

## TEMPLATE 2

# Equality Impact Assessment (EqIA) Template APPENDIX B

In order to carry out this assessment, it is important that you have completed the EqIA E-learning Module and read the Corporate Guidelines on EqIAs. Please refer to these to assist you in completing this form and assessment.

What are the proposals being assessed? ( <b>Note:</b> 'proposal' includes a policy, service, function, strategy, project, procedure, restructure)	This is an update of the existing Contributions Policy within a new framework
	Adult Services
Name and job title of lead officer	<a href="#">Carol Yarde – Head of Adults and Housing Transformation</a>
Name & contact details of the other person(s) involved in the EqIA:	Bernie Beckett, Adult Services Consultation Manager Tel: 020 8420 9252 Email: <a href="mailto:bernie.beckett@harrow.gov.uk">bernie.beckett@harrow.gov.uk</a>  All members of the Adult Services Steering Group which includes users, carers, representatives from Voluntary Organisations, NHS, Unions and CNWL
Date of assessment:	11 <sup>th</sup> April, 2011 – Draft initial assessment 14 <sup>th</sup> June, 2011 – Review with comments from Steering Group 29 <sup>th</sup> July, 2011 – Review 23 <sup>rd</sup> August, 2011 – Review further to close of consultation 19 <sup>th</sup> September 2011 - Review further to Steering Group input 3 <sup>rd</sup> October 2011 – Review to incorporate comments from MIND in Harrow, Unison and Legal Services at Harrow Council 7 <sup>th</sup> October 2011 - Review to incorporate comments from EqIA subgroup
<b>Stage 1: Overview</b>	
1. What are the aims, objectives, and desired outcomes of your proposals?  (Also explain proposals e.g. reduction / removal of service, deletion of posts, changing criteria etc)	To be able to deliver equitable services to vulnerable people within the financial resources available to the Council.  To introduce an equitable contributions policy for users of Adult Social Care services.

<p>2. What factors / forces could prevent you from achieving these aims, objectives and outcomes?</p>	<p>Lack of agreement of the Steering Group          Negative feedback from the consultation process          Identified negative impact on individuals/groups          Proposed changes do not benefit the Council          Lack of processes/systems to enable collection of contributions</p>
<p>3. How does this contribute to your Directorates Service Plan?</p>	<p>To introduce an equitable contributions policy for users of Adult Social Care services. This policy will contribute to Adult Services' savings targets</p>
<p>4. Who are the customers? Who will be affected by this proposal? For example who are the external/internal customers, communities, partners, stakeholders, the workforce etc.</p>	<p>All carers and users of Adult Social Care Services including:</p> <ul style="list-style-type: none"> <li>• People with mental health needs</li> <li>• Older people</li> <li>• People with learning disabilities</li> <li>• People with physical disabilities</li> <li>• Staff</li> </ul>
<p>5. Is the responsibility shared with another department, authority or organisation? If so:</p> <ul style="list-style-type: none"> <li>• Who are the partners?</li> <li>• Who has the overall responsibility?</li> </ul>	<p>Finance          Adult Services is responsible for the policy.          Harrow Council has the ultimate responsibility.</p>
<p>5A. How are/will they be involved in this assessment?</p>	<p>A Steering Group has been developed, including representatives from Voluntary Organisations, users, carers, NHS, Unions and CNWL which oversees the consultation including the development of the Equality Impact Assessments. Adult Services has worked closely with the Finance and Legal Departments throughout the consultation.</p>

**Stage 2: Monitoring / Collecting Evidence / Data**

6. What information is available to assess the impact of your proposals (*include the actual data, statistics and evidence*)? List the main sources of data, research and other sources of evidence (including full references) reviewed to determine impact on each equality group (protected characteristic). This can include results from consultations and the involvement tracker, customer satisfaction surveys, focus groups, research interviews, staff surveys, workforce profiles, service users profiles, local and national research, evaluations etc

(Where possible include data on the nine protected characteristics. Where you have gaps, you may need to include this as an action to address in the action plan)

