

## Equality Impact Analysis (EIA) Resident/Service User

Please refer to the guidance and initial Equality Impact Analysis before completing this form.

<b>1. Details of function, policy, procedure or service:</b>	
<b>Title of what is being assessed:</b> Changes to the Fairer Contributions Policy	
<b>Is it a new or revised function, policy, procedure or service?</b> Revised Policy	
<b>Department and Section:</b> Adults and Communities	
<b>Date assessment completed:</b> 14 February 2017	
<b>2. Names and roles of people completing this assessment:</b>	
<b>Lead officer</b>	Alan Mordue, Senior Project Manager
<b>Stakeholder groups</b>	<ul style="list-style-type: none"> <li>• People who use non-residential services including: <ul style="list-style-type: none"> <li>- Older people.</li> <li>- People with a learning disability.</li> <li>- People with a physical disability and/or sensory impairment.</li> <li>- People with mental health needs.</li> </ul> </li> <li>• Carers and families of people who use services</li> <li>• Providers of non-residential care services</li> <li>• Community and voluntary sector</li> <li>• All Barnet residents</li> <li>• Adults &amp; Communities Delivery Unit staff.</li> <li>• Adults and Safeguarding Committee members.</li> <li>• Council Members (all).</li> </ul>
<b>Representative from internal stakeholders</b>	Gary Johnson
<b>Representative from external stakeholders</b>	
<b>Delivery Unit Equalities Network rep</b>	n/a
<b>Performance Management rep</b>	Elissa Rospigliosi
<b>HR rep (for employment related issues)</b>	n/a
<b>3. Full description of function, policy, procedure or service:</b>	
<b>Why is it needed?</b>	
Charges to customers are a key element of the delivery of social care to adults and are significant because they are an essential component of the funding for social care and the means-tested basis of adult social care is based on the principle that individuals who have the resources to cover the cost of their own care should pay for that care so that the Council	

can use public money where it is most needed.

As a response to the continuing financial challenges facing Local Government from public spending reductions, increased costs of provision of care services and increasing demand, the Council is proposing to review charges and contributions. The Council's Fairer Contributions Policy has remained largely unchanged since it was introduced in 2011.

**What are the outcomes to be achieved?**

The outcome to be achieved is an updated structure of charges and contributions for adult social care services which is fair, based on ability to pay and proportionate to the level of service provided.

**Who is it aimed at?**

The policy is aimed at all people using non-residential services in Barnet.

**How have needs based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership and carers been taken account of?**

Revising charges and contributions does not change the principle that everyone receiving care services is treated equally and fairly within a common framework of ability to pay and affordability.

Everybody will still receive a financial assessment to assess what contribution they can afford. The method for doing this is set out in the Fairer Contributions Policy. Everyone will have a guaranteed minimum income which is designed to ensure that people only pay what they can afford. The twelve week public consultation was as comprehensive as possible and encouraged all stakeholders to provide input. It included a monitoring system to see how protected characteristics and other vulnerable groups were responding (and their feedback) as established in the Council's baselines, and if any sections were not responding.

**Identify the ways people can find out about and benefit from the proposals. Consider any processes they need to go through or criteria that we apply to determine eligibility.**

The public consultation included:

- Mailing a consultation pack to everyone who uses non-residential services to take part in the consultation. For people with learning difficulties this was in EasyRead format.
- Mailing a letter to the carers of everyone who uses non-residential services informing them of the consultation and that we would be sending a consultation pack to the person who uses services.
- Putting the proposals and an online survey on Engage Barnet, the Council's consultation hub.
- Hosting a set of drop-in sessions for anyone who wishes to attend, at various times and venues across the Borough.
- Sending an offer to present to meetings of the following community and voluntary sector organisations: Inclusion Barnet, Mencap, Age UK, Barnet Senior Assembly, Carers Centre, Mind, Healthwatch, Your Choice Barnet, Deaf Forum and the Middlesex Association for the Blind.

- A telephone helpline.
- A dedicated email address.
- Promotion of the on-line survey through various media.

**4. How are the equality strands affected?** Please detail the effects on each equality strand, and any mitigating action you have taken so far. Please include any relevant data. If you do not have relevant data please explain why.

Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?
1. Age	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<p><u>Generally.</u>                      People aged over 65 make up 61% of the users of Barnet's adult social services (3,196 out of 5,217). This is a significantly larger proportion than the 18% of people aged over 65 in the Barnet population as a whole (52,858 out of 287,447). This is to be expected as elderly frail residents are more likely to be in need of care and support.</p> <p>Depending on the specific changes some elderly residents in receipt of care and support services commissioned or provided by the Council will have to pay more for services and as a result some will be financially disproportionately adversely affected.</p>	<p>The Fairer Contributions Policy aims to ensure fairness and transparency when assessing contributions. Everyone will have a guaranteed minimum income designed to ensure that no one will be asked to pay more than they can afford</p> <p>A reviews and appeals procedure is in place in cases where people disagree with their financial assessment.</p> <p>As part of the implementation, everyone directly affected will be given a new financial assessment. This will include a benefits check.</p> <p>Any increases to contributions will be capped at £20 per week for nine weeks to allow people to plan and reorganise their finances.</p> <p>If the person does not intend to continue using a service as a result of the changes then they will be offered a strengths-based assessment.</p>
		<p><u>Raising current maximum rates for home care and day care</u>                      People aged over 65 make up 89% of those who use home and day care services and pay</p>	<p>The Fairer Contributions Policy ensures fairness and transparency when assessing contributions.</p> <p>A reviews and appeals</p>

Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?
		<p>full cost (170 out of 191). This is a significantly larger proportion than the 18% of people aged over 65 in the Barnet population as a whole (52,858 out of 287,447).</p> <p>People who use home and day care services and pay full cost for these services would have to contribute more towards the cost of their care. The size of the increase would depend on the type and the amount of care they have.</p>	<p>procedure is in place in cases where people disagree with their financial assessment.</p>
		<p><u>Changing personal allowances</u>                      People aged over 65 make up 61% of the users of people who use community care services in Barnet adult social services (1,805 out of 2,938). This is a significantly larger proportion than the 18% of people aged over 65 in the Barnet population as a whole (52,858 out of 287,447).</p> <p>Until last year when the gap was created, there wasn't any difference between Department of Health's guidance on benefits and the Department of Health's guidance on personal allowances. In future the gap might possibly increase, in which case some people may be worse off in future than if there had been no change to the Fairer Charging Policy. Unfortunately, it is not possible to know what the Department of Health may or may not do in the future.</p>	<p>The minimum income guarantee ensures that the protected levels of income after paying a contribution will not fall below current levels and/or the rate as set by the Department of Health whichever is the greater amount.</p> <p>If a resident already receives the higher amount their minimum income guarantee will not be reduced to current DofH levels but will remain static until the levels equalise</p>
		<p><u>Removing a partial disregard</u>                      People aged over 65 make up 56% of people in receipt of the higher rate of DLA/AA and using</p>	<p>The Fairer Contributions Policy ensures fairness and transparency when determining assessable</p>

Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?
		<p>community care services (478 out of 850). This is a significantly larger proportion than the 18% of people aged over 65 in the Barnet population as a whole (52,858 out of 287,447).</p> <p>The actual increase in their contributions will depend on their personal circumstances.</p> <p>This change will directly affect people whose overall assessable income has increased from a level below the old threshold to a level above the new threshold as a result of the change to the disregard. These people would have to contribute more towards the cost of the care.</p> <p>The age strand is disproportionately impacted by any change to the treatment of higher rate DLA/AA when assessing how much people can afford to contribute when compared to those who use community care services as a whole.</p>	<p>income.</p> <p>A reviews and appeals procedure is in place in cases where people disagree with their financial assessment.</p>
<p><b>2. Disability</b></p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p>	<p><u>Generally.</u></p> <p>The proposed changes are being applied to a group with a higher proportion of disabled people.</p> <p>25.6% of people who use community care services are registered disabled (751 out of 2,938). People with 'bad or very bad health' and 'people whose day-to-day activities are limited a lot' make up 10.4% of the</p>	<p>The Fairer Contributions Policy aims to ensure fairness and transparency when assessing contributions.</p> <p>Everyone will have a guaranteed minimum income designed to ensure that no one will be asked to pay more than they can afford</p> <p>A reviews and appeals procedure is in place in cases where people</p>

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		<p>Barnet population as a whole.<sup>1</sup></p> <p><u>Raising current maximum rates for home care and day care</u>                      People who are registered disabled make up about 26% of the group of people who pay full cost and use home care or day care services (49 out of 191). People living with disability make up about 10% of the Barnet population.                      Those paying full cost for services will be disproportionately adversely affected as they will have to pay more for the services</p>	<p>disagree with their financial assessment. As part of the implementation, everyone directly affected will be given a new financial assessment. This will include a benefits check. Any increases to contributions will be capped at £20 per week for two months to allow people to plan and reorganise their finances. If the person does not intend to continue using a service as a result of the changes then they will be offered a strengths-based assessment.</p> <p>The Fairer Contributions Policy ensures fairness and transparency when assessing contributions. A reviews and appeals procedure is in place in cases where people disagree with their financial assessment.</p>

<sup>1</sup> The Barnet Demographics Data Dashboard uses census data to profile health and disability under the following two categories: 'People with Bad or Very Bad Health' and 'People whose Day-to-day activities are limited a lot'. Only percentages are available. This is not directly comparable with the data held by the Council about people in the fairer contributions user base and therefore the following disability profile of people impacted by the proposals compared to the Barnet population as a whole is only indicative.

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		<p><u>Changing personal allowances</u>                      Until last year when the gap was created, there wasn't any difference between Department of Health's guidance on benefits and the Department of Health's guidance on personal allowances. In future the gap might possibly increase, in which case some people may be worse off in future than if there had been no change to the Fairer Charging Policy. Unfortunately, it is not possible to know what the Department of Health may or may not do in the future.</p>	<p>The minimum income guarantee ensures that the protected levels of income after paying a contribution will not fall below current levels and/or the rate as set by the Department of Health whichever is the greater amount.                      If a resident already receives the higher amount their minimum income guarantee will not be reduced to current DofH levels but will remain static until the levels equalise</p>
		<p><u>Removing a partial disregard</u>                      People who are registered disabled make up about 35% of people in receipt of the higher rate of DLA/AA and using community care services (294 out of 850). People living with disability make up about 10% of the Barnet population.                      Removing the partial disregard for Disability Living (care) and Attendance Allowance will affect people with a disability who need help with care costs.                      Approximately 500 people (out of 850) currently paying a contribution would be affected by removing the disregard.                      There is cohort of approximately 350 (out of 850) clients who currently do not pay a contribution under the current policy. The exact impact of this proposal on them is not known at present but it is likely that some of them would be assessed to pay a contribution</p>	<p>The Fairer Contributions Policy ensures fairness and transparency when determining assessable income.                      A reviews and appeals procedure is in place in cases where people disagree with their financial assessment.                      The difference between the higher and lower rate generally comprises the amount that is paid in respect of night-time care. Therefore, any night-time care not being provided/ commissioned by the Council should be claimed by the service user as a disability related expenditure, which if eligible, will be taken into account as allowable expenditure.</p>

Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?									
		<p>under the proposal.</p> <p>In future, PIP (standard and enhanced daily living component) would also be treated in full as income.</p> <p>If anybody has an income over the new threshold or have savings in excess of (£23,250 for 2016/17) then they would have to make a contribution towards their care.</p> <p>The actual increase in their contributions will depend on their personal circumstances.</p>										
<b>3. Gender reassignment</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	There is no available data on number of service users falling within this category but there are no identified disproportionate adverse impacts relating to gender reassignment or transgender people.	No disproportionate impact.									
<b>4. Pregnancy and maternity</b>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	There is no available data on number of service users falling within this category but there are no identified disproportionate adverse impacts relating to pregnancy and maternity.	No disproportionate impact.									
<b>5. Race/ Ethnicity</b>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<p><u>Generally.</u></p> <p>Overall people who use community care services have a broadly similar ethnicity profile when compared to the profile for the Barnet population as a whole. The breakdown of ethnicity is:</p> <table border="1" data-bbox="603 1845 1062 2045"> <thead> <tr> <th data-bbox="603 1845 794 1944">Ethnicity</th> <th data-bbox="794 1845 927 1944">Barnet Pop.</th> <th data-bbox="927 1845 1062 1944">Fairer Cont. SU</th> </tr> </thead> <tbody> <tr> <td data-bbox="603 1944 794 1989">White</td> <td data-bbox="794 1944 927 1989">64.2%</td> <td data-bbox="927 1944 1062 1989">65.4%</td> </tr> <tr> <td data-bbox="603 1989 794 2045">Asian/Asian British</td> <td data-bbox="794 1989 927 2045">16.2%</td> <td data-bbox="927 1989 1062 2045">15.2%</td> </tr> </tbody> </table>	Ethnicity	Barnet Pop.	Fairer Cont. SU	White	64.2%	65.4%	Asian/Asian British	16.2%	15.2%	The Fairer Contributions Policy aims to ensure fairness and transparency when assessing contributions. Everyone will have a guaranteed minimum income designed to ensure that no one will be asked to pay more than they can afford. A reviews and appeals procedure is in place in cases where people disagree with their
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		<p>disproportionate adverse impact on people of the black ethnic group in the same manner as with white service users for day care.</p> <p><u>Changing personal allowances</u>                      Until last year when the gap was created, there was no difference between Department of Health's guidance on benefits and the Department of Health's guidance on personal allowances.                      In future the gap might possible increase, in which case some people may be worse off in future than if there had been no change to the Fairer Charging Policy. Unfortunately, it is not possible to know what the Department of Health may or may not do in the future.</p> <p><u>Removing a partial disregard</u>                      Overall people in receipt of the higher rate of DLA/AA and using community care services have a similar ethnicity profile when compared to the Barnet population as a whole.</p> <table border="1" data-bbox="603 1563 1062 2033"> <thead> <tr> <th data-bbox="611 1574 794 1697">Ethnicity</th> <th data-bbox="799 1574 927 1697">Barnet Pop.</th> <th data-bbox="932 1574 1054 1697">DLA /AA - Higher Rate</th> </tr> </thead> <tbody> <tr> <td data-bbox="611 1704 794 1738">White</td> <td data-bbox="799 1704 927 1738">64.2%</td> <td data-bbox="932 1704 1054 1738">61.6%</td> </tr> <tr> <td data-bbox="611 1744 794 1812">Asian/Asian British</td> <td data-bbox="799 1744 927 1812">16.2%</td> <td data-bbox="932 1744 1054 1812">17.8%</td> </tr> <tr> <td data-bbox="611 1818 794 1886">Black/Black British</td> <td data-bbox="799 1818 927 1886">7.7%</td> <td data-bbox="932 1818 1054 1886">10.5%</td> </tr> <tr> <td data-bbox="611 1892 794 1960">Chinese or Other</td> <td data-bbox="799 1892 927 1960">7.2%</td> <td data-bbox="932 1892 1054 1960">7.3%</td> </tr> <tr> <td data-bbox="611 1966 794 2000">Mixed</td> <td data-bbox="799 1966 927 2000">4.8%</td> <td data-bbox="932 1966 1054 2000">1.8%</td> </tr> <tr> <td data-bbox="611 2007 794 2040">Not Known</td> <td data-bbox="799 2007 927 2040">0.0%</td> <td data-bbox="932 2007 1054 2040">1.1%</td> </tr> </tbody> </table>	Ethnicity	Barnet Pop.	DLA /AA - Higher Rate	White	64.2%	61.6%	Asian/Asian British	16.2%	17.8%	Black/Black British	7.7%	10.5%	Chinese or Other	7.2%	7.3%	Mixed	4.8%	1.8%	Not Known	0.0%	1.1%	<p></p> <p>The minimum income guarantee ensures that the protected levels of income after paying a contribution will not fall below current levels and/or the rate as set by the Department of Health whichever is the greater amount.                      If a resident already receives the higher amount their minimum income guarantee will not be reduced to current DofH levels but will remain static until the levels equalise.</p> <p>No disproportionate impact.</p>
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		<p>There is no disproportionate impact on any ethnic group by a change to the treatment of higher rate of DLA/AA when assessing how much people can afford to contribute when compared to the group of people who use community services as a whole.</p>	
<p><b>6. Religion or belief</b></p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p>	<p><u>Generally.</u></p> <p>The Jewish and Hindu faith groups make up 16% and 7% respectively of people who use community care services (471 and 214 out of 2,938) and 12% and 6% respectively of the Barnet population.</p> <p>The Christian, Atheist and Muslim faith groups make up 41%, 9% and 8% respectively of people who use community care services (1,192, 260 and 234 out of 2,938) and 49%, 16% and 13% respectively of the Barnet population.</p> <p>The Jewish and Hindu faith groups are over-represented and the Christian, Muslim and Atheist faith groups are under-represented in the group of people who use community care services as compared with the population of Barnet as a whole, though the Christian group makes up the largest group within the cohort of people using community care services.</p> <p>With those exceptions, people who use community care services (i.e. the Fairer Contributions user base) have a broadly similar religion profile when compared to the profile for all people who use adult social care services and the Barnet</p>	<p>The Fairer Contributions Policy aims to ensure fairness and transparency when assessing contributions. Everyone will have a guaranteed minimum income designed to ensure that no one will be asked to pay more than they can afford</p> <p>A reviews and appeals procedure is in place in cases where people disagree with their financial assessment.</p> <p>As part of the implementation, everyone directly affected will be given a new financial assessment. This will include a benefits check. Any increases to contributions will be capped at £20 per week for two months to allow people to plan and reorganise their finances.</p> <p>If the person does not intend to continue using a service as a result of the changes then they will be offered a strengths-based</p>

Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?
		<p>adult population as a whole. Any change to contributions for community care services will have a slight disproportionate adverse impact on the Jewish and Hindu faith groups.</p> <p><u>Raising current maximum rates for home care and day care</u> The Christian faith group makes up 61% of people who use home care services and pay full cost (99 out of 163) and 49% of the Barnet population. The Jewish, Atheist and Muslim faith groups make up 9%, 12% and 2% respectively of people who use home care services and pay full cost (15, 19 and 3 out of 163) and 12%, 16% and 13% respectively of the Barnet population. The Christian faith group is over-represented and therefore this change would have a disproportionate adverse impact on them. The Jewish and Muslim faith groups are under-represented as users of home care services. The Christian and Jewish faith groups make up 68% and 18% respectively of people who use day care services and pay full cost (19 and 5 out of 28) and 49% and 12% respectively of the Barnet population. The Atheist, Muslim and Hindu faith groups make up 4%, 7% and 0% respectively of people who use day care services and pay full cost (1, 2 and 0 out of 28) and 16%, 13% and 6% respectively of the Barnet population.</p>	<p>assessment.</p> <p>The Fairer Contributions Policy ensures fairness and transparency when determining assessable income. A reviews and appeals procedure is in place in cases where people disagree with their financial assessment.</p>

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		<p>The Christian and Jewish faith groups are over-represented and this change will have a disproportionate adverse impact on them in that they may have to pay more for services.</p>	
		<p><u>Changing personal allowances</u>            Until last year when the gap was created, there was no difference between Department of Health's guidance on benefits and the Department of Health's guidance on personal allowances.            In future the gap might possible increase, in which case some people may be worse off in future than if there had been no change to the Fairer Charging Policy. Unfortunately, it is not possible to know what the Department of Health may or may not do in the future.</p>	<p>The minimum income guarantee ensures that the protected levels of income after paying a contribution will not fall below current levels and/or the rate as set by the Department of Health whichever is the greater amount.            If a resident already receives the higher amount their minimum income guarantee will not be reduced to current DofH levels but will remain static until the levels equalise.</p>
		<p><u>Removing a partial disregard</u>            The Jewish and Hindu faith groups make up 17% and 9% respectively of people in receipt of the higher rate of DLA/AA and using community care services (148 and 75 out of 850) and 12% and 6% respectively of the Barnet population.            The Christian and Atheist faith groups make up 42% and 7% respectively of people in receipt of the higher rate of DLA/AA and using community care services (354 and 61 out of 850) and 49% and 16% respectively of the Barnet population.            The Jewish and Hindu faith groups are over-represented and removal of the partial disregard will have a slight</p>	<p>The Fairer Contributions Policy ensures fairness and transparency when determining assessable income.            A reviews and appeals procedure is in place in cases where people disagree with their financial assessment.</p>

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		disproportionate adverse impact on these faith groups	
7. Gender/ sex	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<p><u>Generally.</u>                      Females make up 60% of the users of Barnet’s adult social services. This is a larger proportion than the 52% of females in the Barnet population as a whole.</p> <p><u>Raising current maximum rates for home care and day care</u>                      Females make up 67% of those who use day care services and pay full cost (110 out of 163). This is a significantly larger</p>	<p>The Fairer Contributions Policy aims to ensure fairness and transparency when assessing contributions. Everyone will have a guaranteed minimum income designed to ensure that no one will be asked to pay more than they can afford</p> <p>A reviews and appeals procedure is in place in cases where people disagree with their financial assessment.</p> <p>As part of the implementation, everyone directly affected will be given a new financial assessment. This will include a benefits check.</p> <p>Any increases to contributions will be capped at £20 per week for two months to allow people to plan and reorganise their finances.</p> <p>If the person does not intend to continue using a service as a result of the changes then they will be offered a strengths-based assessment.</p> <p>The Fairer Contributions Policy ensures fairness and transparency when determining assessable income.</p> <p>A reviews and appeals</p>

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		<p>proportion than the 52% of females in the Barnet population as a whole.</p> <p>Females who use day care services and pay full cost for these services would have to contribute more towards the cost of their care. The size of the increase would depend on the type and the amount of care they have.</p> <p>Any change to contributions for day care services is likely to have a slight disproportionate adverse impact on females.</p> <p>The proportions of females and males who use home care services and pay full cost are about the same as in the Barnet population as a whole</p>	<p>procedure is in place in cases where people disagree with their financial assessment.</p>
		<p><u>Changing personal allowances</u></p> <p>Until last year when the gap was created, there was no difference between Department of Health's guidance on benefits and the Department of Health's guidance on personal allowances.</p> <p>In future the gap might possible increase, in which case some people may be worse off in future than if there had been no change to the Fairer Charging Policy. Unfortunately, it is not possible to know what the Department of Health may or may not do in the future.</p>	<p>The minimum income guarantee ensures that the protected levels of income after paying a contribution will not fall below current levels and/or the rate as set by the Department of Health whichever is the greater amount.</p> <p>If a resident already receives the higher amount their minimum income guarantee will not be reduced to current DofH levels but will remain static until the levels equalise.</p>
		<p><u>Removing a partial disregard</u></p> <p>Females make up 60% of those in receipt of higher rate DLA/AA and use community care services (513 out of 850). This is a larger proportion than the</p>	<p>The Fairer Contributions Policy ensures fairness and transparency when determining assessable income.</p> <p>A reviews and appeals</p>

Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?
		<p>52% of females in the Barnet population as a whole.</p> <p>The actual increase in their contributions will depend on their personal circumstances.</p> <p>This change will directly affect people whose overall assessable income has increased from a level below the old threshold to a level above the new threshold as a result of the change to the disregard.</p> <p>These people would have to contribute more towards the cost of the care.</p> <p>The gender strand is disproportionately impacted by any change to the treatment of higher rate DLA/AA when assessing how much people can afford to contribute when compared to those who use community care services as a whole and compared to the overall Barnet population.</p>	<p>procedure is in place in cases where people disagree with their financial assessment.</p>
<p><b>8. Sexual orientation</b></p>	<p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p>	<p>We have not identified any disproportionate impacts relating to sexual orientation.</p>	<p>No disproportionate impact.</p>
<p><b>9. Marital Status</b></p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p>	<p><u>Generally.</u></p> <p>People who are single, widowed or a surviving civil partner make up 62% of people who use community care services (1,813 out of 2,938). This is a larger proportion than the 36% of people who are single, widowed or a surviving civil partner in the Barnet population as a whole.</p> <p>Any increase in contributions for community care services is likely to have a disproportionate adverse impact on the single and widowed/surviving civil partner groups.</p>	<p>The Fairer Contributions Policy aims to ensure fairness and transparency when assessing contributions.</p> <p>Everyone will have a guaranteed minimum income designed to ensure that no one will be asked to pay more than they can afford</p> <p>A reviews and appeals procedure is in place in cases where people disagree with their financial assessment.</p>

Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?
		<p><u>Raising current maximum rates for home care and day care</u></p> <p>People who are widowed or a surviving civil partner make up 46% of people who use home care services and pay full cost (13 out of 28). This is a larger proportion than the 9% of people who are widowed or a surviving civil partner in the Barnet population as a whole.</p> <p>People who are single, widowed or a surviving civil partner make up 69% of people who use day care services and pay full cost (112 out of 163). This is a larger proportion than the 36% of people who are single, widowed or a surviving civil partner in the Barnet population as a whole.</p> <p>Any change to contributions for home care and day care services is likely to have a disproportionate adverse impact on the people who are single</p>	<p>As part of the implementation, everyone directly affected will be given a new financial assessment. This will include a benefits check.</p> <p>Any increases to contributions will be capped at £20 per week for two months to allow people to plan and reorganise their finances.</p> <p>If the person does not intend to continue using a service as a result of the changes then they will be offered a strengths-based assessment.</p> <p>The Fairer Contributions Policy ensures fairness and transparency when determining assessable income.</p> <p>A reviews and appeals procedure is in place in cases where people disagree with their financial assessment.</p>

Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?
		<p>and are widowed/surviving civil partner as they may be required to pay more.</p> <p><u>Changing personal allowances</u>                      Until last year when the gap was created, there was no difference between Department of Health's guidance on benefits and the Department of Health's guidance on personal allowances.                      In future the gap might possible increase, in which case some people may be worse off in future than if there had been no change to the Fairer Charging Policy. Unfortunately, it is not possible to know what the Department of Health may or may not do in the future.</p> <p><u>Removing a partial disregard</u>                      People who are single, widowed or a surviving civil partner make up 60% of people in receipt of the higher rate of DLA/AA and using community care services (511 out of 850). This is a larger proportion than the 36% of people who are single, widowed or a surviving civil partner in the Barnet population as a whole. People who are single, widowed or a surviving civil partner will be disproportionately affected by any change to the treatment of higher rate of DLA/AA when assessing how much people can afford to contribute.</p>	<p></p> <p>The minimum income guarantee ensures that the protected levels of income after paying a contribution will not fall below current levels and/or the rate as set by the Department of Health whichever is the greater amount.                      If a resident already receives the higher amount their minimum income guarantee will not be reduced to current DofH levels but will remain static until the levels equalise.</p> <p>The Fairer Contributions Policy ensures fairness and transparency when determining assessable income.                      A reviews and appeals procedure is in place in cases where people disagree with their financial assessment.</p>

Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?
<p><b>10. Other key groups?</b></p> <p><b>Carers</b></p> <p><b>People with mental health issues</b></p> <p><b>Some families and lone parents</b></p> <p><b>People with a low income</b></p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>	<p>Contributions for services are based on a person's ability to pay rather than the type of service received.</p> <p><b>Carer's</b> services are not charged for so are not directly affected by these proposals, However, if someone decides to stop receiving a care package because they do not wish to pay more for it then this could possibly impact their carer(s) who may have to give additional care and support.</p> <p><b>People with mental health issues:</b> Intermediate care and enablement support services for the first 6 weeks are not chargeable. But see also the Disability Strand for impact.</p> <p><b>Some families and lone parents</b> may also be affected if someone in the family decides to stop receiving a care package because they do not wish to pay more for it. This could possibly impact family members who may have to give additional care and support.</p> <p><b>People with an income above the guaranteed minimum will be</b> affected by these proposals if they use home care or day care services or are in receipt of the higher rate of DLA/AA and use community care services as they may have to pay a higher contribution..</p> <p>The minimum income guarantee ensures that the protected levels of income after paying a contribution will not fall below current levels and/or the rate as set by the Department of Health whichever is the greater amount.</p>	<p>If this situation occurs then a carer's assessment will be offered. Carer's services are not charged for in Barnet.</p>

Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?
<p><b>Unemployed people</b></p> <p><b>Young people not in employment education or training</b></p>	<p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p> <p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p>	<p>We have not identified any disproportionate impacts relating to any of the other key groups.</p>	

**5. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?**

Individuals who have to pay increased contributions, their families and carers may express lower satisfaction as there may be an increase in their caring role.

**6. How does the proposal enhance Barnet's reputation as a good place to work and live?**

The proposal is unlikely to enhance the Council's reputation as a good place to work and live.

The financial challenges facing the Council are well known and this proposal is in line with an increasing number of councils who have removed or who are consulting on removing the disregard. An informal email survey provided the following information:

Local authorities already counting the higher rate of DLA/AA as income and not allowing any disregard :

- Brighton and Hove
- Bristol
- Leeds
- North Yorks
- East Sussex
- West Berkshire
- Peterborough
- Kingston

Local authorities proposing to count the higher rate of DLA/AA as income in some circumstances:

- Sefton
- Sunderland
- Durham
- Surrey
- Windsor and Maidenhead
- Tameside
- Royal Greenwich
- York

Local authorities considering a change to count the higher rate of DLA/AA as income in some circumstances:

- Southend
- Nottinghamshire
- Croydon
- Herefordshire
- Haringey
- Hertfordshire

Barnet's Fairer Contributions Policy is open, visible, transparent and similar to those of neighbouring Boroughs.

**7. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?**

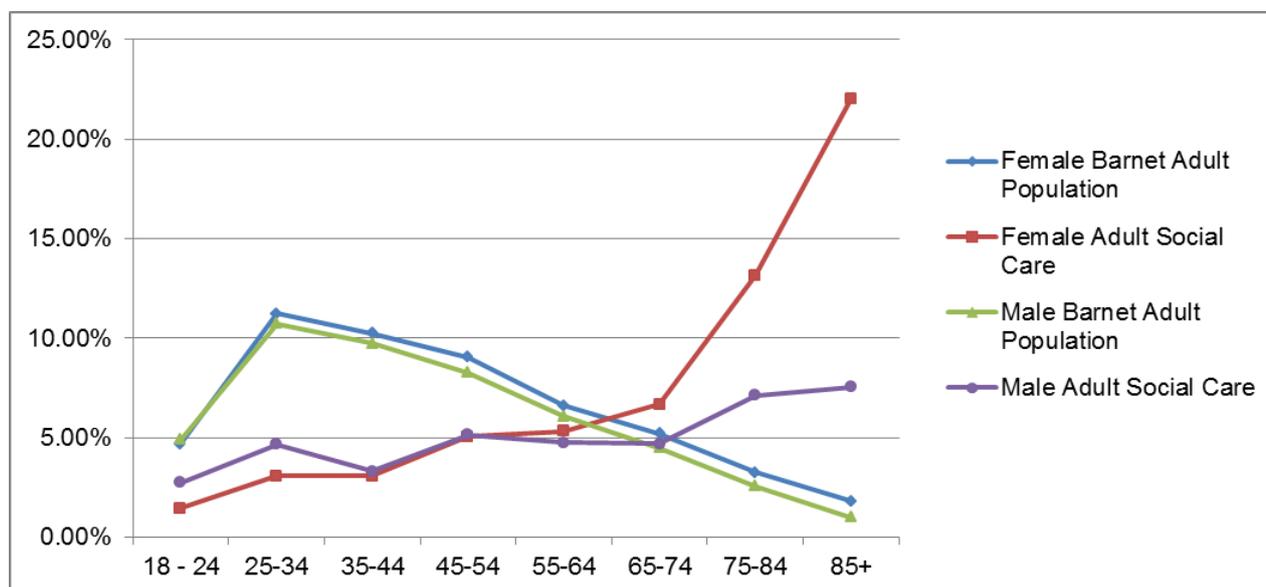
Barnet's Fairer Contributions Policy will still be based on ability to pay and affordability. Contributions for services are based on a person's ability to pay rather than the type of service received.

**8. Please outline what measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? Include information about the groups of people affected by this proposal. Include how frequently the monitoring will be conducted and who will be made aware of the analysis and outcomes? This should include key decision makers. Include these measures in the Equality Improvement Plan (section 16)**

## AGE/GENDER PROFILES

### Age/ gender profiles for Barnet’s population and people who use adult social care

Age Band	Female Barnet Adult Population	Female Adult Social Care	Male Barnet Adult Population	Male Adult Social Care
18 - 24	4.70%	1.48%	4.91%	2.76%
25-34	11.25%	3.09%	10.73%	4.68%
35-44	10.25%	3.09%	9.75%	3.34%
45-54	9.06%	5.06%	8.26%	5.16%
55-64	6.61%	5.35%	6.09%	4.75%
65-74	5.23%	6.69%	4.50%	4.70%
75-84	3.26%	13.17%	2.57%	7.13%
85+	1.81%	22.02%	1.03%	7.55%

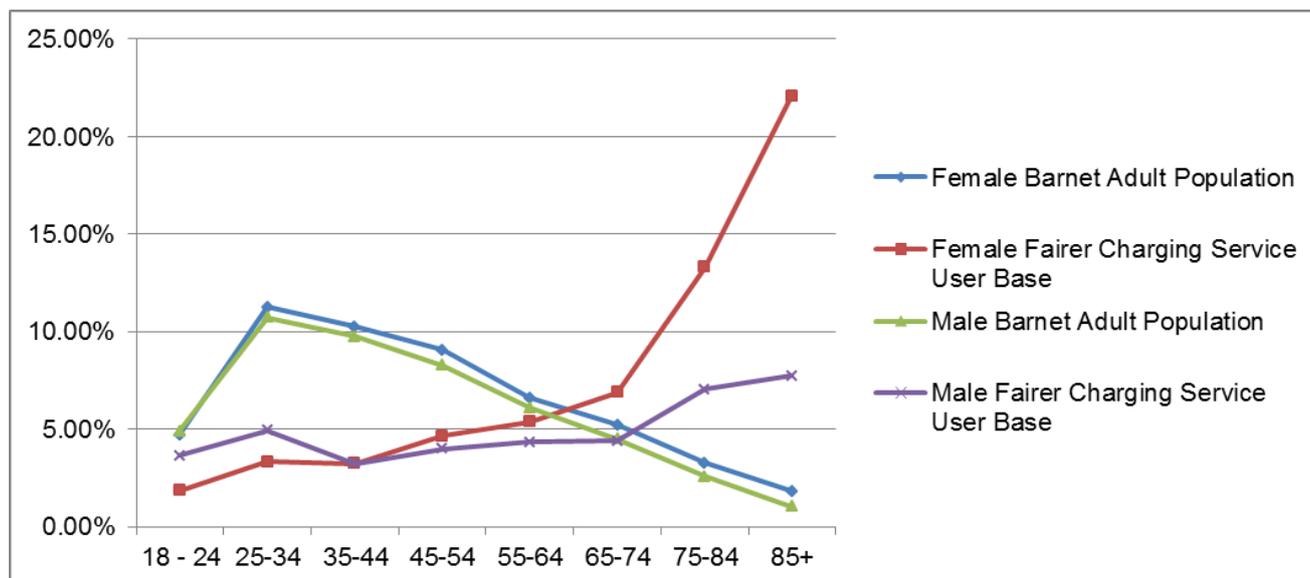


Because of the very nature of adult social care, people who use Barnet’s adult social services have a much larger proportion of older people than Barnet’s population as a whole.

As a result, any change to contributions for adult social care services is likely to have a disproportionate adverse impact on older people. However, the means-tested basis of adult social care is based on the principle that individuals who have the resources to cover the cost of their own care should pay for that care so that the Council can use public money where it is most needed.

**Age/ gender profiles for people who use community care services (Fairer Contributions user base)**

Age Band	Female Barnet Adult Population	Female Fairer Charging Service User Base	Male Barnet Adult Population	Male Fairer Charging Service User Base
18 - 24	4.70%	1.84%	4.91%	3.64%
25-34	11.25%	3.34%	10.73%	4.94%
35-44	10.25%	3.23%	9.75%	3.23%
45-54	9.06%	4.66%	8.26%	3.98%
55-64	6.61%	5.38%	6.09%	4.32%
65-74	5.23%	6.88%	4.50%	4.39%
75-84	3.26%	13.31%	2.57%	7.05%
85+	1.81%	22.09%	1.03%	7.73%



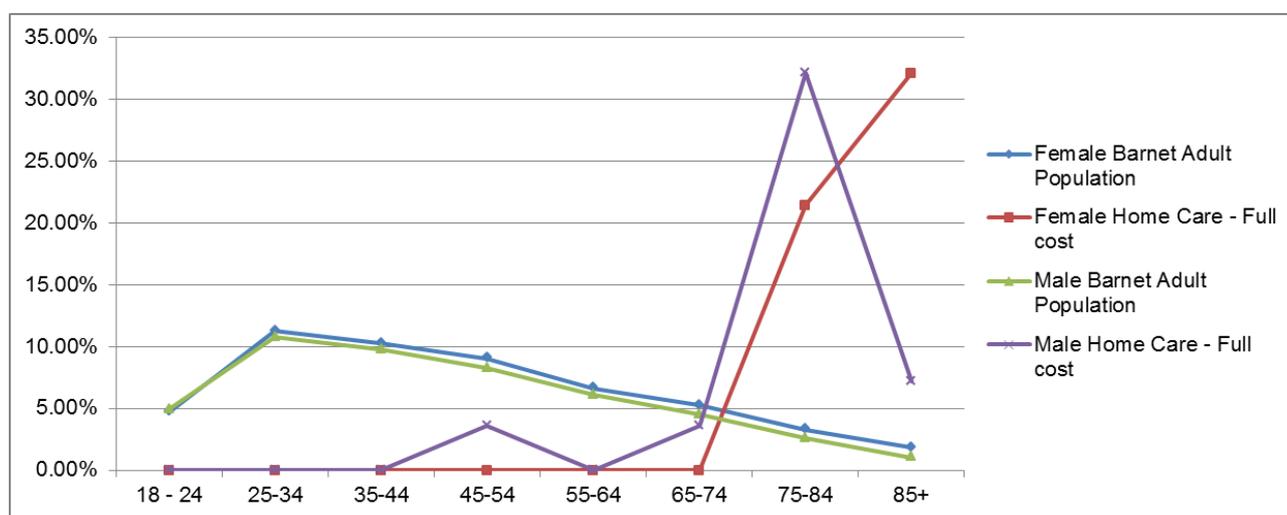
Females who use community care services (i.e. the Fairer Contributions user base) tend to be older whereas in the general population, there are a larger proportion of younger females.

Men who use community care services (i.e. the Fairer Contributions user base) are spread across all age groups but tend to be older whereas in the general population, there are a larger proportion of younger males.

In conclusion, when compared to the Barnet population as a whole, any change to contributions for community care services is likely to have a disproportionate adverse impact on older people and females more than men.

