational Therapist to identify adaptations and aids, or assistive technology. In some situations, a reduction was possible because the person had not been using the care hours allocated for a substantial period of time; they remained in place as no review had been held. In more than one situation the person had regained a level of independence that meant that the care was no longer needed.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

There is no direct impact on NSC staff however it is acknowledged that additional staff resource is needed to carry out this work; this would be a dedicated review team commissioned via an external agency who have already been used in a pilot project.

If yes, how many posts could be affected? State whether they are current vacant, or filled permanently or temporarily.

5. Consolidation savings – please complete for medium or high impact areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Not applicable	
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 7th November 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager: Kathryn Needham & Martin Hawketts

Date: 7th November 2019

PCA11 - Review of Direct Payments for adult social care and support



1. The Proposal

Service area:	Adult Social Care
Budget reference:	PCA11
Budget reduction proposal:	Review of Direct Payments for adult social care and support
Budget saving for this financial year:	£100,000

Description of the proposal:

To continue the review process that has been underway over the last six months whilst developing the Direct Payment offer across North Somerset to improve accessibility to direct payments as an alternative care offer. The use of a direct payment may be a more flexible alternative to a domiciliary care package with an existing domiciliary care provider and could assist with the supply challenge as well as being more cost effective.

Summary of changes:

North Somerset Council is continuing its Direct Payment reviewing process, ensuring that service users are receiving appropriate levels of funding and using it in the correct way. We are also continuously exploring ways to make Direct Payments easier to manage and more accessible whilst keeping the person-centred approach which is crucial to an excellent Direct Payment offer.

Is this a continuation of a previous medium-term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type						
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people		X			X		
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income		X			X		
People in particular age groups		X			X		
People in particular faith groups				X			

People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify: Health		X			X		

3. Explanation of customer impact

The council is obliged under the Care Act to offer Direct Payments and to ensure the process is not excessively laborious, for those who are using it. With this in mind, we have focussed on accessibility which is key to ensuring that anyone who is entitled to receive a Direct Payment can do so.

The reviewing process does not target any client cohort and therefore, any service user receiving Direct Payments is subject to the review. The review enables the Direct Payment Support Team to establish if a service user is having difficulty with any elements of their direct payment, if this is the case, the difficulty can be resolved, or additional support methods used to assist and enable the ongoing use and management.

North Somerset Council has already recovered over £1million in excess contingency balances and generated an additional £150,000 in yearly equivalent savings as a result of the Direct Payment reviewing policy. This has been achieved by recovering resources that have not been used to meet a care need.

Whilst we have generated a net saving, the above demonstrates the need for the reviewing policy and ensuring that resources are deployed to where they are most needed, it also focuses the importance of providing an appropriate, supportive and easily accessible Direct Payment service.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily - See above.

5. Consolidation -savings – please complete for medium or high impact - areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposals that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 11th November 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager:

Gerald Hunt

Date:

11th November 2019

Full Equality Impact Assessment – PCA12 Review of Adult Social Care Non-residential Financial Assessments



Service area:	Adult Social Care
Budget reference:	PCA12
Budget reduction proposal:	Review of Adult Social Care Non-residential Financial Assessments - changes to procedural arrangements for financial assessments for non-residential service users, which will result in changes to client contributions for adult social care
Equality impact assessment owner:	Katherine Sokol
Director sign off:	Sheila Smith
Review date:	15 th January 2020

Budget Ref.	Budget Reduction Proposal	Budget Reduction £				Staffing Reduction (FTE)
		2020/21	2021/22	2022/23	2023/24	2020/21
PCA12	Financial Assessments	150,000	50,000	0	0	0
1)	Review of all non-residential financial assessments to update client's resources	115,000				
2)	Change in the treatment of the enhanced element of the Personal Independence Payment (PIP)	20,000				
3)	Correct application of the Minimum Income Guarantee for clients who are part of a couple	15,000				

Service User Impact (High, medium or low)	
Before mitigating actions	After mitigating actions
Medium	Low
Medium	Low
Medium	Low

Staff Impact (High, medium or low)	
Before mitigating actions	After mitigating actions
None	None
None	None
None	None

Section 1 – The Proposal

1.1 Background to proposal

Users of adult social care and support services undergo a financial assessment in order to determine how much, if any, they should contribute to the costs of their care. These proposals involve changes to a number of procedural arrangements for financial assessments, which will result in changes to client contributions for non-residential adult social care and support packages, whether they be managed services such as home care, or non-managed services such as Direct Payments. The proposals fall into 3 parts:

1. Review of all Non-residential Financial Assessments (service users in settings other than care homes)

It is intended to conduct a review of all financial assessments for service users in receipt of non-residential care services, beginning in Spring 2020, and annually thereafter. This has not been done for several years (other than when service users have notified us of a change in financial circumstances) because of the fact that, historically, benefit and pensions increases have been roughly in line with the increase in the Minimum Income Guarantee (MIG)¹ and therefore, any increases in client contributions were expected to be minimal. However, in recent years, benefit and pension increases have exceeded increases in the MIG and, as a result, client contributions are expected to need to be increased.

As a result of the reviews, it is anticipated that many clients will experience an increase in required contributions to the cost of care as a result of increases in benefits or other income. On average we would expect these increases to be in the region of £15 to £25 / week and impact on around 800 service users, although it could be substantially higher for those who have had new or enhanced benefits / income or capital and have not notified the Council of these changes in financial circumstances. On the contrary, there may be a smaller number of clients who have experienced reductions in income and or capital or increases in disregards, which have not been notified to the Council, who may experience a reduction in charges. It should be noted that carrying out reviews / re-assessments is a requirement of the Care and Support Statutory Guidance and not carrying them out is not a viable option. It is not proposed to backdate any of the reviews that result in an increase in contributions, but to apply the new charges three months from the date of the review, in order to allow a period of transition to new arrangements. However, in the event that the review leads to a reduction in contributions, these will be applied immediately and backdated where appropriate.

¹ Charges for care and support for services other than in a care home, must not reduce people's income below a certain amount; this is called the Minimum Income Guarantee.

All charging will comply with the Care Act 2014 and the Care and Support Statutory Guidance. The overarching principle that people should only be required to pay what they can afford will remain; people will continue to be entitled to financial support based on a means-test, and many will continue to be entitled to free care. There will continue to be an appeals process for all Financial Assessments. In addition, allowances may be made on an exceptional case-by-case basis if clients experience significant welfare impacts as a result of the review. The Financial Assessments and Care Charging teams will ensure that they work with social work teams to ensure that a review of the care assessment is triggered where appropriate.

There are around 1,240 non-residential financial assessments over 12 months old; around 70% of these are of working age and all will have some form of disability, which results in them needing a care and support package. 438 of these are “nil charge” (their income is below the MIG); 26 have capital above the £23,250 limit and, as such are charged the full cost of their care; 64 are non-chargeable as a result of them being in receipt of mental health aftercare and 712 make some contribution to their care costs. It is anticipated that around 350 will remain Nil Charge, 88 will become chargeable and 700 will see an increase of, on average, around £15 to £25 per week, although those who have had an increase in income beyond the usual inflation uplifts or an increase in capital, and have not previously advised the Council of these changes, could see higher increases.

1. Change in the treatment of the enhanced rate daily living element of the Personal Independence Payment (PIP)

Personal Independence Payment (PIP) is a state benefit that provides assistance with some of the extra costs if people have a long-term ill-health issue or disability. PIP is available to adults who have not reached state pension age.