Age (including carers of young/older people)	<p>Demographic profile of users of Adult Care Services</p> <p>Customer satisfaction surveys</p> <p>Local and national research</p> <p>Benchmarking with other London Authorities</p> <p>Complaints and compliments</p> <p>Information from pre and full consultation process</p> <p>Levels of bad debts</p> <p>Refusals of direct payments (investigate whether this information is available and how it can be captured in the future)</p>
Disability (including carers of disabled people)	MIND and Harrow user group held a consultation event in collaboration with Harrow Council and collated several months of anecdotal feedback from mental health service users
Gender Reassignment	Monitoring information is not currently held on this protected characteristic
Marriage / Civil Partnership	Monitoring information is not currently held on this protected characteristic
Pregnancy and Maternity	Monitoring information is not currently held on this protected characteristic
Race	As above
Religion and Belief	As above
Sex / Gender	As above
Sexual Orientation	As above

7. Do you need to collect any additional data to be able to monitor the impact on different groups?	Not identified			
8. Are there any other local/regional/national data sources that can inform this assessment if you have insufficient data on any of the groups?	Benchmarking			
9. Have you undertaken any consultation on your proposals? (this may include consultation with staff, members, unions, community / voluntary groups, stakeholders, residents and service users)	Yes	x	No	
Who was consulted?	What consultation methods were used?	What did you learn from your consultation?	What do the results show about the impact on different equality groups (protected characteristics)?	
<p>The consultation was carried out with users, carers, staff, voluntary organisations, community groups, people living and working in Harrow, staff, Unions, NHS and CNWL</p>	<p>Pre consultation included IPSOS Mori survey of all users of Adult Social Care and a sample of carers approx 7000 Face to face meetings with over 700 people Pre consultation document sent to over 10,000 people with opportunity to feed back through feedback form, email, telephone and freepost address</p> <p>Full consultation included the circulation of a full consultation document and draft Fairer Contributions Policy to over 10,000 people with opportunity to feed back through feedback forms, emails, telephone and freepost address. Easy read documents and a DVD were developed Documents were circulated in</p>	<p>People from all client groups will be asked to pay for services who haven't previously contributed</p> <p>People from all client groups may stop using services</p> <p>People from all client groups may stop using services before proposals are implemented because they are concerned charges will be backdated</p> <p>Impact on Carers if users stop using services</p> <p>Some carers may withdraw users from the services</p> <p>Charges being backdated could put users in debt</p> <p>People on middle income may be disproportionately affected by the proposals</p> <p>People with savings above the statutory level of £23,250 will be required to pay the full cost of the care services they receive</p>		

	<p>translated formats as required  Face to face meetings with 700+ people  Meals on Wheels Survey  Face to Face meetings with some meals on wheels users</p>	
<p>Specific feedback from <b>Harrow Mencap</b></p>		<p>‘Endorse the principle of a Fairer Contributions Policy’</p> <p>‘Have concerns around the implementation process and any subsequent backdating’</p> <p>‘Must be contingencies for monitoring impacts should individuals decide to opt out of services’</p> <p>‘Should be a group set up to monitor the impacts any changes’</p>
<p>Specific feedback from <b>Mind in Harrow</b></p>		<p>Mental health personalisation has been introduced at a later date than other care groups.</p> <p>‘Introduction of the Contributions Policy on top of an underdeveloped capacity will be a disaster for mental health services and unsafe’</p> <p>‘That the Contributions Policy cannot safely be introduced in Harrow unless the fundamental processes for mental health personalisation have been implemented.’</p> <p>‘We believe that mental health service users may not currently be receiving a fair allocation of resources from the existing embryonic personal budgets process and assert that it would be unfair and unsafe to require contributions until the full personal budget processes have been properly introduced.’</p> <p>Reject proposal to backdate contributions for the first year.</p>

Specific feedback from <b>Age UK Harrow</b>		<p>‘Introducing a tariff does not reflect the reality of older peoples income and will put them at a disadvantage’</p> <p>‘Older people will stop attending day centres which could result in increased social isolation.’</p> <p>Concern that the transitional arrangements would put older people in debt.</p>
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**NOTE:** If you have not undertaken any consultation as yet, you need to consider if you need to carry out any consultation. For example, if you have insufficient data/information for any equality group and you are **unable** to assess the potential impact, you may want to consult with them on your proposals as how they will affect them. Any proposed consultation needs to be **completed before** progressing with the rest of the EqIA. **Guidance on consultation/community involvement toolkit can be accessed via the link below**  
[http://harrowhub/info/200195/consultation/169/community\\_involvement\\_toolkit](http://harrowhub/info/200195/consultation/169/community_involvement_toolkit)

10. If you have not undertaken any consultation, explain why?	<b>N/A</b>
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**Stage 3: Assessing Impact and Analysis**

11. What does your information tell you about the impact on different groups? Consider whether the evidence shows potential for differential impact, if so state whether this is an adverse or positive impact? How likely is this to happen? How you will mitigate/remove any adverse impact? How likely is this to happen? How will you mitigate/remove any adverse impact?

