

## EQUALITY IMPACT ASSESSMENT - TRAFFORD COUNCIL

A. Summary Details		
1	Title of EIA (Equality Impact Assessment):	Fair Price for Care Consultation (2021-22) for Homecare
2	Person responsible for the assessment:	Lindsey Mallory
3	Contact details:	<a href="mailto:Lindsey.mallory@trafford.gov.uk">Lindsey.mallory@trafford.gov.uk</a> Tel. No. 0161 912 4565
4	Section & Directorate:	All Age Commissioning - Adults
5	Name and roles of other officers involved in the EIA, if applicable:	Not applicable

B. Policy or Function		
1	Is this EIA for a policy or function?	Policy <input type="checkbox"/> Function <input checked="" type="checkbox"/>
2	Is this EIA for a new or existing policy or function?	New <input type="checkbox"/> Existing <input type="checkbox"/> Change to an existing policy or function <input checked="" type="checkbox"/>
3	What is the main purpose of the Policy/function?	The annual Fair Price for Care consultation is a statutory requirement under the Care Act. The requirement is to consult the provider market about proposed annual uplifts to the fees we pay them to deliver commissioned care services.  This EIA relates to the Fair Price for Care consultation for the provision of homecare services for the financial year 2021-22.
4	Is the policy/function associated with any other policies of the Authority?	The policy is related to our statutory obligations under the Care Act.

		It is also related to the Council's pledge to adopt UNISON's Ethical Care Charter (ECC). ECC sets out minimum standards of pay and working conditions for the homecare workforce. In order to meet these conditions we may need to make a commitment to increasing our hourly rate for homecare services. So that providers can improve pay and conditions for their workforce.
5	Do any written procedures exist to enable the delivery of this policy/function?	See above
6	Are there elements of common practice not clearly defined within the written procedures? If yes, please state.	Not applicable
7	Who are the main stakeholders of the policy? How are they expected to benefit?	<ul style="list-style-type: none"> <li>• Homecare providers are expected to benefit from an increase to the rates paid for the delivery of commissioned homecare</li> <li>• Homecare workforce will be expected to benefit from improved pay and conditions resulting from providers paying them an increase in their salary and expenses</li> <li>• People in receipt of homecare should benefit from improved workforce stability and continuity of care resulting from a reduction in staff turnover through improved pay and conditions</li> </ul>
8	How will the policy/function (or change/improvement), be implemented?	<p>The change will be implemented as follows:</p> <ul style="list-style-type: none"> <li>• A report to the Executive which presents options for the financial remuneration made to commissioned providers of homecare for services they provide to our residents.</li> <li>• The Executive considers the report and makes a recommendation for the fees payable for the relevant financial year.</li> <li>• This recommendation is then published for consultation and we gather formal responses from our providers and others.</li> </ul>

		<ul style="list-style-type: none"> <li>• The responses are then reported back to the Executive who use this information to make a final decision regarding the rates we pay our providers.</li> <li>• Any challenges are considered by the Executive before a final decision is made with regard to the annual rates we pay for commissioned homecare services.</li> </ul>
9	What factors could contribute or detract from achieving these outcomes for service users?	<p>The proposed uplift on the business as usual homecare rate of £0.91p and a further uplift which reflects the NLW (National Living Wage). This will be met by both transformation funding and within the overall allocation for inflation and demography in the Medium Term financial plan (MTFP). The funding and overall allocation will be that which has been allocated to the Adult Social Care Budget for 2021/22.</p> <p>There are several other methodologies for calculating the funding required to adequately fund commissioned homecare services, including the UK Homecare Association methodology. These indicate a higher rate is required to adequately fund homecare provision and ensure the workforce are appropriately remunerated.</p> <p>The Executive may choose to implement a higher or lower rate for the provision of commissioned homecare services</p> <p>The Executive may choose to keep the rate at the current level.</p>
10	Is the responsibility for the proposed policy or function shared with another department or authority or organisation? If so, please state?	The policy is shared with finance colleagues and the final decision is made by the Executive