**Age/gender profiles of people who use home care services and pay full cost**

Age Band	Female Barnet Adult Population	Female Home Care - Full cost	Male Barnet Adult Population	Male Home Care - Full cost
18 - 24	4.70%	0.00%	4.91%	0.00%
25-34	11.25%	0.00%	10.73%	0.00%
35-44	10.25%	0.00%	9.75%	0.00%
45-54	9.06%	0.00%	8.26%	3.57%
55-64	6.61%	0.00%	6.09%	0.00%
65-74	5.23%	0.00%	4.50%	3.57%
75-84	3.26%	21.43%	2.57%	32.14%
85+	1.81%	32.14%	1.03%	7.14%



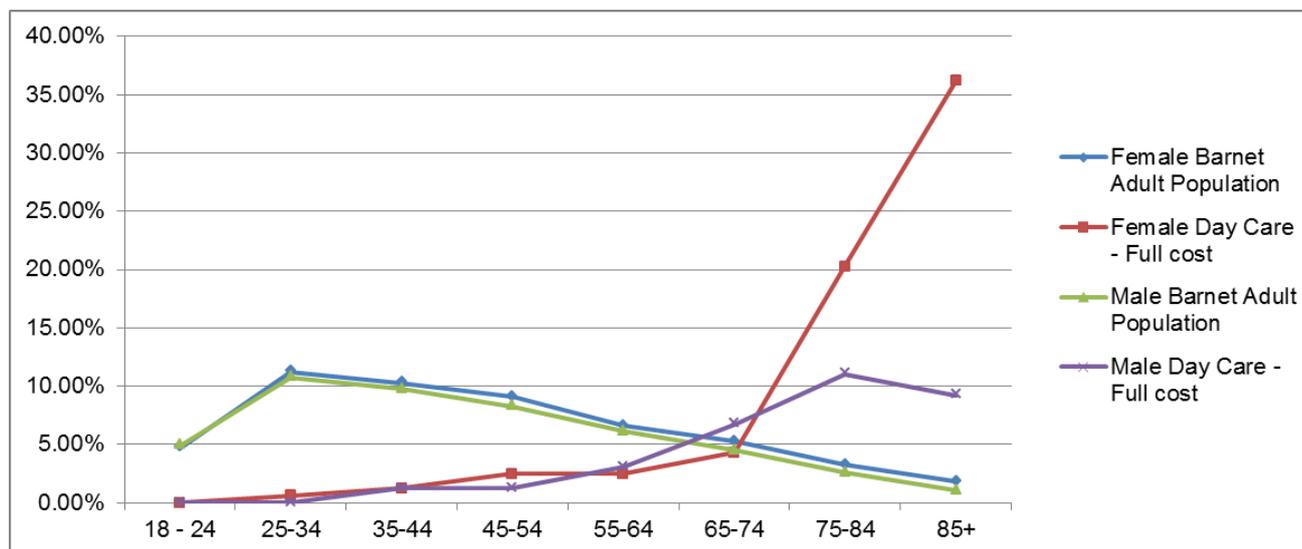
There is a significant difference between the age profile for females who use home care services and pay full cost and the age profile of females in the Barnet population as a whole. There is a greater proportion of females aged 65 and over using home care services and paying full cost.

Males between 75 and 84 are much more likely to use home care services than any other age range so any change to home care contributions is likely to have a disproportionate impact on this group.

In conclusion, when compared to those in the Barnet population as a whole, any change to contributions for home care services is likely to have a disproportionate adverse impact on males aged between 75 and 84 and females aged 65 and over.

**Age/gender profiles of people who use day care services and pay full cost**

Age Band	Female Barnet Adult Population	Female Day Care - Full cost	Male Barnet Adult Population	Male Day Care - Full cost
18 - 24	4.70%	0.00%	4.91%	0.00%
25-34	11.25%	0.61%	10.73%	0.00%
35-44	10.25%	1.23%	9.75%	1.23%
45-54	9.06%	2.45%	8.26%	1.23%
55-64	6.61%	2.45%	6.09%	3.07%
65-74	5.23%	4.29%	4.50%	6.75%
75-84	3.26%	20.25%	2.57%	11.04%
85+	1.81%	36.20%	1.03%	9.20%



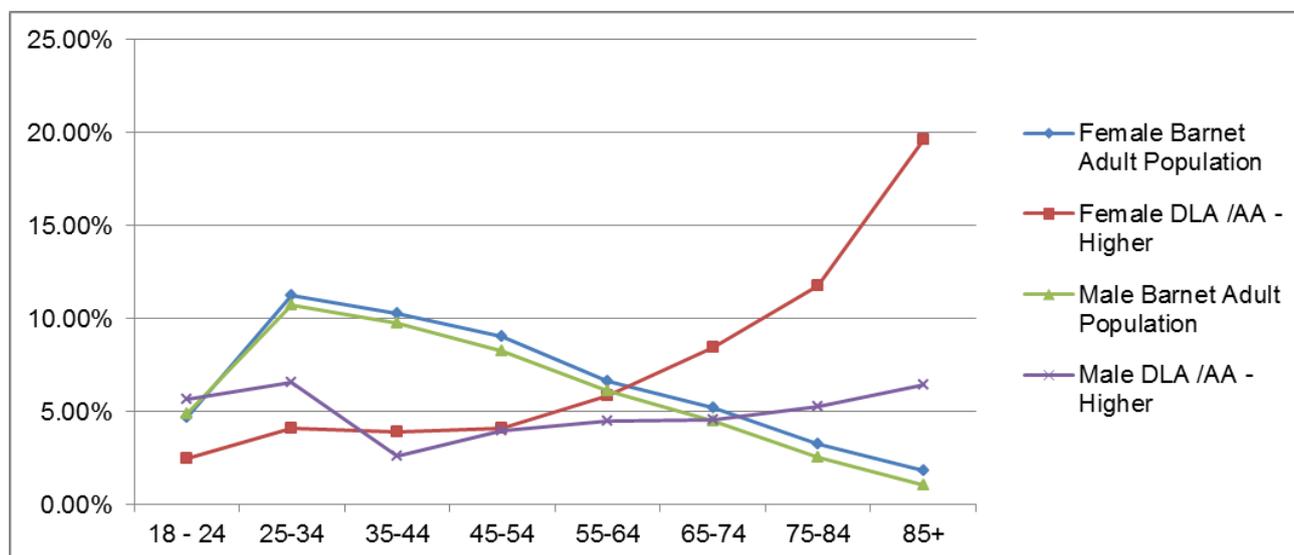
There is a significant difference between the age profile for females who use day care services and pay full cost and the age profile of females in the Barnet population as a whole. There is a greater proportion of females aged 65 and over using day care services and paying full cost.

There is a significant difference between the age profile for males who use day care services and pay full cost and the age profile of males in the Barnet population as a whole. There is a greater proportion of males aged 65 and over using day care services and paying full cost.

In conclusion, when compared to the Barnet population as a whole, any change to contributions for day care services is likely to have a disproportionate adverse impact on older people in general and females more than males.

**Age/gender profiles of people who receive higher DLA/AA and use community care services**

Age Band	Female Barnet Adult Population	Female DLA /AA - Higher	Male Barnet Adult Population	Male DLA /AA - Higher
18 - 24	4.70%	2.47%	4.91%	5.65%
25-34	11.25%	4.12%	10.73%	6.59%
35-44	10.25%	3.88%	9.75%	2.59%
45-54	9.06%	4.12%	8.26%	4.00%
55-64	6.61%	5.88%	6.09%	4.47%
65-74	5.23%	8.47%	4.50%	4.59%
75-84	3.26%	11.76%	2.57%	5.29%
85+	1.81%	19.65%	1.03%	6.47%



There is a significant difference between the age profile for females using community care services who receive the higher rate of DLA/AA and the age profile for females in the Barnet population as a whole. There is a greater proportion of females aged 55 and over receiving the Higher DLA/AA.

There is a significant difference between the age profile for males using community care services who receive the higher rate of DLA/AA and the age profile for males in the Barnet population as a whole. There is a greater proportion of males aged 65 and over receiving the higher rate DLA/AA.

In conclusion, when compared to the Barnet population as a whole, older people in general and females more than males are disproportionately affected by changes to the treatment of higher rate of DLA/AA, when assessing how much people can afford to contribute.

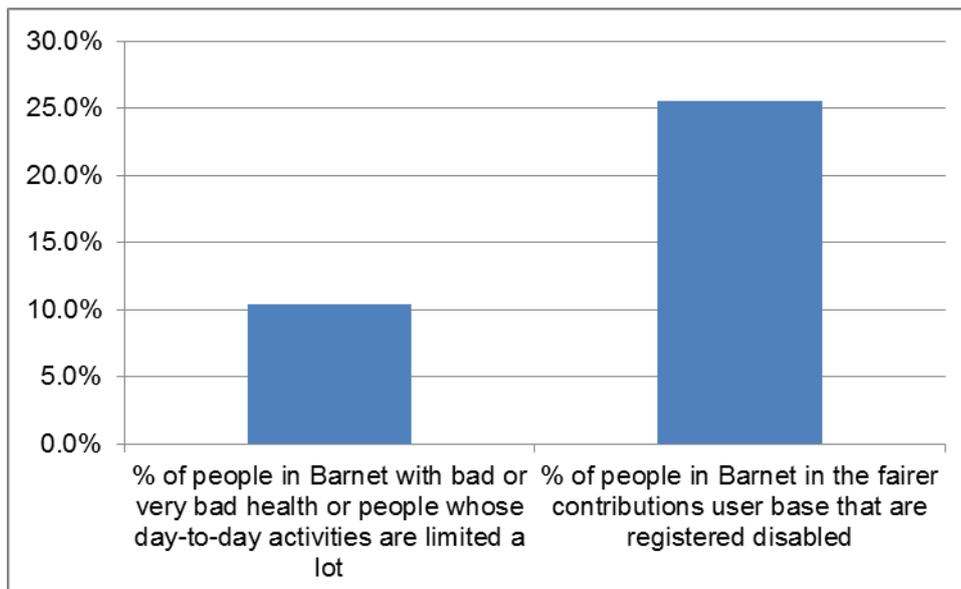
## DISABILITY PROFILES

The Barnet Demographics Data Dashboard uses census data to profile health and disability under the following two categories: ‘People with Bad or Very Bad Health’ and ‘People whose Day-to-day activities are limited a lot’.

This is not directly comparable with the data held by the Council about people in the fairer contributions user base and therefore the following disability profile of people impacted by the proposals compared to the Barnet population as a whole is only indicative.

### Disability profiles of people who use community care services in the fairer contributions user base

% of people in Barnet with bad or very bad health or people whose day-to-day activities are limited a lot	10.4%
% of people in Barnet in the fairer contributions user base that are registered disabled	25.6%

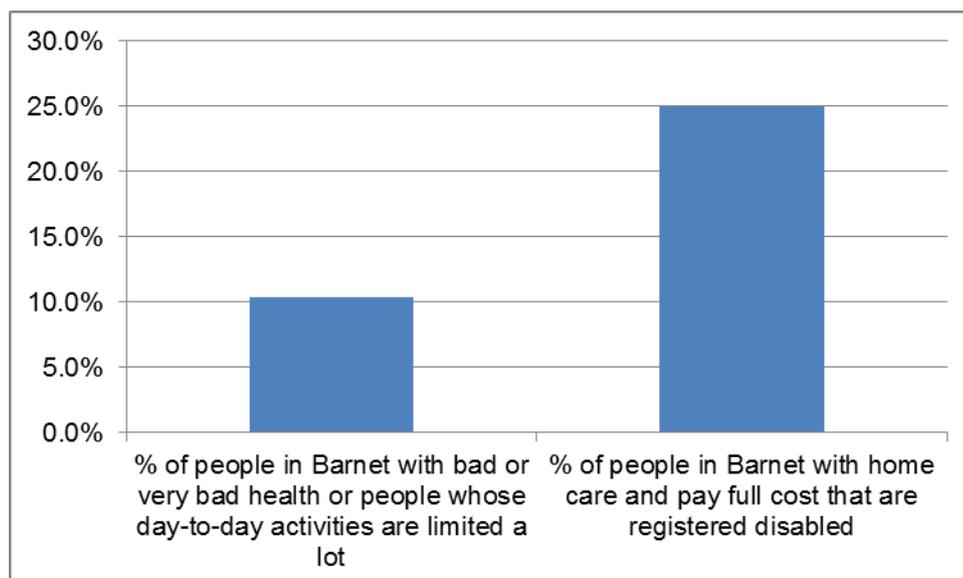


The proportion of people who use community care services (in the Barnet fairer contributions user base) is greater than the proportion of people in Barnet that have bad or very bad health or whose day to day activities are limited a lot.

In conclusion, when compared to the Barnet population as a whole, there is a disproportionate adverse impact on people living with disability by a change to contributions for community care services.

