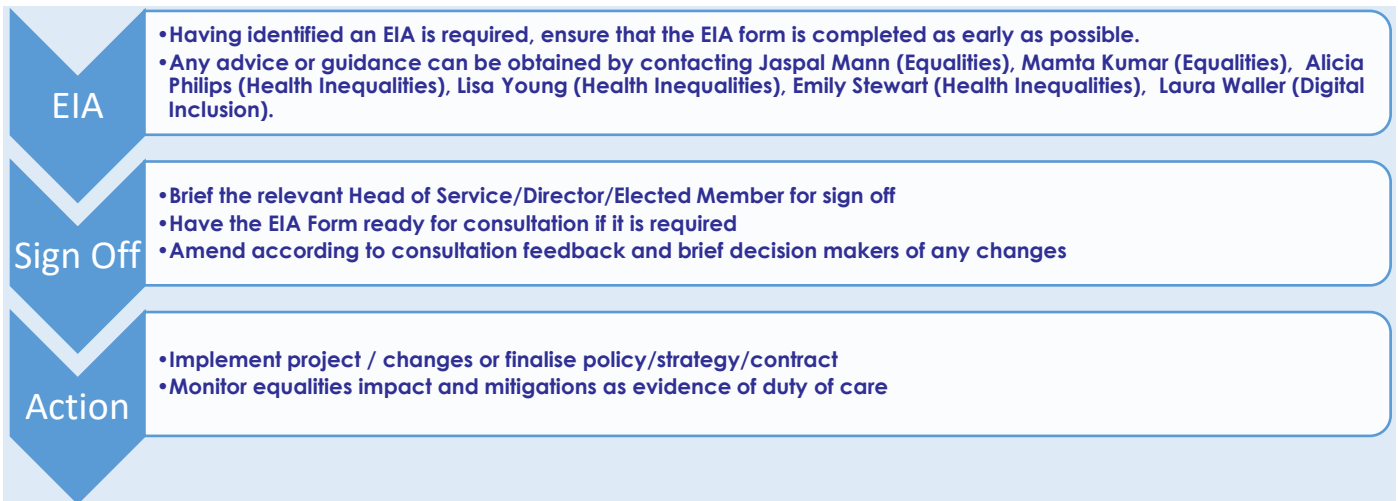


EQUALITY IMPACT ASSESSMENT (EIA)



Title of EIA		Adult Social Care – Deferred Payment Scheme
EIA Author	Name	Jane Mousley
	Position	Change Manager
	Date of completion	11/01/24
Head of Service	Name	Tracey Denny
	Position	Head of Localities & Social Care Operations
Cabinet Member	Name	Cllr. Bigham
	Portfolio	Cabinet Member for Adult Services



PLEASE REFER TO [EIA GUIDANCE](#) FOR ADVICE ON COMPLETING THIS FORM

SECTION 1 – Context & Background

1.1 Please tick one of the following options:

This EIA is being carried out on:

- New policy / strategy
- New service
- Review of policy / strategy
- Review of service
- Commissioning
- Other project (please give details) *Medium Term Financial Strategy Project*



1.2 In summary, what is the background to this EIA?

Care and support for adults to live an independent life are not free. Adult Social Care provide a needs and well-being assessment and support plan. If residential or nursing care is appropriate, a financial assessment will be undertaken.

Adult Social Care will undertake a financial assessment which will determine:

- whether the local authority will meet all the cost of your care
- or whether you will need to contribute towards your care cost
- or whether you will have to pay the full cost.

A Financial Assessment will be completed which will consider –

- existing income, such as state pension, occupational pensions etc.
- the amount of Income Support/Pension Credit you would receive if you went into residential or nursing care.

Depending on individual circumstances, it is decided as part of the assessment whether a property is included in your assessment of charges. There are some circumstances where property is disregarded which are:

- If the residents' partner will continue to live in the property.
- If the resident has a relative aged 60 years or over living in the property.
- If the resident is responsible for a child under 16 years living in the property.
- If the resident has a relative who is incapacitated and lives in the property.
- The Council can use a discretionary power to disregard a property in exceptional circumstances.