## C. Data Collection

1	Do you have monitoring data on the number of people (from different equality groups) who are using or are potentially impacted upon by your policy/ function?	Yes																																		
2	Please specify monitoring information you have available and attach relevant information*	<p><b>Snapshot data provided by performance (January 2021):</b>  69% of homecare users are female  31% of homecare users are male</p> <p>Age range data:</p> <table border="1" data-bbox="909 635 1429 885"> <tr><td>under 55</td><td>12%</td></tr> <tr><td>55-64</td><td>10%</td></tr> <tr><td>65-74</td><td>13%</td></tr> <tr><td>75-84</td><td>27%</td></tr> <tr><td>85-94</td><td>33%</td></tr> <tr><td>95+</td><td>5%</td></tr> </table> <p>Ethnicity data:</p> <table border="1" data-bbox="909 970 1659 1468"> <thead> <tr><th colspan="2">Ethnicity</th></tr> </thead> <tbody> <tr><td>Any Other Asian Background</td><td>1%</td></tr> <tr><td>Any Other Black Background</td><td>1%</td></tr> <tr><td>Any Other Ethnic Group</td><td>0%</td></tr> <tr><td>Any Other Mixed Background</td><td>0%</td></tr> <tr><td>Any Other White Background</td><td>2%</td></tr> <tr><td>Arab</td><td>0%</td></tr> <tr><td>Bangladeshi</td><td>0%</td></tr> <tr><td>Black - African</td><td>0%</td></tr> <tr><td>Black Caribbean</td><td>3%</td></tr> <tr><td>Chinese</td><td>0%</td></tr> </tbody> </table>	under 55	12%	55-64	10%	65-74	13%	75-84	27%	85-94	33%	95+	5%	Ethnicity		Any Other Asian Background	1%	Any Other Black Background	1%	Any Other Ethnic Group	0%	Any Other Mixed Background	0%	Any Other White Background	2%	Arab	0%	Bangladeshi	0%	Black - African	0%	Black Caribbean	3%	Chinese	0%
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Chinese	0%																																			

Indian	1%
Information Not Yet Obtained	1%
Pakistani	1%
Refused	0%
White - British	86%
White - Irish	3%
White and Asian	0%
White and Black African	0%

Faith background data

Religion	
Blank	31%
Buddhist	9%
Christian	9%
Church of England	15%
Hindu	0%
Islamic	1%
None	2%
Not Stated	32%
Other religion	1%
Rastafarian	0%
Roman Catholic	8%
Sikh	0%

Disability data\*

Disability not registered	22%
Disability registered	6%
Blank	72%

		<p>*although we know that many people in receipt of homecare have physical impairments and could still be disabled if not registered as such</p> <p>We do not have reliable data about the sexual orientation of people in receipt of homecare.</p> <p>19% of homecare recipients live in the North of the borough  24% live in the Central neighbourhood  29% live in the South of the borough  28% live in the West of the borough</p>
3	If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data?	n/a (not applicable)

\*Your monitoring information should be compared to the current available census data to see whether a proportionate number of people are taking up your service

<b>D. Consultation &amp; Involvement</b>		
1	Are you using information from any previous consultations and/or local/national consultations, research or practical guidance that will assist you in completing this EIA?	<p>Yes, we have considered UK Homecare Association (UKHCA) recommendations with regard to rates payable to providers. We have also utilised UNISON's Ethical Care Charter to consider how the proposed changes could impact on the homecare workforce.</p> <p>We have also considered the rates which other neighbouring local authorities pay their providers and considered the impact of the 2020-21 UK Living Wage rates.</p> <p>We have adopted a price model which factors in all of the above and which reflects budget pressures for the Council.</p>

2	Please list any consultations planned, methods used and groups you plan to target. (If applicable)	<p>The information has been shared with providers and they have been asked to respond.</p> <p>The information was also published on the Council's website for public consultation.</p>
3	**What barriers, if any, exist to effective consultation with these groups and how will you overcome them?	<p>It is hard to consult with the homecare workforce with regard to pay and conditions because they tend to be lone workers, in the community.</p> <p>Also many are on part time or zero hours contracts. It is hard to consult with people in receipt of homecare because they tend to have difficulty leaving the house. Or are reluctant to participate in such exercises, for fear that it will affect their care.</p> <p>Our pricing model reflects expectations around the national living wage.</p> <p>The new service specification also makes requirements for providers to improve pay and conditions and evidence that they are meeting these expectations.</p>

\*\*It is important to consider all available information that could help determine whether the policy/ function could have any potential adverse impact. Please attach examples of available research and consultation reports

**E: The Impact – Identify the potential impact of the policy/function on different equality target groups**

The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any of the target groups you will also need to assess whether that negative potential impact is high, medium or low

