

Durham County Council – Altogether Better equality impact assessment form

NB: Equality impact assessment is a legal requirement for all strategies plans, functions, policies, procedures and services. We are also legally required to publish our assessments. You can find help and prompts on completing the assessment in the guidance from page 7 onwards.

Section one: Description and initial screening

Section overview: this section provides an audit trail.	
Service/team or section:	
Lead Officer: Linda Ogilvie	Start date: 6 th July 2015 Update: 7 th January 2016
<p>Subject of the Impact Assessment: (please also include a brief description of the aims, outcomes, operational issues as appropriate)</p> <p>Care Connect is the council's community alarm and telecare provider. It provides a range of additional preventative services to a variety of people many of whom are older people and some who also receive a social care service. The community alarm service is non-statutory provision which assists users to live independently in their own home, safe in the knowledge that if there is an accident or they have a fall, they can get help quickly 24 hours a day, seven days a week, 365 days a year through our alarm monitoring and response service.</p> <p>In order to address ongoing reductions in government funding support for local authorities, MTFP proposals include a further reduction in Children and Adult Services (CAS) expenditure on Care Connect services of £750k from April 2016. The long term need for community alarm type services is likely to grow as the demographics of the county change. The longer term viability of the service depends on being able to cover the costs of providing community alarms through charging its customers. The cost to the council of delivering the community alarm service is currently estimated at £4.80 per week per client.</p> <p>Historically, customers in receipt of Guaranteed Pension Credit, Council Tax Benefit or Housing Benefit qualified for a free community alarm service. This qualification was removed for new customers from April 2014, as part of the previous MTFP savings measures. However, Cabinet agreed to protect those customers already receiving a free service for a period of at least two years. It is proposed to increase the charge for the self-funding customers from £4.60 to £4.80 per week. This increase is carried out on an annual basis and will increase the income to the service by £142k. In order to realise the full MTFP saving it is also proposed to introduce a contributory charge for those customers currently receiving the service for free.</p>	

The introduction of charges where none previously existed may lead to people withdrawing from the service. For example, Sunderland City Council introduced community alarm charges in 2013 and saw a reduction of around 40% of their customers. It should also be noted that there are around 4,200 smoke alarms linked to the community alarm system in registered housing provider properties. We currently receive 60p per week for each monitored smoke alarm under Service Level Agreements with the housing providers. Should individual customers decide not to stay on the Care Connect service, we would need to renegotiate our SLA or adjust the budget for loss of this income. In addition to the MTFP saving, the service is facing an additional cost pressure through the loss of £151k income from the termination of SLAs by the housing providers (County Durham Housing Group - Durham City Homes and Livin RSL) for the monitoring of their smoke alarms, door entries etc. A full review of delivery options for Care Connect is included in the RED Service Plan for 2016/17

If we assume a similar elasticity as Sunderland and make an adjustment for the loss of SLA income, then in order to make the appropriate level of savings it would be necessary to introduce a charge of £2.80 per week (around £145 per year) for those currently receiving a free service. This would still represent a considerable subsidy from the Council for these customers. Should the customer base fall by a greater amount than 40%, then the reduced level of income would need to be offset by a further reduction in the costs of staffing and resources required to deliver the service. Any shortfall in the anticipated income would be met from cash limits until exact numbers, costs and savings levels have been established.

Who are the main stakeholders: General public / Employees / Elected Members / Partners/ Specific audiences/Other (please specify) –
Care Connect service users, staff, potential users, NHS, Emergency Services, Public Health

Is a copy of the subject attached? Yes

If not, where could it be viewed?

Initial screening

Prompts to help you:

Who is affected by it? Who is intended to benefit and how? Could there be a different impact or outcome for some groups? Is it likely to affect relations between different communities or groups, for example if it is thought to favour one particular group or deny opportunities for others? Is there any specific targeted action to promote equality?

Is there an actual/potential negative or positive impact on specific groups within these headings?

Indicate :Y = Yes, N = No, ?=Unsure

Gender	Y	Disability	Y	Age	Y	Race/ethnicity	N	Religion	N	Sexual	N
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								or belief		orientation	
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How will this support our commitment to promote equality and meet our legal responsibilities?

Reminder of our legal duties:

- Eliminating unlawful discrimination & harassment
- Promoting equality of opportunity
- Promoting good relations between people from different groups
- Promoting positive attitudes towards disabled people and taking account of someone’s disability, even where that involves treating them more favourably than other people
- Involving people, particularly disabled people, in public life and decision making

Potential service impacts

The service is generally provided to older people and those who are vulnerable, for example as a result of a disability. There are older women in the county’s population so the likelihood is that more women will be affected by changes to this service than men. The gender profile of current service users shows that just under 65% are female. 58% of users are aged over 75. There is no direct evidence that changes to the service will have a specific impact in relation to transgender, race, religion or sexual orientation.