The current rates of PIP are shown below:

Personal Independence Payment (for those under State Pension Age)			
	Standard	Enhanced	Higher-rate Element
Daily Living Element	£58.70	£87.65	£28.95
Mobility Element	£23.20	£61.20	N/A

Historically, the Council has not included as income in a Financial Assessment the higher rate care element of Disability Living Allowance (DLA) and Attendance Allowance (AA) and the enhanced rate daily living element of the Personal Independence Payment (PIP), because the eligibility criteria means that this element was assumed to be for “night care” that the Council was not providing.

However, PIP is assessed differently from AA and DLA and does not divide components into day and night time care requirements, and the Care Act 2014 allows Local Authorities to take into account all of the PIP “daily living” amount in the Financial Assessment (although it must exclude all “mobility” elements).

With effect from 1 April 2020, for all new and change of financial circumstances Financial Assessments, where the service user is in receipt of the enhanced rate of Personal Independence Payment (PIP), it is proposed to discontinue the practice of automatically disregarding from the income calculation, the weekly amount of £28.95, which historically represents the element of the higher rate of Attendance Allowance / Disability Living Allowance historically assumed to be for “night care”. Instead, any night care costs will be assessed as Disability Related Expenditure (DRE) and the Council will take account of actual amounts paid in the Financial Assessment. So, for clarity, we are not proposing that we won’t take night care costs into account, just that this will be done based on actual costs under DRE, rather than an assumed flat-rate spend based on the out-of-date DLA model.

For existing service users, we propose bringing in the change on a phased basis as follows, with the changes coming into effect as part of the review process described in proposal 1.

<u>New Rates for existing service users</u>	Current	Phase 1	Phase 2
	2019/20	2020/21 (not before 1 June 2020)	2021/22 (1 April 2021)
Income disregarded in relation to the higher rate of PIP (daily living component)	£28.95	£14.48	£0.00

New Service users who would have had the £28.95 disregarded and were not paying for night care are anticipated to be negatively impacted up to the value of £28.95 / week by the proposal; service users paying in excess of £28.95 for night care would be positively impacted by these proposals. For existing service users, the changes are proposed to be phased in as indicated above.

It is proposed to carry out a consultation on this proposal prior to making any final decision about implementation.

We estimate that around 300 **new service users** in a year will be in receipt of the enhanced rate of PIP (the vast majority of whom will be of working age) and, as a result, would have had £28.95 disregarded from their benefits income under the current arrangements. Under the new arrangements, it is estimated that around:

- 200 would no longer receive any allowance would pay up to £28.95 more per week than they would have done under the previous policy
- 50 would no longer receive the allowance but would remain non-chargeable
- 40 would receive some allowance for night care through Disability Related Expenditure (DRE) of up to £28.95 per week, which would offset any loss in allowance
- 10 would receive an allowance in excess of £28.95 through DRE and, as a result would be better off

We estimate that there are also currently around 300 **existing services users** in receipt of the enhanced rate of PIP. Under the new arrangements, it is estimated that around:

- 200 would no longer receive any allowance would pay up to £28.95 more per week than they would have done under the previous policy, but phased over 2 years
- 50 would no longer receive the allowance but would remain non-chargeable
- 40 would receive some allowance for night care through Disability Related Expenditure (DRE) of up to £28.95 per week, which would offset any loss in allowance
- 10 would receive an allowance in excess of £28.95 through DRE and, as a result would be better off

As described above, changes for existing service users will be phased in over 2 years.

This change is fully in accordance with the Care Act and Statutory Guidance and we intend to carry out a consultation on this proposal prior to making any final decision about its implementation.

2. Minimum Income Guarantee for adults who are part of a couple

Under the Care Act 2014, charges for care and support for services other than in a care home, must not reduce people's income below a certain amount; this is called the Minimum Income Guarantee (MIG). The Government publishes levels of MIG each year and there are separate values for single adults and adults that are part of a couple. The current rates are shown in the table below:

Age / Status	18-24	25 to under pension credit age	Attained pension credit age
<u>Single</u>			
Basic	£72.40	£91.40	£189.00
In receipt of disability premium	£40.35	£40.35	£0.00
In receipt of enhanced disability premium	£19.70	£19.70	£0.00
	£132.45	£151.45	£189.00
<u>Part of a Couple</u>			
Basic	£71.80	£71.80	£144.30
In receipt of disability premium	£28.75	£28.75	£0.00
In receipt of enhanced disability premium	£14.15	£14.15	£0.00
	£114.70	£114.70	£144.30
Difference	£17.75	£36.75	£44.70

Historically, we have erroneously applied the Single Person's MIG to all service users without regard to the service user's status. We intend to rectify this and propose that with effect from 1 April 2020, for all new and change of financial circumstances Financial Assessments, we will use the Government-set Couple's Minimum Income Guarantee (MIG) where the adult concerned is part of a couple, and also ensure that the couple's income remains in excess of the couple's MIG.

Most new clients with income above the MIG will pay between £36.75 and £44.70 more compared with the existing arrangements, but it is also possible that a small number of clients who are on low incomes and part of a couple, will benefit, because the MIG for the couple could be £144.30 x 2 = £288.60, whereas we currently only allow £189.00 to cover both people in a couple.

For existing service users, we propose bringing in the changes on a phased basis as follows, with the changes coming into effect through the review process described in proposal 1.

Age / Status	18-24	25 to under pension credit age	Attained pension credit age
Current MIG applied to couples	£132.45	£151.45	£189.00
Interim MIG for couples from no earlier than 1 June 2020	£123.58	£133.08	£166.65
MIG for couples from 1 April 2021	£114.70	£114.70	£144.30

Of the 700 **new cases assessed each year**, around 175 of these are part of a couple. Around 120 are of working age and 55 are of pension credit age. It is anticipated that around 115 would pay around £44.70 more than they would have done under the previous arrangements and around 50 would pay around £36.75 more than they would have done under the previous arrangements. A small number of services users, who are part of a couple on a low income, are expected to benefit from the couple's MIG allowance being correctly applied as we will ensure that a couple's income remains in excess of the couple's MIG.

We estimate that there are around 280 **existing service users** who are part of a couple. Around 190 are of working age and 90 are of pension credit age. It is anticipated that around 180 would pay around £44.70 more than the current arrangements and around 80 would pay around £36.75 more than under the current arrangements, but these changes will be phased in over 2 years.

This change is fully in accordance with the Care Act and Statutory Guidance and we intend to carry out a consultation on this proposal prior to making any final decision about its implementation.

Summary of changes:

1. It is anticipated that this change will lead to small to moderate increases in client contributions to care packages for many clients, with larger increases for any clients that have not notified material changes in income / capital to the Council. The proposals may also lead to a reduction in contributions for a smaller number of clients who have had a reduction in income / capital that has not been notified to the Council.
2. New service users in receipt of the enhanced rate of PIP and not paying for night care are anticipated to be negatively impacted up to the value of £28.95 / week by the proposal when compared with the previous arrangements; new service users paying in excess of £28.95 for night care would be positively impacted by these proposals when compared with the current arrangements. For existing service users, the changes will be phased in over 2 years, with a potential maximum impact of £14.48 per week in year one and a further £14.47 per week in year 2. Any changes that lead to a reduction in contributions will be implemented immediately as part of the review.
3. Most new clients with income above the MIG will lose between £36.75 and £44.70 when compared with the current arrangements, but it is also possible that a small number of clients who are on low incomes and part of a couple will benefit. For existing service users, the changes will be phased over 2 years, with a 50% impact in each of the 2 years. Any changes that lead to a reduction in contributions will be implemented immediately as part of the review.

