

**Section 4**

**Equality   
Analysis Toolkit   
Charging for Telecare  
For Decision Making Items**

**August 2022**

**Question 1 - What is the nature of and are the key components of the proposal being presented?**

|  |
| --- |
| Introduction of charging, for a previously free telecare service. Local authorities currently adopt different approaches to charging for community alarm and telecare services; from a free service provision to standard charge, regardless of the technology installed, to tiered charging and to non-means tested. Lancashire County Council currently supplies a free service to 16,626 people and the current arrangement has been identified as unsustainable in its current form as the service needs to prepare for and fund the necessary analogue to digital switch. User charging is a way to address the shortfall in the investment required. |

**Question 2 - Scope of the Proposal**

Is the proposal likely to affect people across the county in a similar way or are specific areas likely to be affected – e.g. are a set number of branches/sites to be affected?

|  |
| --- |
| Any adult who currently uses the telecare service will be affected. If a flat rate charge is implemented, then all adults will experience a charge for a service that has to date been free of charge. This non-means tested option will not require financial assessment for service users in relation to this service.  Any new adult telecare service user will be similarly affected however it will not represent a change for this group as they will not have previously been receiving the same service free of charge. |

**Question 3 – Protected Characteristics Potentially Affected**

Could the proposal have a particular impact on any group of individuals sharing protected characteristics under the Equality Act 2010, namely:

* Age
* Disability including Deaf people
* Gender reassignment
* Pregnancy and maternity
* Race/ethnicity/nationality
* Religion or belief
* Sex/gender
* Sexual orientation
* Marriage or Civil Partnership Status

And what information is available about these groups in the County's population or as service users/customers?

|  |
| --- |
| The policy would apply equally to all telecare service users. However as telecare, is provided to people to assist them to manage the risks that their health or physical condition may present, older people are more likely to experience these types of conditions and make up the greatest percentage of the telecare service user demographic. Older people are therefore proportionally more affected by this change.  Telecare is provided to people to assist them to manage the risks that their health or physical condition may present. By definition, a person with a disability is more likely to experience the types of risk that the service is designed to respond to.  Carers may be affected as it may act as a disincentive to individuals taking up the service therefore the benefits that the service provides in terms of security, confidence and peace of mind for carers may be adversely affected, in turn affecting carers. Anecdotally, carers are more likely to be women so there may be a disproportionate impact on them.  The introduction of a charge for the previously free of charge telecare service may potentially act as a disincentive and result in a drop off in use by service users. Information from Scotland suggests that a drop off rate of around 10% is average following introduction of a charge. However evidence from Trafford and Birmingham suggests that the drop off rate in Lancashire may be as high as 30 -50% due to a previous liberal approach to the provision of telecare support. |

**Question 4 – Engagement/Consultation**

How have people/groups been involved in or engaged with in developing this proposal?

|  |
| --- |
| A consultation has been undertaken in respect of the proposal to introduce charges for the telecare service. The consultation ran for a period of three weeks from 18 July 2022 to 8 August 2022, with the full range of responses set out at Appendix 'C'.  Principal stakeholders in the consultation process for charging for telecare were identified as:   * Individuals who use the service; * Families, friends and carers of individuals who use the service; * Adult Social Care staff; and * The broader public, sought through the Get Involved - Have Your Say webpage, alongside a Twitter and Facebook post.   The principal methodology for engagement was a published survey, made available in electronic and paper versions. A paper copy, which included a link to the online questionnaire was sent directly to all 16,000+ service users.  A total of 1,650 (10%) completed surveys were returned. There were 742 responses submitted via the online survey platform, with 908 responses received in paper format.  42% of respondents said that they would be willing to pay for the telecare service. 46% of respondents said that they would be unlikely to continue using telecare if charges are introduced and12% indicated that they were unsure or did not know at this point in time.  **How likely are you to continue using telecare if charges are introduced?**  30  %  12  %  10  %  36  %  12  %  Very likely (499)  Likely (190)  Don't know/not sure (190)  Unlikely (172)  Very unlikely (595  A high-level summary of the narrative responses is detailed below:  Respondents who were prepared to pay for the service said:   * It is an excellent, vital service. * It helps me stay safe and gives peace of mind. * I have no choice, I need this service. * It is a fair price.   Those respondents who were unlikely to continue with a paid for service said:   * They are unable to afford the proposed charge, especially with cost-of-living crisis * The price is too high * I no longer require the service.   Most respondents indicated that they were aged over 80 – and when including references to age in their consultation comments this ranged from 80 to 103 years. Some indicated that they had disabilities – being registered blind, having dementia or being wheelchair users were mentioned in responses.  Following the closure of the public consultation, two focus group meetings were arranged in which the views of our social care assessors were sought. A total of 22 Social Workers and Social Care Support Officers attended these meetings. Many questions were answered about the proposed changes, allowing those who attended the meetings a better understanding of the proposal. The following information was captured during the meetings:  **Question 1. What do you think about the introduction of a charge?**  Strongly agree 5  Agree 9  Neutral 2  Disagree 2  Strongly disagree 4  **Question 2. Should the telecare service be targeted at those with a social care assessment or a universal prevention service, available to all?**  Targeted 13  Universal 9  **Question 3. If a charge is introduced, should a person's ability to pay be assessed?**  Yes 13  No 9 |