**Disability profiles of people who use home care services and pay full cost**

% of people in Barnet with bad or very bad health or people whose day-to-day activities are limited a lot	10.4%
% of people in Barnet with home care that are registered disabled	25.0%

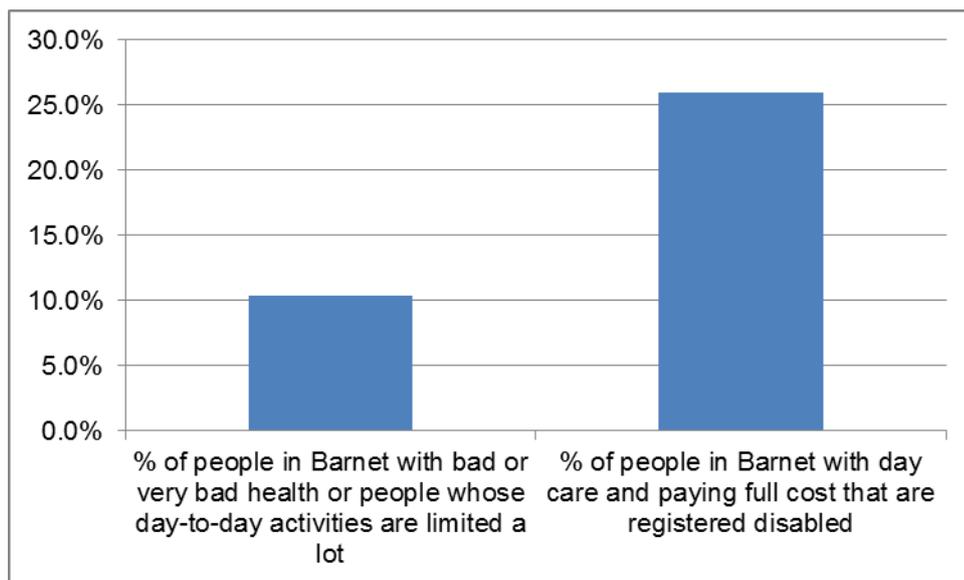


People who use home care services and pay full cost for the service are more likely to live with disability than the Barnet population as a whole.

In conclusion, when compared to the Barnet population as a whole, people living with disability are disproportionately adversely impacted by a change in the contribution for day care services.

**Disability profiles of people who use day care services and pay full cost**

% of people in Barnet with bad or very bad health or people whose day-to-day activities are limited a lot	10.4%
% of people in Barnet with day care and paying full cost that are registered disabled	26.0%

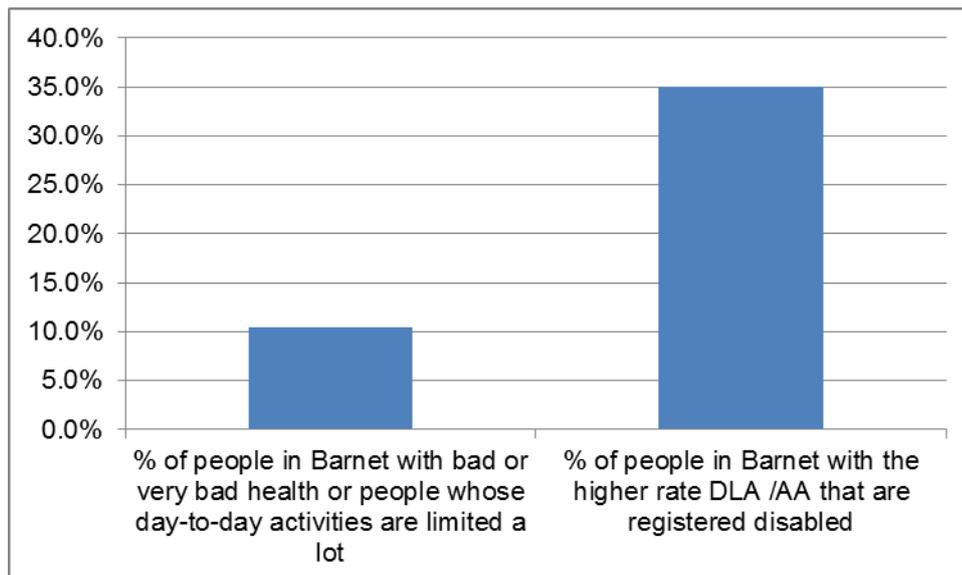


People who use day care services and pay full cost for the service are more likely to live with disability than the Barnet population as a whole.

In conclusion, when compared to the Barnet population as a whole, people living with disability are disproportionately adversely impacted by a change in the contribution for day care services.

**Disability profiles of people who receive the higher rate DLA/AA and use community care services**

Percentage of people in Barnet with bad or very bad health or people whose day-to-day activities are limited a lot	10.4%
Percentage of people in Barnet with the higher rate DLA /AA that are registered disabled and use community care services	35.0%



People who use community care services and receive the higher rate of DLA/AA are more likely to live with disability than the Barnet population as a whole.

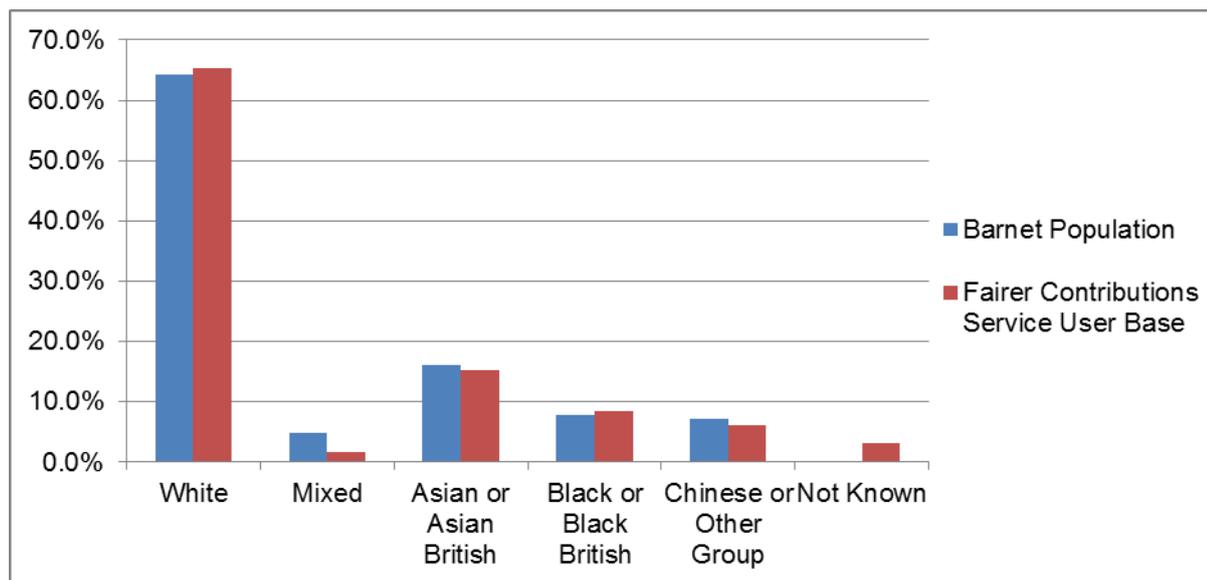
In conclusion, when compared to the Barnet population as a whole, there is a disproportionate adverse impact on people living with disability by a change to the treatment of higher rate of DLA/AA, when assessing how much people can afford to contribute.

## ETHNICITY PROFILES

Note that in order to provide comparable data sets, the data in these graphs for adult social care does not include people whose ethnicity is not recorded or who declined to provide information. Also, in order to best present the data graphically, the upper level of ethnicity has been used.

### Ethnicity profiles of Barnet’s population and the fairer contributions service user base

Ethnicity	Barnet Population	Fairer Contributions Service User Base	
White	64.2%	1921	65.4%
Mixed	4.8%	48	1.6%
Asian or Asian British	16.2%	447	15.2%
Black or Black British	7.7%	249	8.5%
Chinese or Other Group	7.2%	180	6.1%
Not Known	0.0%	93	3.2%

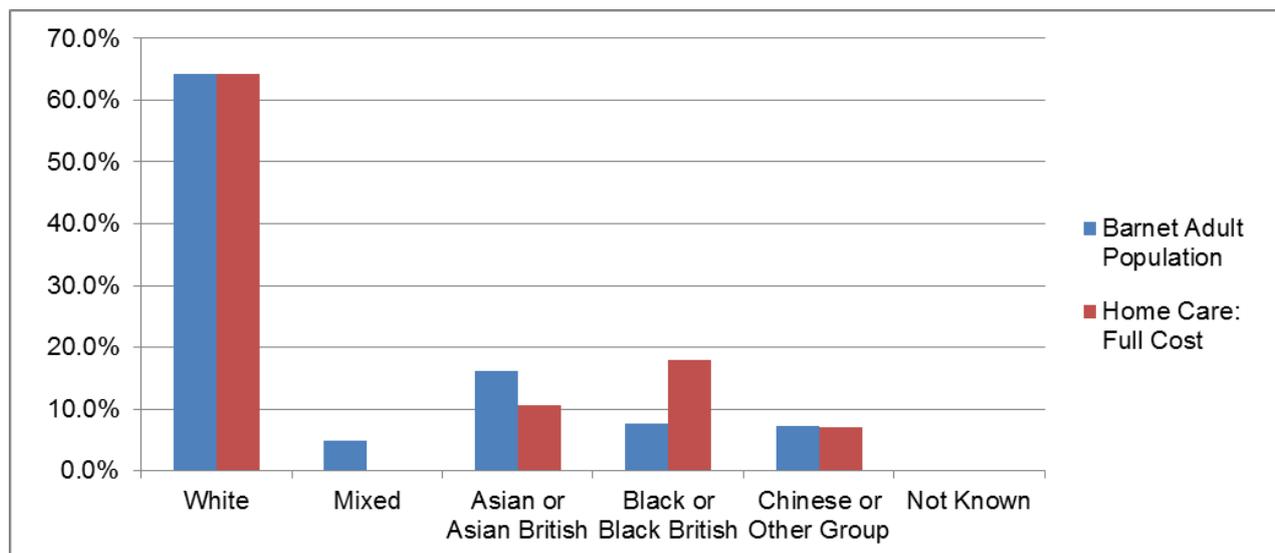


People who use community care services (i.e. the Fairer Contributions user base) have a broadly similar ethnicity profile when compared to the profile for the Barnet adult population as a whole however there are some disproportionate adverse impacts when looking at the individual proposals separately

**Ethnic profiles of people who use home care services**

Ethnicity	Barnet Adult Population	Home Care: Full Cost
White	64.2%	* 64.3%
Mixed	4.8%	0.0%
Asian or Asian British	16.2%	10.7%
Black or Black British	7.7%	17.9%
Chinese or Other Group	7.2%	7.1%
Not Known	0.0%	0.0%

\*Note: Numbers removed to prevent identification of individuals.



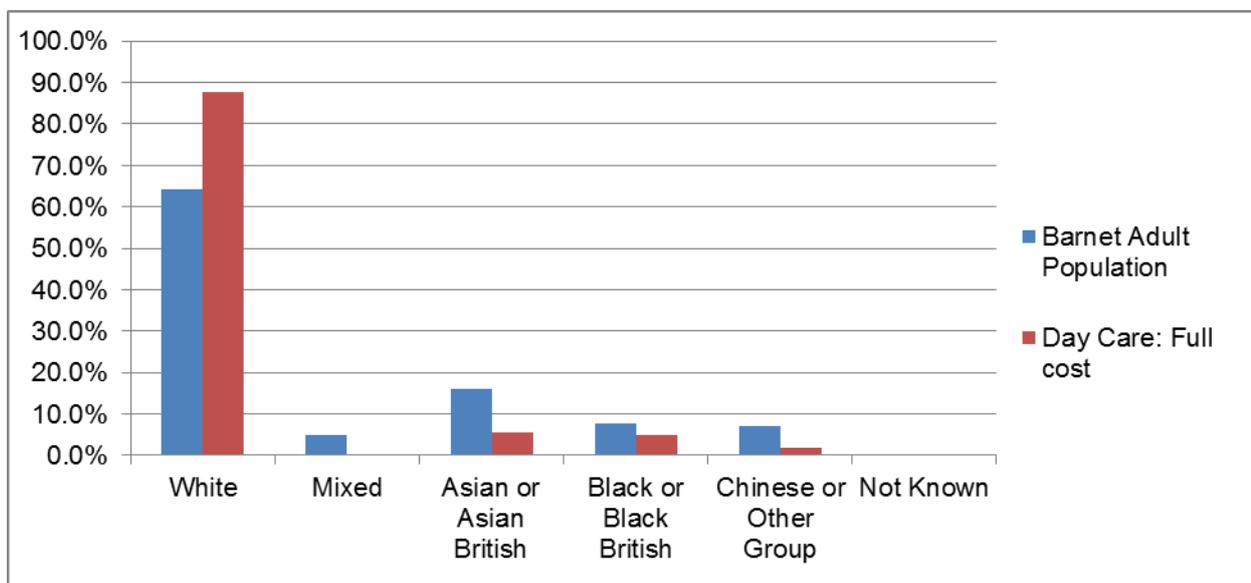
People from the Black ethnic group are over-represented in the group of people who use home care services when compared to the Barnet population as a whole.

In conclusion, when compared to the Barnet population as a whole, there would be a disproportionate adverse impact on people of the Black ethnic group by changing the contributions for day care.

**Ethnic profiles of people who use day care services**

Ethnicity	Barnet Adult Population	Day Care: Full cost
White	64.2%	* 87.7%
Mixed	4.8%	0.0%
Asian or Asian British	16.2%	5.5%
Black or Black British	7.7%	4.9%
Chinese or Other Group	7.2%	1.8%
Not Known	0.0%	0.0%

\*Note: Numbers removed to prevent identification of individuals.