It is possible that some clients (clients of working age, with disabilities who are part of a couple and not paying for night care) may be adversely impacted by all three proposals. Some examples of possible changes in relation to all three proposals are shown in Appendix 1.

All charging will comply with the Care Act 2014 and the Care and Support Statutory Guidance. The overarching principle that people should only be required to pay what they can afford will remain, and people will continue to be entitled to financial support based on a means-test, and many will continue to be entitled to free care. There will continue to be an appeals process for all Financial Assessments. In addition, allowances may be made on an exceptional case-by-case basis if clients experience significant welfare / financial hardship impacts. Proposal 1 will have a three-month transition period and proposals 2. and 3. will be phased in over a two-year period.

1.2 Please detail below how this proposal may impact on any other organisation and their customers

No significant impacts identified.

Section 2 – What Do We Know?

2.1 Customer/staff profile details – what data or evidence is there which tells us who is, or could be, affected?

Proposal i)

There are around 1,240 non-residential financial assessments over 12 months old; around 70% of these are of working age and all will have some form of disability, which results in them needing a care and support package. 438 of these are “nil charge” (their income is below the MIG); 26 have capital above the £23,250 limit and, as such are charged the full cost of their care; 64 are non-chargeable as a result of them being in receipt of mental health aftercare and 712 make some contribution to their care costs.

It is anticipated that around 350 will remain Nil Charge, 88 will become chargeable and 700 will see an increase of, on average, around £15 to £25 per week, although those who have had an increase in income beyond the usual inflation uplifts or an increase in capital, and have not previously advised the Council of these changes, could see higher increases.

Proposal ii)

We estimate that around 300 **new service users** in a year will be in receipt of the enhanced rate of PIP (the vast majority of whom will be of working age) and, as a result, would have had £28.95 disregarded from their benefits income under the current arrangements. Under the new arrangements, it is estimated that around:

- 200 would no longer receive any allowance would pay up to £28.95 more per week than they would have done under the previous policy
- 50 would no longer receive the allowance but would remain non-chargeable
- 40 would receive some allowance for night care through Disability Related Expenditure (DRE) of up to £28.95 per week, which would offset any loss in allowance
- 10 would receive an allowance in excess of £28.95 through DRE and, as a result would be better off

We estimate that there are also currently around 300 **existing services users** in receipt of the enhanced rate of PIP. Under the new arrangements, it is estimated that around:

- 200 would no longer receive any allowance would pay up to £28.95 more per week than they would have done under the previous policy, but phased over 2 years
- 50 would no longer receive the allowance but would remain non-chargeable
- 40 would receive some allowance for night care through Disability Related Expenditure (DRE) of up to £28.95 per week, which would offset any loss in allowance
- 10 would receive an allowance in excess of £28.95 through DRE and, as a result would be better off

Proposal iii)

Of the 700 **new cases assessed each year**, around 175 of these are part of a couple. Around 120 are of working age and 55 are of pension credit age. It is anticipated that around 115 would pay around £44.70 more than they would have done under the previous arrangements and around 50 would pay around £36.75 more than they would have done under the previous arrangements. A small number of services users, who are part of a couple on a low income, are expected to benefit from the couple's MIG allowance being correctly applied as we will ensure that a couple's income remains in excess of the couple's MIG.

We estimate that there are around 280 **existing service users** who are part of a couple. Around 190 are of working age and 90 are of pension credit age. It is anticipated that around 180 would pay around £44.70 more than the current arrangements and around 80 would pay around £36.75 more than under the current arrangements, but these changes will be phased in over 2 years.

2.2 What does the data or evidence tell us about the potential impact on diverse groups, and how is this supported by historic experience/data?

See above – all service users impacted by the proposals will have some form of disability, which results in them needing a care and support package.

2.3 Are there any gaps in the data, for example across protected characteristics where information is limited or not available?

Estimates are based on the characteristics of the existing customer base and impacts could be different if new service users have significantly difference characteristics.

2.4 How have we involved or considered the views of the people that could be affected?

The proposals were discussed with the Equality Stakeholder Group on 13 January 2020; the issues raised, and the Council's response is shown in the table overleaf.

2.5 What has this told us?

See 2.4 and table below. Further responses will be published after the formal consultation has been completed.

2.6 Are there any gaps in our consultation, what are our plans for the future?

We intend to carry out a formal consultation specifically on proposals i) and ii)

Equality Stakeholder Group Consultation

Consultation Comment	Response
<p>Concern that vulnerable people could be impacted by this change. Those in receipt of Personal Independence Payment (PIP) have been significantly impacted by austerity and this is a further example of an impact on these vulnerable people.</p>	<p><i>See mitigation highlighted in action plan in Section 4</i></p>
<p>Communication</p> <ul style="list-style-type: none"> - communication should be accessible (standard large print) and not reliant on information being on line. - acknowledged that this is a very complex area and communication should be as clear as possible - letter should be informative but not 'frightening - ways in which people respond should include email address and telephone number - think about those with low level literacy and those whose first language isn't language - ensure the appeals process is clearly explained in the notification of any change in benefit - how will the equality data collected by social services be used to help communicate with those subject to changes 	<p><i>We will take all these issues into account as part of any implementation and ensure that communications are as simple, clear and accessible as possible and, in particular, that clients can speak to experts on the telephone if required.</i></p>
<p>Need to ensure the principle of client directed care remains</p>	<p><i>These proposed changes have no impact on the principle of client directed care</i></p>
<p>Could the 2-month transition period be extended? Most financial planning advice would be over 3 months.</p>	<p><i>As a result of the concerns expressed, the Council will implement a three-month transition period for implementation of any new charges that follow a review.</i></p>
<p>Who determines what is affordable for those in receipt of benefits?</p>	<p><i>The Secretary of State for Health and Social Care sets the Minimum Income Guarantee (MIG) each year, taking account of the welfare benefits available to different age groups, which is the responsibility of the Department for Work and Pensions (DWP). The Social Security Administration Act 1992 requires the Secretary of State for the DWP to conduct an annual review of benefits and pension rates to determine</i></p>

	<p><i>whether they have retained their value in relation to the general level of prices and earnings. The DWP also publishes a range of measures of living standards in the Households Below Average publication. The latest estimates are to 2017/18 and were published on 28 March and can be found at</i></p> <p>https://www.gov.uk/government/statistics/households-below-average-income-199495-to-201718</p>
<p>Can it be made clear what can be included as a disability related expenditure.</p>	<p><i>The Council considers Disability Related Expenditure (DRE) on an individual basis, but, in general terms, our policy is as follows:</i></p> <p><i>DRE is expenditure that Service Users incur in addition to their day to day living costs where the cost is more than normal expenditure and incurred due to disability rather than choice. The amount of DRE is deducted from the financial assessment when determining the Service User's charge. The general principles for DRE allowances are that:</i></p> <ul style="list-style-type: none"> <i>• They should be considered in conjunction with the individual's support plan.</i> <i>• They should be the lowest cost alternative</i> <i>• Evidence of payment may be requested if higher costs are involved</i> <i>• Exceptional circumstances will be considered</i>
<p>How will this be impacted by universal credit?</p>	<p><i>The Council does not foresee any specific impacts of these proposals in relation to Universal Credit</i></p>
<p>Need to consider the ongoing monitoring of the impact on individuals</p>	<p><i>The Council agrees – we will monitor the impact on individuals.</i></p>
<p>Work with NSCAB in advance of the implementation of changes so they are able to advise customers who go to them for advice</p>	<p><i>The Council agrees – we will meet with the North Somerset Citizens Advice Bureaux to give them further information about the proposals and any implementation timetable.</i></p>
<p>If people have a change in circumstances how quickly will they be reassessed?</p>	<p><i>In general terms, a change of circumstances financial assessment usually takes in the region of 4 weeks. However, the changes proposed here</i></p>