**Question 5 – Analysing Impact**

Could this proposal potentially disadvantage particular groups sharing protected characteristics and if so which groups and in what way? This pays particular attention to the general aims of the Public Sector Equality Duty:

- To eliminate unlawful discrimination, harassment or victimisation because of protected characteristics;

- To advance equality of opportunity for those who share protected characteristics;

- To encourage people who share a relevant protected characteristic to participate in public life;

* To contribute to fostering good relations between those who share a relevant protected characteristic and those who do not/community cohesion;

|  |
| --- |
| There is likely to be a greater impact on older people, people with disabilities and carers. These differential impacts are a consequence of the nature of the service in question and cannot be entirely addressed.  Many consultation respondents said that having telecare gave them "peace of mind", helped them to feel "safe" and gave them and their families "security". Some indicated that although the costs would be difficult they would need to continue with telecare for these reasons, whilst others said they would be unable to afford it and that they would lose the "peace of mind" and "safety" the service had given them and their families. For this group their equality of opportunity to use telecare is adversely impacted.  The level of charge was also a concern. A number of respondents indicated that they might be able to choose option 1 or 2 and indicated the charges did seem "reasonable". Others felt that they would not be able to afford any level of charge and calculated needing to budget for an additional £16 a month in some cases or included references to £286 a year which would be difficult for them. For both those who continue to use telecare and those who are unable to do so for financial reasons there will be an adverse impact on their current position which will impact their equality of opportunities to use telecare as they have currently had access to and used it.  For respondents who intended to continue to use the service, who didn't know if they would continue and some who were unlikely to continue to use the service there was concern about affordability. Some respondents said that although they may be able to afford the service, they were concerned that others might not be able to do this. Others stated that they would have to "cut back" on other things – some suggested social activities and a few suggested cutting back on food. For those who reduce other activities, their ability to participate in public life could be adversely affected by this proposal. For those cutting back on "essential" there is an adverse impact on their equality of opportunity to access those items. |

**Question 6 –Combined/Cumulative Effect**

Could the effects of this proposal combine with other factors or decisions taken at local or national level to exacerbate the impact on any groups?

|  |
| --- |
| The analogue to digital switch may see the price of Voice over Internet Protocol (VoIP) line increase and we may find telecare service users cancelling their telephone service and their analogue telecare equipment will no longer work. Ofcom have confirmed that communication providers must offer a price for an equivalent digital service which does not increase following the forced migration. BT plan to offer a 40Mbps (10Mbps upload) *“*anchor*”* service at a lower price to help tempt users off older lines.  Any increase, if agreed, will be introduced at a time when there are already significant pressures on the cost of living for many people. There have been significant price rises in gas, electricity and food costs which are likely to be felt alongside the introduction of a telecare charge so increasing the costs of household bills for those affected. A number of these people are likely to be on fixed incomes – e.g. benefits or other retirement pensions. This theme and these concerns were reflected widely amongst consultation respondents even where they understood and accepted the rationale behind this proposal.  Some respondents also stated that the impact of the proposal may be increased for them as they already paid charges for other aspects of their social care. |

