#### Equality Analysis Evidence Document

# PLEASE NOTE THIS IS A WORKING DRAFT DOCUMENT THAT WILL BE COMPLETED AFTER THE PUBLIC CONSULTATION HAS BEEN CONSLUDED.

#### Title: What are you completing an Equality Analysis on?

This Equalities Impact Assessment has been completed on proposals to change a range of adult social care policies in line with the Care Act (2014) The policies once in effect will provide the Council with a clear framework within which to operate and deliver its statuary functions. There are two individual policies that have been proposed. A separate assessment has been prepared in relation to the charging policy, this document focuses on proposals to implement a prevention policy and policy statement.

This Equality Impact Assessment (EIA) is a working document. It details the equality analysis work undertaken so far and identifies the future work needing to be undertaken to ensure that Wiltshire Council meets its statutory obligations under the Public Sector Equality Duty. It is updated at various points as the proposal progresses.

Why are you completing			y that apply)		
Proposed New Policy or Service	Change to Policy or Service	MTI (Medium Tern Strates	n Financial	Service I	Review
Version Control					
Version control number	Date 31 <sup>st</sup> May 2016	Reason for review (if appropriate)	Updated base	d on survey r	esults
<b>Risk Rating Score</b> (use **If the Risk Score is 1 or 2 have to be completed. Ple	Inherent risk proposal	score on			
equalities@wiltshire.gov.u	Residual risk after mitigatir have been id	ng actions			

#### a. Introductory note:

Following the planned consultation this document will be submitted to Wiltshire Councils cabinet with a full version of the proposal as amended based on any considerations made during the consultation phase. Any feedback that is considered but not adopted shall also be summarized in the cabinet proposals. The document will be published as part of the public consultation process.

## b. What is being Impact Assessed:

This Equality Impact Assessment (EIA) has been produced to review the potential impact that the introduction of a number of new policies may have on people across the County. This statement assesses the combined impact of two policies; Prevention which sets out how the Council will meet the universal duty to reduce delay and prevent people developing needs and a policy statement which provides clarity as to how Wiltshire Council will make decisions about delivering social care in Wiltshire.

The Care Act (2014) introduces a new statuary framework which brings together over fifty pieces of existing legislation and provides the regulations through which social care will be delivered in England. The Act includes some significant changes including the general duty to prevent, reduce and delay needs arising across an entire population. This is a statuary Duty and as such the Council must comply with the regulation. The policies have been revised so as to ensure the Council complies with the Care Act, makes the best possible use of available resources and because a number of existing policies were out of date. The policies has been designed to provide people with clarity about how Wiltshire Council will make decisions about what social care services are used to meet a persons care and support needs. This assessment will focus on the potential impacts of this compliance on people living within Wiltshire and what mitigating actions can be put in place to limit any adverse impacts.

Key changes in the policy which form the focus of this analysis are

- A clear statement setting out the Councils approach to delivering the Prevention duty based on
  prioritising activities that will reduce the risk of people going into hospital, needing permanent care
  home placements or having their independence at home significantly reduced.
- Proposes the Councils approach to calculating personal budgets and the amounts that will be used to establish if a program of activities constitutes a reasonable cost to meet eligible needs.
- A proposal to charge an arrangement fee as permitted under the Care Act to arrange care services for customers with assets above the maximum threshold who have eligible care and support needs.
- Clarifies explicitly the Councils priority to support customers to live independently at home.
- Provides additional clarity regarding the provision of transport including the fact that the Council will only fund customers travel to the nearest appropriate activity based upon their eligibility for transport services.

The changes set out in the draft prevention policy are largely based on existing practice and commissioning principles. The policy clarifies the Councils approach to prevention in particular the Councils decision making process. From this perspective the impact on customers is limited and rather the document provides clarity which will ensure equitable services for everyone living in Wiltshire.

This document has been prepared to consider the impact these changes may have on people if the Council chooses to adopt the proposals contained in these polices. It is important to note the polices will be subject to a period of considered public consultation and the final cabinet proposal shall consider incorporating responses from the public into these proposals.

#### c. Background to the decision making process so far:

The decision to make these proposals about changes to policy is based on the requirement to update Adult Social Care policy to ensure there is clarity about how Wiltshire Council will deliver social care in Wiltshire. Another key driver for the change is to ensure that the Councils policies are compliant with the Care Act (2014) which came into effect in April 2015.

The decisions have been made based on the requirement to make the best use of available resources, to ensure compliance with national legislation and so as to ensure there is clarity for customers and officers who may be affected by care and support services. It is proposed that if the policy statement is adopted commissioners will use the document as a foundation when developing and designing care and support services.

The proposals included in the statement have been approved in principle by the senior adult care boards including the older peoples board and learning disabilities board. Based on this a period of consultation will be carried out in relation to the proposals with a particular focus on the impact these proposals might have on individuals wellbeing. The feedback and comments gathered during this consultation will then be used to consider the proposals further and consider changes to the current proposal. Once feedback and comments have been considered the policy may be revised and a final proposal will be submitted to cabinet for a decision.

The proposals have been discussed in advance of formal public consultation with key representatives of the voluntary community sector. As a result of this engagement a simple document was produced (see appendix one) which highlights the key changes included within each of the policies and is intended to ensure customers are able to engage with the consultation process. An ongoing program of engagement with key stakeholder organisations has been established so as to maintain an effective dialogue with the sector and ensure effective public consultation.

## d. Background to the consultation process:

While not directly related to the proposed changes, Adult Social Care has recently worked with Local Area Boards to facilitate a number of workshops with older people in order to determine what it is older people enjoy doing and what (if anything) prevents them from doing these things. Initial feedback indicates that the primary issues older people are experiencing is accessing the places they want to go, getting the information they need about what's going on and what's available to people and feelings of isolation or loneliness.

The prevention policy and other policies have been developed to ensure as well as focusing on more intensive prevention services there is provision for universal services and a focus on adult care working across the business to ensure the wellbeing of older people is promoted and supported. Specific consultation for this proposed policy will take the form of an open questionnaire asking people to comment on the proposals and more generally on what sorts of services they feel should be made available. Local voluntary sector organisations and user led organisations will be actively informed about the consultation and encouraged to work with members and customer groups to gather responses and feedback on the proposals.

A pre consultation session was held with key stakeholders on Monday the 17<sup>th</sup> of August 2015 in order to assess the impact these proposals could have on customers and communities and to establish how existing support networks can be used to ensure customers who are affected by any changes have support available to them to help them to manage any impact. As a result of this session an ongoing dialogue was established with these stakeholder organisations and a document was produced to supplement the consultation documents setting out the main changes included within each proposal. (document attached at appendix one) A further pre consultation engagement event was held with key partners on Friday the 4<sup>th</sup> of September in order to discuss the proposed documents and how best to engage with customers. Some of the key feedback at this event was that a glossary of terms should be developed so as to help people understand any technical terminology and the 'what's changed' document produced in response to the first session should be combined with the individual policies. It was agreed that the documents would be updated in line with these discussions so that the second drafts could be 'trialed' with target customers in order to gather feedback. This engagement was designed to ensure that the consultation is equitable and accessible. The consultation results will be used to target the second phase of this equality impact assessment.

In advance of the consultation phase the draft consultation documents which were developed in partnership with key VCS stakeholders as described above were circulated to partners so that they could make any additional commentary and so they could 'trial' the questions with small groups of customers. The purpose of this exercise was to establish if target customer groups felt as if the questions were engaging, the right questions and accessible in terms of language. This step was taken so as to ensure the maximum number of customers potentially impacted by these changes could engage effectively with the consultation process.

The consultation period will run for a minimum of 90 days in accordance with the Councils consultation process and will involve a combination of open consultation and more targeted interaction with key stakeholder groups. The Consultation will ensure that Wiltshire Council meet its statutory duties under the Equality Act 2010. Based on this consultation period feedback and comments will be collated and included in this equalities impact assessment. Comments and feedback will be considered and potentially included in the final cabinet proposal. Comments that are considered but do not result in changes to the policy will be summarized in this equality impact assessment and the subsequent proposal.

The consultation will involve a consultation questionnaire that will be available via the consultation portal and through a number of stakeholder and user led organisations which will include but will not be limited to Healthwatch Wiltshire, Wiltshire and Swindon Users network, Wiltshire Centre for Independent living. These key stakeholders will be encouraged to distribute the questionnaire to customers who are likely to be affected by any changes to adult social care policies.

e.	The	proposed	changes
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Details of the proposed changes are included in the section above.



Section 2A – People or communities that are currently targeted or could be affected by any change (please take note of the Protected Characteristics listed in the action table).

The proposals, if adopted have the potential to impact on people currently in receipt of care and support services or who may need care and support services in the future. A range of information was collected and reviewed so as to identify which groups of people may be effected if the proposed policy changes are adopted.

A large number of people who may be affected by these polices will be older adults and people with a disability. Groups who may be defined in the 'other' protected characteristics include carers, while many of the changes set out in the policy will not directly impact upon carers it is possible the impacts that will be experienced by those who receive care will have consequential impacts on carers. For example the proposals around choice of accommodation are likely to impact on carers who wish to visit a person who is living in a particular service. It is important to note that many aspects of the proposed policies including the proposed regulations around choice reflect current practice and so any impacts will be mitigated. The policies have been drafted to reduce any inequities in terms of interpretation and make it clear to customers what they can expect from the Council and how decisions will be made. Carers representative organisations will be involved in the consultation process and their views will be considered in this equality impact assessment. Consultation questionnaires will be widely advertised to carers organisations.

