

Shropshire Council Equality and Social Inclusion Impact Assessment (ESIIA)

Name of service change: Proposals to amend the Minimum Income Guarantee (MIG) element of the Adult Services Personal Budgets contribution Policy 2018/2019

Contextual Notes 2016

The What and the Why:

The Shropshire Council Equality and Social Inclusion Impact Assessment (ESIIA) approach helps to identify whether or not any new or significant changes to services, including policies, procedures, functions or projects, may have an adverse impact on a particular group of people, and whether the human rights of individuals may be affected.

This assessment encompasses consideration of social inclusion. This is so that we are thinking as carefully and completely as possible about all Shropshire groups and communities, including people in rural areas and people we may describe as vulnerable, for example due to low income or to safeguarding concerns, as well as people in what are described as the nine 'protected characteristics' of groups of people in our population, e.g. Age. We demonstrate equal treatment to people who are in these groups and to people who are not, through having what is termed 'due regard' to their needs and views when developing and implementing policy and strategy and when commissioning, procuring, arranging or delivering services.

It is a legal requirement for local authorities to assess the equality and human rights impact of changes proposed or made to services. Carrying out ESIIAs helps us as a public authority to ensure that, as far as possible, we are taking actions to meet the general equality duty placed on us by the Equality Act 2010, and to thus demonstrate that the three equality aims are integral to our decision making processes. These are: eliminating discrimination, harassment and victimisation; advancing equality of opportunity; and fostering good relations.

The How:

The guidance and the evidence template are combined into one document for ease of access and usage, including questions that set out to act as useful prompts to service areas at each stage.

Shropshire Council Part 1 ESIIA: initial screening and assessment

Please note: prompt questions and guidance within boxes are in italics. You are welcome to type over them when completing this form. Please extend the boxes if you need more space for your commentary.

Name of service change

Proposals to amend the Minimum Income Guarantee (MIG) element of the Adult Services Personal Budgets contribution Policy 2018/2019:

Aims of the service change and description

The Adult Social Care services in Shropshire Council currently arranges care in non-residential settings for 3,884 people in Shropshire, working with a range of providers to do so, and utilising a number of different mechanisms to help and support people to stay in their own homes for as long as they are able to.

The Minimum Income Guarantee ("MIG") is the amount that a recipient of Adult Social Care services must be left with to pay for everyday living costs after they have contributed to the care they receive in a non-residential setting. The statutory minimum income is £189.00 per week for a single person and £144.30 per week for a member of a couple. People who do not meet this are not charged for their care.

Since the implementation of the Care Act 2014, the Department of Health and Social Care circular issued each year stipulates the minimum values for the MIG. The Department of Health and Social Care has not increased the statutorily required MIG since 2015. On 30 January 2018 the Department of Health and Social Care issued its circular advice that there will be no changes in the level of the Minimum Income Guarantee for 2018/2019.

Local authorities have the discretion to set its MIG at a higher rate than the statutory minimum if they wish to do so which allows people to keep more of their income and lessens council income. Shropshire Council Cabinet resolved in May 2016 that this Council would increase its MIG rate for pension aged Service Users to £194.50 a week for a single pensioner and £148.50 for one of a couple making it higher than the governments recommendation. These were £5.50 and £4.30 a week higher respectively than the legal minimum MIG set out by the Department of Health and Social Care. In September 2017 Cabinet resolved that during 2017/18 the MIG rates would remain as per the previous year.

The Councils MIG for working age people is currently set at the statutory level and no increased allowances for any other group of service users has been made: for working age service users the Council have always applied the statutory minimum.

The MIG affects the level of the non-residential care contribution levied by the Council, and therefore the level of income which the Council can receive. Further detail is provided on this below, but in summary, the lower the level of the MIG, the greater the income that can be levied by the Council in the form of non-residential care contributions from individuals.

Shropshire Council, like other local authorities, is facing a significant increase in the cost of adult social care due to increasing demand, demographic pressures and rising contract costs; the cost of adult social care purchasing expenditure is forecast to increase by an average of 8% per year over the next five years.

As a large and sparsely populated rural authority with a significantly older age profile than the all-England average, these costs are exacerbated by the additional costs of

commissioning, arranging and delivering social care and other Council services to households across the county. The Council already works closely with other rural authorities and through MPs to make the case to Government for fairer funding in the light of sparsity factors, but is also required as a matter of financial prudence to take steps to ensure that income is maximised in ways that are fair and transparent as well as utilised in ways that will seek to benefit communities in Shropshire

It is proposed that two options for retaining or reducing the current level of MIG are consulted upon.

Option 1 - Retain existing MIG and increase care contributions in line with benefits increases.