<p>Process of re-assessment and notification of any changes should be 'quick' to reduce any uncertainty or stress that may be caused for individuals.</p>	<p><i>involve us reviewing in excess of 1,000 financial assessments; as a result, these will have to be completed in phases over a period of several months and we will consider how we communicate this as part of our communications plan. Many of those that have not experienced a change in circumstances (other than inflationary uplifts) will take less than four weeks to complete.</i></p>
<p>Changes proposed to the Minimum Income Guarantee will also affect couples, the significant reductions will leave some worse off.</p>	<p><i>See mitigation highlighted in action plan in Section 4</i></p>
<p>Reductions in people's available budget may result in them being less able to undertake social activities leading to an increase in social isolation and poor mental health.</p>	<p><i>See mitigation highlighted in action plan in Section 4</i></p>
<p>Reduction in higher rate night care may impact on people's ability to engage in community services.</p>	<p><i>See mitigation highlighted in action plan in Section 4</i></p>
<p>On the proposed change to the way we treat the enhanced element of PIP, a concern was raised that assessing night care costs as DRE on the basis of actual amounts paid, rather than automatically allowing the £28.95 / week will be a disincentive to those whose night care is being provided by unpaid carers.</p>	<p><i>This is recognised, however, if we were to allow anything for family offering night care, others could argue that we should make allowances for all other unpaid care. If night needs (or indeed any other needs) are identified as a need on a care plan and it is being met by family, then according to Care Act legislation, the need has been met. Anyone over the age of 16 who is providing more than 35 hours care and support a week will be advised to claim carer's allowance and we would also offer them a Carer's Assessment if they have not already had one. We will identify individual impacts on carers and address them on a case by case basis.</i></p>

Section 3 – Assessment of Impact

Impact Level, before mitigation Insert X into one box per row, for impact level and type.					Impact type			Summary of Impact
	High	Med	Low	No	Positive	Neutral	Negative	
Disabled people		X (- tve)	X (+tve)		X	X	X	Likely to experience an increase in the required client contribution to services, although some may experience a reduction. Everyone will only be required to pay what they can afford, people will continue to be entitled to financial support based on a means-test, and many will continue to be entitled to free care
People from different ethnic groups				X				
Men or women				X				
Lesbian, gay or bisexual people				X				
People on a low income		X (- tve)	X (+tve)		X	X	X	Likely to experience an increase in the required client contribution to services, although some may experience a reduction. Everyone will only be required to pay what they can afford, people will continue to be entitled to financial support based on a means-test, and many will continue to be entitled to free care

People in particular age groups		X (- tve)	X (+tve)		X	X	X	By virtue of an increased likelihood that older people will experience some kind of disability, they are also likely to experience an increase in the required client contribution to services, although some may experience a reduction. Everyone will only be required to pay what they can afford, people will continue to be entitled to financial support based on a means-test, and many will continue to be entitled to free care
People in particular faith groups				X				
People who are married or in a civil partnership				X				
Transgender people				X				
Women who are pregnant or whilst on maternity leave				X				
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:		X (- tve)	X (+tve)		X	X	X	There could be an impact on health and well-being for those clients who experience an increase in the required client contribution, although everyone will only be required to pay what they can afford, people will continue to be entitled to financial support based on a means-test, and many will continue to be entitled to free care

Does this proposal have any potential Human Rights implications? If 'yes', please describe	No
Could this proposal have a Cumulative Impact with any other budget savings? <i>This is an impact that appears when you consider services or activities together; a change or activity in one area may create an additional impact somewhere else</i> If 'yes', please describe?	As mentioned above, it is possible that some clients (clients of working age, with disabilities who are part of a couple and do not pay for night care) may be adversely impacted by all three proposals.

Section 4 – Action Plan

Where you have listed that there will potentially be negative outcomes, you are required to mitigate the impact of these. Please detail below the actions that you intend to take.

Action taken/to be taken	How will it be monitored?
1. Financial Assessments will continue to comply with the Care Act and the relevant Statutory Guidance. The overarching principle that people should only be required to pay what they can afford will remain; people will continue to be entitled to financial support based on a means-test, and many will continue to be entitled to free care.	Quarterly reports on the changes and impacts
2. None of the changes that involve an increase in contributions will be backdated.	Quarterly reports on the changes and impacts
3. Proposals ii) and iii) will be applied to new and change of financial circumstances assessments from 1 April 2020, but for existing service users they will be phased in over 2 years, with a 50% impact in each of 2020/21 and 2021/22	Quarterly reports on the changes and impacts
4. For proposal i) changes will be implemented following a three-month transition period	Quarterly reports on the changes and impacts
5. There will continue to be an appeals process for all Financial Assessments	Quarterly reports on the changes and impacts
6. We will consider making allowances or a more significant phasing of the introduction of new charges in exceptional circumstances where evidence of significant welfare / financial hardship impact is provided	Quarterly reports on the changes and impacts
7. Visiting Officers will visit clients who are assessed as being required to make a significantly increased contribution	Quarterly reports on the changes and impacts
8. Service users will continue to be signposted to organisations who can provide financial advice, support and information	Quarterly reports on the changes and impacts
9. The Financial Assessment and Care Charging Teams will work closely with social work teams and ensure that a care assessment review is triggered where appropriate	Quarterly reports on the changes and impacts

Action taken/to be taken	How will it be monitored?
If negative impacts remain, please provide an explanation below.	

Appendix One – Examples of Potential Changes

Example 1 – Doris – impacted by proposal i)

Doris - an example of someone who might have to pay more following the Annual Review

Doris is 82 years old and single.

Doris receives a State Pension of £136.93 per week. Doris has an occupational pension of £80.34 per week.

Doris also receives Pension Guarantee Credit and Severe Disablement Premium of £96.17 per week and the higher rate of Attendance Allowance.

Doris's care costs £350 a week.

Doris currently pays £133.11 a week for her care and was last assessed in 2016.

If our proposal went ahead, Doris would have to pay £156.49 a week for her care. That's £23.38 a week more.

	Old Assessment	New Assessment
Income		
- Pension	£126.50	£136.93
- Attendance Allowance	£82.30	£87.65
- Severe Disablement Premium & PGC	£90.95	£96.17
- Occupational Pension	£74.98	£80.34
	£374.73	£401.09
Disregards / allowances		
- DRE	£25.32	£26.65
- Attendance Allowance Night Care element	£27.30	£28.95
- MIG	£189.00	£189.00
	£241.62	£244.60
Contribution calculation	£133.11	£156.49
Contribution	£133.11	£156.49
Difference		£23.38

Example 2 – Eileen – impacted by proposal i)

Eileen is an example of someone who would pay less following the annual review as a result of a decrease in her tariff income¹ that derives from her reduced capital

Eileen is 89 and single.

She receives a pension of £195.60 and the higher rate of Attendance Allowance.

When she was last assessed in 2015, her capital was close to the upper threshold, but has now reduced and her tariff income will reduce accordingly.