If a resident has been assessed to pay the full cost of their residential or nursing care a Deferred Payment Scheme is designed to help if their capital is tied up in their home.

In order to apply for the Deferred Payment Agreement Scheme a resident must have one of the following:

- Capital (excluding the property) of less than £23,250.
- Be professionally assessed as requiring and be entering permanent residential / nursing care in a registered care home.
- Own or have part legal ownership of a property, which is not benefitting from a property disregard, and ensure their property is registered with the Land Registry.
- Have mental capacity to agree to a deferred payment agreement or have a legally appointed agent willing to agree this.



Adult Social Care can consider circumstances outside of the usual criteria and agree a Deferred Payment Scheme, where it is considered appropriate, within the parameters of the Guidance.

The expectation of the Care Act 2014, is that Local Authorities will assist an individual to access a placement in a residential or nursing care home and, based on the 12-week property disregard, will fund that placement for those first 12-weeks.

During those 12-weeks, residents who have had a Financial Assessment which determine they need to pay for their care however, their assets are tied up with their property need will have to make arrangements to fund their own placements from the 13th week, either by liquidating their assets or by making a formal Deferred Payment Agreement (DPA) with Coventry City Council.

The Deferred Payment Agreement Scheme is a national approach and is designed to help residents if they have been assessed to pay the full cost of their residential care but cannot afford to pay the full weekly charge because most of their capital is tied up in your home.

The scheme offers the resident a loan from Coventry City Council using their home as security. It generally does not work in the same way as a conventional loan. The Local Authority does not give a fixed sum of money when they join the scheme. The Local Authority pays an agreed part of their weekly care and support bill for as long as there is sufficient equity in the property.

When a resident enters into the Deferred Payment Agreement Scheme, they enter into a legal agreement with the Council by signing an agreement document. The Council then places what is called a 'legal charge' on their property to safeguard the loan. They will be charged for this expense, and it will be included in the DPA reclaim invoice when the funding ends.

The agreement covers both the responsibilities of the Council and the resident responsibilities, one of which is to make sure that their home is insured and maintained. They can end the agreement at any time (for example if they sell their home) and the loan then becomes payable immediately. Otherwise, the agreement ends on their death and the loan becomes payable 90 days later. The Council cannot cancel the agreement without their consent.

Interest can be charged on the loan in the same way a normal loan would be on money borrowed from a bank. The maximum interest rate that can be charged is fixed by the government. Currently the maximum rate that can be charged is based on the cost of government borrowing and will change on 1st January and 1st July every year. The current rate applicable from 1 January 2024 is 4.65%.

The interest will be compounded on a four-weekly basis. The interest will apply from the day a Deferred Payment Agreement is entered into. Regular statements are issued showing how the charge is being calculated and what the outstanding sum on the Deferred Payment account is.

Currently, Coventry City Council does not have guidance available to practitioners and therefore has continued to offer unsecured Deferred Payments for people in residential and nursing care who own a property.



1.3 List organisations and people who are involved in this area of work?

Adult social care providers (residential care homes)

- Cabinet, specifically Cabinet Member for Adults
- Director of Adult Social Care and Housing
- Adults Strategic Commissioning
- Transformation Team
- Finance
- Legal
- Residents / service users
- Operational social work teams
- Voluntary and community groups
- Health

SECTION 2 – Consideration of Impact

Refer to guidance note for more detailed advice on completing this section.

In order to ensure that we do not discriminate in the way our activities are designed, developed and delivered, we must look at our duty to:

- Eliminate discrimination, harassment, victimisation and any other conflict that is prohibited by the Equality Act 2010
- Advance equality of opportunity between two persons who share a relevant protected characteristic and those who do not
- Foster good relations between persons who share a relevant protected characteristic and those who do not

2.1 Baseline data and information

- Please include an analysis of the equalities data your service holds. This could include surveys, complaints, compliments, management information and customer profiles. *(Please refer to Diversity Guide)*
- Where possible compare your data to local data using
 - Facts about Coventry
 - Census 2011

EQUALITY IMPACT ASSESSMENT (EIA)



- Census 2021
- JSNA

All of wards across Coventry will be affected by the implementation of a Deferred Payment Agreement Scheme, especially if a person owns a property and that property is considered as part of the financial assessment towards the cost of residential care or nursing care.