**Question 7 – Identifying Initial Results of Your Analysis**

As a result of the analysis has the original proposal been changed/amended, if so please describe.

|  |
| --- |
| Although an impact has been identified for a number of groups these proposals continue to be felt to be necessary in order to establish a sustainable digital telecare service.  The Council can no longer afford to absorb the costs of replacement digital kit and service development costs and must consider charging at a rate which will enable the continuation of a service fit for the digital future. The rate proposed is not unrealistic in terms of the North West region range of charges. |

**Question 8 - Mitigation**

Will any steps be taken to mitigate/reduce any potential adverse effects of the proposal?

|  |
| --- |
| Service users who express a wish to end their telecare service following introduction of charging will be offered a review of the service, focussing on risk assessment and risk management, prior to withdrawal. The review will seek to explore with the service user their concerns about the changes and the benefits of the telecare that is in place. Benefits checks and income maximisation will be offered and onward referrals made to CAB and / or DWP as appropriate.  This may address some of the concerns that people have about paying a charge. In addition, many people in receipt of a telecare service will also be accessing or entitled to benefits as a result of their disability or dependency levels. These benefits are intended to contribute to the costs of their support services. |

**Question 9 – Balancing the Proposal/Countervailing Factors**

This weighs up the reasons for the proposal – e.g. need for budget savings; damaging effects of not taking forward the proposal at this time – against the findings of the analysis.

|  |
| --- |
| It is acknowledged that the introduction of charges for telecare will have an adverse impact on some people from the age (older people) and disability protected characteristics groups and may also affect carers, many of whom are likely to be women. The introduction of the charge, if agreed, may present difficulties at any time but these may be exacerbated by the current cost of living difficulties being experienced by many people. There are around 16,000 users of telecare in Lancashire at present, some of whom may no longer use the service and may experience a slower response in the event of a fall or other emergency.  Mitigation arrangements have been identified to assist those who decide they cannot continue with the Service. For those who remain using telecare, some may experience additional financial difficulties which may impact their equality of opportunity and their participate in public life if they feel they need to reduce/ restrict their spending on essential items such as food or other activities.  Unfortunately, the reality is, however, that cost of living effects such as energy, fuel and food costs and increases in demand for services also impact local authorities. At times of financial constraints public authorities have to make difficult and often unpopular decisions regarding funding and service provision and that in this context introducing a charge for telecare is an appropriate proposal to have to make. |

**Question 10 – Final Proposal**

In summary, what is the final proposal and which groups may be affected and how?

|  |
| --- |
| Of 20 Local Authorities examined during the research stage, 18 charged. Charges ranged between £1.11 and £6.65 per week. The average charge across the charging authorities in 2021, based on the information provided, is £5.51 per week for telecare with a mobile response service. Lancashire County Council continues to provide the service free of charge.  The rational for charging is to achieve a sustainable budget for the service. The policy would apply equally to all telecare service users. However older people, people with disabilities and carers are proportionally more affected by this change. |

**Question 11 – Review and Monitoring Arrangements**

What arrangements will be put in place to review and monitor the effects of this proposal?

|  |
| --- |
| Following the consultation, a review of the Equality Analysis has taken place to ensure it has captured the service users concerns about the changes and the benefits of telecare.  If the proposal is implemented, the demand for telecare will be monitored to see how many people cease using telecare and what effect that may have on the sustainability of telecare and demand for other services. |

Equality Analysis Prepared By Deborah Gent

Position/Role Policy, Information and Commissioning Senior Manager

Equality Analysis Endorsed by Line Manager and/or Service Head Joanne Reed

Decision Signed Off By

Cabinet Member or Director

For further information please contact

Jeanette Binns – Equality & Cohesion Manager

[Jeanette.binns@lancashire.gov.uk](mailto:Jeanette.binns@lancashire.gov.uk)