	Old Assessment	New Assessment
Income		
- Pension	£183.25	£195.60
- Attendance Allowance	£82.30	£87.65
- Pension Savings Credit	£7.19	£9.30
- Tariff Income on £23,200	£36.00	£0.00
- Tariff Income on £16,900	£0.00	£11.00
	£308.74	£303.55
Disregards / allowances		
- DRE	£16.50	£18.40
- Night Care Allowance	£27.30	£28.95
- Pension Savings Credit	£7.19	£9.30
- MIG	£189.00	£189.00
	£239.99	£245.65
Contribution calculation	£68.75	£57.90
Contribution	£68.75	£57.90
Difference		-£10.85

¹ Where a person has assets between the lower (£14,250) and upper (£23,250) capital limits, tariff income will be applied. Tariff Income assumes that for every £250 of capital, or part thereof, a person is able to afford to contribute £1 per week towards the cost of their eligible care needs.

Example 3 – Mark – Impacted by proposals i) and ii)

Mark - an example of someone who might have to pay more following the Annual Review

Mark is 49 years old and single.

Mark gets Employment & Support Allowance of £194.30 per week

Mark gets the enhanced rate of PIP Daily Living Allowance but was previously awarded middle rate.

Mark also receives the higher rate of PIP Mobility of £61.20 per week

Mark's care costs £130 a week.

Mark pays £55.12 a week for his care and was last assessed in 2014.

If our proposal went ahead, Mark would have to pay £101.53 a week for his care in 2020/21. That's £46.41 a week more. When the second phase of the PIP proposals come forward in 2021/22, he would be required to pay a further £14.48 per week.

	Old Assessment	New Assessment 2020/21	New Assessment 2021/22
Income			
- Income Support now ESA	£159.55	£194.30	£194.30
- PIP Daily Living	£51.85	£87.65	£87.65
- PIP Mobility	£54.05	£61.20	£61.20
	£265.45	£343.15	£343.15
Disregards / allowances			
- DRE	£11.09	£14.49	£14.49
- PIP daily living enhanced element	£0.00	£14.48	£0.00
- PIP Mobility	£54.05	£61.20	£61.20
- MIG	£145.19	£151.45	£151.45
	£210.33	£241.62	£227.14
Contribution calculation	£55.12	£101.53	£116.01
Contribution	£55.12	£101.53	£116.01
Difference		£46.41	£14.48

Example 4 – Susan – not affected by proposals ii) or iii)

Susan - an example of someone who would see no change as a result of proposals ii) or iii)

Susan is 23 years old.

She gets Universal Credit.

She doesn't get the PIP daily living enhanced rate.

Susan's care costs £250 a week.

Now Susan doesn't pay anything for her care.

If our proposal went ahead, Susan would still have to pay nothing towards her care. That's because Susan will continue to have less money coming in than the amount that she can keep.

	Old Rules	New Rules	
Income			
- Universal Credit (including housing benefit)	£309.83	£309.83	
- PIP daily living element (standard rate)	£58.70	£58.70	
- PIP mobility (standard rate)	£23.20	£23.20	
	£391.73	£391.73	
Disregards / allowances			
- Housing Benefit element of UC	£253.23	£253.23	
- DRE	£20.00	£20.00	
- PIP mobility (standard rate)	£23.20	£23.20	
- MIG	£132.45	£132.45	*
	£428.88	£428.88	
Contribution calculation	-£37.15	-£37.15	
Contribution	0	0	
Difference		0	
<i>* Government's MIG for 18-24 in receipt of disability and enhanced disability premium</i>			

Example 5a – David – impacted by proposal ii)

David – an example of someone who might have to pay under the new rules that would not have previously had to pay

David is 35 years old and a **new service user**.

He gets the Employment & Support Allowance and enhanced rate of daily living PIP.

David's care costs £100 a week.

Under the old rules David would not contribute towards his care.

If our proposal went ahead, someone like David, with a new financial assessment, would pay £28.65 / week towards his care. That's because he would have more money coming in than the amount that he can keep.

	Old Rules	New Rules
Income		
- ESA	£112.45	£112.45
- PIP daily living	£87.65	£87.65
- PIP mobility	£61.20	£61.20
	£261.30	£261.30
Disregards / allowances		
- PIP enhanced	£28.95	£0.00
- PIP mobility	£61.20	£61.20
- DRE	£20.00	£20.00
- MIG	£151.45	£151.45
	£261.60	£232.65
Contribution calculation	-£0.30	£28.65
Contribution	£0.00	£28.65
Difference		£28.65
<i>* Government's MIG for single 25+ in receipt of disability and enhanced disability premium</i>		

Example 5b – David – impacted by proposal ii)

David – an example of someone who might have to pay under the new rules that would not have previously had to pay

David is 35 years old and an **existing service user**.

He gets the Employment & Support Allowance and enhanced rate of daily living PIP.

David's care costs £100 a week.

Under the old rules David would not contribute towards his care.

If our proposal went ahead, someone like David, with a new financial assessment, would pay £28.65 / week towards his care. That's because he would have more money coming in than the amount that he can keep. However, as an existing service user, the changes are implemented over two years, so that the increase in charge is £14.17 in year 1 and £14.48 in year 2.

	Old Rules	New Rules 2020/21	New Rules 2021/22	
Income				
- ESA	£112.45	£112.45	£112.45	
- PIP daily living	£87.65	£87.65	£87.65	
- PIP mobility	£61.20	£61.20	£61.20	
	£261.30	£261.30	£261.30	
Disregards / allowances				
- PIP enhanced	£28.95	£14.48	£0.00	
- PIP mobility	£61.20	£61.20	£61.20	
- DRE	£20.00	£20.00	£20.00	
- MIG	£151.45	£151.45	£151.45	*
	£261.60	£247.13	£232.65	
Contribution calculation	-£0.30	£14.17	£28.65	
Contribution	£0.00	£14.17	£28.65	
Difference		£14.17	£14.48	
<i>* Government's MIG for single 25+ in receipt of disability and enhanced disability premium</i>				

Example 6 – Kate – impacted by proposal ii)

Kate - an example of someone who might have to pay less

Kate is 50 years old and a new service user.

Kate gets the enhanced rate of daily living PIP.

Kate's care costs £200 a week.

Kate would pay £88.70 per week for her care under the current rules.

Kate also pays £40.00 per week for night care not supplied by North Somerset Council – this would have previously been considered under the PIP enhanced rate allowance, but only at a maximum of £28.95. Under the new rules, we would take this into account as Disability Related Expense at the full cost.

If our proposal went ahead, someone like Kate would have to pay £77.65 a week for her care.

That's £11.05 a week less than under the current rules.

	Old Rules	New Rules	
Income			
- ESA	£191.45	£191.45	
- PIP daily living (enhanced)	£87.65	£87.65	
	£279.10	£279.10	
Disregards / allowances			
- PIP enhanced	£28.95	£0.00	
- DRE	£10.00	£50.00 #	
- MIG	£151.45	£151.45 *	
	£190.40	£201.45	
Contribution calculation	£88.70	£77.65	
Contribution	£88.70	£77.65	
Difference		-£11.05	
<i>* Government's MIG for single 25+ in receipt of disability and enhanced disability premium</i>			
<i># now includes £40 night care allowance</i>			

Example 7 – Keith – impacted by proposal iii)

Keith - an example of someone who might have to pay less

Keith is 70 years old; his partner is Sylvia, who is 58 and does not work.

Keith gets a State Retirement Pension of £199.00 per week

Keith gets the enhanced rate of Attendance Allowance.

Sylvia does not receive any benefits.

Keith's care costs £200 a week.

Keith pays £58.70 a week for his care.

