## **Appendix 2: Disability Equality Impact Assessment**

# Policy or action disability impact assessment record sheet

Policy or Action Title: Fairer Charging for Adult Social Services									
Policy Action owner Name and Title: Jane Robinson – Asst. Director, Adult Social Care and Health						Date: 24 April 2008			
Type of assessment	Type 1	X	Type 2			Type 3			
Is this a policy or an action? Please state: <b>Proposed policy changes.</b>									

# What are the positive or negative effects that the policy or action will have on disabled people?

A large-scale consultation exercise was undertaken between mid-January and mid-April 2008. Twenty-two meetings were held with service users, carers and representative organisations, with over 300 attendees, and over 3,000 briefing papers were distributed through mail shots and inclusions in newsletter etc. Many views were expressed during these group meetings, and these were recorded. Many people also expressed their views in writing/email or through telephone calls. These were also recorded.

The evidence for the positive or negative effect of the proposals is drawn from the views expressed during the consultation period.

# **Proposal One**

That the Charging Policy for non-residential care services be applied to all service users equally.

From the consultation there were no clear positive effects this proposal would have on any individual or group of disabled people. However of all the proposals this had the largest agreement that things should be more equitable than they are currently. This includes a number of comments from DAD that equity could mean not to charge anyone for services. Below is a summary of the comments;

- i) Unfairness in the current charging policy and that it was right that the council were doing something to address this
- ii) This will be a useful exercise to reduce inequalities
- iii) Agreement that it should be a fair process
- iv) Agreement it should be more equitable

#### **Evidence**

- i) Carers Strategy Steering Group 15.01.08
- ii) Self Directed Support LIG 17.01.08
- iii) Making a Difference Group 21.01.08
- iv) Mental Health Service User Group 24.01.08

## **Negative effects**

- i) The information on financial assessments is not accessible
- ii) There will be some people who are prevented from accessing services as they are not prepared to either be financially assessed or pay for services following a financial assessment
- iii) The finance could be a barrier for people
- iv) People will be wary about using the service because of the cost

#### **Evidence**

- i) Carers Strategy Steering Group 15.01.08
- ii) DAD members focus group 11.04.08
- iii) DAD members focus group 11.04.08
- iv) Returned questionnaire 8.4.08

# **Proposal Two**

That the rate for home care services reflects the actual cost of the service provision

## **Negative effects**

- i) People who need the services will be paying the most.
- ii) Those with greater needs would pay more for the same service.
- iii) You want to charge us more but we do not get extra quality control.
- iv) If home care proposals are agreed, this may impact on individuals who cannot afford to keep a service and the housework may slip and lead to further care issues.
- v) Some People will not want to pay and will become housebound and isolated.

#### **Evidence**

- i) Learning Disabilities Carers Subgroup 24.01.08
- ii) Visually Impaired Meeting 3.4.08
- iii) Visually Impaired Meeting 3.4.08
- iv) Visually Impaired Meeting 3.4.08
- v) Returned questionnaire 8.4.08

## **Proposal Three**

That a charge of £10 per day is made for day services

# **Negative effects**

- i) Individuals referred to mental health day services by their GP wouldn't be charged this would be a two tier system
- ii) Individuals who refer themselves wouldn't be charged
- iii) People who 'drop-in' to services, would they be charged on a sessional basis?
- iv) People will stop coming to day services
- v) People may start going without services
- vi) There would be an impact on carers if people stopped going to services
- vii) People use some services as a stepping stone to independence and may chose not to because of the costs this could lead to them having greater needs
- viii) Some People will not go to the day centre if they are to be financially assessed
- ix) A large proportion of people commented they would stop coming to day services

## **Evidence**

- i) Mental Health Service User Group 24.01.08
- ii) Mental Health Service User Group 24.01.08
- iii) Mental Health Service User Group 24.01.08

- iv) Mental Health Service User Group 24.01.08
- v) Mental Health Carers Coffee Afternoon 31.01.08
- vi) Direct Payments User Involvement Group 7.2.08
- vii) Direct Payments User involvement Group 7.2.08
- viii) Direct Payments User involvement Group 7.2.08
- ix) Dimensions Disability Initiative 8.4.08

## **Proposal Four**

Charges for refreshments within Day Care Services to be charged at actual cost equitably across all services.

There was a relatively small amount of comment on this proposal which would identify a positive or negative effect for either an individual or group of people. However one comment on the matter from the Mind Focus Group 10.4.08 was that it is not bad to pay £3 for a good meal.

## **Proposal Five**

That the cost of frozen meals at home is increased to the actual cost of provision.

No positive or negative impacts identified during consultation.

# **Proposal Six**

That charges for transport to services are introduced for all service users.

The proposed charge is £1 per journey (which unlike other services would be a charge not subject to financial assessment).