The tables below set out some of the key figures that were used to assess which groups of customers would be most affected by this policy and if there was any specific impact on any protected characteristic group.1

Primary support need	Age		
			Grand
	18 to 64	65+	Total
Access and mobility only	43	71	114
Asylum seeker support	2		2
Deaf		1	1
Learning disability support	853	82	935
Mental Health support	214	368	582
None entered	48	70	118
Personal care support	470	2133	2603
Substance misuse support	2	4	6
Support for dual impairment	9	18	27
Support for hearing impairment	5	6	11
Support for social isolation / other	56	17	73
Support for visual impairment	15	29	44
Support to carer	25	81	106
Support with memory and			
cognition	32	295	327
Grand Total	1774	3175	4949

The table below displays all adult care customers and their primary support need<sup>2</sup>

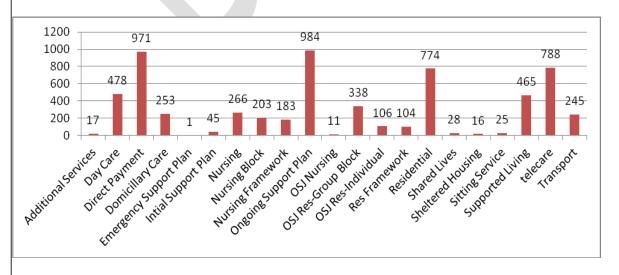
<sup>&</sup>lt;sup>1</sup> Data accurate as of 30-July 2015 based on Mable reporting data.

<sup>&</sup>lt;sup>2</sup> This table includes intermediate care customers Version 1: April 2014

The table below lists the ethnicities of all customers who are known to adult social care<sup>3</sup> and the age profile of customers supported by the service area. It is important to note that the changes will predominantly although not exclusively impact upon customers who are receiving care at home services. The ethnographic profile is reflective of the entire Wiltshire Population. As noted the table does indicate that older people are particularly likely to be impacted upon by this policy if it is adopted and as such must be targeted in terms of consultation and mitigating actions.

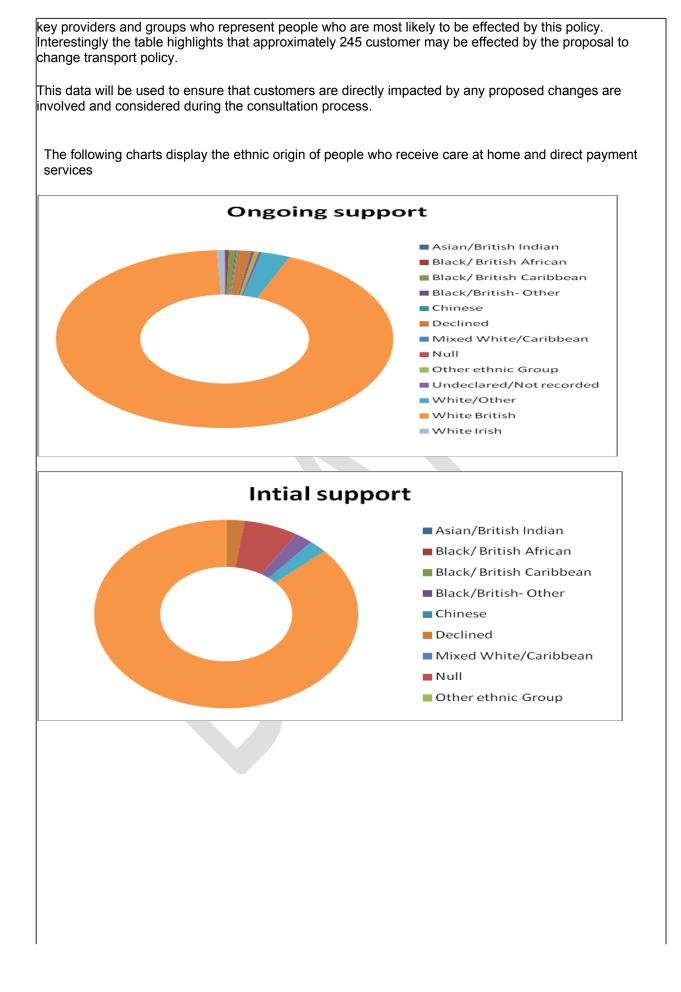
Ethnicity			
Row Labels	18 to 64	65+	Grand Total
Asian / Brit - Bangladeshi	2		2
Asian / Brit - Indian	6	1	7
Asian / Brit - Pakistani	1		1
Asian / Brit -Other Asian	1		1
Black / Brit - African		3	3
Black / Brit - Caribbean	6	16	22
Black / Brit - Other black	3	1	4
Chinese	1	1	2
Declined to say	8	28	36
Mixed - other	3		3
Mixed - White/ Black African	2	1	3
Mixed - White/Black Carib	2	1	3
NULL	20	26	46
Other ethnic group	9	8	17
Undeclared / Not Recorded	11	11	22
White - Other	31	88	119
White British	1658	2965	4623
White Irish	10	25	35
Grand Total	1774	3175	4949

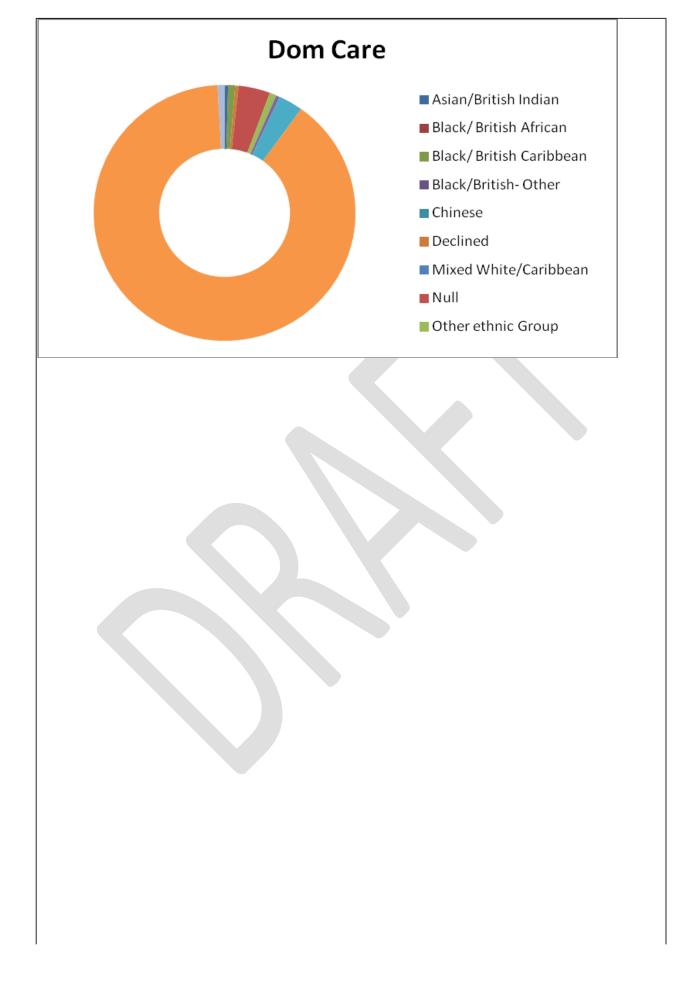
The data presented in this equalities impact assessment sets out the total number of customers who are likely to be directly impacted on by changes to adult social care policy. Policy changes may also have wider impacts on the general population as the changes have the potential to change the way in which the Council makes decisions about how to meet eligible needs and to deliver the prevention duty.

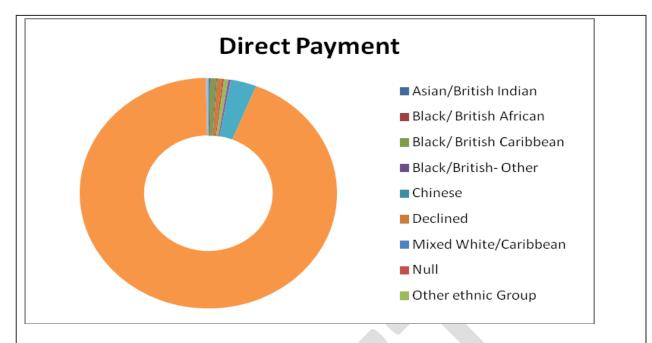


The table above shows the total numbers of customers who are currently in receipt of care and support services commissioned by the Council or provided via a direct payment. The table will be used to target

<sup>&</sup>lt;sup>3</sup> Data accurate as of 30/07/2015 Version 1: April 2014







The charts produced confirm that in line with the demographics of wiltshire the majority of people impacted on this proposoal are White British. It was also clear that other nationalities and ethnicities might also be impacted by the policy and subsequently correspondance will need to be available in a variety of formats on request so as to ensure all groups are able to get involved in the consultation process.

The following information is taken from <u>http://www.poppi.org.uk</u> and shows the projected increase in the older age population over the coming years. This data was used to identify the fact that it is likely many more individuals than those currently in receipt of care and support are likely to be effected by prevention services in the future. Subsequently consultation will be broadly targeted both at those in receipt of care and those who may need support in the future.