Protected Characteristic	Positive	Adverse	Explain what this impact is, how likely it is to happen and the extent of impact if it was to occur.	What measures can you take to eliminate or reduce the adverse impact(s)? E.g. consultation, research, implement equality monitoring etc <b>(Also Include these in the Improvement Action Plan at Stage 5)</b>
Age (including carers of young/older people)		X	<p>Demographic profiles as of 31 March 2011: 4605 Older People</p> <p>Older people will be disproportionately affected by this proposal as they make up the majority of users of Adult Social Care</p> <p>Older people are more likely to be on a fixed income so paying for services may have more of an effect on this group</p>	<p>Attendance monitoring carried out at Day Centres throughout consultation period to monitor and address concerns</p> <p>Equality monitoring will continue to be carried out</p> <p>Financial assessment will be carried out to ensure that only users with that have been assessed as having the ability to pay will contribute towards services.</p>

			<p>Older people may stop using services</p> <p>Older people may stop using services before proposals are implemented because they are concerned charges will be backdated</p> <p>Impact on carers if users stop using services</p> <p>Charges being backdated could put users in debt</p>	<p>Work with agencies to ensure full benefits entitlement for all users of services</p> <p>Individual letters will be sent to all users if changes are agreed explaining the change and what it means for the individual</p> <p>Communications campaign will be developed</p> <p>If agreed at Cabinet, the steering group will continue to meet to monitor how the policy is being implemented.</p> <p>If agreed at Cabinet, monitoring will be put in place to establish if users stop accessing services following a request for a contribution towards the cost of their care. Reports will be presented to the Steering Group.</p>
<p>Disability (including carers of disabled people)</p>			<p>Demographic profiles as of 31 March 2011: 862 physically disabled service users</p> <p>426 Learning Disabled service users</p> <p>People with disabilities may be disproportionately affected by this proposal as they make up a significant percentage of users of Adult Social Care</p> <p>People with disabilities may stop using services</p> <p>People with disabilities may stop using services before proposals are implemented because they are concerned charges will be backdated</p> <p>Impact on carers if users stop using services</p>	<p>As above</p>

			<p>Charges being backdated could put users in debt</p> <p>People on middle income may be disproportionately affected by the proposal</p> <p>People with savings above the statutory level of £23,250 will be required to pay the full cost of the care services they receive</p>	
Mental Health			<p>Demographic profiles as of 31 March 2011: 655 Mental Health Service users</p> <p>Concerns expressed by mental health service users include the following:</p> <p>People requiring Mental Health support may not be able to afford day care provision in the future which will impact on their recovery.</p> <p>People requiring Mental Health Support, their Carers and advocates may not be fully aware of the changes and how these may impact upon them.</p> <p>Back dating contributions will cause stress and anxiety and potentially push people into debt.</p>	<p>All eligible service users will go through a financial assessment to assess their ability to make a contribution towards the cost of their care. Those assessed as being unable to afford a contribution will not need to pay but will still be provided with all the support agreed in their support plan.</p> <p>The proposed Fairer Contributions Policy has been circulated widely during the full consultation process and discussed in face to face meetings. Once Cabinet Committee have made decisions a communications plan will be put into place to ensure everyone in the community who accesses Adult Care Services is aware of the policy and the process that they need to go through to access services.</p> <p>A bid has been submitted to the Council's Corporate Transformation and Priority Initiatives Fund for additional resources to support the implementation of the new policy, if agreed by Cabinet.</p> <p>As a result of the full consultation exercise the revised proposal is not to backdate any contributions.</p> <p>For mental health users we will need to ensure that there is sufficient capacity to undertake necessary assessments in the same timeframe as other user</p>



