

## EQIA Submission – ID Number

### Section A

**EQIA Title**

ASC 202526 Provider Uplift decision

**Responsible Officer**

Richard Ellis - AH EK

**Approved by (Note: approval of this EqIA must be completed within the EqIA App)**

Richard Smith - AH CDO

### Type of Activity

**Service Change**

No

**Service Redesign**

No

**Project/Programme**

No

**Commissioning/Procurement**

Commissioning/Procurement

**Strategy/Policy**

No

**Details of other Service Activity**

No

### Accountability and Responsibility

**Directorate**

Adult Social Care and Health

**Responsible Service**

Adult & Integrated Commissioning

**Responsible Head of Service**

Richard Smith - AH CDO

**Responsible Director**

Richard Smith - AH CDO

### Aims and Objectives

To agree the annual uplift of adult social care commissioned services, taking into account cost pressures on adult social care providers, the costs of employment for those who directly employ personal assistants through Direct Payments, the resources made available to Kent County Council by Government and the other financial pressures on the service. For 2025/26 this is particularly challenging given the impact of the Autumn Budget on the costs of employment from the above inflation increase in the National Living Wage and the changes in employer national insurance contributions, which combined increase cost of employment up to 11%. Adult social care providers meet the needs of people who might be vulnerable, who disproportionality have protected characteristics and as a means tested service they are disproportionally economically disadvantaged.

### Section B – Evidence

**Do you have data related to the protected groups of the people impacted by this activity?**

Yes

**It is possible to get the data in a timely and cost effective way?**

Yes

**Is there national evidence/data that you can use?**

Yes

**Have you consulted with stakeholders?**

Yes
<b>Who have you involved, consulted and engaged with?</b>
We have engaged with social care provider representatives and will continue to do so.
<b>Has there been a previous Equality Analysis (EQIA) in the last 3 years?</b>
Yes
<b>Do you have evidence that can help you understand the potential impact of your activity?</b>
Yes
<b>Section C – Impact</b>
<b>Who may be impacted by the activity?</b>
<b>Service Users/clients</b> Service users/clients
<b>Staff</b> No
<b>Residents/Communities/Citizens</b> Residents/communities/citizens
<b>Are there any positive impacts for all or any of the protected groups as a result of the activity that you are doing?</b>
Yes
<b>Details of Positive Impacts</b>
The aim of the annual uplift process is to try to protect services by reflecting increased costs of delivery in our fee levels. This way we protect the interests of those who draw on care and support. Our contracts refer to December CPI but also the affordability of any uplifts. The proposal is for an average uplift above expected December CPI, but less than the increase in the national living/minimum wage.
<b>Negative impacts and Mitigating Actions</b>
<b>19.Negative Impacts and Mitigating actions for Age</b>
<b>Are there negative impacts for age?</b>
Yes
<b>Details of negative impacts for Age</b>
Older people make up a significant proportion of those that draw on care and support. For KCC it is currently 78.4% of the people we support. Given the increase in employment costs and the inadequate financial settlement, providers may choose to exit care provision or stop accepting placements from KCC. This may limit choice, cause delays in accessing care, or in the case of provider failure or withdrawal a change in care provider or care home.
<b>Mitigating Actions for Age</b>
We have an established process for managing provider failure. We also have a team dedicated to arranging care. We will continue to engage with the sector to try to ensure sufficient provision.
<b>Responsible Officer for Mitigating Actions – Age</b>
Richard Ellis
<b>20. Negative impacts and Mitigating actions for Disability</b>
<b>Are there negative impacts for Disability?</b>
Yes
<b>Details of Negative Impacts for Disability</b>
People with disabilities make up a significant proportion of those that draw on care and support. Given the increase in employment costs and the inadequate financial settlement, providers may choose to exit care provision or stop accepting placements from KCC. This may limit choice, cause delays in accessing care, or in the case of provider failure or withdrawal a change in care provision.
<b>Mitigating actions for Disability</b>
We have an established process for managing provider failure. We also have a team dedicated to arranging care. We will continue to engage with the sector to try to ensure sufficient provision. We can offer direct payments as an alternative if someone who draws on care and support wishes to arrange their own