Show percentage change       2014       2015       2016       2017       2018         People aged 65-69       30,300       30,600       30,800       29,500       28,800         People aged 70-74       22,200       23,300       24,700       27,000       28,500         People aged 75-79       17,700       18,100       18,200       18,800       19,600         People aged 80-84       13,000       13,400       13,700       14,100       14,600         People aged 90 and over       5,100       5,300       5,600       5,800       6,100         Total population 65 and over       96,600       99,300       101,900       104,300       107,000						
People aged 70-74       22,200       23,300       24,700       27,000       28,500         People aged 75-79       17,700       18,100       18,200       18,800       19,600         People aged 80-84       13,000       13,400       13,700       14,100       14,600         People aged 85-89       8,300       8,600       8,900       9,100       9,400         People aged 90 and over       5,100       5,300       5,600       5,800       6,100	Show percentage change	2014	2015	<mark>2016</mark>	2017	2018
People aged 75-79       17,700       18,100       18,200       18,800       19,600         People aged 80-84       13,000       13,400       13,700       14,100       14,600         People aged 85-89       8,300       8,600       8,900       9,100       9,400         People aged 90 and over       5,100       5,300       5,600       5,800       6,100	People aged 65-69	30,300	30,600	30,800	29,500	28,800
People aged 80-84       13,000       13,400       13,700       14,100       14,600         People aged 85-89       8,300       8,600       8,900       9,100       9,400         People aged 90 and over       5,100       5,300       5,600       5,800       6,100	People aged 70-74	22,200	23,300	24,700	27,000	28,500
People aged 85-89         8,300         8,600         8,900         9,100         9,400           People aged 90 and over         5,100         5,300         5,600         5,800         6,100	People aged 75-79	17,700	18,100	18,200	18,800	19,600
People aged 90 and over 5,100 5,300 5,600 5,800 6,100	People aged 80-84	13,000	13,400	13,700	14,100	14,600
	People aged 85-89	8,300	8,600	8,900	9,100	9,400
Total population 65 and over 96,600 99,300 101,900 104,300 107,000	People aged 90 and over	5,100	5,300	5,600	5,800	6,100
	Total population 65 and over	<mark>96,600</mark>	<mark>99,300</mark>	101,900	104,300	107,000

Figures may not sum due to rounding Crown copyright 2014

**Section 2B** – People who are **delivering** the policy or service that are targeted or could be affected (i.e. staff, commissioned organisations, contractors)

The proposed changes have the potential to impact on a number of commissioned and voluntary sector organisations who work with customers as well as an impact on staff implementing the policy. Organisations working with customers including Council officers are likely to have to support customers who are impacted on by this policy are adopted. This could include increased pressure on information and advice services who receive enquiries regarding the proposed change and its potential impact.

The Council has worked closely with key stakeholder groups including user led organisations throughout the process. This engagement has included a pre consultation workshop to identify how the sector can work together to gather people's views on the proposed changes and ensuring voluntary organisations were supported to facilitate effective consultation with customers. People delivering these policies including those working on behalf of Wiltshire Council through commissioned contracts will need to be aware of the changes in policy if the proposals are adopted. Organisations may experience higher than normal contacts from customers who have been affected by the changes.

The majority of the proposed changes provide clarity and consistency in accordance with National legislation so from that perspective will provide operatives delivering the policy with a clear framework within which to conduct business. The policies if adopted will reduce the risk of individual interpretations of operational procedure and practice and will act as a framework to ensure social care services are delivered equitably to everyone living within Wiltshire and everyone is given the same opportunities in relation to prevention and early help.

In line with the work going on across adult social care increasingly officers working in the sector will need to focus on the provision of high quality information and advice, prevention and a focus on wellbeing so as to help people to help themselves rather than specifying what statuary services should be used.

**Section 3** – The underpinning **evidence and data** used for the analysis (Attach documents where appropriate)

Prompts:

- What data do you collect about your customers/staff?
- What local, regional and national research is there that you could use?
- How do your Governance documents (Terms of Reference, operating procedures) reflect the need to consider the Public Sector Equality Duty?
- What are the issues that you or your partners or stakeholders already know about?
- What engagement, involvement and consultation work have you done? How was this carried out, with whom? Whose voices are missing? What does this tell you about potential take-up and satisfaction with existing services?
- Are there any gaps in your knowledge? If so, do you need to identify how you will collect data to fill the gap (feed this into the action table if necessary)

#### A- Overview

The core of this equality impact assessment will be based on feedback collated during the period of consultation. Based on previous engagement and consultation we know that people want to be able to remain living at home for as long as possible. We also know that many people find the social care system confusing and are unsure of where to go to get the right support, information or advice. The ongoing focus in social care on the first point of contact and coordinating the information and advice available will be developed based on the feedback of customers and will be supplemented by the overview provided in the prevention policy.

It is also known that many people who both need care and support or who act as carers often delay contacting the local authority until they reach a point of crisis and traditionally councils have not had a legislative duty to prevent needs developing or providing high quality advice. The Care Act gives the council the opportunity to start working with customers before they have acute social care needs which can often be more cost effective and importantly a more customer focused experience.

The consultation will identify which groups are aware of existing services and where there are gaps in terms of provision the impact assessment can then be expanded to include specific actions in response to the items raised. One of the primary challenges associated with prevention interventions is assessing the impact of the services as there is often no certain way of correlating a preventative service with a health or social care event that subsequently does not take place. Going forward the Council will work through the prevention board to consider creative approaches to outcomes measurements including social return on investment. As data regarding prevention services becomes more refined opportunities to assess the impact of this policy more comprehensively may develop.

Going forward a program of ongoing engagement will take place with the voluntary community sector to understand how we can best deliver the principles set out in this policy so as to give customers the best possible opportunities to access the information and advice they need to prevent eligible needs developing and so that people can continue to live independently within their community. All of these approaches will apply to all people living within a community but will be designed with the specific needs of key users including older people, people with a disability and carers taken into account as they are the most likely to use and benefit from the service.

#### B-Detailed data about the people who pay for care services:

#### (More Information regarding the groups of people who may be effected can be found at section 2a)

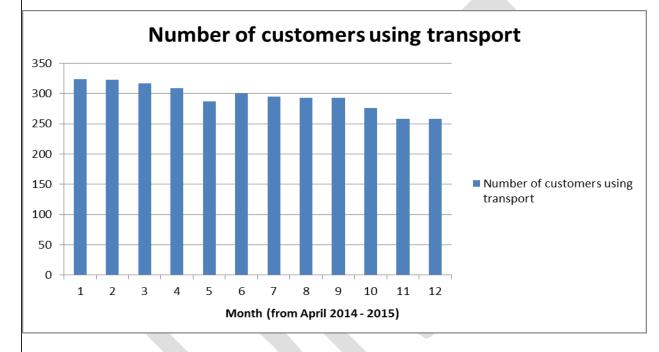
Further engagement will be completed through the delivering of an accessible questionnaire asking for people's views on how the changes will affect them and what can be done to mitigate the impact of any changes. This consultation shall give due regard to the target customer group and shall be completed over a reasonable time period so as to give people the opportunity to respond in full. This initial equalities impact assessment shall be updated based on the feedback received from customers and the specific issues that are highlighted.

## C-Policy Statement

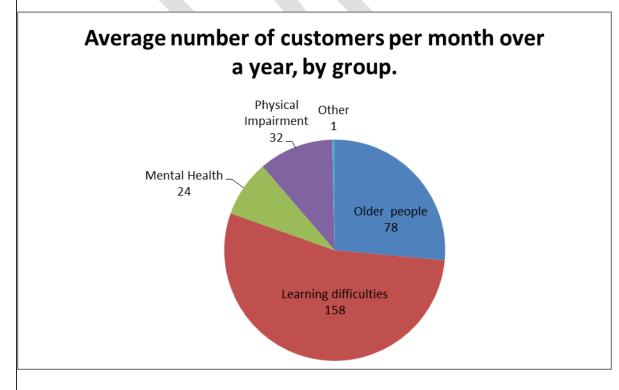
Adult social care collects a range of information regarding customers in receipt of care or who may require care and support services in the future. This information is collected for local intelligence purposes, national statistics and performance monitoring

The proposals set out in this policy will impact on all customers who receive care and support equally and will not impact differently on any protected characteristic within this cohort of citizens. The policy provides clarity for staff and customers which will ensure everyone is offered a service in accordance with the policy which will ensure equity and reduce the amount of objectivity associated with interpreting operating procedures.

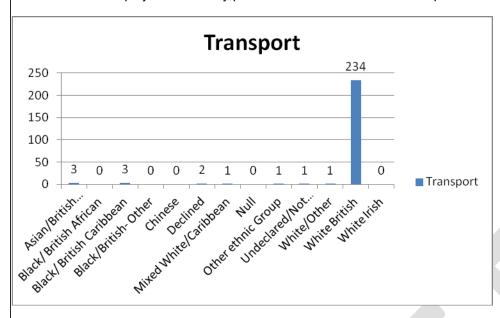
One of the primary impacts of this change (if adopted) will be on customers who receive transport as part of a funded package of care and support. It is possible that these changes will impact on this group of customers who are likely to be members of the elderly or disabled protected characteristic. Comprehensive data analysis of adult social care users who receive transport has been included below and has been used to determine the impact on this particular group.