The potential impacts relate to health and wellbeing as well as financial impacts. The increase in weekly payments for self- payers and the proposed introduction of charges for those who currently do not currently pay will have a financial impact which may mean that some cancel, this could leave them at risk and would potentially increase reliance on other emergency response services such as ambulance or fire and rescue services.

The customers who currently receive a free service are amongst the highest users of the service. Over the last 12 months we have answered and responded to around 40,000 calls from these customers. Many of these calls relate to low level incidents. However, any withdrawal from the service will inevitably place additional burdens on the Police, Fire and Ambulance services. The consultation plan will identified key stakeholders and sought to assess the level of impact of potential changes. Section two of this assessment includes the equality specific consultation feedback.

Potential staff impacts

If proposals are implemented and the customer base falls this may affect staffing with a potentially greater impact on women as more women are employed within the service. Corporate HR procedures would be followed to ensure fair treatment.

What evidence do you have to support your findings?

There are currently around 16,300 households (20,000 customers) receiving the community alarm monitoring and response service. This comprises approximately:

☐ 9,750 households who receive the service free (through historical funding arrangements)

- ☐ 4,750 self-funding households (who currently pay £4.60 per week)
- ☐ 1,800 households in receipt of Telecare equipment and monitoring (which includes the community alarm service as part of an assessed care package)

Data for current users who receive the service for free (9,750 households = 11584 customers)

Gender breakdown: 7510 (65%) female, 4074 (35%) Male

Age breakdown:

Age Range	Customers
Birth to 64 yrs	2370
65 to 69 yrs	1091
70 to 74 yrs	1400
75 to 79 yrs	1959
80 to 84 yrs	2054
85 yrs +	2710
Total	11584

Update 7th January

After agreement by Cabinet a consultation exercise took place from 7th October to 30th November 2015 with customers, families or contacts, voluntary sector and interest groups including Age UK and Carers Forum, members and other stakeholders including police, fire and rescue and NHS. Questionnaires were targeted towards those current users who receive the service for free.

Consultation feedback

Survey respondents where:

	Frequency	Percent
A Care Connect customer	3878	85.7
A family member or carer of a Care Connect customer	624	13.8
Other	21	0.5
Total	4523	100.0
Missing	180	

Do you agree or disagree with the proposal to ask Care Connect customers currently receiving a free service to contribute £2.80 per week towards the cost of Care Connect services?

	Frequency	Percent
Strongly agree	252	5.6
Agree	1449	32.1
Neither agree nor disagree	786	17.4
Disagree	817	18.1
Strongly disagree	1207	26.8
Total	4511	100.0
Missing	91	
Don't know	101	

If we agree a charge of £2.80 per week, would you continue to use the service?

	Frequency	Percent
Yes	2625	57.4
No	1297	28.3
Don't know	653	14.3
Total	4575	100.0
Missing	128	

If we agree a charge of £2.80 per week, how could the proposed change affect you?

	Frequency	Percent
No real affect/will cope with it	918	31.5%
£2.80 per week (or equivalent) less well-off/another bill/lose financially, etc.	582	20.0%
Cut back on utilities/food/other items	291	10.0%
Unaffordable loss of money	287	9.9%
Will not pay for service/will not use	276	9.5%
Significant affect, badly, etc. (not specified)	245	8.4%
Would affect but will still pay	217	7.5%
Don't know	98	3.4%
Rely on other people/carer	5	0.2%

Would feel/be vulnerable	38	1.3%
Total	2957	101.6%

Do you have any further comments regarding these proposals, or alternative ways which the savings could be made within the Care Connect service?

	Frequency	Percent
Critical of consultation (tick box exercise, already agreed).	33	2.1%
Critical of change (hitting vulnerable, money-grabbing)	126	8.0%
Should be free/lower charge	205	12.9%
Praise of service	115	7.3%
Lamenting loss of money	74	4.7%
Cut councillors/councillors' pay	28	1.8%
Criticism of central Government	47	3.0%
Alternative funding/spending on local government services	62	3.9%
No Comment/Don't know	609	38.4%
Critical of service and previous changes	99	6.3%
Agree with the change	62	3.9%
Comments about other services	21	1.3%
Removal of system	81	5.1%
Pay as you go	27	1.7%
Cuts to Management/Wages	33	2.1%
Suggested change to service	43	2.7%
Total	1665	105.1%

Section two of this assessment includes the equality monitoring results from respondents.

