

EAST RENFREWSHIRE COUNCIL22 October 2025Report by Chief Officer, Health & Social Care PartnershipHEALTH & SOCIAL CARE PARTNERSHIP –  
CHARGING FOR NON-RESIDENTIAL CARE SERVICES IN 2026/27**PURPOSE OF REPORT**

1. To provide Council with the requested update and an analysis of the amount of revenue expected to be generated from tapers and a recommended taper level.

**RECOMMENDATIONS**

2. Council is asked to:

- a) note the updated equalities impact assessment on service users actually asked to contribute.
- b) note the analysis of the income maximisation efforts made to support all potentially affected service users.
- c) note the analysis of the amount of revenue expected to be generated by taper levels of 25% to 60%; and
- d) agree a taper level of 60% based on the analysis.

**BACKGROUND**

3. Legislation on health and social care integration states that the Council, not the Integration Joint Board (IJB), retains the authority to set social care charges.

4. The Regulation of Care (Scotland) Act 2001 defines non-residential social care as care and support services provided outside of care homes. This includes services delivered in people's own homes and in the community such as day activities and transport.

5. In practice, the services people can be charged for are better described as support. These supports help people live more fulfilling, independent lives and are very different to personal care. This support includes:

- support to go shopping or preparing food;
- housework;

- travelling in the community for things like going to college, work, social activities or appointments;
- day activities; and
- help communicating with others or help understanding information.

6. On 20 November 2024, East Renfrewshire Integration Joint Board (IJB) endorsed introducing charging for non-residential care from 1 April 2025, with a 60% taper.

7. On 5 December 2024, Cabinet deferred the decision on the charges for non-residential care until its meeting of 6 February 2025, to receive clarity on the impact of the latest Scottish Government budget.

8. On 6 February 2025, Cabinet agreed to introduce charging for non-residential care from 1 April 2026, with a 40% taper.

9. The decision was subsequently called into Full Council on 26 February 2025, seeking to defer charging until the 2026/27 budget. Full Council:

- Deferred the introduction of charging for non-residential care services until 1 April 2026 and asked that the HSCP review the impact of the deferral.
- Asked that the deferral should allow sufficient time for financial assessments to take place alongside income maximisation and right to appeal.
- Noted that funding for the deferral of the implementation to 1 April 2026, where appropriate, should be taken from expected current year revenue budget underspends.
- Noted that, by 1 April 2026, the Council would also know if the Scottish Government intended to abolish or modify such charges in their budget for 2026/27.
- Further agreed that a report would be prepared for October's Full Council meeting, which would:
  - provide an updated equalities impact assessment on those service users actually asked to contribute;
  - provide an analysis of the income maximisation efforts made to support all potentially affected users; and
  - include an analysis of the amount of revenue expected to be generated and the taper level recommended.

10. This report provides the update requested.

**REPORT**

11. After the Full Council decision, a steering group of officers from the HSCP and the Council was set up to oversee the implementation of the amendment and to prepare the requested Council update.

12. A group of 12 residents also formed a Lived Experience Group to help shape and inform ongoing communications and engagement. The Steering Group included a standing agenda item to consider feedback and insights from this group.

**WHO WE SUPPORT: DATA OVERVIEW**Individuals Not Eligible for Charging

13. An analysis of all care and support plans identified 1,674 people receiving care and support from the HSCP.

14. Of the 1674 people, **69% (1,159 people)** are not currently eligible for a charge, as their support relates only to free personal care (support with daily living tasks and intimate personal hygiene including washing, dressing, toileting, or eating) or includes elements that are nationally exempt from charging, such as alcohol and drug recovery, carers' support, and support for children.

15. The 1159 individuals were notified in writing in May 2025 that they were exempt from charging. Income maximisation will however continue to be offered to individuals as part of their ongoing support offer.

Individuals Eligible for Charging

16. A total of 515 individuals were identified as receiving chargeable care and support services. These individuals are supported by a range of HSCP services - Learning Disability (52%), Older adults (16%), Mental Health (12%), Physical Disability (11%), Addictions (5%), Care at Home (3%), and Children & Families (1%).

17. This means in practice that those individuals are receiving non-residential care services, which can include support to go shopping, do housework, use transport or undertake day activities.