The wards to be most likely to be affected are where most adults assessed in need of support live in the city which are Westwood, Radford, Cheylesmore and Bablake.

We know that service requests from adults to the ASC front door increased from 13,944 to 14,706 from 2021/2022 to 2022/2023. The current year figures show a decrease in requests for support, 9,465 compared to 9,609 at this stage in the year (November 2023). Winter pressures might impact on the numbers requesting support, as the year progresses.

Of the current requests for support, 78.9% came from the community and 20.7% are from hospital. Of these requests, 37.4% are signposted to a range of commissioned, or other public, voluntary or community services. 24.8% are provided with on-going low-level support, 19.4% are provided with short term support to maximise independence, 11.1% no services provided, 3.7% long-term support in the community, 1.4% Short-term other, 0.9% Long-term residential care, 0.7% no services provided (deceased), 0.5% Long-term support (nursing care) and 0.2% NHS funded care. Therefore, we know that 1.4% of requests are assessed needing long-term residential care or long-term supporting nursing care.

Of the adults accessing residential and/or nursing care the majority are white British (81.8%) and there are slightly more women (56.8%) than men (43.2%).

From research undertaken, several important equality, diversity and inclusion issues have been identified for minority ethnic groups who require services:

- Barriers accessing Services – language barriers, insufficient information, cultural awareness in services (appropriateness and unfamiliarity), misconception about support provided by services - Early intervention and prevention is required.
- Previous negative experiences of services, dissatisfaction with services and services not sensitive to their needs.
- Minority groups more likely to experience ill health and poverty (leading to financial concerns). They are less likely to be in receipt of financial and practical support and will tend to have to wait longer.
- The perceived “duty” within the family to provide support and that services believe certain cultures want to provide that care.
- There is no word for “dementia” in Asian languages. Lack of awareness for certain conditions, such as dementia and depression within BAME communities. Alongside this, within certain BAME communities’ certain conditions are more prevalent.



- Stigma of accessing support as well as stigma around a diagnosis will influence the uptake of accessing support. A delay in contacting services may lead to a crisis.
- Interpreters used are often family members, which raises issues about confidentiality, filtering of information or not interpreted correctly because lack of understanding. Even though written information may be translated, older generations may have a limited understanding of literacy in their own language.
- Refugees face barriers about not being able to receive benefits, gain employment, housing and Schools.
- Services do not always have staff from the same minority ethnic group and white, British professionals not understanding what racism and discrimination feels like. There is a need to develop a skilled workforce that matches the local population which is culturally appropriate and sensitive to the needs.
- Staff raise concerns that they do not have appropriate knowledge of cultures and also difficulties in trying to engage minority groups in service design.
- Satisfaction questionnaires may not provide adequate feedback due to how it is interpreted.

From the latest available data taken from the Facts About Coventry data dashboard we know:

- Foleshill and St Michael's have the highest numbers of non-white residents.
- Binley and Willenhall, Henley, Longford, Radford, Woodlands, Westwood, Foleshill and St Michael's are the wards with higher numbers of people with limiting long term illness or disability.
- St Michael's and Foleshill have been identified as being 2 of 6 wards with the highest levels of health deprivation according to the Indices of Multiple Deprivation scores.
- Henley, St Michael's and Foleshill are in the top 3 wards for crime according to the Indices of Multiple Deprivation.
- Binley and Willenhall, Foleshill, Henley, Longford, Radford and St. Michael's have been identified as the wards which are in the 10% of the most deprived neighbourhoods in the country according to the indices of multiple deprivation.
- Foleshill is the ward with the highest level of child poverty according to the Indices of Multiple Deprivation scores.
- There does not seem to be much difference in the numbers of males and females distributed in each ward besides St Michael's with males being significantly higher.
- There does seem to be a slightly number of adults over the age of 65 in most of the wards, with a significantly higher number of adults aged 65 and over in the Woodlands Ward.