Consultation returns from those currently paying for the service was low at 10% return. However, 80% of respondents agreed with the increase and commented that the service provided value for money and that they relied on the service. The proposed charges in County Durham appear to compare favourably with other local authorities.

Decision: Proceed to full impact assessment – Yes

Date: 6th July 2015

If you have answered 'No' you need to pass the completed form for approval & sign off.

Section two: Identifying impacts and evidence- Equality and Diversity

Section overview: this section identifies whether there are any impacts on equality/diversity/cohesion, what evidence is available to support the conclusion and what further action is needed.

	Identify the impact: does this increase differences or does it aim to reduce gaps for particular groups?	Explain your conclusion, including relevant evidence and consultation you have considered.	What further action is required? (Include in Sect. 3 action plan)															
Gender	<p>Proposed introduction of a £2.80 contributory charge per week will disproportionately impact women as there are more female registered users who receive the service for free.</p> <p>The proposals will have a financial impact which may mean that some service users cancel, this could leave them at risk and would potentially increase reliance on other emergency response services such as ambulance or fire and rescue services. Support in helping customers and carers/family to understand the changes including signposting to financial help and benefit maximisation will be available.</p> <p>If proposals are implemented and the customer base falls this may affect staffing with a potentially greater impact on women as more women are employed within the</p>	<p>Current users who receive a free service: 7510 (65%) female, 4074 (35%) Male</p> <p>Consultation respondents:</p> <table><tr><th></th><th>Frequency</th><th>Percent</th></tr><tr><td>Male</td><td>1119</td><td>30.3</td></tr><tr><td>Female</td><td>2578</td><td>69.7</td></tr><tr><td>Total</td><td>3697</td><td>100.0</td></tr><tr><td>Missing</td><td>1006</td><td></td></tr></table> <p>Consultation has indicated that 57.4% ‘free users’ would continue to use the service, 28.3% would not and 14.3% are still undecided. Actual retention rates will not be known until after invoices have been released to customers in April 16. However, for financial modelling a 40% drop off appears to be a prudent assumption.</p>		Frequency	Percent	Male	1119	30.3	Female	2578	69.7	Total	3697	100.0	Missing	1006		<p>If proposals are agreed all customers will be informed by letter of cost changes. Support including signposting to financial help will be provided where required to help people understand and adapt to the changes.</p> <p>Any customers who decide not to stay with the service but consider themselves to be at risk due to their vulnerability will be directed to Social Care Direct for an assessment of their needs if required.</p> <p>If staff are affected the change</p>
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Age	<p>Proposed introduction of a £2.80 contributory charge per week will disproportionately impact older residents in the county as 80% of registered users who currently receive the service for free are over the age of 65 years.</p> <p>The proposals will have a financial impact which may mean that some service users cancel, this could leave them at risk and would potentially increase reliance on other emergency response services such as ambulance or fire and rescue services. Support in helping customers and carers/family to understand the changes including signposting to financial help and benefit maximisation will be available.</p>	<p>Current users who receive a free service:</p> <table><tr><td>Age Range</td><td>Customers</td></tr><tr><td>Birth to 64 yrs</td><td>2370</td></tr><tr><td>65 to 69 yrs</td><td>1091</td></tr><tr><td>70 to 74 yrs</td><td>1400</td></tr><tr><td>75 to 79 yrs</td><td>1959</td></tr><tr><td>80 to 84 yrs</td><td>2054</td></tr><tr><td>85 yrs +</td><td>2710</td></tr><tr><td>Total</td><td>11584</td></tr></table> <p>Consultation respondents:</p> <table><tr><td></td><td>Frequency</td><td>Percent</td></tr><tr><td>Under 18</td><td>2</td><td>0.0</td></tr><tr><td>18-24</td><td>1</td><td>0.0</td></tr><tr><td>25-34</td><td>15</td><td>0.4</td></tr><tr><td>35-44</td><td>42</td><td>1.0</td></tr><tr><td>45-54</td><td>196</td><td>4.8</td></tr><tr><td>55-64</td><td>399</td><td>9.8</td></tr><tr><td>65-74</td><td>919</td><td>22.6</td></tr><tr><td>75+</td><td>2499</td><td>61.4</td></tr><tr><td>Total</td><td>4073</td><td>100.0</td></tr><tr><td>Missing</td><td>527</td><td></td></tr><tr><td>Prefer not to say</td><td>103</td><td></td></tr></table> <p>Consultation has indicated that 57.4% ‘free users’ would continue to use the service, 28.3% would not and 14.3% are still undecided. Actual retention rates will not be known until after invoices have been released to customers in April 16. However, for financial modelling a 40% drop off appears to be a prudent assumption.</p>	Age Range	Customers	Birth to 64 yrs	2370	65 to 69 yrs	1091	70 to 74 yrs	1400	75 to 79 yrs	1959	80 to 84 yrs	2054	85 yrs +	2710	Total	11584		Frequency	Percent	Under 18	2	0.0	18-24	1	0.0	25-34	15	0.4	35-44	42	1.0	45-54	196	4.8	55-64	399	9.8	65-74	919	22.6	75+	2499	61.4	Total	4073	100.0	Missing	527		Prefer not to say	103		<p>If proposals are agreed all customers will be informed by letter of cost changes. Support including signposting to financial help will be provided where required to help people understand and adapt to the changes.</p> <p>Any customers who decide not to stay with the service but consider themselves to be at risk due to their vulnerability will be directed to Social Care Direct for an assessment of their needs if required.</p>
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Disability	Proposed introduction of a £2.80	Current users who receive a free service:	Ensure consultation																																																				