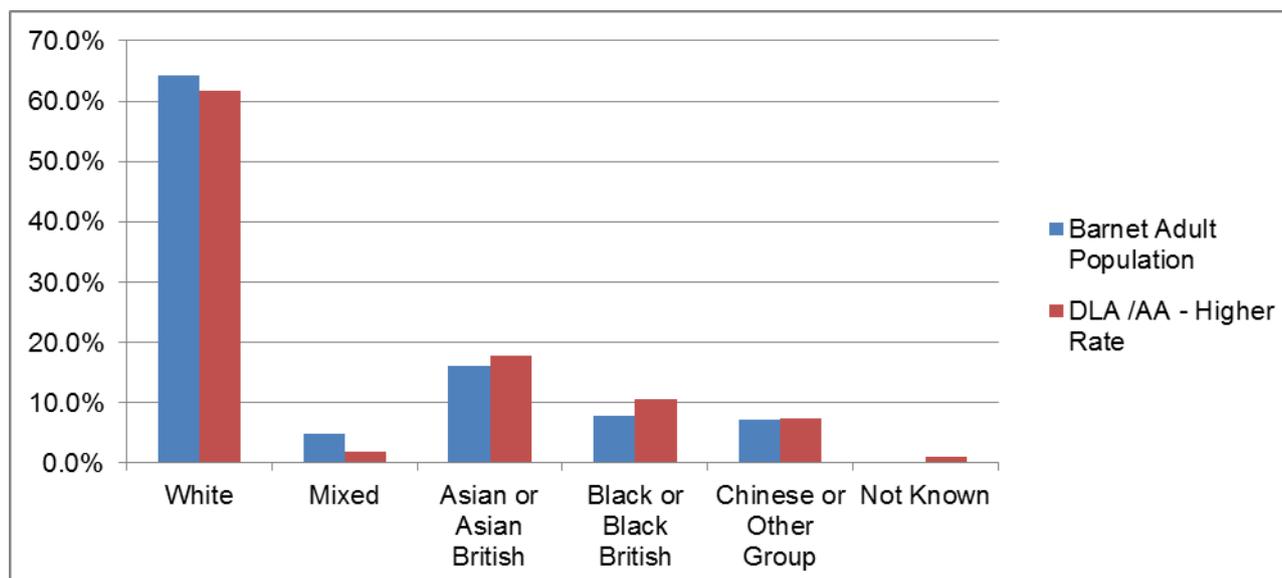


The white ethnic group is over-represented in the group of people who use day care services when compared to the Barnet population as a whole.

In conclusion, when compared to the Barnet population as a whole, there is a disproportionate adverse impact on the white ethnic group by changing the contributions for day care.

**Ethnicity profiles of people who receive higher DLA/AA and use community care services**

<b>Ethnicity</b>	<b>Barnet Adult Population</b>	<b>DLA /AA - Higher Rate</b>	
White	64.2%	524	61.6%
Mixed	4.8%	15	1.8%
Asian or Asian British	16.2%	151	17.8%
Black or Black British	7.7%	89	10.5%
Chinese or Other Group	7.2%	62	7.3%
Not Known	0.0%	9	1.1%



People who use community care services and receive the higher rate of DLA/AA have a similar ethnicity profile to the profile of the Barnet Population as a whole.

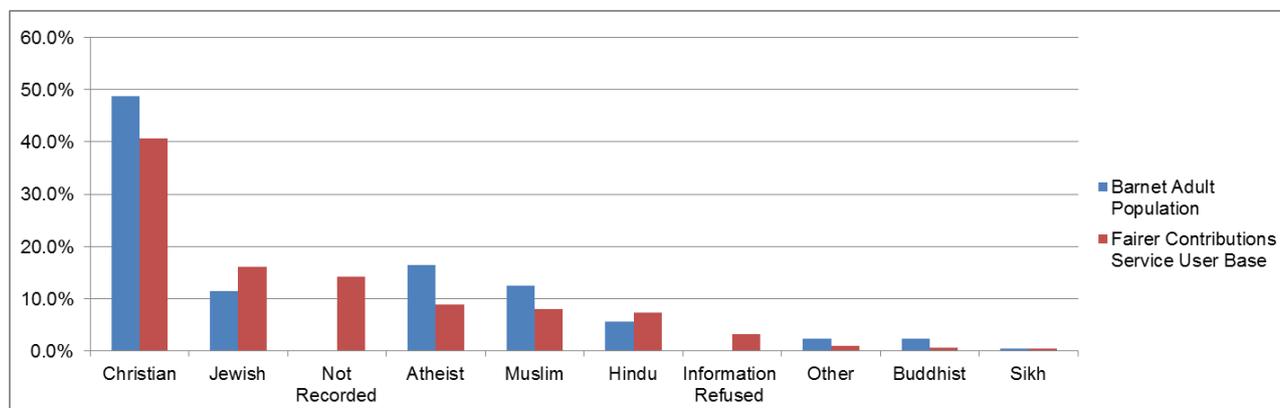
In conclusion, when compared to the Barnet population as a whole, there is no disproportionate impact on any ethnic group by a change to the treatment of higher rate of DLA/AA when assessing how much people can afford to contribute.

## RELIGION PROFILES

Note that in order to provide comparable data sets, the data used for the graphs for adult social care does not include people whose religion is not recorded or who declined to provide information.

### Religion profiles of Barnet’s population and the fairer contributions service user base

Religion	Barnet Adult Population	Fairer Contributions Service User Base	
Christian	48.8%	1,192	40.6%
Jewish	11.5%	471	16.0%
Not Recorded	0.0%	418	14.2%
Atheist	16.4%	260	8.8%
Muslim	12.5%	234	8.0%
Hindu	5.7%	214	7.3%
Information Refused	0.0%	92	3.1%
Other	2.4%	27	0.9%
Buddhist	2.3%	18	0.6%
Sikh	0.4%	12	0.4%



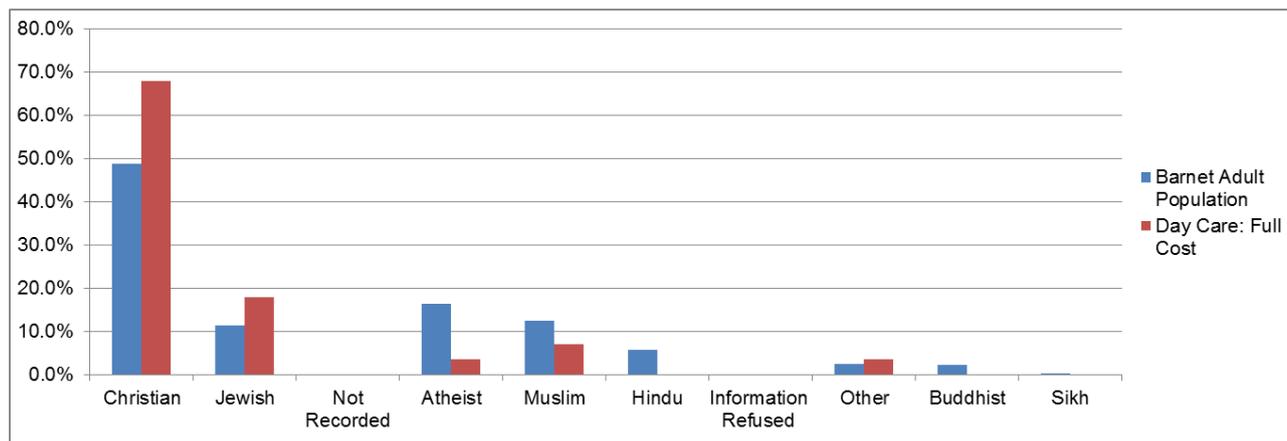
The Jewish and Hindu faiths are ver-represented and the Christian, Atheist and Muslim faiths are under-represented in the group of people who use community care services when compared to the Barnet population as a whole. With those exceptions, people who use community care services (i.e. the Fairer Contributions user base) have a broadly similar religion profile when compared to the profile for the Barnet adult population as a whole.

In conclusion, when compared to the Barnet population as a whole, there will be a disproportionate adverse impact on the Jewish and Hindu faith groups

**Religion profiles of people who use day care services**

Religion	Barnet Adult Population	Day Care: Full Cost
Christian	48.8%	* 67.9%
Jewish	11.5%	17.9%
Not Recorded	0.0%	0.0%
Atheist	16.4%	3.6%
Muslim	12.5%	7.1%
Hindu	5.7%	0.0%
Information Refused	0.0%	0.0%
Other	2.4%	3.6%
Buddhist	2.3%	0.0%
Sikh	0.4%	0.0%

\*Note: Numbers removed to prevent identification of any individuals.



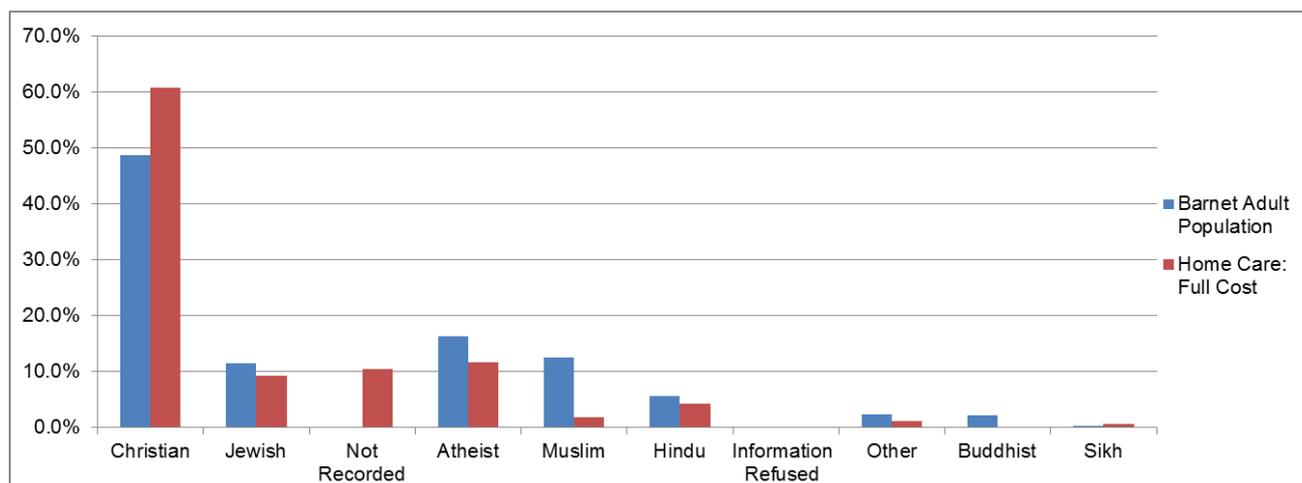
The Christian and Jewish faith groups are over-represented and the Atheist, Muslim and Hindu faith groups are under-represented in group of people who use day care services when compared to the Barnet population as a whole.

In conclusion, when compared to the Barnet population as a whole, there will be a disproportionate adverse impact on the Christian and Jewish faith groups and a disproportionate favourable impact on the Atheist, Muslim and Hindu faith groups by changing the contributions for day care

**Religion profiles of people who use home care services**

Religion	Barnet Adult Population	Home Care: Full Cost
Christian	48.8%	* 60.7%
Jewish	11.5%	9.2%
Not Recorded	0.0%	10.4%
Atheist	16.4%	11.7%
Muslim	12.5%	1.8%
Hindu	5.7%	4.3%
Information Refused	0.0%	0.0%
Other	2.4%	1.2%
Buddhist	2.3%	0.0%
Sikh	0.4%	0.6%

\*Note: Numbers removed to prevent identification of any individuals.



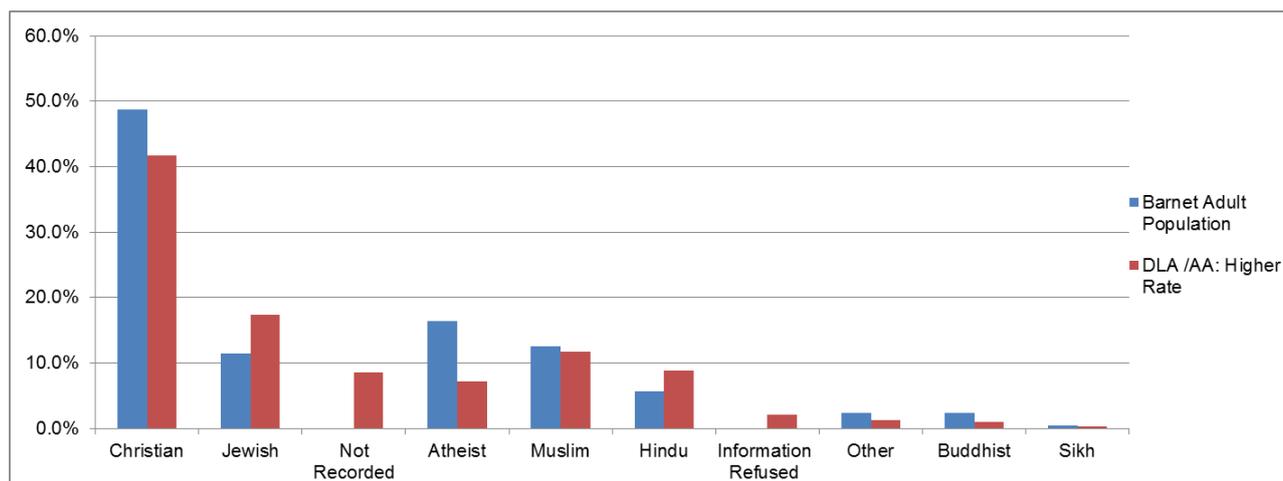
The Christian faith group is over-represented and the Jewish, Atheist and Muslim faith groups are under-represented as users of home care services when compared to the Barnet population as a whole.