The social care data and indices of deprivation has identified that the implementation of Deferred Payment Scheme, could have a negatively disproportionate impact on the most deprived and vulnerable residents who own a property, and that property is considered as part of the financial assessment who live in and are:

- Minority ethnic communities in the Foleshill and St Michael's wards

EQUALITY IMPACT ASSESSMENT (EIA)



- Persons with disabilities and limiting long term conditions in Woodlands/Westwood, St Michaels and Foleshill
- Residents who are female.
- Older residents over the age of 65.
- Residents who are white.

2.2 On the basis of evidence, complete the table below to show what the potential impact is for each of the protected groups.

- Positive impact (P),
- Negative impact (N)
- Both positive and negative impacts (PN)
- No impact (NI)

**Any impact on the Council workforce should be included under question 5.0 – not below*

Protected Characteristic	Impact type P, N, PN, NI	Nature of impact and any mitigations required
Age 0-18	NI	<p>The implementation of a Deferred Payment Scheme will not directly impact on children under 18 years. As any care packages for residential or nursing care for children are funded outside Deferred Payment Schemes.</p> <p>If there is a relative (child) living in an assessed service user's property than that property is not considered as part of the Financial Assessment and so they can remain at the property should the service user wishes that to happen.</p>
Age 19-64	PN	<p>The implementation of a Deferred Payment Scheme could have a negative impact on person who has been assessed in need of residential or nursing care support and they have a property which meets the criteria of being included in a financial assessment. These residents will need to understand the implications of the Deferred Payment Scheme and make an informed decision.</p> <p>There would be a positive impact as the service user will be able to meet the financial costs of their needs and will not incur any unnecessary unsecured debts. They would be in control of whether they choose to liquidise their assets to pay for their care.</p>

EQUALITY IMPACT ASSESSMENT (EIA)



		<p>To mitigate any negative impact, policies and procedures will be in place to provide Social Workers with information and guidance to support residents and their representatives to make an informed decision. Residents will also be signed posted to local independent advice agencies/webpages.</p>
Age 65+	PN	<p>Due to the fact that a higher proportion of the elderly are likely to enter residential or nursing care, it may have a greater impact on this group.</p> <p>A Deferred Payment Scheme could have a negative impact on person who has been assessed in need of residential or nursing care support and they have a property which meets the criteria of being included in a financial assessment. These residents will need to understand the implications of the Deferred Payment Scheme and make an informed decision.</p> <p>Interest will accrue (compound interest) on all accrued charges, including any associated fees for administrative fees for administrative and legal charges, unless the person chooses to pay these at the start of the agreement.</p> <p>Residents who choose to take up the scheme will as part of their contract need to ensure the property is maintained and kept adequately insured, so that the council's interest is protected.</p> <p>There could be a positive impact on adults aged 65+ who are eligible to receive social care, as the service user will be able to meet the financial costs of their needs and will not incur any unnecessary unsecured debts. They would be in control of whether they choose to liquidise their assets to pay for their care.</p> <p>Any negative impact will be mitigated by the fact that entering into a deferred payment agreement is voluntary. As part of the assessment process potential clients will be signposted to sources of independent advice.</p>
Disability	P	<p>There could be a positive impact on adults living with a disability who are eligible to receive social care, as the service user will be able to meet the financial costs of their needs and will not incur any unnecessary unsecured debts. They would</p>

EQUALITY IMPACT ASSESSMENT (EIA)