				groups.  Provider organisations would need to sustain capacity to support mental health service users through financial assessments.
Gender Reassignment			Monitoring information is not currently held on this protected characteristic	
Marriage and Civil Partnership			Monitoring information is not currently held on this protected characteristic	
Pregnancy and Maternity			Monitoring information is not currently held on this protected characteristic	
Race			Demographic profiles as of 31 March 2011: White British 40% Indian 22% African/Caribbean 13%	
Religion or Belief			No impact identified	
Sex			No impact identified	
Sexual Orientation			No impact identified	
Other (please state)				
<p><b>12. Cumulative impact</b> – Are you aware of any cumulative impact? For example, when conducting a major review of services. This would mean ensuring that you have sufficient relevant information to understand the cumulative effect of all of the decisions.</p> <p><b>Example:</b> A local authority is making changes to four different policies. These are funding and delivering social care, day care, respite for carers and community transport. Small changes in each of these policies may disadvantage disabled people, but the cumulative effect of changes to these areas could have a significant effect on disabled people's participation in public life. The actual and potential effect on equality</p>			<p><b>Adult Services is carrying out a consultation which include proposed changes to the Contributions Policy, Adult Social Care Transport, Concessionary travel and the costs of Meals on Wheels.</b></p> <p><b>For users of more than one service there may well be a cumulative impact i.e. if somebody has meals on wheels and also attends a day centre, uses Adult Social Care Transport and has a support package, following a financial assessment they may be asked to contribute to the total cost of that care package, undergo an assessment for transport and may have to pay more for their meal.</b></p>	

<p>of all these proposals, and appropriate mitigating measures, will need to be considered to ensure that inequalities between different equality groups, particularly in this instance for disabled people, have been identified and do not continue or widen. This may include making a decision to spread the effects of the policy elsewhere to lessen the concentration in any one area.</p>	<p><b>The cumulative impact could affect users and carers from all Client Groups using Adult Care Services:</b>  <b>People with mental health needs</b>  <b>People with learning disabilities</b>  <b>Elderly people</b>  <b>People with physical disabilities</b></p> <p><b>We have undertaken analysis to identify users and carers who may be impacted by change. We are working with partner agencies to ensure that all users and carers are receiving their full benefit entitlement and are exploring various options to minimise the impact of the transition.</b></p>
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**13.** How do your proposals contribute towards the requirements of the Public Sector Equality Duty (PSED), which requires the Council to have due regard to eliminate discrimination, harassment and victimisation, advance equality of opportunity and promote good relations between different groups.

(Include all the positive actions of your proposals, for example literature will be available in large print, Braille and community languages, flexible working hours for parents/carers, IT equipment will be DDA compliant etc)

<b>Equality Group</b>	Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010	Advance equality of opportunity between people from different groups	Foster good relations between people from different groups	What actions can you take to meet these requirements? (Also include these in the Improvement Action Plan at Stage 5)
Age (including carers of young/older people)	The council will ensure that services continue to meet the needs of older people and only those who are assessed as having the ability to pay will contribute.	We will monitor feedback from service users on a continued basis	The consultation process has allowed us to ensure that all groups are given the opportunity to give their views	Continued monitoring of the services  Working with Partner Agencies to ensure older people have their full benefit entitlement
Disability (including carers of disabled people)	The council will ensure that services continue to meet the needs of people with disabilities and only those who are assessed as having	We will monitor feedback from service users on a continued basis	The consultation process has allowed us to ensure that all groups are given the opportunity to give their views	Continued monitoring of the services  Working with Partner Agencies to ensure people with

	the ability to pay will contribute			<p>disabilities have their full benefit entitlement</p> <p>Information will be provided in required format.</p> <p>Please note the specific requirements of mental health service users are included in action plan.</p>
Gender Reassignment	The council will monitor services to ensure meeting the needs of all	We will monitor feedback from service users on a continued basis	As above	Continued monitoring of services
Marriage and Civil Partnership	The council will monitor services to ensure meeting the needs of all	We will monitor feedback from service users on a continued basis	Not monitored	Will ensure included in future monitoring of services
Pregnancy and Maternity	The council will monitor services to ensure meeting the needs of all	We will monitor feedback from service users on a continued basis	Not monitored	Will ensure included in future monitoring of services
Race	The council will monitor services to ensure meeting the needs of all	We will monitor feedback from service users on a continued basis	The consultation process has allowed us to ensure that all groups are given the opportunity to give their views	<p>Continued monitoring of services</p> <p>Information about services will be provided in first language</p>
Religion or Belief	The council will monitor services to ensure meeting the needs of all	We will monitor feedback from service users on a continued basis	The consultation process has allowed us to ensure that all groups are given the opportunity to give their views	Continued monitoring of services
Sex	The vast majority of Carers are women therefore if people stop using services this may have a disproportionate effect on this group. The council will monitor	We will monitor feedback from service users on a continued basis	The consultation process has allowed us to ensure that all groups are given the opportunity to give their views	Continued monitoring of services