18. This information allowed us to be more targeted with communications and engagement. We also consulted with [The Alliance](#) and [The Assembly](#), which are independent organisations who advocate for people with learning disabilities, to seek feedback and input when developing our communications and engagement approach.

## **ACTIONS TAKEN TO FULFIL THE AMENDMENT**

### Communications and Engagement with Individuals Eligible for Charging

19. Our approach was to co-produce our communications and engagement activity and to listen to those impacted by the proposals.

20. We convened five dedicated sessions with the Lived Experience Group, each focused on a specific theme:

- Communications
- Personal Care
- Disability Related Expenditure (DRE)
- Equality, Fairness & Rights Impact Assessment (EFRIA)
- Appeals Process

21. The first session and feedback therein directly informed the development of our communications and engagement plan and associated materials.

22. On 24 May 2025, a plain English letter, co-produced with the Lived Experience Group, was sent to 515 affected individuals (or their Power of Attorney/guardian), explaining the proposed changes, the EFRIA process, and available support, along with FAQs and information about the Council's Money Advice & Rights Team (MART).

23. Follow-up letters on 20 June and 30 July provided further details on financial assessments, promoted MART services and drop-in sessions, and included testimonials from those who had engaged in the process. Most of these letters were issued by Royal Mail, but our teams hand delivered letters to a small group of particularly vulnerable service users to ensure they understood the message and to support them to make informed decisions.

24. Elected Member written briefings accompanied each letter to keep councillors informed and support constituent engagement.

25. The comprehensive Communications and Engagement Programme included:

- Mandatory internal training and communications across the HSCP to ensure consistent, accurate messaging ahead of launch.
- Tailored training for external partners, including the Carers' Centre and third sector providers supporting people with learning disabilities, to support effective communication.
- Regular attendance at the monthly Providers' Forum (May-August) to share updates and offer support.
- Advance distribution of letters and summaries to all HSCP staff and the Council's Customer First team to prepare for public enquiries.
- [A dedicated webpage](#), regularly updated with the latest information.

- Easy Read materials co-developed with the Lived Experience Group to ensure accessibility.
- A [step-by-step video guide](#) explaining the financial assessment process.
- Twice-weekly drop-in clinics throughout July and August at Barrhead and Eastwood Health and Care Centres, supported by HSCP staff, MART, the Carers' Centre, and the Self-Directed Support (SDS) Forum. We spoke to over 80 people at these sessions.
- Engaged hard-to-reach groups by working with our Community Pathways Service; Alcohol & Drug Recovery Service; Fairweather Hall drop-in; and Talking Points. We have also continued to work closely with the SDS Forum and Carers' Centre throughout.

#### Analysis of Income Maximisation Efforts with Individuals Eligible for Charging

26. Income maximisation ensures people are aware of and supported to access the benefits they're entitled to, along with advice on other financial matters. MART deliver this service.

27. To provide context, it's important to outline the benefits available to support adults with the additional costs associated with a disability or long-term health condition. These include:

- **Adult Disability Payment (ADP)** – replacing Disability Living Allowance (DLA) and Personal Independence Payments (PIP) in Scotland, for people aged 16 to State Pension age, who need help with daily living or mobility due to a disability or health condition.
- **Pension Age Disability Payment (PADP)** – replacing Attendance Allowance, for people over State Pension age who need help with personal care or supervision to stay safe.

28. Both benefits are designed to support people with everyday tasks aligned to non-residential care and support, such as:

- Preparing food
- Communicating with others
- Understanding information and making decisions
- Travel and mobility

29. Since June MART has been contacted by 66 of the 515 service users. This has so far led to income maximisation with 20 individuals achieving a £161,000 increased income. 30% of individuals who contacted MART have had an increase in their benefit income, generating an average gain of £8000 per annum, per household. Although 70% of residents did not financially gain from the income maximisation exercise, it provided them with reassurance and future-proofing of their current benefit awards and the knowledge that MART is available at any time to assist.