Option 1 would effectively cancel out a service user's increased pension. A single older person receiving pension credit would receive a weekly increase of £7.15 in their income, and their contribution would increase by £6.39, leaving them with typically 76p additional income per week. One of a couple would receive £4.43 additional pension but would incur increased charges of £4.01, leaving them with typically 42p additional income per week. Therefore, if Shropshire Council's MIG were to remain the same as in 2017/12018, the financial consequence for those over retirement age would be that their weekly increase in pension would be absorbed almost entirely by the increase in their contribution to their care and support.

This option would generate an estimated additional income of approximately £250,000 per annum for the Council.

Option 2 – Change the level of the Minimum Income Guarantee to the level set by the Government. This will mean people receiving care will have to pay a little more towards that care.

People affected by the changes would keep less of their money because more will go towards care. For example, rather than have 76 pence extra, as in Option 1, a single person will have £4.74 a week less and a couple will have £3.35 a week less. This option will mean people will have less income than option 1 but it would mean Shropshire Council will have an extra £467,000 each year to help towards providing care and support to those who need it most.

The Minimum Income Guarantee for people of working age is already set at the Government minimum level. Option 2 would mean people of pensionable age are treated in the same way as people of working age.

All those affected by the above proposals will be contacted as part of the formal consultation.

Intended audiences and target groups for the service change

This will be the general public; those who are currently receiving care at home or in the community and of pensionable age who will be impacted by any changes to the Minimum Income Guarantee; their carers; those who receive care who are of working age; and their carers.

Evidence used for screening of the service change

- ***Statistics about the rurality of the County, its ageing population in statistical terms, and reference to the costs of arranging and providing services in a large rural county.***
- ***Any known evidence about the protected characteristic groupings of people who will be impacted by any changes to the MIG and of pensionable age, i.e. not just their age.***
- ***Reference that there are around 1300 people currently who would be impacted by any changes to MIG and of pensionable age***
- ***Numbers who are single and numbers who are in couples***
- ***Number this is expected to increase to over next five years to give perspective on the growth of this group and thus more weight to the rationale for the proposed service change***
- ***Numbers of working age who are receiving care and support at home or in the community in order to facilitate comparisons and give an overall picture.***

Specific consultation and engagement with intended audiences and target groups for the service change

- ***Individual households, whether single people or couples, for whom there is considered to be an impact either now or in the future***
- ***All those who would be affected by any changes to the MIG in Shropshire at the moment***
- ***Shropshire Council councillors***
- ***MPs***
- ***VCSA***
- ***Town and parish councils***
- ***Health and social care providers***
- ***Shropshire Business Board and Marches LEP***

This list is not intended to be exhaustive and will be amended and added to as appropriate, including as arrangements for consultation are further developed.

Potential impact on Protected Characteristic groups and on social inclusion

Using the results of evidence gathering and specific consultation and engagement, please consider how the service change as proposed may affect people within the nine Protected Characteristic groups and people at risk of social exclusion.

1. Have the intended audiences and target groups been consulted about:
 - their current needs and aspirations and what is important to them;
 - the potential impact of this service change on them, whether positive or negative, intended or unintended;
 - the potential barriers they may face.
2. If the intended audience and target groups have not been consulted directly, have their representatives or people with specialist knowledge been consulted, or has research been explored?
3. Have other stakeholder groups and secondary groups, for example carers of service users, been explored in terms of potential unintended impacts?
4. Are there systems set up to:
 - monitor the impact, positive or negative, intended or intended, for different groups;
 - enable open feedback and suggestions from a variety of audiences through a variety of methods.
5. Are there any Human Rights implications? For example, is there a breach of one or more of the human rights of an individual or group?
6. Will the service change as proposed have a positive or negative impact on:
 - fostering good relations?
 - social inclusion?

Initial assessment for each group

Please rate the impact that you perceive the service change is likely to have on a group, through inserting a tick in the relevant column. Please add any extra notes that you think might be helpful for readers.

Protected Characteristic groups and other groups in Shropshire	High negative impact <i>Part Two ESIIA required</i>	High positive impact <i>Part One ESIIA required</i>	Medium positive or negative impact <i>Part One ESIIA required</i>	Low positive or negative impact <i>Part One ESIIA required</i>
Age (please include children, young people, people of working age, older people. Some people may belong to more than one group eg child for whom there are safeguarding concerns eg older person with disability)			X	
Disability (please include: mental health conditions and syndromes including autism; physical disabilities or impairments; learning disabilities; Multiple Sclerosis; cancer; HIV)			X	
Gender re-assignment (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)				X
Marriage and Civil Partnership (please include associated aspects: caring responsibility, potential for bullying and harassment)				X
Pregnancy & Maternity (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)				X
Race (please include: ethnicity, nationality, culture, language, gypsy, traveller)				X
Religion and belief (please include: Buddhism, Christianity, Hinduism, Islam, Judaism, Non conformists; Rastafarianism; Sikhism, Shinto, Taoism, Zoroastrianism, and any others)				X
Sex (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)				X
Sexual Orientation (please include associated aspects: safety; caring responsibility; potential for bullying and harassment)				X
Other: Social Inclusion (please include families and friends with caring responsibilities; people with			X	

health inequalities; households in poverty; refugees and asylum seekers; rural communities; people for whom there are safeguarding concerns; people you consider to be vulnerable)				
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Guidance on what a negative impact might look like