If our proposal went ahead, Keith would have to pay £0.00 a week for his care. That's £58.70 a week less.

	Old Rules	New Rules	
Income			
- Pension	£199.00	£199.00	
- Attendance Allowance	£87.65	£87.65	
	£286.65	£286.65	
Disregards / allowances			
- Attendance Allowance Night Care element	£28.95	£28.95	
- DRE	£10.00	£10.00	
- MIG	£189.00	£288.60 *	
	£227.95	£327.55	
Contribution calculation	£58.70	-£40.90	
Contribution	£58.70	£0.00	
Difference		-£58.70	
<i>* Government's MIG for couples x 2 as partner has no income</i>			

Example 8a – James – affected by proposals ii) and iii) NEW ASSESSMENT

James is 47 years old and lives with his partner in their own home. Someone like James, in receipt of a new financial assessment, would be affected by both proposals.

James would currently pay £41.87 per week towards the £200 per week cost of his care services. The balance of £158.13 is paid by North Somerset Council

Money James has coming in each week

- State Retirement Pension £191.45
- PIP daily living enhanced rate £87.65
- PIP mobility enhanced rate £61.20

Money James spends that relates to his disability (known as disability related expenses)

James has a community alarm which costs £5.28 each week, cleaning expenses £10.00 and a gardener, which costs £4 / week. We need to make sure James has £19.28 per week to pay for these expenses.

Money James needs for food and bills

The government says that James must be left with a minimum amount from his income for living expenses and this is called the Minimum Income Guarantee (MIG). We currently allow everyone the Single Person's MIG. For someone of James' age, that is £151.45 a week.

Because of his social care assessment, James's care services cost £200 per week. We work out the amount James should pay towards his £200 cost of care as follows. Under the new rules, someone like James, when he received a new financial assessment, would pay £65.70 more for his care than under the current rules

	Old Rules	New Rules
Income		
- ESA	£191.45	£191.45
- PIP daily living	£87.65	£87.65
- PIP mobility	£61.20	£61.20
	£340.30	£340.30
Disregards / allowances		
- PIP enhanced	£28.95	£0.00
- PIP mobility	£61.20	£61.20
- DRE	£19.28	£19.28
- MIG	£151.45	£114.70
	£260.88	£195.18
Contribution Calculation	£79.42	£145.12
Actual Contribution	£79.42	£145.12
Difference		£65.70

Example 8b – James – affected by proposals ii) and iii) EXISTING SERVICE USER

James is 47 years old and lives with his partner in their own home. James, in receipt would be affected by both proposals.

James would currently pay £41.87 per week towards the £200 per week cost of his care services. The balance of £158.13 is paid by North Somerset Council

Money James has coming in each week

- State Retirement Pension £191.45
- PIP daily living enhanced rate £87.65
- PIP mobility enhanced rate £61.20

Money James spends that relates to his disability (known as disability related expenses)

James has a community alarm which costs £5.28 each week, cleaning expenses £10.00 and a gardener, which costs £4 / week. We need to make sure James has £19.28 per week to pay for these expenses.

Money James needs for food and bills

The government says that James must be left with a minimum amount from his income for living expenses and this is called the Minimum Income Guarantee (MIG). We currently allow everyone the Single Person's MIG. For someone of James' age, that is £151.45 a week.

Because of his social care assessment, James's care services cost £200 per week. We work out the amount James should pay towards his £200 cost of care as follows. Under the new rules, James would pay an additional £65.70 per week, but this would be phased in over 2 years.

	Old Rules	New Rules 2020/21	New Rules 2021/22
Income			
- ESA	£191.45	£191.45	£191.45
- PIP daily living	£87.65	£87.65	£87.65
- PIP mobility	£61.20	£61.20	£61.20
	£340.30	£340.30	£340.30
Disregards / allowances			
- PIP enhanced	£28.95	£14.18	£0.00
- PIP mobility	£61.20	£61.20	£61.20
- DRE	£19.28	£19.28	£19.28
- MIG	£151.45	£133.08	£114.70
	£260.88	£227.74	£195.18
Contribution Calculation	£79.42	£112.56	£145.12
Actual Contribution	£79.42	£112.56	£145.12
Difference		£33.14	£32.56

PCC1 - Completion of more Parenting Assessments in-house

1. The Proposal

Service area:	People & communities
Budget reference:	PCC1
Budget reduction proposal:	Completion of more Parenting Assessments in-house
Budget saving for this financial year:	£5,000

Description of the proposal:

Parenting Assessments are usually carried out by social workers from within the authority. If the demand is not manageable within the Local Authority, we use independent social workers. As we continue to reduce staff turnover and increase the skills and knowledge base of staff, we believe we can avoid having to outsource assessments in the future.

Summary of changes:

The Local Authority has strived to complete Parenting Assessment in house to prevent any external costs. The Local Authority will continue to strive to ensure all Parenting Assessment wherever possible are complete internally.

Is this a continuation of a previous medium-term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people				X		X	
People from different ethnic groups				X		X	
Men or women (including pregnant women or those on maternity leave)				X		X	
Lesbian, gay or bisexual people				X		X	
People on a low income				X		X	
People in particular age groups				X		X	
People in particular faith groups				X		X	
People who are married or in a civil partnership				X		X	
Transgender people				X		X	

Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:				x		x	
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3. Explanation of customer impact

It is not anticipated that there will be any customer impact as a result of these proposals.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily. none

5. Consolidation savings – please complete for medium or high impact areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 22nd October 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager: Jackie Milton, Shelly Caldwell, Christian Sweeney, Dawn Newton

Date: 18th October 2019

PCC2 - Children's Continuing Care / Health Contributions



1. The Proposal

Service area:	People & Communities
Budget reference:	PCC2
Budget reduction proposal:	Children's Continuing Care / Health Contributions
Budget saving for this financial year:	£125,000

Description of the proposal

For children/young people who are in North Somerset Care and have health diagnosed needs, social care approach health to contribute to that Individual child/young person's care. Health will contribute a percentage of the total of the care needs dependant on the specific health diagnosis/need of the child/young person.

Summary of changes:

In the year 2018/2019 the total contributions made by health were £197,000. In the period 2019/20 to date the current contributions from health are £119,000. There is no impact of the Health, social care financial agreement on the care of the child/young person.

Is this a continuation of a previous medium-term financial plan saving?
PCC6 – 2019/20 budget proposal

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people				X		X	
People from different ethnic groups				X		X	
Men or women (including pregnant women or those on maternity leave)				X		X	
Lesbian, gay or bisexual people				X		X	
People on a low income				X		X	
People in particular age groups				X		X	
People in particular faith groups				X		X	
People who are married or in a civil partnership				X		X	

Transgender people				x		x	
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:				x		x	

3. Explanation of customer impact

There is no expected impact on the level and provision of care given.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant, or filled permanently or temporarily.

5. Consolidation savings – please complete for medium or high impact areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 22nd November 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager: Christian Sweeny, Dawn Newton, Jackie Milton, Shelly Caldwell

Date: 18th November 2019

PCC3 – Children’s Residential Step Down

1. The Proposal

Service area:	People & Communities
Budget reference:	PCC3
Budget reduction proposal:	Children’s Residential Step Down
Budget saving for this financial year:	£200,000

Description of the proposal:

Reduction in spend for children who are Looked After by transitioning children from residential to foster care placements or returning them to care at home.

Summary of changes:

£200,00 savings to be delivered through a continued reduction in the use of residential placements for children looked after.