	services to ensure meeting the needs of all			
Sexual Orientation	The council will monitor services to ensure meeting the needs of all	We will monitor feedback from service users on a continued basis	The consultation process has allowed us to ensure that all groups are given the opportunity to give their views	Continued monitoring of services

**14.** Is there any evidence or concern that **direct or indirect discrimination** may occur with reference to anti discrimination legislation?

**Direct discrimination** - occurs when a person is treated less favourably than others on the grounds of their age, disability, gender, race, religion or belief, or sexual orientation. Refer to main guidelines and toolkit for examples of direct discrimination.

**Indirect discrimination** - occurs when a rule, condition or requirement, which applies equally to everyone, has a disproportionately adverse effect on people from a particular equalities group when there is no objective justification for the rule. Refer to main guidelines and toolkit for examples of indirect discrimination.

		Age (including carers)	Disability (including carers)	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation
Direct	Yes									
	No	x	x	X	x	x	x	x	x	x
Indirect	Yes	x	x							
	No			X	x	x	x	x	x	x

If you have answered 'yes' to any of the above you need to stop and rethink and should not proceed with your proposals.

As there is the potential for the policy to have a disproportionate adverse impact on particular protected groups, the Council must have a justifiable reason for applying the policy and must consider mitigating measures. The objective justification for the policy proposal is set out in the EqIA as the need to deliver equitable services to vulnerable people within the financial resources available to the Council and the option to deliver services in an alternative way that is still in line with national guidance and more aligned to that of neighbouring councils.

**(You are also encouraged to seek Legal Advice)**

#### Stage 4: Decision

15. Please indicate which of the following statements best describes the outcome of your EqlA ( ✓ tick one box only)

<b>Outcome 1</b> – No change required: when the EqlA has not identified any potential for discrimination or adverse impact and all opportunities to promote equality are being addressed.	
<b>Outcome 2</b> – Adjustments to remove adverse identified by the EqlA or to better promote equality. <b>List the actions you propose to take to address this in the Improvement Action Plan at Stage 5</b>	x
<b>Outcome 3</b> – Continue with proposals despite having identified some potential for adverse impact or missed opportunities to promote equality. In this case, the justification needs to be included in the EqlA and should be in line with the PSED to have ‘due regard’. In some cases, compelling reasons will be needed. You should also consider whether there are sufficient plans to reduce the negative impact and/or plans to monitor the impact. <b>(explain this in 15A below)</b>	
<b>Outcome 4</b> – Stop and rethink: when your EqlA shows actual or potential unlawful discrimination. <b>(You are also encouraged to seek Legal Advice)</b>	
<b>15A.</b> If your EqlA is assessed as <b>outcome 3</b> , explain your justification with full reasoning to continue with your proposals?	

**Stage 5: Making Adjustments (Improvement Action Plan)**

16. List below any actions you plan to take as a result of this impact assessment. This will include any actions identified throughout the EqIA.

Area of potential adverse impact e.g. Race, Disability	Action proposed	Lead Officer	Timescale	Resource implication	Progress
<p>The areas of potential adverse impact that have been identified as an impact include:</p> <ul style="list-style-type: none"> <li>• People who are older and or disabled</li> <li>• Users of the services that have middle income</li> <li>• Female Carers</li> <li>• People with savings above the statutory level of £23,250</li> <li>• Mental health service users</li> </ul>	<p>If the proposals are implemented all users of the service will have a care needs assessment and financial assessment and only those who have been assessed as having the ability to pay will contribute towards their services.</p> <p>The dept recovery policy is being reviewed following issues being highlighted as part of the consultation.</p> <p>The council is working in partnership with the Voluntary Sector to ensure that people access their full benefit entitlement</p> <p>The Steering Group has set up a sub group to look at the financial assessment</p>	<p>Carol Yarde</p>			

**Stage 5: Making Adjustments (Improvement Action Plan)**

16. List below any actions you plan to take as a result of this impact assessment. This will include any actions identified throughout the EqIA.