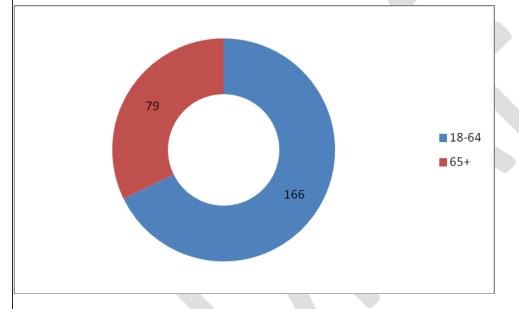
The tables below display the number of customers who use transport who may be effected by this change



The table below displays the ethnicity profile of customers who use transport services<sup>4</sup>



The chart below displays the age profile of customers who use transport



The ethnic and demographic data regarding customers in receipt of funded transport was used to identify the fact that if transport changes are agreed these changes will have the potential to impact on customers from a range of ethic backgrounds and notably age groups. Consultation for this aspect will need to be made available to all to ensure all age groups are able to participate.

Information about the groups of people who may be effected by this policy are included in section 2A of this equality impact assessment.

There are some gaps in this data in the context of the proposed policy changes which will at least in part be met through the consultation with customers and communities. Notably the proposal to charge an arrangement fee for customers who have assets above the maximum threshold with eligible needs will impact on an unknown amount of customers. The Council is currently arranging a meeting with the local dom care market to discuss how it can work with the market to better understand the needs and wants of customers who fund their own care and indeed how many people pay for care privately in the community. This will help us establish the possible number of people who may require this service and the impact it might have on them.

The suspected financial impact will be limited as the cohort of people impacted by this change has assets above the threshold and can arrange care independently if they choose to do this.

This equality impact assessment is largely based on a period of twelve weeks consultation on the proposed changes which was completed through interaction with key voluntary and customer led organisations and open consultation to gather customers views and opinions about how the proposed changes might impact on them.

The consultation was made available to everyone living in Wiltshire via an online questionnaire and printed document but was proactively targeted at groups who were most likely to be affected including those in receipt of care services and their carers. Based on the responses the Council will be able to fully assess the impact of this proposal and develop a robust action plan that will ensure we can work with groups who may be impacted on to develop support networks which will mitigate these impacts.

Specific consultation activity for this policy will also be supplemented by engagement that has been going on with older people through the Local Area Boards for the past year. This engagement has suggested that older people feel the current system is complex and it can be difficult to find out the information they need easily. The clarity provided in the policy provides officers with a framework with which to begin improving this for older people living I Wiltshire. This engagement has also revealed that people are concerned about how they can remain socially active making use of the available transport networks. The policy will ensure equity in terms of how the Council provides transport for customers where this has been assessed as an eligible need but equally may have an adverse impact on some customers wellbeing. The consultation will include a specific question on this issue and it will form a key aspect of engagement with user led organisations and voluntary groups.

## **D- Consultation Data**

A three month consultation was completed in order to gather people's views regarding the proposed policies. The consultation was based on an online survey that was available via the Councils consultation portal. Voluntary sector organisations were contacted to raise awareness of the policy and asked if they would like to produce organisational responses.

The low number of responses particularly in relation to the prevention policy was anticipated. The draft policy sets out how the Council will deliver on a statuary duty that will promote wellbeing and as such the level of public interest was not expected to be high. However it is recommended in the cabinet report that the community commissioning team investigate alternative means of engagement so as to generate interest for future Consultations.

A summary of the consultation responses can be found below;

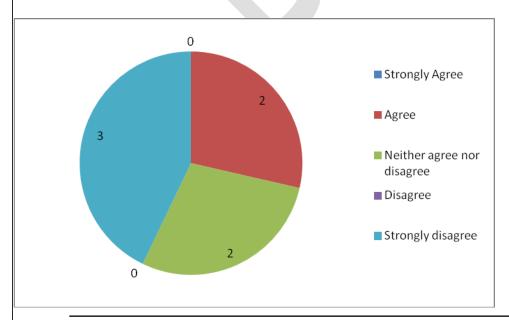
# Prevention Policy

Question 1

Wiltshire Council is proposing to charge for prevention services where it is able to do so. The decision whether to charge for a service will be based on an individual's ability to pay and the impact charging may have on the uptake of the service.

Do you agree it is reasonable for Wiltshire Council to charge for certain prevention services based on a person's ability to pay?

Total Responses-7



Opinion wab state water as of est of solutions of the provident of the pro

not be invested in at the cost of other services. The commissioning team is committed to developing an effective evidence base for investment in services and will use this feedback to support the planning of prevention services and those meeting eligible care and support needs.

## Question 4

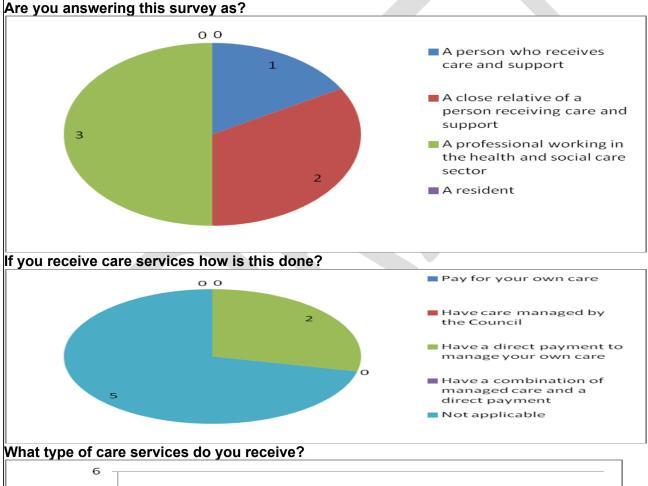
Would you like to make any further comments about anything included in the proposed policy? If so please use the space below to record your views.

## **Total Responces-2**

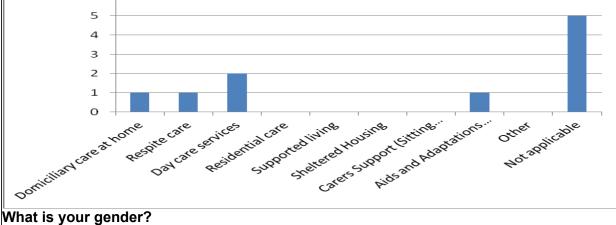
- I would ask the council to be more specific about what services it would see as "prevention" and how outcomes would be measured.
- One individual who identified themselves as a carer felt that withdrawing support might be the only way to highlight the need for prevention and asked the Council to "bear this in mind when determining how much support an individual needs, after all the need has already been agreed"

Demographic Information

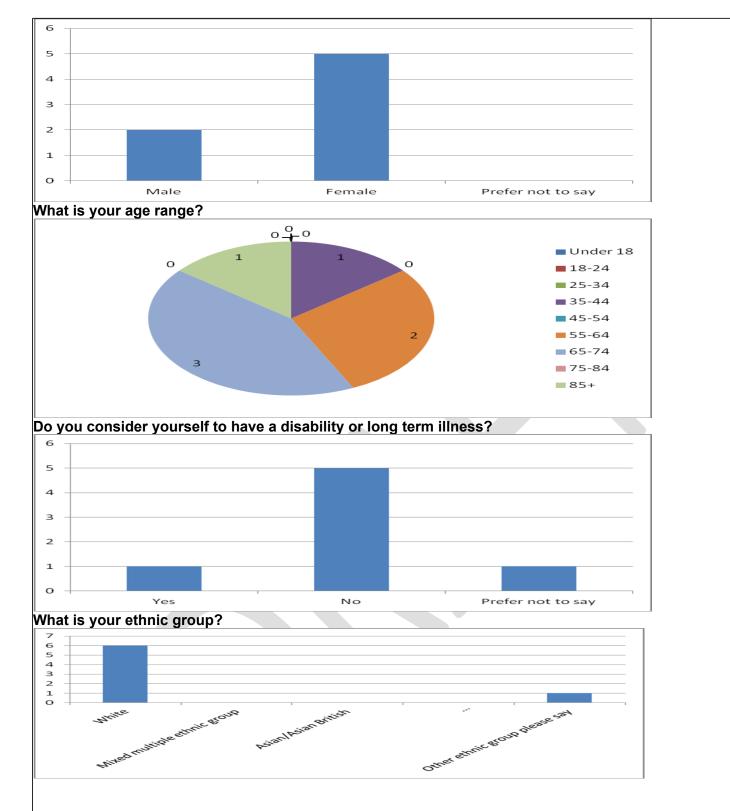
Based on respondents







Version 1: April 2014

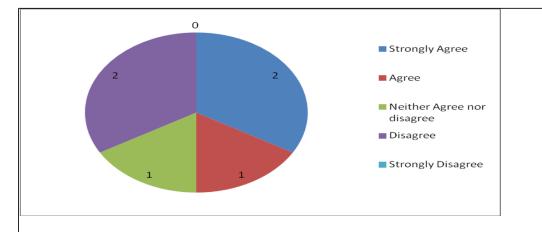


## General Policy Statement

Question 1

Do you think that it is reasonable that the Council invests in developing a range of care and support services including community services that are designed to prevent the need for traditional care services?