	<b>Positive</b>	<b>Negative (please specify if High, Medium or Low)</b>	<b>Neutral</b>	<b>Reason</b>
<b>Gender</b> – both men and women, and transgender;	✓			If we do not uplift the homecare rate sufficiently, providers may not share the benefits of any uplift with their workforce who are predominantly female
Pregnant women & women on maternity leave			✓	Not applicable - the consultation relates to hourly homecare rates for the whole workforce.
Gender Reassignment			✓	Not applicable - the consultation relates to hourly homecare rates for the whole workforce.
Marriage & Civil Partnership			✓	Not applicable - the consultation relates to hourly homecare rates for the whole workforce.
<b>Race-</b> include race, nationality & ethnicity (NB: the experiences may be different for different groups)			✓	Not applicable - the consultation relates to hourly homecare rates for the whole workforce. The workforce is predominantly white British, as are recipients of homecare.
<b>Disability</b> – physical, sensory & mental impairments	✓			If the annual uplift is insufficient it may impact on market stability and workforce retention, which will impact on provider ability to deliver quality care. As the service is targeted at those who are most vulnerable, we can assume that many will be people with disabilities

<b>Age Group</b> - specify eg; older, younger etc)	✓			If the annual uplift is insufficient it may impact on market stability and workforce retention, which will impact on provider ability to deliver quality care. As the service predominantly supports people who are over 65, it is likely affect older people more.
<b>Sexual Orientation</b> – Heterosexual, Lesbian, Gay Men, Bisexual people			✓	Not applicable - the consultation relates to hourly homecare rates for the whole workforce.
<b>Religious/Faith groups</b> (specify)			✓	Not applicable-the consultation relates to hourly homecare rates for the whole workforce.

**As a result of completing the above what is the potential negative impact of your policy?**

High

Medium

Low

Neutral

<b>F. Could you minimise or remove any negative potential impact? If yes, explain how.</b>	
Race:	Not applicable
Gender, including pregnancy & maternity, gender reassignment, marriage & civil partnership	<p>There is a positive impact, which we plan to enforce through a revised homecare service specification for our commissioned homecare providers</p> <p>It is hoped that the increase in homecare rates will enable providers to improve the pay and conditions of their workforce. This is aligned with our commitment to adopting the Ethical Care Charter and our new homecare model. The new model will oblige providers contractually to adopt the Ethical Care Charter and ensure that homecare workforce pay and conditions improve.</p>
Disability:	<p>There is a positive impact, which we plan to enforce through a revised homecare service specification for our commissioned homecare providers</p> <p>It is hoped that the increase in homecare rates will enable providers to improve the pay and conditions of their workforce. This is aligned with our commitment to adopting the Ethical Care Charter and our new homecare</p>

		mode. The new model will oblige providers contractually to adopt the Ethical Care Charter and ensure that homecare workforce pay and conditions improve.
Age:		<p>There is a positive impact, which we plan to enforce through a revised homecare service specification for our commissioned homecare providers</p> <p>It is hoped that the increase in homecare rates will enable providers to improve the pay and conditions of their workforce. This is aligned with our commitment to adopting the Ethical Care Charter and our new homecare model. The model will oblige providers contractually to adopt the Ethical Care Charter and ensure that homecare workforce pay and conditions improve.</p>
Sexual Orientation:		Not applicable
Religious/Faith groups:		Not applicable
Also consider the following:		
1	If there is an adverse impact, can it be justified on the grounds of promoting equality of opportunity for a particular equality group or for another legitimate reason?	Not applicable
2	Could the policy have an adverse impact on relations between different groups?	Not applicable
3	If there is no evidence that the policy <i>promotes</i> equal opportunity, could it be adapted so that it does? If yes, how?	Not applicable

<b>G. EIA Action Plan</b>				
<b>Recommendation</b>	<b>Key activity</b>	<b>When</b>	<b>Officer Responsible</b>	<b>Progress milestones</b>
Develop a more ethical commissioning framework for homecare by 31 <sup>st</sup> March 2021	Tender for new homecare framework including contractual requirements around workforce pay and conditions	December 2020	Lindsey Mallory	Tender deadline is 29 <sup>th</sup> January
Complete a cost modelling exercise to ensure the hourly homecare rate promotes equality by March 2021	Cost modelling exercise	30 <sup>th</sup> June 2020	Lindsey Mallory	Complete

Please ensure that all actions identified are included in the attached action plan and in your service plan.

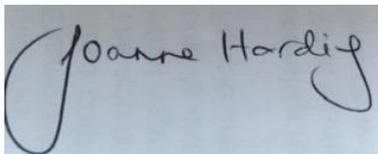
Signed  
Lead Officer  
Date



14th January 2021

Signed  
Service Head  
Date

Signed



Lead Member Date 21/01/2021