Reflecting the learning from the first year of the project this reduction is expected to be achieved through a combination of:

1. “stepping down” young people from high cost residential placements into in-house foster care provision
2. “stepping down” young people from high cost residential placements into lower cost Independent Fostering Agency provision
3. “stepping down” young people from high cost residential placements into family-based care

The moves are also intended to significantly improve outcomes for children & young people by mitigating the negative effects of being in long-term residential placements, often out of the local area.

These step-down moves also increase the likelihood of a successful move into independent living at age 18.

In all cases behaviour and risk management plan to be in place prior to child placement, reviewed fortnightly thereafter through multi professional meetings. Bespoke packages of support are designed and agreed before the step-down move and can include educational placements, therapeutic support and mentoring, alongside continuing casework support from NSC social care staff and other professionals as appropriate.

Post step-down, fortnightly multi-agency meetings are held to review support plan, update risk management plan and support the carer – these may decrease as behaviours from the child de-escalate

Foster carers also receive support from social care staff and though the offer of training on therapeutic parenting, adolescent behaviours and adolescent support groups.

During the pilot year five young people were successfully “stepped down” under scenarios 1 to 3 and the costs of a sixth placement significantly reduced under scenario 4.

Monitoring of long-term outcomes is ongoing.

Is this a continuation of a previous medium-term financial plan saving? **PCC4 2019/20 £500,000**

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people				X			
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income			X		X		X
People in particular age groups			X		X		X
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify: Foster Carers			X		X		X

3. Explanation of customer impact

As set out above, the saving is being delivered by taking steps that are designed to materially *improve* outcomes for children & young people, as evidenced by best practice in reducing the use of long-term, and expensive, residential care placements.

There is the potential for low impact on people on a low income, young people and foster carers, however the changes include an extensive support package as outlined above to mitigate against any risk of negative outcomes.

Children will only form part of the project where a step down to foster care is in their best interests. There will continue to be careful matching between the foster carer and child and a clear induction plan to ensure the best chance of success.

Children who are able to step down from Residential Placements to Foster Placements will experience care in a family environment. It will enable them to experience positive family structures, which will in turn increase their individual needs. In short it will role model the

potential for family life, a potential they cannot experience in a residential provision. It will also increasingly equip them for either returning to their own biological family or assist in skills to live as positively as possible with their peer community.

There is a risk step down might fail, we would of course plan for this not to happen but need to acknowledge the potential. This means unfortunately we might need to step back up to residential and this would have an impact on the young person. Placement breakdown is always a concern and something we try hard to prevent.

4. Staff equality impact summary

Are there any staffing implications for this proposal? Yes No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant, or filled permanently or temporarily.

5. Consolidation savings – please complete for medium or high impact areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 22nd October 2019

Is a further detailed equality impact assessment needed? Yes No

If 'yes', when will the further assessment be completed?

Service Manager: Dawn Newton
Date: 18th October 2019

PCC5 - Increase in number of In-house foster placements

1. The Proposal

Service area:	People & Communities
Budget reference:	PCC5
Budget reduction proposal:	Increase in number of In-house foster placements
Budget saving for this financial year:	£60,000

Description of the proposal:

Increasing foster care placements within North Somerset

Summary of changes:

North Somerset Fostering Service has employed a Marketing Officer to increase the number of Forester Carers within the Local Authority, thereby reducing the need to use Independent Foster Carer agency (IFA) this will decrease the cost in respect of IFA placements. At this time our aim is to increase by 20 fostering families per year. North Somerset are also about to launch the Mocking Bird project. This project will consist of a home hub carer with 2 beds available to offer significant support to 6 identified Foster Carer families, support like respite, in times of stress on organised occasions. The impact will be that both the young people and the carers will know where they can turn to when needed. This is a pilot and the plan is to be rolled out across all NS on a seven monthly basis following the success of the Mockingbird Pilot Programme.

Consideration is also being given to increasing the foster care allowances.

Is this a continuation of a previous medium-term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people				X		X	
People from different ethnic groups				X		X	
Men or women (including pregnant women or those on maternity leave)				X		X	
Lesbian, gay or bisexual people				X		X	
People on a low income				X		X	
People in particular age groups				X		X	
People in particular faith groups				X		X	
People who are married or in a civil partnership				X		X	
Transgender people				X		X	

Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify: Foster carers may be impacted			X			X	
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3. Explanation of customer impact –

Foster Carers – the proposed changes should provide a more secure base of support preventing break down of placement for both the child & foster carer with the option of that support going into adulthood.

The Marketing Officer will aim to increase the Foster Care provision within North Somerset Council at this time our targets are to increase by 20 families per year.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant, or filled permanently or temporarily.

5. Consolidation savings – please complete for medium or high impact areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 22nd November 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager: Dawn Newton

Date: 18th October 2019

PCH1 – Housing Efficiencies

1. The Proposal

Service area:	People and Communities - Housing
Budget reference:	PCH1
Budget reduction proposal:	Housing efficiencies
Budget saving for this financial year:	£55,000

Description of the proposal:

Reduction in staffing costs, increased income, savings resulting from ICT recommissioning and additional capitalisation of staffing costs for Disabled Facilities Grants

Summary of changes:

Reduction in staffing costs (£20,000) – deletion of vacant part-time (0.51 FTE) Housing Projects Officer post.

Increased income in the Housing Strategy and Development team through fee income received from Registered Providers for the services provided by the team in enabling new affordable housing.

Reduction in ICT costs through the recommissioning of the HomeChoice and Homelessness systems to consolidate from two platforms to one.

Additional capitalisation of staff time (Occupational Therapists) spent on relevant Disabled Facilities Grants activities.

Is this a continuation of a previous medium-term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X				X
People from different ethnic groups			X				X
Men or women (including pregnant women or those on maternity leave)			X				X
Lesbian, gay or bisexual people				X		X	
People on a low income			X				X

People in particular age groups			X				X
People in particular faith groups				X		X	
People who are married or in a civil partnership				X		X	
Transgender people				X		X	
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify: Potential negative impacts on health and well and carers			X				X

3. Explanation of customer impact

The Housing Strategy and Development team includes a project development and management function for the Housing Service. The reduction in the staffing levels will mean that the project development work programme will be revised and there will be a reduction in the scale of project development work that can be undertaken by this team. This change could adversely affect services for vulnerable people from a range of diverse groups in a proportionate way. To mitigate the risks as far as possible the work plan will be reprioritised and regularly monitored to ensure that priority service developments can be taken forward. In addition, the duties of the former Policy Officer post (part-time) were realigned when the Project Officer Post became vacant to give a stronger emphasis on project development and management (alongside policy and strategy development) and the post re-titled Senior Project Officer.

Income received from Registered Providers over and above the budgeted income figure is currently available to fund activities e.g.: feasibility studies which support affordable housing development which are normally repaid by the Provider if the development proceeds. The housing service provides a wide range of services for vulnerable people. If the income received were insufficient to meet the increased budgeted figure and also fund the required development activities and this is not mitigated in another way, there could be an adverse on the development of new affordable housing which could impact on the service affecting vulnerable people from a range of diverse groups in a proportionate way.

Capitalising the costs staff time (Occupational Therapists) spent on relevant Disabled Facilities Grants (DFGs) activities will reduce the amount of funding available for DFGs and/or social care capital programme priorities. There is a risk this could negatively impact on service uses particularly older and disabled people. However, in the light of the relatively small amounts involved (the total budget is circa £2.1m) and the significant increase in the DFG grant from Government over recent years the risk is considered low and the impact would be mitigated as far as possible by prioritising mandatory (DFG) expenditure.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

The vacant part time post (0.51 FTE) Project Officer post would be deleted.