		<p>be in control of whether they choose to liquidise their assets to pay for their care.</p> <p>A Deferred Payment Scheme could have a negative impact on person who has been assessed in need of residential or nursing care support and they have a property which meets the criteria of being included in a financial assessment. These residents will need to understand the implications of the Deferred Payment Scheme and make an informed decision.</p> <p>Interest will accrue (compound interest) on all accrued charges, including any associated fees for administrative fees for administrative and legal charges, unless the person chooses to pay these at the start of the agreement.</p> <p>Residents who choose to take up the scheme will as part of their contract need to ensure the property is maintained and kept adequately insured, so that the council's interest is protected.</p> <p>Any negative impact will be mitigated by the fact that entering into a deferred payment agreement is voluntary. As part of the assessment process potential clients will be signposted to sources of independent advice.</p>
Gender reassignment	NI	It is not expected that there will be any impact on this protected group.
Marriage and Civil Partnership	NI	It is not expected that there will be any impact on this protected group.
Pregnancy and maternity	NI	It is not expected that there will be any impact on this protected group.
Race (Including: colour, nationality, citizenship ethnic or national origins)	PN	<p>Our data tells us that adults accessing residential and/or nursing care the majority are white British (81.8%) There could be a positive impact on adults who are eligible to receive social care, as the service user will be able to meet the financial costs of their needs and will not incur any unnecessary unsecured debts. They would be in control of whether they choose to liquidise their assets to pay for their care.</p> <p>A Deferred Payment Scheme could have a negative impact on person who has been assessed in need of residential or nursing care support and they have a property which meets the criteria of being included in a financial assessment. These</p>

EQUALITY IMPACT ASSESSMENT (EIA)



		<p>residents will need to understand the implications of the Deferred Payment Scheme and make an informed decision.</p> <p>Interest will accrue (compound interest) on all accrued charges, including any associated fees for administrative fees for administrative and legal charges, unless the person chooses to pay these at the start of the agreement.</p> <p>Residents who choose to take up the scheme will as part of their contract need to ensure the property is maintained and kept adequately insured, so that the council's interest is protected.</p> <p>Any negative impact will be mitigated by the fact that entering into a deferred payment agreement is voluntary. As part of the assessment process potential clients will be signposted to sources of independent advice.</p>
Religion and belief	NI	It is not expected that there will be any impact on this protected group.
Sex	P	<p>Our data tells us that adults accessing residential and/or nursing care there are slightly more women (56.8%) than men (43.2%).</p> <p>There could be a positive impact on women who are eligible to receive social care, as the service user will be able to meet the financial costs of their needs and will not incur any unnecessary unsecured debts. They would be in control of whether they choose to liquidise their assets to pay for their care.</p>
Sexual orientation	NI	It is not expected that there will be any impact on this protected group.

SECTION 3 – HEALTH INEQUALITIES - See the health inequalities pre EIA guidance sheet for this section.

3	Further information on health inequalities is available on the Intranet
3.1 Please tell us how the proposal you are submitting this EIA form will reduce health inequalities:	
<i>Please include which Marmot Principles this work covers.</i>	



Having a policy will ensure that adults who have been assessed in need of residential or nursing care support and they have a property which meets the criteria of being included in a financial assessment, will be able to meet the financial costs of their needs and will not incur any unnecessary unsecured debts. They would be in control of whether they will choose to liquidise their assets to pay for their care. Residential or Nursing care will provide the intensive specialised care to support residents to live and age well due to the care provided.

This relates to the Marmot principle to:

- enable all children, young people, and adults to maximise their capabilities and have control over their lives.
- strengthen the role and impact of ill health prevention.

3.2 What information do you have to show you are going to reduce health inequalities:

The revision of Deferred Payment Agreement Scheme enables people who meet the assessed need for residential or nursing care to access the equity in their property and choose a home that will best meet their health and social care needs, without accruing an unsecured debt or having to worry about selling their property whilst they are alive.

For those whose needs can only be met in a care home there is assurance that they will have access to health professionals including doctors, district nurses, dentists, chiropodists and opticians something which may not have been accessible to them living in the community due to their level or need or mobility or lack of support to access these services.

The service area will monitor the needs of the community through analysing data from Office National Statistic (ONS) and Joint Strategic Needs Assessment (JSNA) of the city and by reviewing the number of requests and the type of request for support from service users.