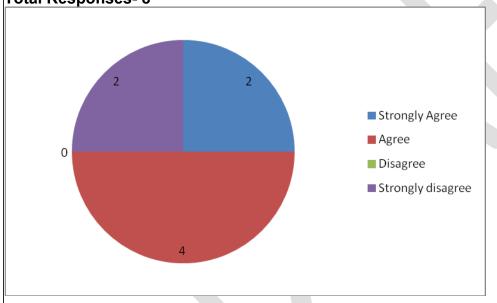
Total Responces-6



Opinion was split amongst responders, people who disagreed with the proposals commented that investment in prevention services should not be at the expense of other care and support services.

## Question 2

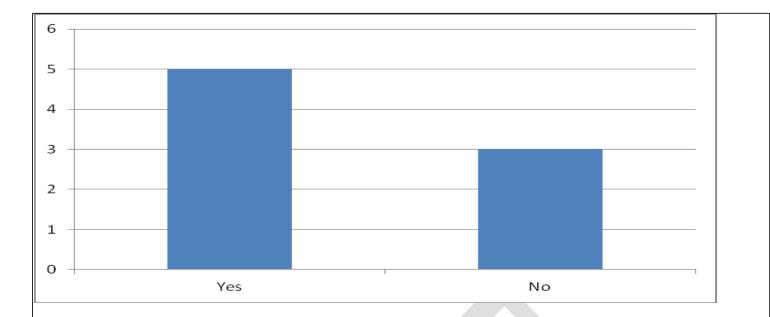
The policy proposes that the Council will always support customers to live at home in the first instance and that only when the total life cost of a package exceeds that of supporting a customer in residential care will the Council consider a care home placement. Do you agree the Council should support people to live at home for as long as possible? Total Responses- 8



The majority of people supported this proposal, people who disagreed asked the Council to take full consideration of carers when assessing for care and support needs. The Council is committed to supporting carers and is working to ensure a hollistic approach is taken duruing an assessment of need.

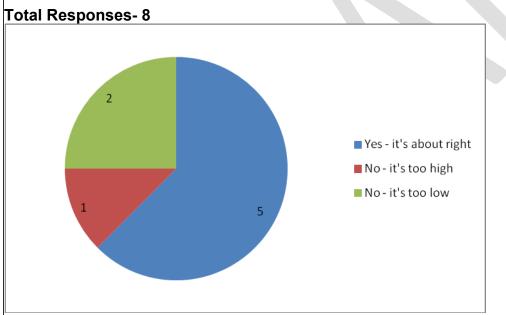
## Question 3a

Is it reasonable to ask people who have been assessed as having eligible care needs but have assets above the maximum threshold (currently £23,250) to pay the Council an administration fee for arranging their care and support? Total Responses- 8



## Question 4

Is a fee of £56.00 a fair amount to charge a self-funding customer described above to arrange a care package? Authorities have the discretionary power to charge an administration fee based on what it costs the Council to deliver this service. Costs will be different in each area but the proposed rate is approximately comparable with neighboring authorities who choose to charge for this service.



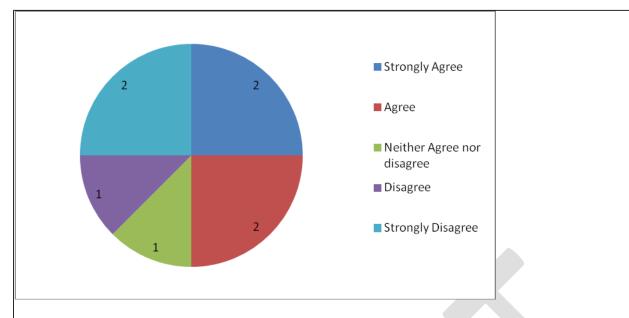
## Question 5

The Policy states that transport will only be provided as part of a care and support package when it is meeting an eligible care and support need.

When transport is provided it will only be provided to the nearest appropriate service, if customers choose an alternative service with additional transport costs the additional element of transport will not be funded.

Do you agree it is reasonable that the Council supports eligible customers to the nearest appropriate service only?

Total Responses- 8



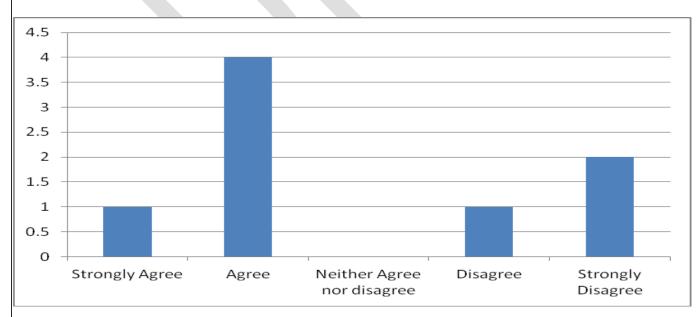
People who disagreed with this proposal suggested that this should only apply to those people in receipt of relevant benefits for instance mobility component of DLA. The policy does state that all relevant benefits would be taken into account and people may be supported to access the closest appropriate service. It is felt the current proposal ensures people use all applicable benefits and this is supplemented by the fact the Council remains committee in the charging policy to maximizing an individual's benefits where they may be entitled to additional support.

## Question 6

Wiltshire Council will always offer at least one service that will meet a person's needs within their personal budget. Customers are able to choose from any appropriate service available. If this service is more expensive than the Council would reasonably expect to pay for a service customers may be asked to fund the difference.

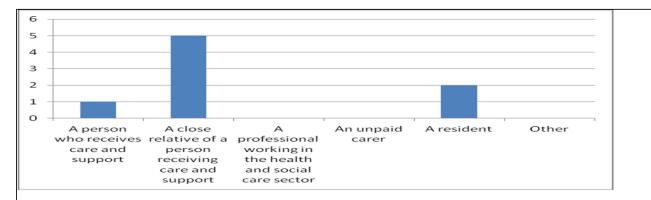
## Do you agree this is a fair approach?

## Total Responses- 8

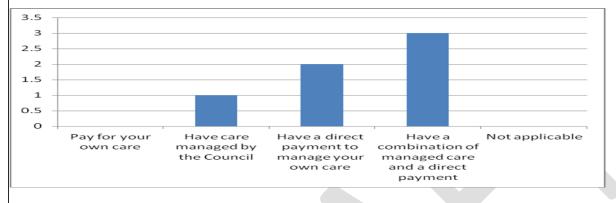


## Demographic Information (Policy Statement Survey)

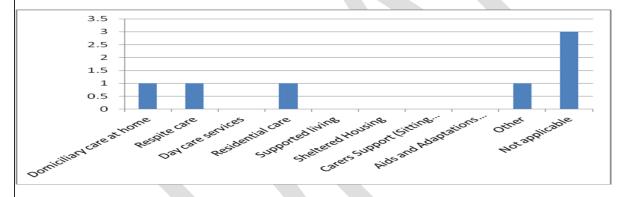
Are you answering this survey as? (Figure 2.6)



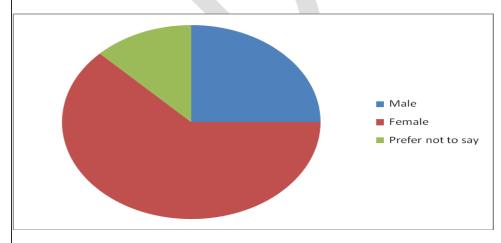
## If you receive care services how is this done? (Figure 2.7)



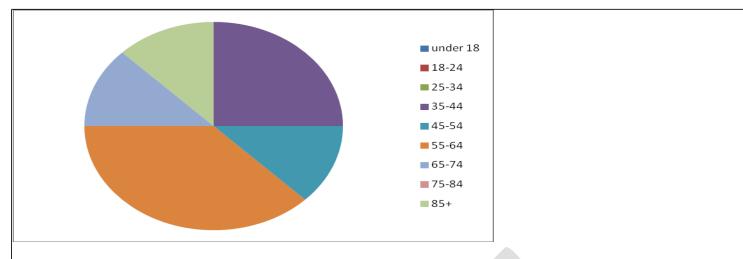
## What type of care services do you receive? (Figure 2.8)



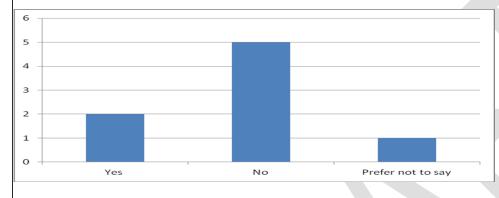




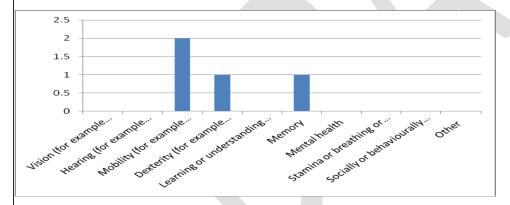
What is your age range? (Figure 2.10)



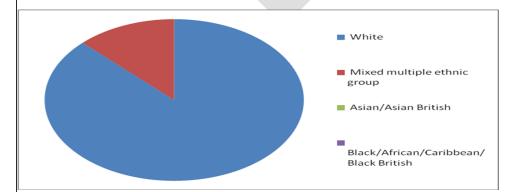
Do you consider yourself to have a disability or long term illness? (Figure 2.11)



## If you answered Yes above what is the nature of your disability? (Figure 2.12)



What is your ethnic group? (Figure 2.13)



As noted above the low number of responses makes it challenging to analyses these results and as stated it is recommended the new policy officer explores creative means of engagement so as to encourage greater participation in the future. It is also proposed that work continues to monitor the impact of these policies so as to supplement the survey responses.