Area of potential adverse impact e.g. Race, Disability	Action proposed	Lead Officer	Timescale	Resource implication	Progress
	<p>The Steering Group will continue to operate and will be involved in monitoring the implementation of changes and continuing service delivery.</p> <p>A comprehensive communications strategy has been developed in conjunction with Communications to ensure that the outcome from the consultation is widely communicated.</p> <p>Staff need to be trained in mental health awareness, particularly in relation to the contributions policy.</p> <p>Information for service users on the financial assessment needs to be reviewed and improved and provided in a more accessible way to all users and carers.</p> <p>For mental health users we</p>				

	<p>will need to ensure that there is sufficient capacity to undertake necessary assessments in the same timeframe as other user groups.</p> <p>Provider organisations would need to sustain capacity to support mental health service users through financial assessments.</p>				
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### Stage 6 - Monitoring

The full impact of the decision may only be known after the proposals have been implemented, it is therefore important to ensure effective monitoring measures are in place to assess the impact.

<p><b>17.</b> How will you monitor the impact of the proposals once they have been implemented? How often will you do this?</p>	<p>The Steering Group is continuing to work with the Council to ensure the monitoring arrangements are robust. The Steering Group will continue to meet to monitor the implementation and ongoing service delivery</p>
<p><b>18.</b> What monitoring measures need to be introduced to ensure effective monitoring of the policy? (Also Include in Improvement Action Plan at Stage 5)</p>	<p>The council is working closely with the Steering Group, which will have the same composition of representation, to ensure robust monitoring arrangements are put in place. CNWL to report impact of contribution policy to steering group. Steering Group to work with CNWL to develop evaluation process for mental health personalisation.</p>
<p><b>19.</b> How will the results of any monitoring be analysed, reported and publicised?</p>	<p>Via steering group, and reported and publicised on council website.</p>
<p><b>20.</b> Have you received any complaints or compliments about the policy, service, function, project or decision being assessed? If so, provide details.</p>	<p>Feedback has been received to the consultation and is included within the Cabinet Report and reported to the Steering Group.</p>



## Stage 7 – Reporting outcomes

The completed EqlA must be attached to all committee reports and a summary of the key findings included in the relevant section within them.

EqlA's will also be published on the Council's website and made available to members of the public on request.

### 21. Summary of the assessment

**NOTE:** This section can also be used in your Cabinet reports etc but you must ALSO attach the full EqlA to the report

- What are the key impacts – both adverse and positive?
- What course of action are you advising as a result of this EqlA?
- Are there any particular groups affected more than others?

Do you suggest to proceeding with your proposals although an adverse impact has been identified?

The impacts identified through the consultation are:

Positive –

- The policy will provide fair access to services and only those who are assessed as having the ability to pay will be asked to contribute towards their services

Negative

- People may be asked to pay for services who haven't previously contributed
- People may stop using services
- People may stop using services before proposals are implemented because they are concerned charges will be backdated
- Impact on Carers if users stop using services
- Some carers may withdraw users from the services
- Charges being backdated could put users in debt
- People on middle income may be disproportionately affected by the proposals
- People with savings above the statutory level of £23,250 will be required to pay the full cost of the care services they receive

The Steering Group will continue to operate and will work with the Council to monitor implementation of the changes that are agreed and the monitoring arrangements.

Working closely with the Voluntary Sector to ensure people get their full benefit entitlements

The Council have changed the proposals for transition as a result of the consultation and no backdating of charges will now be put forward.

The Steering Group are working with the Council to develop effective transition and monitoring arrangements.

22. How will the impact assessment be publicised? E.g. Council website, intranet, forums, groups etc	The Council website
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**Stage 8 - Organisational sign Off (to be completed by Chair of Departmental Equalities Task Group)**

**The completed EqlA needs to be sent to the chair of your Departmental Equalities Task Group (DETG) to be signed off.**

23. Which group or committee considered, reviewed and agreed the EqlA and the Improvement Action Plan?	The Steering Group has shaped the Equality Impact Assessment in partnership with the Council.
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<b>Signed: (Lead officer completing EqlA)</b>		<b>Signed: (Chair of DETG)</b>	
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<b>Date:</b>		<b>Date:</b>	
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