	<p>contributory charge per week will disproportionately impact as all current service users who receive a free service have vulnerability and most have a disability.</p> <p>The proposals will have a financial impact which may mean that some service users cancel, this could leave them at risk and would potentially increase reliance on other emergency response services such as ambulance or fire and rescue services. Support in helping customers and carers/family to understand the changes including signposting to financial help and benefit maximisation will be available.</p>	<p>The service is generally provided to those who are vulnerable, for example as a result of a disability.</p> <p>Consultation respondents:</p> <table><tr><td></td><td>Frequency</td><td>Percent</td></tr><tr><td>Yes</td><td>3046</td><td>75.6</td></tr><tr><td>No</td><td>983</td><td>24.4</td></tr><tr><td>Total</td><td>4029</td><td>100.0</td></tr><tr><td>Missing</td><td>674</td><td></td></tr></table> <p>Consultation has indicated that 57.4% ‘free users’ would continue to use the service, 28.3% would not and 14.3% are still undecided. Actual retention rates will not be known until after invoices have been released to customers in April 16. However, for financial modelling a 40% drop off appears to be a prudent assumption.</p>		Frequency	Percent	Yes	3046	75.6	No	983	24.4	Total	4029	100.0	Missing	674		<p>is accessible and reasonable adjustments are made where required.</p> <p>If proposals are agreed all customers will be informed by letter of cost changes. Support, including reasonable adjustments and signposting to financial help will be provided where required to help people understand and adapt to the changes.</p> <p>Any customers who decide not to stay with the service but consider themselves to be at risk due to their vulnerability will be directed to Social Care Direct for an assessment of their needs if required.</p>
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Race/Ethnicity	Insufficient evidence to determine impact																	
Religion or belief	Insufficient evidence to determine impact																	

Sexual orientation	Insufficient evidence to determine impact		

How will this promote positive relationships between different communities?

Section three : Review and Conclusion

Summary: please provide a brief overview, including impact, changes, improvements and any gaps in evidence.			
<p>The service is generally provided to older people and those who are vulnerable, for example as a result of a disability. There are more older women in the county's population so the likelihood is that more women will be affected by changes to this service than men. The gender profile of current service users shows that just under 65% are female. 58% of users are aged over 75. There is no direct evidence that changes to the service will have a specific impact in relation to transgender, race, religion or sexual orientation.</p> <p>If proposals are implemented, any customers who decide not to stay with the service but consider themselves to be at risk due to their vulnerability will be directed to Social Care Direct for an assessment of their needs if required.</p>			
Action to be taken	Officer responsible	Target Date	In which plan will this action appear
Ensure consultation is accessible and reasonable adjustments are made where required.	Linda Ogilvie	Sept 2015	Complete
If proposals are agreed all customers will be informed by letter of cost changes. Support, including reasonable adjustments and signposting for financial help, will be provided where required to help people understand and adapt to the changes.	Linda Ogilvie	February/March 2016	
Any customers who decide not to stay with the service but consider themselves to be at risk due to their vulnerability will be directed to Social Care	Linda Ogilvie	February/March 2016	

Direct for an assessment of their needs if required.			
Follow change management toolkit if staff are affected to ensure fair treatment.	Linda Ogilvie	August 2016	
When will this assessment be reviewed?	Date: April 2016		
Are there any additional assessments that need to be undertaken in relation to this assessment?	No		
Lead officer - sign off: Linda Ogilvie <i>Linda Ogilvie</i>			Date:18/01/2016
Service equality representative - sign off: Gemma Wilkinson			Date:18/01/2016

Please email your completed Impact Assessment to the Equality team - equalities@durham.gov.uk.