Overall the responses suggest the majority of respondents agree with the Councils proposals and that this policy reflects the principles and requirements in the Act. The majority of comments from people who disagreed with a proposal were based on utilizing benefits reasonably and ensuring that investment in one area of service did not generate changes in another.

The community commissioning team is developing a commissioning intentions document that will re iterate the focus on using data and evidence as the foundation for commissioning discussions and decisions. Investment in one service or another will be based on the cost benefit analysis associated with a particular intervention as well as engagement with customers.

Section 4 – Conclusions drawn about the impact of the proposed change or new service/policy

Prompts:

- What actions do you plan to take as a result of this equality analysis? Please state them and also feed these into the action table
- Be clear and specific about the impacts for each Protected Characteristic group (where relevant)
- Can you also identify positive actions which promote equality of opportunity and foster good relations between groups of people as well as adverse impacts?
- What are the implications for Procurement/Commissioning arrangements that may be happening as a result of your work?
- Do you plan to include equalities aspects into any service agreements and if so, how do you plan to manage these through the life of the service?
- If you have found that the policy or service change might have an adverse impact on a particular group of people and are **not** taking action to mitigate against this, you will need to fully justify your decision and evidence it in this section

As a result of this analysis it is clear a robust period of consultation is required to fully assess the potential impact these proposals will have on the community. The consultation process will be used to gather people's views on the policies which will be considered before the proposals are submitted to cabinet for a decision. This section of the document details some of the key actions that will be taken to fully assess the impact of the proposed changes and to ensure that people living in Wiltshire have the opportunity to have their say.

#### Actions

Action detail	By When	Responsible
VCS pre consultation workshop to identify	August 17th 2015	Adult Care
available support networks		Commissioning
Second VCS pre consultation workshop to	September 4 <sup>th</sup> 2015	Adult Care
discuss proposed documentation		Commissioning
Revised documents to be 'tested' with	September 2015	VCS stakeholders
customers to assess accessibility and impact		
Healthwatch to facilitate a targeted	January 2015	Adult Care
engagement plan for consultation with key		Commissioning
stakeholder groups.		
Stakeholder meeting with key partners to	September 2015	Adult Care
continue discussions initiated on the 17 <sup>th</sup> of		Commissioning
August and to agree a set of 'key changes		
document' that will be used to supplement the		
consultation phase.		
Questionnaire online and in paper format	March 2016	Commissioning
available to the public		team
Equality impact assessment updated based on	June 2016	Adult Care
consultation		Commissioning
Cabinet paper submitted	July 2016	Commissioning
		team
Any changes implemented	August 2016	Commissioning
		team

#### Impacts on protected groups

Protected Characteristics	
Age	A high percentage of customers who pay for care and support are older people (65 or older) Reducing disposable incomes on this group can have a large impact as few older people work in paid employment and a reduction in disposable income may lead to people not being able to afford activities and items that will have an adverse impact on wellbeing.
Disability	Many customers with eligible social care needs will have a diagnosed disability or will consider themselves to be disabled. This change will increase the amount disabled customers who receives funded care and support services will have to contribute towards care and support services. As with older people this group often has low disposable incomes and reducing this income may have a negative impact on wellbeing.
Gender Reassignment	No additional Impact
Marriage and civil partnership	No additional Impact
Pregnancy and Maternity	No additional Impact
Sex	No additional Impact
Sexual Orientation	No additional Impact
Other	Other groups that are likely to be effected by the proposed changes include carers who will be included in any pre consultation engagement to understand any specific impacts and to

The proposed policy (if adopted) will promote an equitable approach to social care practice by removing any ambiguities. This will ensure that everyone regardless of any protected characteristic contributes fairly for the social care services that they receive. As a result of the consultation exercise the Council will be able to establish the groups that are likely to be impacted on if this policy is adopted. It may become clear that certain subgroups within cohorts of protected characteristic groups including older people or people with a disability will be particularly impacted upon by individual elements of the change. If impacts are identified targeted actions will be taken to ensure these groups are given every opportunity to comment on the proposed changes and these comments will be taken into consideration when making recommendations to cabinet.

The proposals included within the policy have the potential to impact upon large numbers of customers who receive care and support, their carers and those who may need care in the future. Subsequently the initial consultation will be broad and will comprise a combination of consultation aimed at specific groups as well as the general population. General consultation will include a questionnaire that will be available through the Councils website and in paper format if requested. A range of service providers, organisations and key stakeholders will be informed as to the details of the consultation so that they are given every opportunity to comment and are able to facilitate awareness raising amongst people who may be interested in getting involved.

An engagement workshop was held with key voluntary sector (VCS) and user led organisations (ULOs) with the objective of utilizing existing support networks and working with the Council to establish if any other support opportunities are required. These organisations will be kept fully informed of progress in relation to the policies including but not limited to informing stakeholders when the consultation is publically available so that they can work with their members to encourage people to share their views.

Subsequently a further session was held with key parters. This session generated a range of feedback about the proposed consultation documents. Based on this session further drafts of the documents and questions were produced and provided in draft format to key organisations so that they could be 'trialed' with target customer groups. This will allow commissioners to establish if the documents are accessible to customers and ensure the impact of the policies is robustly assessed through the consultation phase.

The responses will be collated and will be included in a proposal to cabinet which will set out what if any aspects of the proposed changes should be taken forward and adopted. The responses of stakeholders and individuals will be considered and included for cabinets consideration. Individual actions may be added to this equalities impact assessment based on the views expressed during the consultation.

The proposed changes will inform commissioning strategy and actions but do not have direct procurement implications at this stage.

In summary this assessment has concluded that if this policy is adopted it will impact upon groups within Wiltshire Community. Mitigating actions have been put in place which will reduce the impact of this proposed change on customers. These mitigating actions will be refined based on feedback from the affected groups and the decision by cabinet to implement all or aspects of the proposed policy.

#### \*Section 5 - How will the outcomes from this equality analysis be monitored, reviewed and communicated?

Prompts:

- Do you need to design performance measures that identify the impact (outcomes) of your policy/strategy/change of service on different protected characteristic groups?
- What stakeholder groups and arrangements for monitoring do you have in place? Is equality a standing agenda item at meetings?
- Who will be the lead officer responsible for ensuring actions that have been identified are monitored and reviewed?
- How will you publish and communicate the outcomes from this equality analysis?
- How will you integrate the outcomes from this equality analysis in any relevant Strategies/Polices?

Engagement with customers who may be effected by the changes will be ongoing and the Council will where appropriate continue to co produce commissioned services will those who will be effected by a particular service this approach will help the Council to monitor the practical implementation of this policy and to ensure it is being applied equitably across all customer groups.

The Community Commissioning team will lead on the implementation and review of these policies although it should be noted that these 'general' policies will impact on customers with specialist needs and as such this monitoring will need to be completed in partnership with representatives from the joint commissioning team. The Community Commissioning team has recently recruited to a policy and performance officer post who will be responsible for working with commissioners so as to ensure these policies generate changes in practice and culture and to develop operational guidance.

Wiltshire Council engages regularly with user led organisations which represent customers from across the groups who are most likely to require care and support. During ongoing engagement officers will monitor the impact of any changes that are taken forward. Bespoke and targeted monitoring may be required based on customers response to the consultation and will be added to this equality impact assessment.

In addition to this VCS partners who have been involved in the development of consultation documents and have will have facilitated the engagement process will be asked to continue to monitor the impact of any changes. It is proposed the dialogue maintained throughout this process is continued after the consultation period so as to establish the impact of any changes if agreed on customers. This information will then be used to ensure existing support networks are mobilized to support customers who may have been impacted by any policy changes.

# \*Copy and paste sections 4 & 5 into any Committee, CLT or Briefing papers as a way of summarising the equality impacts where indicated

Completed by:		Olly Spence
Date		31 <sup>st</sup> May 2016
Signed off by:		
Date		
To be reviewed by:		
Review date:		
For Corporate Equality Use only	Compliance sign off date:	



Equalit	y Impact Issues and Action Table(	for more information on prot	ected characteristics,	see page 7)	
<b>Identified issue drawn from</b> <b>your conclusions</b> (only use those characteristics that are relevant)	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age	1	I	1		1
receive social care and support are older people, subsequently large numbers of older people living in Wiltshire may be effected by the proposed changes.	A program of engagement with key stakeholders and user led organisations will be completed during the consultation. This will ensure that the maximum numbers of older people possible are supported to engage with the consultation and have their say. The views collected will be considered when making final proposals to cabinet.		October 2015	Number of consultation responses, level of engagement during pre consultation and engagement phase.	Older people who are likel to be effected by the policy shall be given the opportunity to give their views. Feedback gathered during the consultation phase will be considered before the final policy is submitted to cabinet.
customers will be effected by the proposed policy changes. This includes people who are not currently in receipt of care	Broad public consultation process aimed at understanding peoples views on the policies and specifically focused on how the changes if agreed will impact on customers now and in the future	Andrew Osborn	September 2015	Number of consultation responses, level of engagement during pre consultation and engagement phase.	People who may be effected by the policies wi be given the opportunity to comment and feedback. Views will be considered before final documents are sent to cabinet.
that in addition to older people young people with a disability may also be impacted on by these proposed changes.	Groups which represent users from a range of age groups and disability groups will be involved in the consultation process in advance of the public consultation phase. Healthwatch Wiltshire will work with users from a range of backgrounds so as to help people understand the changes and engage with the consultation process.	Andrew Osborn	October 2015	Age profile of survey respondents	As many people as possib supported to engage with the consultation process including representatives of a range of age groups and disability groups.

