

Working together to create a borough of opportunity
Predictive Equality Impact Assessment (PEIA)
FOR ALL COUNCIL DECISIONS ONLY



Title of report or proposal:

Fair Access to Care Services

Describe in full the aims, objectives and purpose of the proposal, including desired outcomes:

The Fair Access to Care Services Key Decision Report provides a full review of Fair Access to Care Services in LBH&F. Fair Access to Care Services are the adult social care eligibility criteria set down by the Department of Health for all Local Authorities. The criteria contain four bands – ‘critical’, ‘substantial’, ‘moderate’ and ‘low’ risk.

Most Councils provide services to those with ‘critical’ and ‘substantial’ needs only. The London Borough of Hammersmith and Fulham currently sets its threshold for services at ‘moderate’ and provides services for those at this level of need and above.

All Councils should review the Fair Access to Care Services eligibility threshold on a regular basis and in such a way that available resources are aligned with local need. An unavoidable increase in demand for services further predicates a need for the threshold for services to be reviewed.

All Councils must review eligibility for adult social care services in relation to the lowest band of service users in the first instance. For the London Borough of Hammersmith and Fulham, this band is ‘moderate’, of whom there are about 1,400 at any one time.

On March 2nd, this Council decided to review its Fair Access to Care Services and to consult on two options:

Option One – provision of services to ‘critical’ and ‘substantial’ only, with a resourced Preventative Strategy

Option Two – provision of services to ‘critical’, ‘substantial’ and ‘greater moderate’.

In the light of the outcome of the review, it is recommended that the Council adopt Option Two and provide services only to those assessed as being in ‘critical’, ‘substantial’ and ‘greater moderate’ need.

It is also recommended that Cabinet note the projected increase in demand and require officers to provide a further report on the options to meet this demand within a balanced budget including the necessity or otherwise of further raising the threshold for services.

Planned outcomes include the delivery of adult social care services within budget; equal and fair access to adult social care services and consistently robust and transparent assessment.

Department:

Community Services Department

Form and report MUST be checked and countersigned by the Principal Policy Officer (Organisational Development)

Officer Responsible:

John Chamberlain, Assistant Director, Adult Social Care, x 5004, john.chamberlain@lbhf.gov.uk

(Angela Jenkinson, Director’s Executive Assistant, Partnerships and Procurement, x5093, angela.jenkinson@lbhf.gov.uk)

Email completed form to PEIA@lbhf.gov.uk

Principal Policy Officer: *(to be completed by the Principal Policy Officer (OD))*

Signed off by Pinakin Patel at **14.08** on **11/07/07**. Email pinakin.patel@lbhf.gov.uk Tel 020 8753 5727

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. Who are the main people that this decision will affect?

The decision to raise the threshold for adult social care services will affect current and prospective service users over 18 years and their informal carers regardless of age, gender, disability or impairment, ethnic origin, sexuality or belief system.

Young disabled people between 16 and 18 will not be directly affected, but should be aware of the revised eligibility for Adult Social Care which could affect their services upon transition.

In particular, those present service users whose needs have most recently been assessed as 'moderate' or 'lower moderate' and those prospective service users whose needs would be assessed as 'moderate' or 'lower moderate' will be affected, contingent upon the Cabinet decision in July 2007. There will also be an impact on those service users whose needs have most recently assessed been assessed as 'critical' or 'substantial' but who also have some needs assessed as 'moderate' or 'lower moderate'.

At the time of the consultation, there were approximately 2,200 'critical' and 'substantial' service users and 1,400 'moderate' service users, although this figure inevitably fluctuates slightly over time.

The decision to raise the threshold for adult social care services could also potentially affect adult social care staff. There will need to be a review of the number of assessment and support staff should the numbers of service users drop significantly. This could mean that some posts would be deleted. However, this review will not be possible until the data from all 'moderate' assessments is available in October.

Planned outcomes include the delivery of adult social care services within budget; equal and fair access to adult social care services and consistently robust and transparent assessment.

2. Identify the risks that could prevent the planned outcomes

There is a risk that Cabinet could decide not to raise the threshold for adult social care services.

There is a risk that the Fair Access to Services review might not divert sufficient funds.

There is a risk that staff training and development might not be sufficient to ensure that assessments are carried out consistently and accurately.

There is a possible risk that, following reassessment, more than the projected number of service users who were in the moderate band are assessed into substantial and critical bands.

3. Could the proposal have a positive impact on a) race b) disability c) gender d) sexual orientation e) age f) belief system groups? (Please provide evidence e.g. user feedback, complaints, monitoring?)

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Pinakin.patel@lbhf.gov.uk

The decision to raise the threshold for adult social care services will have some positive impacts on current and prospective service users across race, disability, gender, sexual orientation, age and belief system groups.

The key positive impact for disadvantaged groups is that the purpose of the Fair Access to Care Services review is that its resources are directed at meeting the increasing levels of need for those most in need. Therefore, the review will ensure that the most vulnerable people have an equal chance of access to and benefit from the services that they need.

The majority response to the consultation was in favour of the second option for raising the threshold for services (82%) – to provide services for those with ‘critical’, ‘substantial’ and ‘greater moderate’ needs. There was no significant difference in terms of age, gender, disability, ethnic group, or employment status in this respect. Therefore, were the Cabinet to decide to raise the eligibility threshold as per option two, this would be in direct response to the consultation and therefore targeting services as present and prospective users would prefer.

Arising from the Fair Access to Care Services review and captured in the implementation plan, service users will benefit from improvements in assessment practice and the more consistent and transparent application of eligibility criteria in line with the Department of Health Fair Access to Care Services guidance and underpinned by the Assessment Tool.