If yes, how many posts could be affected? State whether they are current vacant, or filled permanently or temporarily – see above

5. Consolidation savings – please complete for medium or high impact areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality 22nd October 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager: Mark Hughes

Date 22nd October 2019

PH1 and PH2 - Review of public health 2019/20 growth funded projects and temporary use of public health reserve

1. The Proposal

Service area:	People and Communities - Public Health
Budget reference:	PH1 and PH2
Budget reduction proposal:	Review of public health 2019/20 growth funded projects Temporary use of public health reserve
Budget saving for this financial year:	PH1 £100,000 PH2 £180,000

Description of the proposal:

Annual Government reductions to the ring-fenced Public Health Grant have been in place since 2015/16 to 2019/20. The proposal is to deal with the impact of those Public Health Grant savings. Please note that the Public Health Grant allocation for 2020/21 has not yet been confirmed. It may include an increase in funding, but a cautionary approach has been adopted using last year's allocation as a projection.

Summary of changes:

- **Reduce 2019/20 growth** – The saving is £100,000 which means no additional investment in stop smoking services and reduced additional investment in health checks and family peer support services from the public health budget.
- **Use of public health reserve** – The use of this money (£180,000) will not have any impact on current service delivery but reserve use needs to be reduced on previous years to ensure it maintains a sustainable level until longer term savings can be achieved.

Is this a continuation of a previous medium-term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Please note a separate EIA is available for the savings on the Substance Misuse contract.

Impact Level Insert X into one box per row, for impact level and type.	Impact type				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			x				X
People from different ethnic groups			x				X
Men or women (including pregnant women or those on maternity leave)			x				X
Lesbian, gay or bisexual people			x				X

People on a low income			x				X
People in particular age groups			x				X
People in particular faith groups				x		x	
People who are married or in a civil partnership				x		x	
Transgender people				x		x	
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify: (<u>For substance misuse service</u>) Impact on carers. Impact on people suffering from mental or physical ill health. Impact on social excluded individuals.			x				x

3. Explanation of customer impact

- **Reduce 2019/20 growth** – This will mean that stop smoking services will remain at current levels. No existing service user will be disadvantaged, and access will continue to be provided in a range of community settings. Additional health checks will be provided in GP surgeries but to a lower extent than originally planned. Family peer support will be delivered through children’s centres through specialist training and resources but with less capacity to provide childcare support for participating parents.
- **Use of public health reserve** – The use of this money will not have any impact on current service delivery but reserve use needs to be reduced on previous years to ensure the reserve has a baseline sustainable level. Longer term savings from 2021/22 will be delivered through new commissioning arrangements for large contracts to rebase the budget and match future public health grant levels.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes No

5. Consolidation savings – please complete for medium or high impact areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
None identified	
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 7th November 2019

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager: Matt Lenny
Date: 17 November 2019

PH4 - Reduce expenditure on the drug and alcohol misuse contract

1. The Proposal

Service area:	Public Health
Budget reference:	Reduce expenditure on the drug and alcohol misuse contract
Budget reduction proposal:	PH4
Budget saving for this financial year:	£150,000

Description of the proposal:

Budget reduction of £150,000 to the annual contract value of the specialist Substance Misuse Service. The contract will run for up to seven years and the annual value will be £1,450,000

Summary of changes:

Recommissioning of the adult, community-based Substance Misuse Service (currently provided by Addaction) provides an opportunity to reduce this part of substance misuse spend by £150,000 to the annual budget for this service. The Substance Misuse Service is being recommissioned, with the current contract ending on 31 March 2020. Providing treatment and support programmes for problematic drug and/or alcohol users remains a priority and a new, similar service will be commissioned and procured. The new service will operate from 1 April 2020 for a maximum of seven years. The annual budget for this service will be £1,450,000.

We have ensured that equality and diversity issues are considered throughout the commissioning and procurement process in the following ways:

- **Preparation for the service specification development** (April-May 2019) - two online consultations were undertaken, one for service users and one for referring agencies. These asked about the experience of using local, specialist drug and alcohol services. Both sought views to about barriers to access for people with protected characteristics.
- **Specification development** (June to September 2019) - the specification was developed with input from many Council and CCG officers. This multi-disciplinary oversight enabled scrutiny of any equality issues. A stakeholder engagement event (31 July 2019) attended by professionals and service users, also invited comments to be made in relation to any issues of equality and diversity.
- **Tender documents** - two compulsory, standard questions relating to equality and diversity are contained in the Standard Questionnaire element of the tender documents. Also, the quality element of the tender documents requires the bidders to provide information on how they will ensure their service is accessible and a bespoke case study question requires bidders to evidence how they would respond to the needs of an individual based on their gender, age and parental status.
- **Mobilisation** – a three-month mobilisation period provides the Council with an opportunity to work with the provider to refine service delivery in response to the needs of people with protected characteristics.

The current stage of the procurement process is that a preferred bidder has been selected by a multi-disciplinary panel and given notice that, subject to council approval, we intend to award the contract. The planned Executive Decision to award the contract has been changed due to pre-election period, to an approval process agreed under the council's emergency powers, the

outcome of which is due on 11 December 2020. The preferred bid describes a one-off allocation for redundancy payments in year one. We have begun discussions with the provider about proposed redundancies, which may be subject to change. Details cannot be disclosed before the provider receives final approval from the council to award the contract and the staff have been advised. The provider has demonstrated good engagement with the commissioner to seek to mitigate the impact of any staff capacity reductions.

The provider has committed to deliver a comprehensive range and distribution of services to ensure needs-based access, including outreach delivery. Additionally, they have described how they intend to deliver services relating to digital and training requirements which we specified. As part of their bid assessment they also assured us that the standard of KPIs they intend to deliver will place them amongst high performing services compared to other substance misuse treatment services in England. The provider took full account of the capacity reductions required when drafting its bid and the details of the staff groups affected during the mobilisation phase of the new contract, will not detract from the commitments they have made to provide a high quality service which meets the substance misuse treatment and recovery needs of North Somerset residents, many of whom are vulnerable. Therefore, we consider the equality and diversity impacts arising from these savings to be low for the protected groups considered.

Is this a continuation of a previous medium-term financial plan saving?

Yes No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X				X
People from different ethnic groups				X		X	
Men or women (including pregnant women or those on maternity leave)			X				X
Lesbian, gay or bisexual people				X		X	
People on a low income			X				X
People in particular age groups			X				X
People in particular faith groups				X		X	
People who are married or in a civil partnership				X		X	
Transgender people				X			X
Other specific impacts, for example: carers, parents, impact on health and wellbeing.			X				X

3. Explanation of customer impact

There are no known differential impacts likely to be experienced by minority ethnic communities, people in particular faith groups, the LGBT community, transgender people and those married or in civil partnerships.

Negative service impacts arising from reduced service capacity are likely to disproportionately affect the following:

- people representing the demographic of current service users: unemployed, older, white men living in relatively deprived areas and
- people who have additional, complex needs including those with concurrent mental health problems, limited mobility and pregnant women

As a result of the mitigation described above, this impact has been assessed as low.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant, or filled permanently or temporarily.

5. Consolidation savings – please complete for medium or high impact areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Total	

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 7/11/19 and 2/12/19

Is a further detailed equality impact assessment needed?

Yes No

If 'yes', when will the further assessment be completed?

Service Manager: Lodee Dudley

Date: 9 December 2019