Disability					
As above					
Gender Reassignment				l	
As above					
Marriage and Civil Partners	hip				
As above					
Pregnancy and Maternity			·		
Race (including ethnicity or na	ational origin, colour, nationality and (	Gypsies and Travellers)		·	·
The analysis above has identified that while the demographic profile of customers who will be effected is predominantly white British there are a number of other ethnic groups who may be effected by the change.	All documents will include clear statements setting out that they are available in alternative formats at a customers request.	Andrew Osborn	October 2015	Documents to include option to be made available in alternative formats.	People who are not able to access standard documentation will be given the opportunity to engage with the consultation and give feedback on the proposals.
Religion and Belief					
As above					
Sex	1	1			
As above					
Sexual Orientation	1	1			
Other (including caring respo	nsibilities, rurality, low income, Militar	y Status etc)			
Carers and the people they care for are likely to be effected by the proposed changes.	Carers support organisations will be actively involved in the consultation process so as to ensure carers views are collated.	Andrew Osborn	September 2015	Number of responses from carers	Carers views will be considered and included.

As a result of the fact that changes to the charging policy may increase the number of people with assets below the financial threshold who contribute one hundred percent of their care package it will be important to ensure clear messages are distributed to staff setting out the fact customers remain local authority funded even if they make a full contribution.		raised by staff and customers- Number of full cost customers	Customers will still be treated as eligible customers despite the fact a one hundred percent contribution is made.
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Version 1: April 2014

3

#### Appendix one

#### Summary of changes

## Policy change

- 1. Prevention
- 2. Policy Statement
- 3. Charging

These documents set out clearly what the proposed policies will change if they come into effect. The document should be read with the full policies which provide further detail about how these proposals will work in practice.

It is important to note that these policies are **proposals only** at this stage and no changes will be made until after the consultation process has been completed, feedback has been considered and cabinet have made a decision.

## 1. Prevention Policy

Key Proposal	How (if at all) is this different
The Council will work to prevent reduce and delay	Council prevention activity is now a
needs arising across the population.	legal requirement.
Wiltshire Council will prioritise prevention activities	Policy sets out clearly when
when it is likely prevention interventions will reduce	Wiltshire Council will prioritise
the likelihood of an admission to hospital, reduce the	prevention
likelihood of an admission to residential or nursing	
care or will reduce the likelihood of a person developing needs that will impact on their ability to	
live independently.	
The Council will facilitate universal, secondary and	The Council already buys or
tertiary prevention activities.	supports activity across all three
	levels, the policy provides clarity as
	to what services will be developed
	at each of the three levels of
	prevention.
The Council will always consider how prevention	This statement reflects a change in
might help a customer before an assessment of need	the way the Council will try to work

is completed.	with customers increasingly taking a proactive approach to reducing needs rather than responding at a point of crisis.
The Council will always look to provide information and advice so that people can help themselves before considering other prevention services.	As a result of the Care Act the Council is increasingly developing information and advice for customers that means they can help themselves and do not need Council services.
Information and advice will not be charged for	No Change
The Council may charge for some prevention services (where it is allowed in legislation). The decision to charge for a service will be based on the level of risk to a customer and their ability to pay. Light touch financial assessments will be used to help the Council determine a person's ability to pay (customers will always be offered a full financial assessment if that is there choice)	The Council already charges for some prevention services such as community day care. The policy adds clarity for customers and staff as to when charges for prevention services will be considered.

# 2. Policy Statement

Key Proposal	How (if at all) is this different	
The Council will work to prevent reduce and delay	Council prevention activity is now a	
needs arising across the population.	legal requirement.	
Assessments will not be a gateway into services and everyone will receive information, advice and possibly support to help them to achieve their goals.	Makes it clear that the Council will promote wellbeing across the population and not just for those who have care and support needs.	
The Council will apply the national minimum eligibility criteria after prevention services have been provided or considered.	The Council previously met the needs of customers who had substantial or critical needs based on the old FACS criteria. The Care Act introduces a new set of eligibility criteria.	
The Council will meet people's needs with the minimum appropriate intervention.	No Change	

Support does not always mean traditional care and support services and may include information and advice, community organisations or personal resources.	Makes it clear that the Council will work with you to identify how you can use your own strengths to meet eligible needs before organising care services.		
Everyone who is eligible will be advised of an indicative personal budget before a support plan is created.	People will be given an estimate of how much it will cost to meet there care and support needs. Previously people were not told how much support would cost until after the plan was agreed.		
Everyone will receive a personal budget which is the amount of money needed to pay for acre and support needs.	Personal budgets are now a legal requirement for everyone who is eligible.		
The policy sets out the amount of money that will be used to calculate the reasonable cost of a care package based on what the Council currently buys similar services for.	The amount of money customers received as a direct payment or for a direct service was based on how the support plan met a customer's assessed needs.		
The Council will charge an administration fee for deferred payments (in accordance with previous consultation)	No fee was charged		
The Council will exercise its power to charge contributions for people who receive care and support services (not carers)	No Change		
The Council will charge an arrangement fee to set up care packages for customers who have eligible needs who live at home but have assets above the maximum financial threshold.	No charge is currently made for this service.		
Support Plan Reviews can happen at any time but will always take place at least once a year.	No Change		
The Council will only consider meeting needs through residential/nursing care provision once the whole life costing of a care package to support a customer at home exceeds that of residential/nursing care.	No Change, the policy provides more clarity about how this will work in practice.		
Equipment under the value of £1000 provided to meet eligible needs will be provided free to customers. If a	No Change		

customer does not have eligible needs information and advice will be provided to help the customer find the equipment they need.	
The Council will always ensure that there is at least one reasonable option available to customers to meet there needs before offering services where a third party top up will be required.	No Change
The Council will not fund any services that are required to meet health needs.	No Change
Transport services will only be funded for customers for whom transport is an eligible need in line with the National eligibility criteria.	Transport is funded based on the previous transport policy.
Transport will only be funded for customers to the nearest appropriate service. Customers who choose to use a service that requires a higher transport cost than the nearest appropriate service will be asked to top up.	In some instances the Council funds transport to services other than the nearest appropriate service.

# 3. Charging Policy

Key Proposal	How (if at all) is this different
Financial Assessments will be completed to	No Change
determine contributions after an individual's eligible	
care and support needs have been assessed.	
Carers services will not be charged for	No Change
The Council will not charge for any services it is not	No Change
permitted to charge for under the Care Act or other	
relevant legislation.	
The Council will ensure it widely publishes information	
about how contributions are calculated and will keep	
this information updated as required.	
Customers who have eligible needs will be given an	Customers were previously not
indicative budget before the support planning process	made aware of the likely cost of
is completed.	their support plans.
The Council will determine if an individual will need to	No Change
make a contribution towards care services based on	
the threshold set nationally.	

No Change.
No Change
No interest, administration or valuation fee is charged.
Currently only 80% of a customer's disposable income is taken into account when calculating contributions for customers who live at home.
The list has been revised and is attached below- the following items represent significant changes.
Previously only the lower rate of attendance allowance was taken into account even if the higher rate was received.
Previously included

Appendix 4

Document produced by Healthwatch Wiltshire to support engagement with customers to establish the impact of the proposed changes.



#### **DRAFT** and for discussion on 4 September 2015

Engagement to support the consultation on Wiltshire Council's Adult Social Care (ASC) policies

## 1. Background

Wiltshire Council is proposing to make changes to three of its ASC policies:

- Statement of policy on Adult social care and support
- Prevention policy
- Charging policy ('determining contributions to personal budgets')

Wiltshire Council has said that the decisions to update the policies '.... Have been made based on the requirement to make the best use of available resources, to ensure compliance with national legislation and so as to ensure there is clarity for customers and officers who may be effected by care and support services.'<sup>5</sup>

The Council intends to consult on the revised policies through a period of formal consultation which will run from xxxx to xxxxx.

A 'pre-consultation' workshops was held with a number of voluntary sector organisations on 17 August 2015. The purpose was 'to work with key partners from the voluntary sector and user led organisations to discuss proposed changes to policy and identify how we can work together to ensure existing support networks are available to people who may be affected by the changes'<sup>6</sup>. Feedback from participants included:

- Provide clear and accessible information to support the consultation
- Promote the consultation widely
- Create opportunities for people to share their views
- Explain clearly what is different about the revised policies and the implications of the changes on a Wiltshire-wide and individual basis
- The importance of ensuring that organisations which provide a service (voluntary or otherwise) are kept well informed about the consultation so that they can respond appropriately to any questions or concerns.

A second 'pre-consultation' workshop is arranged for 4 September 2017 at which a draft Equality Impact Assessment will be discussed. This draft engagement plan will also be discussed.