3.3 Who/which groups of people might face the biggest health inequalities for your work and why:

The groups of people that will face the biggest health inequalities for this work will be new and existing adults and carers across:

Learning Disabilities
Physical Disabilities
Older people (over 65)
Adults with disabilities

3.4. What can be done to improve health equity for the groups of people you have identified?



Improvements in equity for the groups identified would be to ensure that when service users are assessed for social care support that Social Workers support the services user to explore options which will meet their needs and improve their health.

SECTION 4 - DIGITAL EXCLUSION INEQUALITIES

Please consider the digital exclusion information in the supporting document prior to completing this section.

4.1 Starting point:

Thinking of the main aims of your work area that this EIA is for; does your work area impact digital inequalities or exacerbate? Y

- ***Does your work assume service users have digital access and skills?***

The revision of Deferred Payment Agreement Scheme does not assume that all residents have access to digital access and skills. Whilst the information is available on-line, Social Workers will discuss the Deferred Payment Agreement Scheme with service users and their families and a series of leaflets have been produced and will be given to the service user in order for them to spend time reading and reflecting on the scheme, and where possible discuss with family. The leaflets are also available in other languages.

- ***Do outcomes vary across groups, for example digitally excluded people benefit the least compared to those who have digital skills and access?***

There will be no differences between groups as in any event a paper copy will be available and a Social Worker and a Financial Assessment Officer will be able to meet face to face with the service user to discuss options.

- ***Consider what the unintended consequences of your work might be.***

It is not known at this stage, what the unintended consequences of the work might be for service users.



4.2 4.1 Reducing digital exclusion inequalities

Where are the opportunities for your area to reduce digital exclusion inequalities and embed supports/interventions as part of your work?

As part of wider piece of work within Adult Social Care, support will be given to all service users to access training who are digitally excluded.

5.0 Will there be any potential impacts on Council staff from protected groups?

There is potential there could be an impact on staff from protected groups. Social Work Practitioners may become anxious having to have critical conversations with residents concerning financial options. In order to mitigate this a series of training literature and example words which practitioners can use in conversations with residents.

They may also receive verbal abuse from residents or their representative following a critical conversation around the financial assessment determining that the resident will need to contribute to the cost of their care.

You should only include the following data if this area of work will potentially have an impact on Council staff. This can be obtained from: Nicole.Powell@coventry.gov.uk

Headcount:

Sex:

Age:

Female	
Male	

EQUALITY IMPACT ASSESSMENT (EIA)



Disability:

Disabled	
Not Disabled	
Prefer not to state	
Unknown	

16-24	
25-34	
35-44	
45-54	
55-64	
65+	

Ethnicity:

White	
Black, Asian, Minority Ethnic	
Prefer not to state	
Unknown	

Religion:

Any other	
Buddhist	
Christian	
Hindu	
Jewish	
Muslim	
No religion	
Sikh	
Prefer not to state	
Unknown	

Sexual Orientation:

Heterosexual	
LGBT+	
Prefer not to state	
Unknown	

6.0 How will you monitor and evaluate the effect of this work?

The work will be monitored by tracking the numbers of people applying to enter a Deferred Payment Agreement with Coventry City Council. There is an expectation that unsecured debt will fall and this will be monitored through monthly meetings and panels and details of this debt will be shared with ASCMT bi-monthly.

6.1 Action Planning

Issue Identified	Planned Action	Timeframe

EQUALITY IMPACT ASSESSMENT (EIA)



7.0 Completion Statement

As the appropriate Head of Service for this area, I confirm that the potential equality impact is as follows:

No impact has been identified for one or more protected groups

Positive impact has been identified for one or more protected groups

Negative impact has been identified for one or more protected groups

Both positive and negative impact has been identified for one or more protected groups

8.0 Approval

Signed: Tracey Denny - Head of Localities & Social Care Operations	Date: 19/02/2024
Name of Director: Peter Fahy	Date sent to Director: 20/02/2024
Name of Lead Elected Member:	Date sent to Councillor:

Email completed EIA to equality@coventry.gov.uk