

**Consideration of uplift for fees paid to providers 2012-13
Equality impact assessment summary**

Name of the Directorate and Service Area	Health and Adult Services
Policy / Function / Service / Title	Consideration of uplift for fees paid to providers 2012-13
Description of the service/policy	<p>This Equality Impact Assessment (EIA) seeks specifically to review the policy and approach to this year's consideration of an uplift for 2012/13 which is applied to the fees payable to independent sector providers that deliver residential care, nursing care and domiciliary care and voluntary sector providers who deliver mainly non-regulated services. The key stakeholders involved are the ICG (Independent Care Group), which is an organisation that represents the independent sector, other independent sector providers not represented by the ICG, and voluntary sector organisations such as Carers Organisations, Age UK and the Alzheimer's Society.</p> <p>The policy aims to consider an uplift to providers currently operating at the Council's standard rates. Consideration is given to a higher weighted uplift to care homes providing placements for people with enhanced/dementia needs. The policy also aims to consider uplifts to the voluntary sector which delivers a wide range of non-regulated services.</p>
Results of the assessment:	<p>If there is a substantial imbalance identified between the "usual cost of care" and the actual cost of care this would be contrary to the Building Capacity and Partnership in Care and may lead to an adverse impact based on the assumption that there is an 'inevitable reduction in the quality of service provision' which 'may put individuals at risk.' However, the work undertaken with providers in Baseline Assessments in relation to the quality of service provision has not supported the above assumption.</p> <p>Areas of potential impact (should impact be identified as defined by protected characteristics) would be disability and age. There is also differential impact on grounds of gender due to demographics (women generally live longer than men) so therefore if people are generally impacted upon due to age this would affect more women than men. Also, there is an impact due to financial circumstances, based on women's working patterns throughout their working life which means that they are more likely to be on low incomes. However, the requirement for service is based on the person's assessed need and not their ability to pay, which is assessed separately and does not impact on provision of service offered. There is also some potential for differential impact on the grounds of sexual orientation as research indicates that older Lesbian, Gay, Bi-sexual and Trans-gender people may be more reliant on social care as they are less likely to have support from family carers.</p> <p>Actions:</p> <ul style="list-style-type: none"> • Gather and share more market intelligence to ensure the market

	<p>can adapt to the changing demand in terms of an ageing population, increase in people with dementia and the personalisation agenda.</p> <ul style="list-style-type: none"> • Internal validation and “open book “exercise on fees paid. • Funding of Telecare. • Funding of Training. • Decision by Executive Member.
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