In conclusion, when compared to the Barnet population as a whole, there will be a disproportionate adverse impact on the Christian faith group by changing the contributions for home care

**Religion profiles of people who receive higher DLA/AA and use community care services**

Religion	Barnet Adult Population	DLA /AA: Higher Rate
Christian	48.8%	* 41.6%
Jewish	11.5%	17.4%
Not Recorded	0.0%	8.6%
Atheist	16.4%	7.2%
Muslim	12.5%	11.8%
Hindu	5.7%	8.8%
Information Refused	0.0%	2.1%
Other	2.4%	1.3%
Buddhist	2.3%	0.9%
Sikh	0.4%	0.2%

\*Note: Numbers removed to prevent identification of individuals.



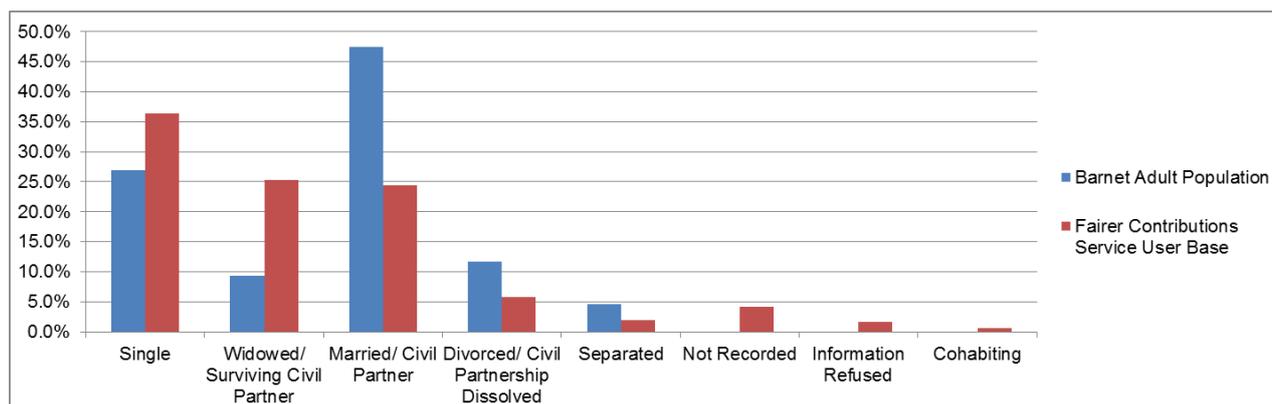
The Jewish and Hindu faiths are over-represented and the Christian and Atheist faiths are under-represented in the in the group of people who use community care services and receive higher rate of DLA/AA when compared to the Barnet population as a whole.

In conclusion, when compared to the Barnet population as a whole, there will be a disproportionate adverse impact on the Jewish and Hindu faith groups by a change to the treatment of higher rate of DLA/AA when assessing how much people can afford to contribute

## MARITAL STATUS PROFILES

### Marital status profiles for Barnet’s population and the fairer contributions service user base

Marital Status	Barnet Adult Population	Fairer Contributions Service User Base	
Single	27.0%	1,071	36.5%
Widowed/ Surviving Civil Partner	9.3%	742	25.3%
Married/ Civil Partner	47.5%	715	24.3%
Divorced/ Civil Partnership Dissolved	11.7%	168	5.7%
Separated	4.6%	55	1.9%
Not Recorded	0.0%	123	4.2%
Information Refused	0.0%	48	1.6%
Cohabiting	0.0%	16	0.5%



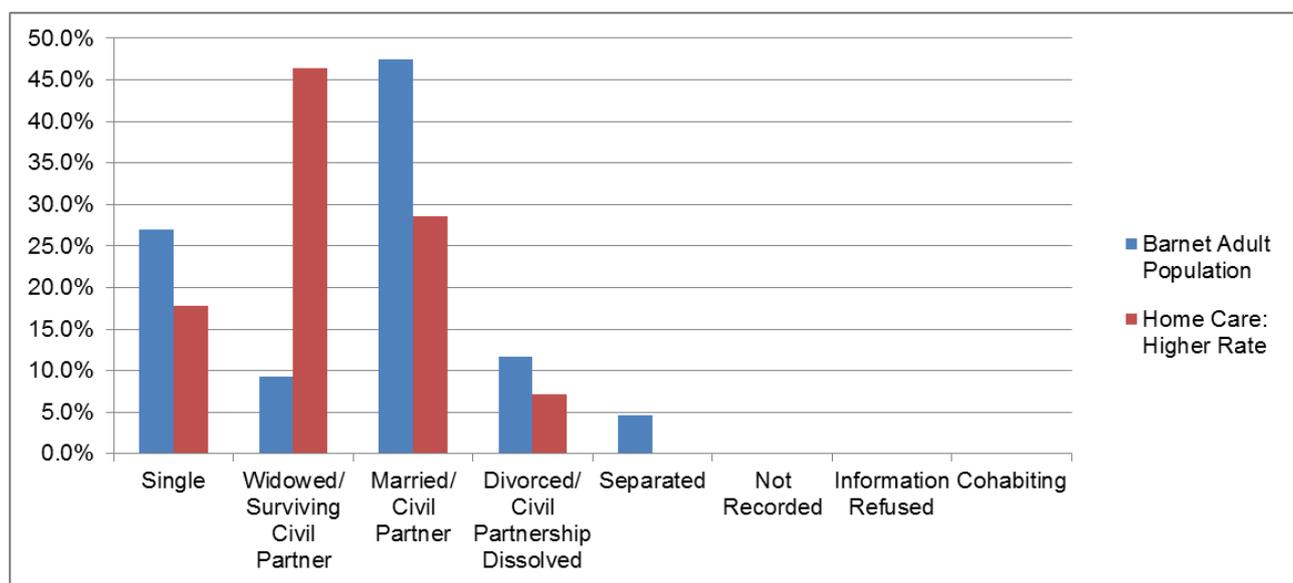
The fairer contributions service user base has a lower proportion of people who are married or a civil partner and divorced/civil partnership dissolved; and a higher proportion of single people and widowed/ surviving civil partner when compared to the Barnet population as a whole.

In conclusion, when compared to the Barnet population as a whole, there will be a disproportionate adverse impact on the single and widowed/ surviving civil partner groups by a change to contributions for community care services.

**Marital status profiles of people who use home care services**

<b>Marital Status</b>	<b>Barnet Adult Population</b>	<b>Home Care: Higher Rate</b>
Single	27.0%	* 17.9%
Widowed/ Surviving Civil Partner	9.3%	46.4%
Married/ Civil Partner	47.5%	28.6%
Divorced/ Civil Partnership Dissolved	11.7%	7.1%
Separated	4.6%	0.0%
Not Recorded	0.0%	0.0%
Information Refused	0.0%	0.0%
Cohabiting	0.0%	0.0%

\*Note: Numbers removed to prevent identification of individuals.



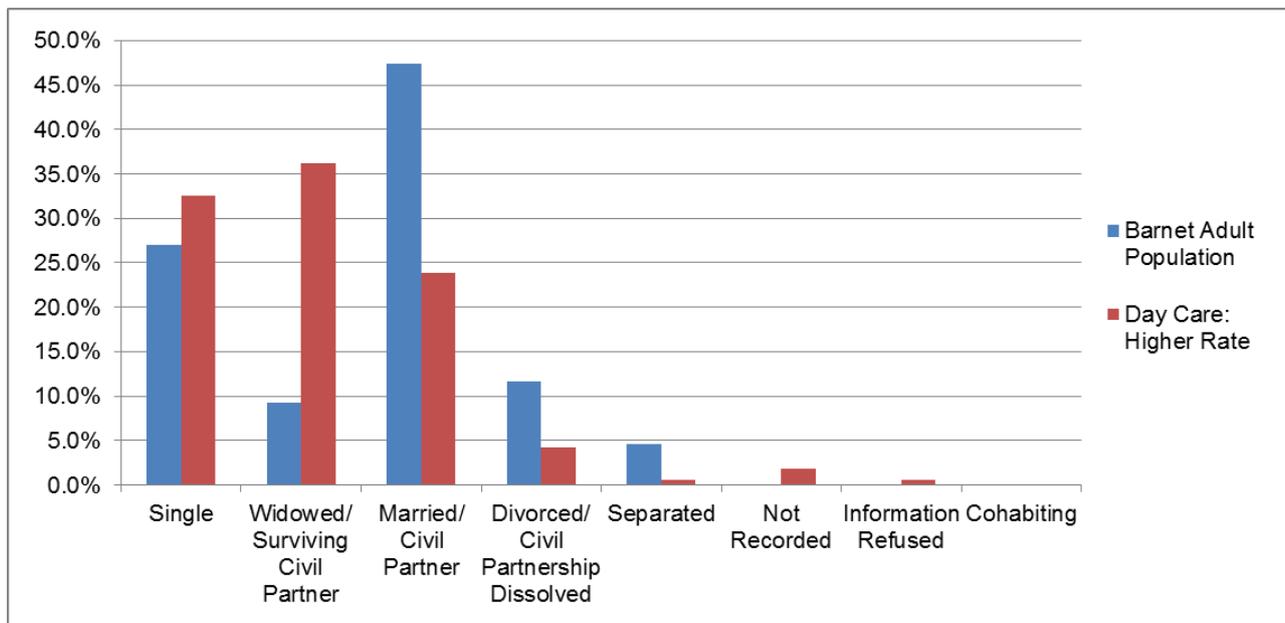
People that are widowed/ surviving civil partner and paying full cost for home care are over-represented; and people that are single, married/ civil partner, divorced/ civil partnership dissolved or separated are under-represented when compared to the Barnet population as a whole.

In conclusion, when compared to the Barnet population as a whole, there will be a disproportionate adverse impact on the group of people who are widowed/ surviving civil partner and a disproportionately favourable impact on the group of people who are single, married/ civil partner, divorced/ civil partnership dissolved or separated by a change to contributions for day care services

**Marital status profiles of people who use day care services and pay full cost**

Marital Status	Barnet Adult Population	Day Care: Higher Rate
Single	27.0%	* 32.5%
Widowed/ Surviving Civil Partner	9.3%	36.2%
Married/ Civil Partner	47.5%	23.9%
Divorced/ Civil Partnership Dissolved	11.7%	4.3%
Separated	4.6%	0.6%
Not Recorded	0.0%	1.8%
Information Refused	0.0%	0.6%
Cohabiting	0.0%	0.0%

\*Note: Numbers removed to prevent identification of individuals.



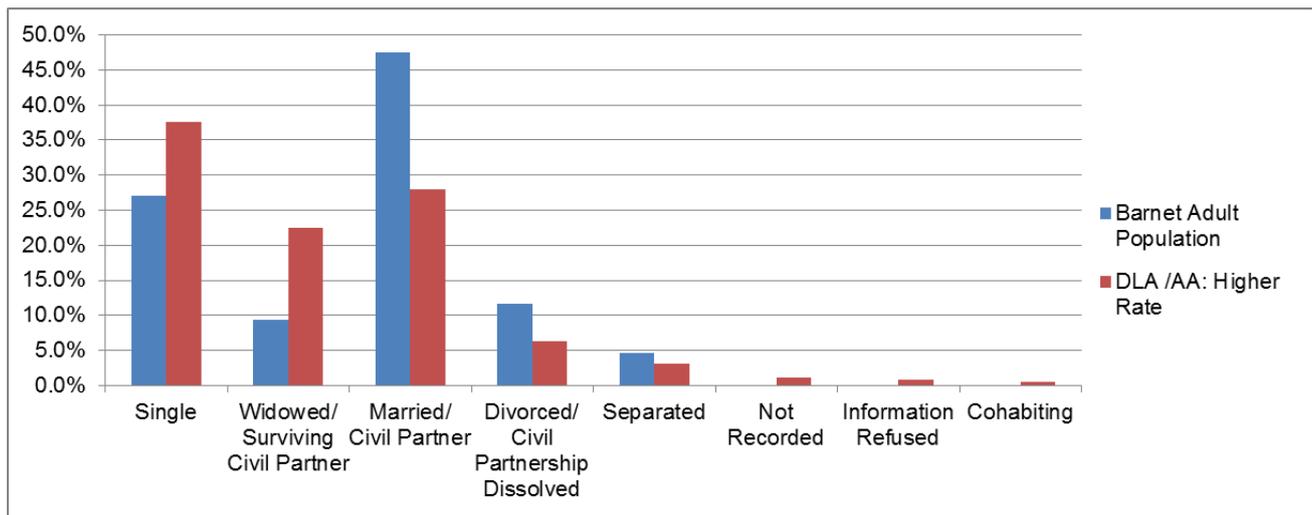
People that are single or widowed/ surviving civil partner and paying full cost are over-represented; and people that are married/ civil partner, divorced/ civil partnership dissolved or separated are under-represented when compared to the Barnet population as a whole.

In conclusion, when compared to the Barnet population as a whole, there will be a disproportionate adverse impact on the group of people who are single or widowed/ surviving civil partner by a change to contributions for day care services.

