

## Equality Impact Assessment (EqIA) for Policies, Procedures and Services

<b>Proposal name</b>	<b>Adult Social Care Charging Policy</b>		
<b>Directorate</b>	Adult Social Care		
<b>Service</b>	Adult Social Care		
<b>Responsible Officer</b>	Karen Jackson/Anna Grainger		
<b>Proposal planning start</b>		July 2021	May 2022

<b>1</b>	<b>What is the purpose of the proposal?</b>	<b>Yes / No</b>	<b>New / revision</b>
	Policy	<b>Yes</b>	<b>Revision</b>
	Procedure	<b>No</b>	
	Guidance	<b>No</b>	
	Is this a service to customers/staff/public?	<b>Yes</b>	
	If yes, is it contracted or commissioned?	<b>Both</b>	
	Other - give details		
<b>2</b>	<b>What is the business case for this proposal? Please provide the main purpose of the service, intended outcomes and reasons for change?</b>		
	<p>Demand for health and social care services is increasing. People are living longer, and the older population is growing. As people age, they become frailer and the incidence of dementia increases. In addition, there are more people living with long-term health conditions and who have complex health needs.</p> <p><b>Aims</b></p> <p>Delivery of improved outcomes for citizens, underpinned by strengths-based practice, with a focus on prevention, maximising and enhancing citizen independence, wellbeing and autonomy, community resilience, prevention and enablement, which will it, is anticipated lead to a reduction in the need for statutory services.</p> <p>The revised Adult Social Care charging policy aims to improve the financial assessment process via promoting a consistent approach to both residential and community-based charging. There are currently separate policies for community and residential services. A single customer facing policy incorporating both residential and community care has been developed. This will provide a single point of reference for customers and staff.</p> <p><b>Objectives</b></p> <ul style="list-style-type: none"> <li>• Maximise citizen independence</li> <li>• Build community resilience</li> <li>• Improved access at the front door to information advice, and signposting</li> <li>• Increase citizen opportunities to have their needs met in the community</li> <li>• Increase access to reablement/enablement</li> <li>• Increase in the use of assistive technology</li> <li>• Increase of those with mental health and learning disabilities who have their own tenancy including supported living settings</li> <li>• Reduction in long term institutional care placements</li> <li>• Reduction in domiciliary care hours purchased</li> <li>• Less reliance on building based day care provision</li> <li>• Decrease in those with mental health and learning disabilities who are in long-term institutional settings including residential education placements</li> </ul> <p>Commissioning with outcome based specifications</p>		



- Clearer financial understanding for citizens so reducing debt (leading to income generation to reduce debt right offs, better bill and debt management)
- In addition, ensure children with disabilities as they transfer to adult social services have the benefit of all the above objectives through an All Age Disability Approach.
- Opportunity to maximise customer benefits to increase client contributions and therefore generating increased income
- Reduction in debt across adult social care and increase of income via self-funders
- Providing resilience to the ASC budget, into the future

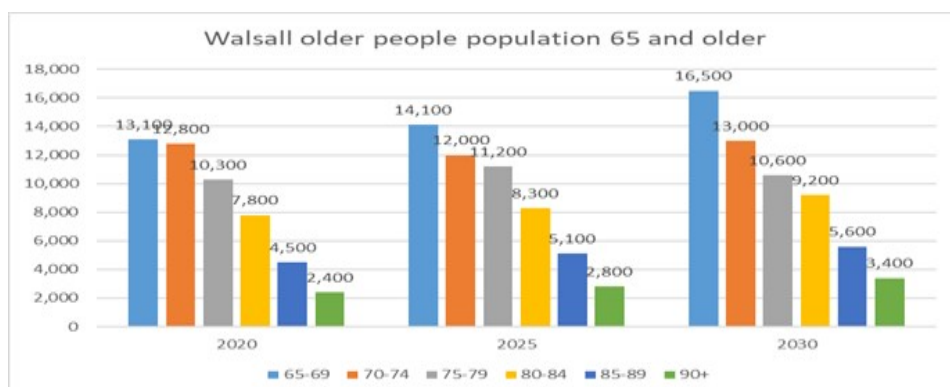
### 3 Who is the proposal likely to affect?

People in Walsall	Yes / No	Detail
All	Y	All those with adult social care assessed needs, including older people, people with mental health problems, learning disabilities, physical disabilities, and young people with disabilities in transition to adult services and carers. In addition those who do not have currently have eligible needs, but may do so in the future.
Specific group/s		
Council employees	Y	
Other (identify).	Y	

### 4 Please provide service data relating to this proposal on your customer's protected characteristics.

There is a growing older population in Walsall.

- At the 2011 census, the population of Walsall was 269,323.
- 51% of the population is female and 49% is male.
- Walsall's population is increasing. The ONS (Office of National Statistics) 2018 mid-year statistics estimated the population to be 283,400.
- 165,400 of the population is aged 18-64 years old (59% of the population) 5,400 of the population is 65 years+ old (19%)



Walsall is a culturally diverse town. The largest group in the town is White British at 76.9% followed by Asian British people at 15.2%, who make up the largest Black and Minority Ethnic (BAME) group.