support.
<b>Responsible Officer for Disability</b>
Richard Ellis
<b>21. Negative Impacts and Mitigating actions for Sex</b>
<b>Are there negative impacts for Sex</b>
Yes
<b>Details of negative impacts for Sex</b>
Women make up 63.5% of the people who draw on KCC arranged care and support. Given the increase in employment costs and the inadequate financial settlement, providers may choose to exit care provision or stop accepting placements from KCC. This may limit choice, cause delays in accessing care, or in the case of provider failure or withdrawal a change in care provision.
<b>Mitigating actions for Sex</b>
We have an established process for managing provider failure. We also have a team dedicated to arranging care. We will continue to engage with the sector to try to ensure sufficient provision. We can offer direct payments as an alternative if someone who draws on care and support wishes to arrange their own support.
<b>Responsible Officer for Sex</b>
Richard Ellis
<b>22. Negative Impacts and Mitigating actions for Gender identity/transgender</b>
<b>Are there negative impacts for Gender identity/transgender</b>
Yes
<b>Negative impacts for Gender identity/transgender</b>
Only 0.1% of people who draw on care and support are recorded as identifying as transgender. A reduction in the number of providers we can work with may further reduce the ability meet transgender people's needs.
<b>Mitigating actions for Gender identity/transgender</b>
When we re-commission our services, we will see if there are providers who are able and willing to meet the needs of gay, lesbian, bisexual or transgender people who draw on care and support.
<b>Responsible Officer for mitigating actions for Gender identity/transgender</b>
Richard Ellis
<b>23. Negative impacts and Mitigating actions for Race</b>
<b>Are there negative impacts for Race</b>
Yes
<b>Negative impacts for Race</b>
1.2% of people who draw on care & support are recorded as Asian/Asian British; 1.2% Black, Black British Caribbean or African; 0.4% Mixed/Multiple ethnic groups, and 0.5% other ethnic groups. In 11.2% of cases ethnicity is not recorded. A reduction in the choice of providers may erode confidence that the needs of people from non-white ethnic backgrounds can be met.
<b>Mitigating actions for Race</b>
Meeting the needs of individuals, including those that arise with different ethnicities, are requirements of our contracts and providers registration with CQC. When we re-commission our contracts we will test whether there are providers who wish to particularly focus on particular communities.
<b>Responsible Officer for mitigating actions for Race</b>
Richard Ellis
<b>24. Negative impacts and Mitigating actions for Religion and belief</b>
<b>Are there negative impacts for Religion and belief</b>
Yes
<b>Negative impacts for Religion and belief</b>
For people who draw on KCC arranged care & support, 36.1% are recorded as being having a faith, 23.8% are recorded as having no religion, and 40.1% are not recorded. A retraction in supply (and therefore choice) may reduce the chances of finding providers who can meet the needs of faith groups.

<b>Mitigating actions for Religion and belief</b>
Meeting the needs of individuals, including those that arise from their faith, are requirements of our contract. When we re-commission our contracts we will test whether there are providers who wish to particularly focus on faith communities.
<b>Responsible Officer for mitigating actions for Religion and Belief</b>
Richard Ellis
<b>25. Negative impacts and Mitigating actions for Sexual Orientation</b>
<b>Are there negative impacts for Sexual Orientation</b>
Yes
<b>Negative impacts for Sexual Orientation</b>
Of those who draw on KCC arranged care and support, 0.5% are recorded as identifying as gay or lesbian,. 0.1% bisexual, 0.2% as other. This is lower than the accepted national prevalence rates. In over 10% of cases it is either not recorded or recorded as 'prefer not to say'. This suggests that there is both a recording issue and an issue of confidence that adult social care will understand and respect their identity.
<b>Mitigating actions for Sexual Orientation</b>
Meeting the needs of individuals, including those that arise from their sexual orientation, are requirements of our contract. When we re-commission our contracts we will test whether there are providers who wish to particularly focus on non-geographic communities.
<b>Responsible Officer for mitigating actions for Sexual Orientation</b>
Richard Ellis
<b>26. Negative impacts and Mitigating actions for Pregnancy and Maternity</b>
<b>Are there negative impacts for Pregnancy and Maternity</b>
No
<b>Negative impacts for Pregnancy and Maternity</b>
Not Applicable
<b>Mitigating actions for Pregnancy and Maternity</b>
Not Applicable
<b>Responsible Officer for mitigating actions for Pregnancy and Maternity</b>
Not Applicable
<b>27. Negative impacts and Mitigating actions for Marriage and Civil Partnerships</b>
<b>Are there negative impacts for Marriage and Civil Partnerships</b>
Yes
<b>Negative impacts for Marriage and Civil Partnerships</b>
28.2% of people who draw on care and support are record as being married, 0.1% as being in civil partnerships, and 1.6% cohabiting. A reduction in choice of providers may make it harder to support couples to remain together.
<b>Mitigating actions for Marriage and Civil Partnerships</b>
Our aim is to support people in a home of their own, including options like Extra Care Housing, which can better support couples to remain together than residential care. Through our accommodation strategy we are aiming to expand the extra care and supported living offer, so it is available to support more people including couples.
<b>Responsible Officer for Marriage and Civil Partnerships</b>
Richard Ellis
<b>28. Negative impacts and Mitigating actions for Carer's responsibilities</b>
<b>Are there negative impacts for Carer's responsibilities</b>
Yes
<b>Negative impacts for Carer's responsibilities</b>
If there is a reduction in providers working with KCC, the care and support that wraps around family and other unpaid carers may be disrupted.
<b>Mitigating actions for Carer's responsibilities</b>

We are re-commissioning our carers support service to ensure that it better meets their needs. In the event of provider failure/withdrawal, we will include carers in the decision making about alternative arrangements.

**Responsible Officer for Carer's responsibilities**

Mark Albiston