2. Healthwatch Wiltshire's (HWW) role

<sup>&</sup>lt;sup>5</sup> Equality Impact Assessment, Wiltshire Council

<sup>&</sup>lt;sup>6</sup> Taken from agenda for meeting

HWW is an independent organisation which has a statutory role in speaking up for local people on health and social care issues. HWW is committed to making sure that local people have the information they need to form a view on any proposed changes to health or social care. HWW is also committed to making sure that people have the opportunity to have their say. HWW does not have a corporate view on the proposed changes to the ASC policies. HWW's role, in respect to the consultation, is to:

- Make suggestions about the process to ensure it represents good practice
- Promote the consultation to local people
- Facilitate opportunities for local people to have their say on the proposed changes
- Reflect what people say to HWW (about the consultation) to Wiltshire Council<sup>7</sup>

Wiltshire Council will maintain overall responsibility for the consultation and for the final decision making process.

## 3. Desired outcome

The desired outcome is that as many people as possible have the opportunity to have their say during the consultation and that Wiltshire Council takes into account what people say when it formulates the final policies.

The effectiveness of the consultation depends on:

- The availability of good quality accessible information.
- Appropriate time for people to give their views (minimum of 12 weeks taking into account any holiday periods)
- The consultation questions must be carefully designed so as not to introduce any bias

HWW expects Wiltshire Council to take responsibility for delivering the elements described above. However, HWW hopes that Wiltshire Council will consult with it (and other voluntary sector partners) on them.

#### 4. Approach

It is important that current and future users of adult social care services have the opportunity to have their say. On this basis it is proposed that HWW convenes and facilitates a number of meetings which are open to the wider public as well as current service users (say 4-6 meetings held in different parts of Wiltshire). Wiltshire Council will need to send an appropriate representative to explain the policies and answer any questions. HWW will facilitate the discussions and record what people say so that this can be reflected in its final report.

Local voluntary sector organisations and user led organisations may want to give their members or service users the opportunity to have their say. These organisations may want to coordinate their own engagement opportunities and make their own responses to the Council on the consultation. However, if a local organisation would like HWW to facilitate a separate opportunity for its members or service users then HWW will do its best to accommodate this.

HWW will, through its regular scheduled engagement, ask people to answer the consultation questions.

The draft Equality Impact Assessment identifies current adult social care customers and their primary support need as well as age (18-64 and over 65s). Current ASC

<sup>&</sup>lt;sup>7</sup> HWW has full editorial and publishing rights for the reports it prepares. Its reports are based on what local people say about their experiences of, and views about, health and care in Wiltshire. All reports are in the public domain.

customers can be reached as they are known to Wiltshire Council. The Council is proposing to write to these customers. It is important that the letters are easy to understand and that people have the option to speak to someone directly if they have questions and that they are advised about how they can share their views. It is important that people who are typically harder to reach have the chance to be informed about the consultation and to have their say. People who are often harder to reach include:

- People who provide unpaid care to family members or friends
- People who fund their own care and support
- People who do not use social care services
- Working people
- Black and minority ethnic people

HWW will promote the consultation through its usual communication channels. There will be a need for Wiltshire Council, and other organisations, to consider how it will promote the consultation.

5. Timeframe

To be completed and dependent on Council's formal consultation 'window'

#### ng the Equalities Risk Score

You will need to calculate a risk score twice:

- 1. On the inherent risk of the proposal itself (without taking into account any mitigating actions you may identify at the end of the Equality Analysis (EA) process) 7
- 2. On the risk that remains (the residual risk) after mitigating actions have been identified

This is necessary at both points to:

- Firstly, identify whether an EA needs to be completed for the proposal and;
- Secondly, to understand what risk would be left if the actions identified to mitigate against any adverse impact are implemented

#### Stage 1 - to get the inherent risk rating:

- 1. Use the Equalities Risk Criteria Table below and score each criteria on a scale of 1 4 for the impact and their likelihood of occurrence. Multiply these 2 scores together (Likelihood x Impact) to get an overall score (this will range from 1 16)
- 2. Consider the scores and if any one aspect scores a 4 then this is likely to outweigh all others. On this basis determine the appropriate score for the risk. (Do not average scores since this will almost always produce a low average scored risk)
- 3. Assess whether you need to carry out an EA using the guidance box below (stage 2)
- 4. If an EA is needed (i.e. your score is above 3) make a note of your inherent score using the red, amber, green colour rating on the first page of the EA template

## Stage 2 - to identify whether an EA needs to be carried out:

If your inherent risk score is:

12 – 16 o Red = High Risk. An Equality Analysis must be completed. Significant risks which have to be actively managed; reduce the likelihood and/or impact through control measures.

6 – 9 or Amber = Medium Risk. An Equality Analysis must be completed. Manageable risks, controls to be put in place; managers should consider the cost of implementing controls against the benefit in the reduction of risk exposure.

- 3 4 or Green = Low Risk. An Equality Analysis must be completed
- 1 2 or Green = Low Risk. An Equality Analysis does not have to be completed

Stage 3 - to get the residual risk rating:

- 1. Repeat the process above when mitigating actions have been identified and evidenced in the <u>table</u> on page 3 to calculate the **residual risk**
- 2. Make a note of the residual risk score using the red, amber, green colour rating on the <u>first page</u> of the EA template

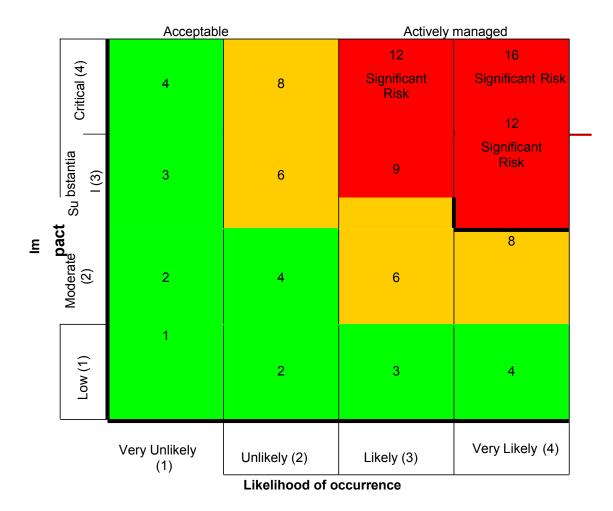
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## Equalities Risk Criteria Table

Impact	Low	Moderate	Substantial 3	Critical
Criteria	1	2		4
<b>Legal challenge</b> to the Authority under the Public Sector Equality Duty	Complaint/initial challenge may easily be resolved	Internal investigation following a number of complaints or challenges	Ombudsman complaint following unresolved complaints or challenges	Risk of high level challenge resulting in Judicial Review
Financial costs/implications	Little or no additional financial implication as a result of this decision or proposal	Medium level implication with internal legal costs and internal resources	High financial impact - External legal advice and internal resources	Severe financial impact - legal costs and internal resources
People impacts	No or Low or level of impact on isolation, quality of life, achievement, access to services. Unlikely to result in harm or injury. Mitigating actions are sufficient	Significant quality of life issues i.e. Achievement, access to services. Minor to significant levels of harm, injury. mistreatment or abuse OR, low level of impact that is possible or likely to occur with over 500 people potentially affected	Serious Quality of Life issues i.e. Where isolation increases or vulnerability is greatly affected as a result. Injury and/or serious mistreatment or abuse of an individual for whom the Council has a responsibility OR, a medium level of impact that is likely to occur with over 500 people potentially affected	Death of an individual for whom the Council has a responsibility or serious mistreatment or abuse resulting in criminal charges OR High level of impact that is likely to occur, with potentially over 500 people potentially affected
Reputational damage	Little or no impact outside of the Council	Some negative local media reporting	Significant to high levels of negative front page reports/editorial comment in	National attention and media coverage

## **Equalities Risk Matrix**



#### The protected characteristics:

Age - Where this is referred to, it refers to a person belonging to a particular age (e.g. 32 year olds) or range of ages (e.g. 18 - 30 year olds). This includes all ages, including children and young people and older people.

**Disability** - A person has a disability if s/he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.

Gender reassignment - The process of transitioning from one gender to another.

**Race** - Refers to the protected characteristic of Race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.

**Religion and belief -** Religion has the meaning usually given to it but belief includes religious and philosophical beliefs including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition.

**Marriage and civil partnership -** Marriage is defined as a 'union between a man and a woman'. Same-sex couples can have their relationships legally recognised as 'civil partnerships' and from 29<sup>th</sup> March 2014, same-sex couples can also get married at certain religious venues. Civil partners must be treated the same as married couples on a wide range of legal matters.

Pregnancy and maternity - Pregnancy is the condition of being pregnant.

Maternity refers to the period of 26 weeks after the birth, which reflects the period of a woman's ordinary maternity leave entitlement in the employment context.

Sex (this was previously called 'gender') - A man or a woman.

Sexual orientation - Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes

You are also protected if you are discriminated against because you are **perceived** to have, or are **associated** with someone who has, a protected characteristic. For example, the Equality Act will protect people who are caring for a disabled child or relative. They will be protected by virtue of their association to that person (e.g. if the Carer is refused a service because of the person they are caring for, this would amount to discrimination by association and they would be protected under the Equality Act)