BAME – Census 2011	%ge
White British	76.9%
Other White	1.9%
Asian British	15.2%
Black British	2.3%
Mixed	2.7%
Other	0.8%

## ASC Clients

- 4201 people supported by Adult Social Care (during 20/21 FY). This can be further broken down:<sup>1</sup>
- Of the 4201, 60% (2510) were females.
- Of the 4201, 40% (1691) were males.
- Those supported at home was 2192.
- Those in nursing care was 474.
- Those in residential care was 766.
- Number of requests for support received from new clients (during 20/21 FY), for clients whom were aged between 18-64 was 2654.
- Number of requests for support received from new clients (during 20/21 FY), for clients whom were aged 65+ was 8130.

The below information was gathered from the NHS Adult Social Care National Data Collections Short and Long Term (SALT) Return 2020-21:

- Of new clients, the request for support for 'Short term Support to Maximise Independence' was 1674 (16% of the total). This can be broken down further:
- Clients whom were aged 18-64 was 125
- Clients whom were aged 65+ was 1549
- Clients broken down by ethnicity:

Ethnicity	Total
White	1035
Mixed/multiple ethnic groups	13
Asian/Asian British	131
Black/African/Caribbean/Black British	37
Other ethnic group	2

- Number of people accessing long term support (during 20/21 FY), for clients whom were aged between 18-64 was 1202.
- Number of people accessing long term support (during 20/21 FY), for clients whom were 65+ was 2999.
- This can be broken down further by ethnicity:

Ethnicity	Total
White	2593
Mixed/multiple ethnic groups	26
Asian/Asian British	300
Black/African/Caribbean/Black British	76
Other ethnic group	6

The primary reasons for long term support at the end of year (during 20/21 FY) was:

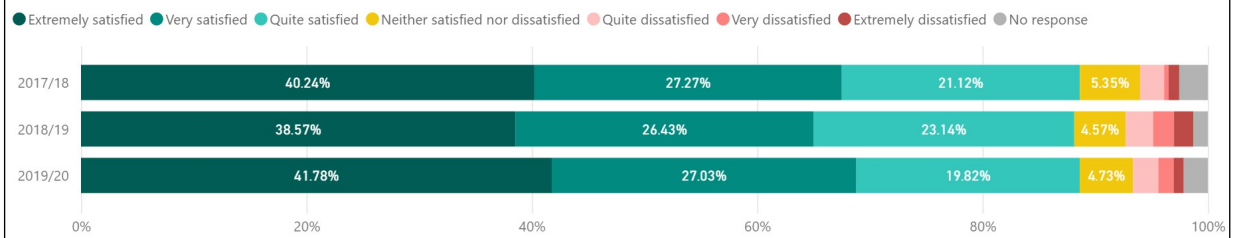
Age	18-64	65+
Physical Support: Access & mobility only	7%	17%
Physical Support: Personal care support	20%	56%
Sensory Support: Support for visual impairment	0.47%	0.66%
Sensory Support: Support for hearing impairment	0.66%	0.66%
Sensory Support: Support for dual impairment	0%	0.3%
Support with Memory & Cognition	0.95%	4.6%
Learning Disability Support	54%	4%
Mental Health Support	0.48%	5.43%
Social Support: Substance misuse support	0.33%	0%