**Marital status profiles of people who receive higher DLA/AA and use community care services**

Marital Status	Barnet Adult Population	DLA /AA: Higher Rate
Single	27.0%	* 37.6%
Widowed/ Surviving Civil Partner	9.3%	22.5%
Married/ Civil Partner	47.5%	28.0%
Divorced/ Civil Partnership Dissolved	11.7%	6.2%
Separated	4.6%	3.2%
Not Recorded	0.0%	1.2%
Information Refused	0.0%	0.8%
Cohabiting	0.0%	0.5%

\*Note: Numbers removed to prevent identification of individuals.



Single and widowed/ surviving civil partner groups are over-represented and the married/ civil partner and divorced/ civil partnership dissolved are under-represented in the group of people who use community care services and receive the higher rate of DLA/AA when compared to the Barnet population as a whole

In conclusion, when compared the Barnet population as a whole, the single and widowed/ surviving civil partner groups will be disproportionately adversely affected by any change to the treatment of higher rate of DLA/AA when assessing how much people can afford to contribute

The equalities impact assessment has been reviewed following the consultation and no changes were considered necessary to the assessment before a final proposal is made.

Monitoring will be conducted immediately following the completion of the annual financial reviews which will apply the policy. This analysis will show the protected characteristics of those people impacted by increases in contributions.

Monitoring will be repeated the following year to determine if there has been any change to the protected characteristics of the impacted group.

**9. How will the new proposals enable the council to promote good relations between different communities?** *Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.*

The proposal is not anticipated to have an impact on community cohesion.

**10. How have employees and residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal?** *Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community. Please refer to Table 2*

The Council identified the groups of people affected by the proposal. The public consultation exercise included contacting everybody who uses services (including carers) and offered various routes (internet, email, phone) for them to contribute towards the consultation or seek advice about their own personal circumstances. The different routes were selected with regard to access for people living with a disability.

## Overall Assessment

11. Overall impact		
Positive Impact  <input type="checkbox"/>	Negative Impact or Impact Not Known <sup>2</sup>  <input checked="" type="checkbox"/>	No Impact  <input type="checkbox"/>
12. Scale of Impact		
Positive impact:  Minimal <input type="checkbox"/> Significant <input type="checkbox"/>	Negative Impact or Impact Not Known  Minimal <input checked="" type="checkbox"/> Significant <input type="checkbox"/>	

13. Outcome			
No change to decision  <input type="checkbox"/>	Adjustment needed to decision  <input type="checkbox"/>	Continue with decision ( <i>despite adverse impact / missed opportunity</i> )  <input checked="" type="checkbox"/>	If significant negative impact – Stop / rethink  <input type="checkbox"/>

14. Please give full explanation for how the overall assessment and outcome was decided.	
<p>The proposals have been developed following on from the process of assessing options to address the financial challenges facing the Council</p> <p>The data for this Equalities impact analysis came from the Barnet Demographics Data Dashboard (September 2016) and SWIFT, the Council's care management IT system and consultation .</p> <p>The Barnet Demographics Data Dashboard presents data from the following sources</p>	
Equalities Issue	Source
Age	GLA 2015, Borough-Preferred Option
Gender	GLA 2015, Borough-Preferred Option
Sexual Orientation	NOMIS, ONS 2011
Marriage / Civil Partnership	NOMIS, ONS 2011
English as an Additional Language	GLA Ward Profile (Jul 2014)*, ONS 2011
Ethnic Group	GLA Ward Profile (Jul 2014)*, ONS 2011 GLA 2012 Ethnic Group Projections and GLA 2013 Borough-Preferred Option
Religious Category	GLA Ward Profile (Jul 2014)*, ONS 2011 Percentage of Population by Religion, Borough -

	<a href="http://data.london.gov.uk/dataset/percentage-population-religion-borough/resource/abfb6175-f489-4c6e-add2-f4d323183224">http://data.london.gov.uk/dataset/percentage-population-religion-borough/resource/abfb6175-f489-4c6e-add2-f4d323183224</a>
Pregnancy and Maternity Rates	GLA Ward Profile (Jul 2014)*, ONS Vital Statistics Table 4 GLA Ward Profile (Jul 2014)*, ONS Vital Statistics Table 4
Carers	NOMIS, ONS 2011
Disability and Health	GLA Ward Profile (Jul 2014)*, ONS 2011 GLA Ward Profile (Jul 2014)*, HSCIC National Child Measurement Programme GLA Ward Profile (Jul 2014)*, Greenspace Information for Greater London, Ordnance Survey GLA Ward Profile (Jul 2014)*, ONS 2011 GLA Life Expectancy at Birth and Age 65 by Ward (GLA, 2010 - 2014)

### The proposed changes

There are three different types of proposed changes and each affects different groups of people:

- Increasing the maximum amount that someone using home care or day care services will pay as their assessed contribution.

This change will only affect people who already pay the maximum contribution towards their care services.

The amount that someone who pays the maximum contribution and uses home care services will pay would increase by £1.44 for every hour of home care they actually receive. This is provided to the council by the home care provider when billing for services.

The amount that someone who pays the maximum contribution and uses day care services will pay would increase to reflect the full charge made by their day care provider.

- Changing what is included as income when assessing how much someone can afford to contribute.

This change will only affect people who are in receipt of:

- a) the higher rate care component of Disability Living Allowance who do not have eligible night time care services
- b) the higher rate of Attendance Allowance who do not have eligible night time care services
- c) Personal Independence Payments.

An additional £27.20 (the difference between the higher rate and the middle rate of DLA and the difference between the higher rate and the lower rate of AA) will be treated as income when assessing how much the people described above can afford to contribute.

<sup>2</sup> 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

Exactly how much more they would be expected to contribute as a result of this specific change will depend on their total income. It would not exceed £27.20/week (2016/17 rates).

To gauge what other councils are doing in respect of counting the higher rate, a straw was emailed to them. There were 31 responses received. The results are presented below.

Already counting the full higher rate	8
Proposing to Change	8
Considering Change	6
Not looking to Change	9
<b>Total</b>	<b>31</b>

- Changing how the Council's guaranteed minimum income is set.

The guaranteed minimum income is the threshold below which people are not expected to make contributions. The Council's guaranteed minimum income is currently set at existing benefit rates + 25%. Until now, this has been how the Department of Health worked out it's guidance on guaranteed minimum income. However, this year the Department of Health maintained its guidance at 2015/16 levels even though some benefits increased. This proposal will ensure that the Council's guaranteed minimum income is brought in line with the Department of Health's guidance in future. This is in accordance with the original intent of the Policy.

Because of the condition included in the proposal not to reduce the Council's guaranteed minimum income below its current level, this will ensure minimum guarantee amounts are at least maintained at current levels. .

## Consultation

Residents were able to engage with the consultation in one of three ways:

- Online survey published on Engage Barnet, the Council's consultation hub.
- Paper copies of the consultation document and consultation questionnaire, including in Easy Read format.
- Face to face workshops held around the Borough.

Invitations were sent to key stakeholders in the voluntary and community sector to invite them to have a presentation at one of their next meetings.

The face to face workshops were:

- Run at four points, one in November 2016, one in December 2016 and two in January 2017.
- Sessions were held at three different locations covering both sides of the Borough. Those receiving community social care services from the Council were sent a letter inviting them to participate, a summary of the proposed changes, the consultation document, the consultation questionnaire and a reply paid envelope. For people with learning difficulties the pack was translated to EasyRead.

All recorded carers of people who receive community social care services from the Council were sent a letter inviting them to participate and a summary of the proposed changes. They could request a paper copy of the consultation document and questionnaire for themselves if they wished.

There was a dedicated phone number and email address for people to contact if they had any questions about the consultation.

The main methods of communication used throughout this consultation were:

- Consultation Packs.
- Online Information on Engage Barnet.
- Direct Letter to users of Non-Residential Social Care Services.
- Summary Sheet of proposed changes.
- Presentations at voluntary and community sector meetings.
- Presentations at working groups.
- Staff Newsletter.
- SMT Briefing.
- Committee reports.

### **Implementation**

If a decision is made to proceed with the proposed changes then the Fairer Contributions Policy will be changed.

Everybody's contribution is reviewed once a year, usually in April to coincide with the annual change in benefit and pension rates. The reviews for 2017/18 will apply the changes to the Fairer Contributions Policy.

Everybody who receives community care services from the Council will be sent a letter asking them about any disability related expenditure before their annual financial review. This financial review will take account of the new policy and the Council will write to them again when it has been completed. Changes to contributions will start on 1 April 2017 at the earliest and will not be backdated should someone's review not be completed by that date.

After their review has been completed, people will receive a letter informing them of the outcome of the financial assessment. If someone's contribution has increased following their financial review then the letter will inform them of the revised amount they will have to contribute, details of how the contribution has been calculated and will be collected along with the contribution that the Council is making. They will be told how they can appeal using the Review and Appeals Procedure in the Fairer Charging Contributions Policy if they are dissatisfied with their review.

### **Impact Assessment**

The overall impact is currently assessed at minimum adverse and the key mitigating factors are

- a) No individual will experience an increase in fees and charges without individual consideration of their financial circumstances in line with the Fairer Contributions Policy.
- b) Any increase in fees and charges would be made only following individual review of

their financial assessment to decide (within the criteria set out in the Fairer Contributions Policy) whether or not an individual has the ability to pay.

- c) If someone chooses not to continue with a service they will be offered a strengths-based review and another perspective on how to maintain their independence.
- d) Individuals will be advised to contact the council again should their individual circumstances change.
- e) There will be transition period of nine weeks during which increases will be capped at £20 per week

Following a review of the Equality Impact Assessments for other proposals in the Adults and Safeguarding Committee's revenue savings programme for 2017-20 there does not appear to be any cumulative effect from other proposals on the groups affected by this proposal.

There were several proposals in the General Budget Consultation 2017/18 to increase the social care precept (by 2% or 3%) and general Council Tax (by 1.99%). The Fairer Contributions Policy offsets certain types of expenditure against income. Council tax net of Council Tax Benefit is one of these. This means that an increase in Council Tax (net of Council Tax Benefit) would reduce an individual's assessable income by the same amount. A recommendation on the proposals for Council Tax and the Social Care Precept will be made to Full Council Committee on 7 March 2017.

This equalities impact assessment was reviewed following the consultation exercise and no changes were considered necessary before a final decision is made.

The decision to proceed with the proposal balances out the adverse impact on the groups affected as set out above against the need for the Council to make significant savings overall and adult social care pressure of £6.4m (including existing overspend and future projected demographic growth). There is a proposal to apply the maximum 3% social care precept which has been taken in to account in assessing the Council's financial resources.

## 15. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
<p>People who use non-residential services, their carers and staff understand the proposed changes and feel supported.</p>	<p>Include communications as a key part of the implementation plan.</p>	<p>Written communication with everyone who uses non-residential services and their carers to inform them of the consultation and explain how they can participate. A dedicated telephone number and email address will be provided for people to get in touch if they have any questions.</p> <p>Written communication sent to all appropriate staff to ensure that they understand the proposals and are able to offer full support to people who use non-residential services and their carers.</p> <p>Continue to ensure that staff are supporting people who use services and their carers through the changes.</p>	<p>Gary Johnson / Jon Dickinson</p>	<p>February 2017 and then ongoing</p>
<p>No individual will experience an increase in fees and charges without individual consideration of their financial circumstances in line with the Fairer Contributions Policy.</p> <p>Any increase in fees and charges would be made only following individual review of their financial assessment to judge (within the criteria set out in the Fairer</p>		<p>Written communication will be sent to everyone who uses non-residential services informing them of the changes to the policy and asking about their disability related expenditure.</p> <p>Financial reviews of people with direct payments will be prioritised to take place as early as possible. This is because of the advance payments necessitated by the implementation of Mosaic.</p>	<p>Gary Johnson / Jon Dickinson</p>	<p>February 2017 and then ongoing</p>

Equality Objective	Action	Target	Officer responsible	By when
Contributions Policy) whether or not an individual has the ability to pay.				
Everybody who receives community care services from the Council will be kept informed of the changes being made and how this will affect them.		<p>After their review has been completed, they will receive a letter informing them whether or not their contributions have changed.</p> <p>If someone's contribution has increased following their financial review then the letter will inform them of the revised amount they will have to contribute, details of how the contribution has been calculated and will be collected along with the contribution that the Council is making. They will be told how they can appeal using the Review and Appeals Procedure in the Fairer Charging Contributions Policy if they are dissatisfied with their review.</p>	Gary Johnson / Jon Dickinson	April 2017 and then ongoing
Monitor and review the effect on people who are affected by the policy change especially those who chose to stop receiving services		<p>Monitoring will be ongoing and will be conducted immediately following the completion of the annual financial reviews which will apply the policy (2017). This analysis will show the impact on those with protected characteristics by increases in contributions.</p> <p>This will be shared with the Adults and Safeguarding Committee.</p> <p>Monitoring will be repeated in 2018 after the annual financial reviews to determine if there has been any change in assessed impact</p>	Gary Johnson / Jon Dickinson	April – June 2017 and then April – June 2018

1 <sup>st</sup> Authorised signature (Lead Officer/Project Sponsor)	2 <sup>nd</sup> Authorised Signature (Service lead/Project Manager)
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<b>Date:</b>	<b>Date:</b>
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