There was nothing from the consultation which could be viewed as a positive impact on an individual or group of people.

# **Negative effects**

- i) Taking the mobility component of DLA into account is unlawful
- ii) I am totally dependent on transport as cannot use public transport and feel I am being penalised.
- iii) People in wheelchairs are being penalised as they cannot use buses
- iv) At least one person here would have to pay £288 per year on top of what they are already paying.
- v) With these additional costs I would not be able to save any money to use for a holiday.

## **Evidence**

- i) Self Directed Support LIG 17.01.08
- ii) Dimensions Disability Initiative 12.2.08
- iii) Dimensions Disability Initiative 8.4.08
- iv) Dimensions Disability Initiative 8.4.08
- v) DAD members focus group 11.04.08

## **Implementation**

Several respondents have suggested that the proposed increases in charging should be phased-in over one or more years. This approach would be of most relevance to those people who either have not been required to pay for services in the past, or who would see a large increase in their contribution (for instance, because of the application of charges to day services).

The proposals originally adopted an approach that linked implementation of changes/new charges to the annual review and reassessment of all existing service users. Most respondents readily accepted that this was appropriate for service users who are currently financially assessed. However, for service users who have not been financially assessed or charged in the past, this approach would lead to an inequity. Similar service users would be financially assessed and charges commence on the rather arbitrary criteria of the date of their review. Many respondents felt that it would be fairer for all such people if a common date for the commencement of charges was set once all financial assessments had been undertaken.

## What action will you take as a result of the impact assessment?

The final report to members will put forward the outcome of consultation and suggest options for implementation reflective of consultation, along with related financial implications. Members will however need to consider that any reduction may mean other options have to be considered. The suggested actions in the report will be as follows;

- 1. Confirm that the Adult Social Services Charging Policy for non-residential services should apply to all service user groups.
- 2. For the purposes of the Charging Policy, it is now proposed that the term 'day services' should be restricted to a service which provides social care services during the day either directly provided by Adult Social Services or through another agency on a service contract. It should *not* include any daytime service that is primarily provided for the assessment of a person's capability; for the provision of training or rehabilitation; or for the provision of supported employment. It should also *not* include daytime services providing a 'drop-in' facility for social contact.
- 3. Revise information leaflets on Financial Assessment and on Charging for non-residential services to ensure that they are clearer and more readily understood. These would then be made available in a variety of formats (upon request) to ensure accessibility.
- 4. Ensure that current good practice in the financial assessment section is maintained, particularly in relation to any instance when a person indicates that they cannot afford their assessed charge for services. This will include a check on the accuracy of the financial assessment (in particular that all Disability Related Expenditure has been appropriately taken into account); offering assistance with obtaining welfare benefits advice; and a sympathetic approach to genuine cases of material hardship. These measures are intended to ensure that any disabled person who may be adversely affected by the proposed charges would still receive the service that meets their assessed need, whilst negotiations take place regarding their ability to pay.
- 5. Propose that a single flat-rate for Home Care services be considered, regardless of the quality of the provider or the nature of the service. Proposed that this rate should be £10.61per hour (2008 rate, plus inflationary annual uplift thereafter) and that this should be phased-in over three years to minimise the effect upon individual personal finances.

- 6. Adult Social Services managers have considered the suggestion that there should be a common start date for implementing new charges for day services, and for including learning disabled people within the charging policy, and have agreed that this would be the fairest approach, subject to approval by Elected Members. A common start date of 1 October is proposed, as this will give sufficient time for financial assessments to take place, and for sufficient notice to be given of the charges for each individual.
- 7. It is proposed that any charge for transport should be within the scope of the Fairer Charging Guidance, and therefore included within those services for which the maximum individual charge would apply. However officers are recommending that the proposed charge for transport costs should be reconsidered in light of the Concessionary Travel issues and the costs relating to the management of handling this charge.

## How and when will this action be monitored?

- 1. Particular attention will be paid to any instance where a client indicates they wish to withdraw from or refuse a service on financial grounds. This will be identified through Care Management and financial assessment routes. These clients would be encouraged to continue receiving the service whilst investigations were undertaken. A safety net procedure would be put in place through the weekly management team meetings to monitor where people refuse services as a result of the charges. Each case would be looked at and addressed individually.
- 2. Production of draft information on the changes, involvement of 'readers group', redrafting and distribution to take place by 1 October 2008. This is already included in the User Satisfaction Survey sent to all Adult Social Services clients, and will be monitored through this route.

If the amendments to the proposals are agreed then the policy would achieve the two headings crossed below. However if the proposal amendments are not agreed then none of the six headings below would be achieved.

Promote equality of opportunity		
Eliminate unlawful discrimination	X	
Eliminate disability-related harassment		
Promote positive attitudes towards disabled people		
Encourage participation by disabled people in public life		
Take steps to meet disabled people's needs		