<sup>1</sup> Walsall JSNA

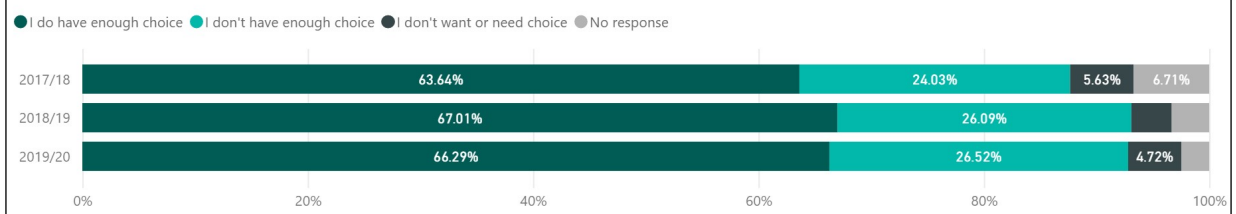
	Social Support: Asylum seeker support	0%	0%
	Social Support: Support for Social Isolation/Other	8.67%	4.24%
	<p>As at 30/09/2021, there was 2167 service users in receipt of long-term community service, of which 170 are marked at full cost:</p> <p><b>Age breakdown</b></p> <ul style="list-style-type: none"> <li>• 18 – 24: 7</li> <li>• 25 – 34: 3</li> <li>• 35 – 44: 3</li> <li>• 45 – 54: 9</li> <li>• 55 – 64: 14</li> <li>• 65 – 74: 25</li> <li>• 75 – 84: 48</li> <li>• 85 – 94: 51</li> <li>• 95+: 10</li> </ul> <p><b>Primary support reason breakdown</b></p> <ul style="list-style-type: none"> <li>• Physical support: 110</li> <li>• Learning disability support: 34</li> <li>• Mental health support: 3</li> <li>• Sensory support: 3</li> <li>• Social support: 13</li> <li>• Support with memory and cognition: 7</li> </ul> <p>As at 30/09/2021, there was 835 service users were in a long term placement (R&amp;N), of which 71 are marked at full cost:</p> <p><b>Age breakdown:</b></p> <ul style="list-style-type: none"> <li>• 18 – 24: 0</li> <li>• 25 – 34: 0</li> <li>• 35 – 44: 0</li> <li>• 45 – 54: 3</li> <li>• 55 – 64: 1</li> <li>• 65 – 74: 7</li> <li>• 75 – 84: 14</li> <li>• 85 – 94: 42</li> <li>• 95+: 4</li> </ul> <p><b>Primary support reason breakdown:</b></p> <ul style="list-style-type: none"> <li>• Physical support: 49</li> <li>• Learning disability support: 3</li> <li>• Mental health support: 5</li> <li>• Sensory support: 1</li> <li>• Social support: 5</li> <li>• Support with memory and cognition: 8</li> </ul>		
5	<p><b>Please provide details of all engagement and consultation undertaken for this proposal. (Please use a separate box for each engagement/consultation).</b></p>		

The Adult Social Care survey was undertaken during 2019/20. The Adult Social Care survey shows that during 2019/20 there was an increase in the %ge of citizens who were extremely satisfied or very satisfied with the care and support services they received. On the other hand, during the same period 26.5% of citizens reported that they did not have enough choice in the care and support services they received, which was a slight increase on the previous year.

#### Q1 - Overall, how satisfied or dissatisfied are you with the care and support services you receive?



#### Q2c - Which of the following statements best describes how much choice you have over the care and support services you receive?



Consultation Activity				
Type of engagement/consultation	Charging policy review and comments	Date	July 2021 – October 2021	
Who attended/participated?	Consultation on the policy has been developed in close liaison with the MHJ Team, who are responsible for the community based financial assessment process. Also, engagement occurred with the Finance Team, who look after the residential based financial assessment process.  ASC colleagues were also consulted and also Legal, to ensure the Policy was compliant with the Care Act and other relevant legislations.			
Protected characteristics of participants	Unknown, as engagement has been carried out electronically via email and teams.			
6	Concise overview of all evidence, engagement and consultation			
Demographic and service evidence shows there will be an increasing need for adult social care services as there is an aging population in Walsall. Reliance on some established forms of social care provision may not promote independence, support strengths, maximise autonomy or wellbeing.  The proposal is likely to have a positive impact on people over 65 years old and younger people with learning disabilities and women. However, as elements of the proposal progresses and engagement continues, and external consultation is concluded, the EQIA will be updated accordingly.				
7	How may the proposal affect each protected characteristic or group? The effect may be positive, negative, neutral or not known. Give reasons and if action is needed.			
Characteristic		Affect	Reason	Action needed Yes / No
Age		The impact on all protected characteristics will be updated once consultation has been concluded.		
Disability				
Gender reassignment				
Marriage and civil partnership				
Pregnancy and maternity				
Race				
Religion or belief				
Sex				
Sexual orientation				

	Other (give detail)			
	Further information			
8	<b>Does your proposal link with other proposals to have a cumulative effect on particular equality groups? If yes, give details.</b>		(Delete one) <b>Yes / No</b>	
	The proposal links to the PROUD work streams CAM, Resilient communities and third party spend. As Council /Walsall wide activities are developed there will be more opportunities for prevention and community resources for citizens to have their needs met, which will support prevention and independence.			
9	<b>Which justifiable action does the evidence, engagement and consultation feedback suggest you take?</b>			
	A	No major change required		
	B	Adjustments needed to remove barriers or to better promote equality		
	C	Continue despite possible adverse impact		
	D	Stop and rethink your proposal.		
<b>Action and monitoring plan</b>				
<b>Action Date</b>	<b>Action</b>	<b>Responsibility</b>	<b>Outcome Date</b>	<b>Outcome</b>
	This EqIA will be updated April 2021 and every 6 months thereafter.	EqIA author	April 2022	To include the outcomes of consultation and engagement activities.  This EqIA will be kept under continual review, as it is too early to say if there will be adverse impacts on some groups until projects and engagement and consultation activities progress.
15 <sup>th</sup> December 2021	Cabinet meeting approval for public consultation	Anna Grainger	December 2021	

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Update to EqIA	
Date	Detail
	This EqiA is planned to be updated in April 2022 to include the outcomes of the range engagement and consultation activities that will be undertaken with users of services and others.

### Contact us

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