A further outcome of the consultation process was the identified need for improved information and communication. Service users will benefit from the drafting and execution of an Information and Communication Plan regarding adult social care services and other locally available resources, as captured in the implementation plan.

4. Could the proposal have a negative impact on a) race b) disability c) gender d) sexual orientation e) age f) belief system groups? (Please provide evidence e.g. user feedback, complaints, monitoring,?)

The decision to raise the threshold for adult social care services will have a negative impact on current and prospective ‘moderate’ or ‘lower moderate’ service users regardless of age, gender, disability or impairment, ethnic origin, sexuality or belief system. It may also have a negative impact on informal carers who support service users who lose services.

The adverse effect mirrors the pattern of adult social care uptake. Therefore, there is no group for whom a change in eligibility as proposed has a disproportionately adverse impact.

a) Race

- The Department monitors the take up of resources by ethnic group.
- Take up is proportionate and therefore any reduction in service users will be proportionate.
- At one consultation event, service users with mental health needs were concerned that raising the threshold for services would have a differentially negative impact on people from black and minority ethnic groups. People from black and ethnic minority groups are over represented amongst learning disabled and mental health groups, but represent only a small number of ‘moderate’ service users.
- Furthermore, there was no correlation between race and preference for option one or option two.

b) Disability

- As of data produced in May 2007, of 1,472 ‘moderates’, 36% or 525 are on the Council’s Disability Register.
- Of these 525, 65% have a physical disability (341), 10% have a learning disability (52), 18% have a mental health need (94) and 10% have a sensory impairment (53).
- Consequently, people with a physical disability are the second largest group on the Disability Register to be affected by a change in the eligibility for adult social care services.

People with a physical disability were the largest group to respond to the Fair Access to Care Services consultation questionnaire (61%) and, accordingly, the group that all questionnaire respondents felt would be second most affected by changes to the threshold (71%).

There are no disability groups that will be disproportionately affected.

- c) Gender – There was no significant correlation between gender and preference for option one or option two.
- d) Sexual orientation – The Fair Access to Care Services will not have a differential effect dependent on sexual orientation.
- e) Age – As of data May 2007, of 1,472 ‘moderates’, 64% or 947 are older people. This mirrors uptake for all adult social care services. Therefore, older people are the largest group to be affected by a change in the eligibility for adult social care services.

Older people were the second largest group to respond to the Fair Access to Care Services consultation questionnaire and the group that questionnaire respondents felt would be most affected by changes to the threshold.

- f) Belief system groups – The Fair Access to Care Services review will not have a differentially negative impact on belief system groups.

5. Can any negative impact of the decision be justified?

The intended positive impact of a decision to raise the threshold for adult social care services is to ensure that resources are directed at those most in need. Therefore, the review will ensure that the most vulnerable people have an equal chance of access to and benefit from the services that they need. This is outlined in more detail in section three above.

Furthermore, a number of specific actions to mitigate against the impact of raising the threshold have been identified through the Fair Access to Care Services consultation process and through conducting the Predictive Equalities Impact Assessment.

Identified actions as outlined below will be included within the Fair Access to Care Services implementation plan.

- Assessment process – The consultation and PEIA processes both highlighted the importance of fair, timely and accurate assessments, underpinned by a consistently robust and transparent assessment process. The Assessment Tool will be published on the LBH&F website and disseminated to stakeholder organisations. Standardised assessment paperwork will be disseminated. Assessment outcomes will be confirmed in writing and the date giving notice of when services will cease unless their needs have changed, in which case they should notify the Department so as to automatically trigger a reassessment. Service users will be given a copy of the Complaints Procedure when they are assessed/reassessed. Reassessments conducted within three months of the Cabinet decision on July 16th will be deemed to be current and services will be immediately adjusted or ceased from the Cabinet decision. Reassessments conducted before this three month cut off will be deemed to no longer have currency and will be reconducted. People will be advised to contact the Department if their needs change.
- Training and development – A training plan will be devised and implemented by the Fair Access to Care Services Steering Group. Training will be designed to promote the consistent and correct application of the FACS criteria and guidance and of the Assessment Tool. The Reviewing Team

will have an important role in acting as assessment champions. The Assessment Tool will be disseminated to staff, including those in integrated teams.

- Information and communication – An Information and Communication Plan will be devised by the Fair Access to Care Services Steering Group. This will include information and communication with regard to the outcome of the review (including a public statement of the threshold for adult social care service) which will be devised and disseminated by the FACS Steering Group. The cost for this will come from the monies found from the change in the Fair Access to Care Services criteria. This should not be more than £20,000.
- The Information and Communication Plan will also address the need for information, signposting and advice regarding adult social care services and other locally available resources.
- The Information and Communication Plan will pay specific regard to appropriate communication channels for older people and people with disabilities, given the projected impact on these groups as outlined above. Council officers will liaise closely with user representative organisations including HAFAD, the Disability Forum, Better Government, Safety Net People First and MIND Service Users Network when devising the Information and Communication Plan.

6. If you have undertaken any internal/ external research or consultation(s) please list these below:

The PEIA has been informed by a comprehensive consultation programme which ran for three months from March to May 2007.

Thirty three consultation events were held, attended by approximately 490 service users.

Consultation questionnaires were sent to 3,204 community service users (questionnaires were not sent to those in residential placements). Questionnaires were also sent to 459 carers, although carer and user households will have overlapped, and 121 named contacts in contracted and partner organisations. A total of 686 questionnaires were returned, a response rate of 18%.

7. Do you need to undertake any further consultation? If so, what and with whom?

No further consultation required at this time.

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**Contact: Pinakin Patel, 020 8753 5727
Assistant Chief Executive's Department
London Borough of Hammersmith & Fulham**