High Negative	Significant potential impact, risk of exposure, history of complaints, no mitigating measures in place or no evidence available: urgent need for consultation with customers, general public, workforce
Medium Negative	Some potential impact, some mitigating measures in place but no evidence available how effective they are: would be beneficial to consult with customers, general public, workforce
Low Negative	Almost bordering on non-relevance to the ESIIA process (heavily legislation led, very little discretion can be exercised, limited public facing aspect, national policy affecting degree of local impact possible)

Decision, review and monitoring

Decision	Yes	No
Part One ESIIA Only?	X	
Proceed to Part Two Full Report?		X

Please now use the boxes below and sign off at the foot of the page.

Actions to mitigate negative impact or enhance positive impact of the service change
<p><i>The proposed changes, whether option 1 or option 2, are acknowledged to be likely to be considered to have a negative impact across the Protected Characteristic groupings, particularly the groupings for Age, Disability, and Social Inclusion, with regard to those currently of pensionable age who would be impacted by any changes to the Shropshire MIG and their carers; those who will enter this age group in the future; those with associated disabilities including seen and unseen disabilities; and those who are at risk of social inclusion such as low income households, households where members have caring responsibilities, and rural households for whom there are greater costs associated with accessing facilities and services. It is possible that there will also be future mental health care needs that could arise from placing real or perceived financial stress on a household as a result of changes to the way the MIG is applied.</i></p> <p><i>All other groupings are currently assessed to show a low negative impact in recognition that this service change will cut across all groupings.</i></p>

Efforts will be made during consultation on the proposals to seek views from communities as well as from service users and stakeholders.

Draft consultation documents and survey have been shared with service users for their feedback and comments. As a result of feedback changes have been made to the way information is presented, to the type of survey that will be issued, and in the design of the survey.

Please note- as consultation has not yet taken place actions to mitigate negative impact or enhance positive impact will depend upon decisions to be taken by Cabinet

Initial actions identified to date are as follows:

-undertake full consultation to allow people to share the concerns and impacts that the change will have

- ensure concerns are fully logged and reported to Cabinet to inform the final decision if the change is going to be implemented

It is recognised that there will then need to be ongoing efforts to engage with people in the Protected Characteristic groupings, particularly where low levels of responses to public consultation are received. Links may usefully also be made with specific target groups including older people, people with mental health problems, and people with physical disabilities, through projects and partnership initiatives already under way and through work with advocates. Actions may then be more readily identified from evidence gathered to mitigate the likely negative impact of the Strategy for these groupings, leading to better outcomes overall for communities in Shropshire.

Actions to review and monitor the impact of the service change


It is recognised that there will need to be clear communication and consistent messaging by the Council about where and how additional income to the Council would be utilised in provision of services, including geographical spread. People are being advised of changes that would impact on their personal finances, and they may consider that they are no longer perceiving personal benefit, in whichever of the Options being consulted upon. It will therefore be important for the Council to articulate and to emphasise the rural realities of arranging and providing adult social care services in what is the second largest inland county in England, and to set out in as much detail as may be possible where the additional money accruing to the Council is intended to be spent for the maximum benefit of these households, who may not otherwise perceive any tangible benefit.

Further actions will be identified following the public consultation, and developed in liaison with Shropshire Council councillors and with MPs as representatives of their

communities.

The Council will also share approaches with other local authorities including rural county authorities through organisations such as the County Councils Network and the Rural Services Network, in order to identify and develop best practice and to continue to make the case to Government for fairer funding for rural communities

Scrutiny at Part One screening stage

People involved	Signatures	Date
Lead officer carrying out the screening		
Any internal support*		
Any external support** Mrs Lois Dale Rurality and Equalities Specialist		30 th April 2018 <i>(commentary in bold and italics)</i>
Head of service		

*This refers to other officers within the service area

**This refers either to support external to the service but within the Council, eg from the Rurality and Equalities Specialist, or support external to the Council, eg from a peer authority

Sign off at Part One screening stage

Name	Signatures	Date
Lead officer's name		
Head of service's name		