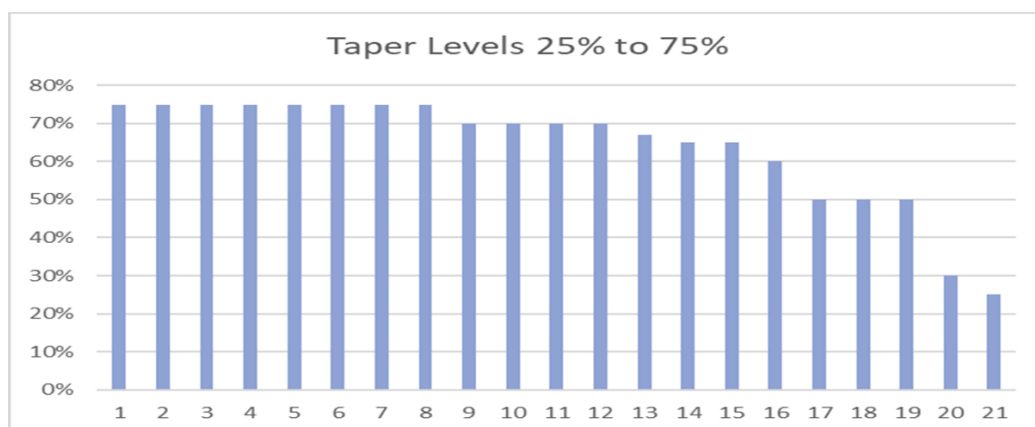
#### Analysis of the amount of revenue expected to be generated and the taper level recommended.

30. Core to introducing a taper is to factor in affordability and fairness as per [COSLA Guidance on Non-Residential Care Charging](#). COSLA provides annual advice on weekly income, below which individuals cannot be asked to pay charges. This is known as the minimum income

threshold and is updated each financial year in line with Department Work Pensions (DWP) and benefit up-rates and includes an additional buffer to ensure that not all income is taken into account for charges and that individuals have sufficient income.

31. The financial assessment determines how much disposable income a person has above the minimum income threshold. This excess amount is known as their 'chargeable income'. A taper is then applied to the chargeable income to calculate how much the person will contribute towards the cost of their care. If there is no chargeable income, the person will not be charged.

32. A review of information from COSLA indicates that that 31 out of 32 local authorities have a charge in place for some services, with 21 of the authorities responding to advise that their taper is between 25% to 75%. Based on the review, East Renfrewshire is the only authority where there is no charge in place for any services. A graph setting out the taper level for the 21 who responded is below.



33. For neighbouring councils, the current taper levels are:

Council	Taper Level
Glasgow	75%
Renfrewshire	60%
East Dunbartonshire	75%
West Dunbartonshire	75%
Inverclyde	25%
South Lanarkshire	70%
East Ayrshire	60%
South Ayrshire	75%
North Ayrshire	50%

34. To date 15 financial assessments have been completed, with a further 3 awaiting completion. The relatively low uptake of financial assessments at this stage was to be expected, as completion of financial assessments has been undertaken on a voluntary basis in the absence of an agreed policy.

35. Of the 15 completed, this shows the disposable income for residents of East Renfrewshire could be £93.29 per week for those in scope to contribute towards care costs. The majority of those who have completed a financial assessment are in receipt of enhanced rate daily living component of Adult Disability Payment/Pension Age Disability Payment which is £110.40/week. This is intended to support payment for care services.

36. With the caveat that 15 people is a snapshot of eligible individuals, the table below illustrates the impact of different taper levels on the estimated average weekly contribution and average annual income, based on an average weekly disposable income of £93.29:

<b>Taper Level %</b>	<b>Average Individual Weekly Contribution based on £93.29 disposable income</b>	<b>Average Annual income from 515 service users</b>
25%	£23.32	£626,258
30%	£27.99	£751,510
35%	£32.65	£876,761
40%	£37.32	£1,002,013
45%	£41.98	£1,127,265
50%	£46.65	£1,252,516
55%	£51.31	£1,377,768
60%	£55.97	£1,503,019

37. At Cabinet on 6 February 2025, illustrations were provided based on high-level modelling using annual care commitment costs, reduced for estimated personal care and using an assumption that there would be a 25% contribution level towards the cost of care. The learning from the financial assessments, has supported this modelling, indicating a similar level of income from charging for non-residential care services.

38. Due to this, a taper level of 60% is proposed to achieve a recurring income of between £1.5m and £1.6m, to meet the £1.5m cost pressure identified in the HSCP and to provide scope for administrative costs.

39. Subject to Council's decision, financial assessments would need to commence in November 2025 to give sufficient time to complete financial assessments for all individuals impacted in advance of 1 April 2026, when the charging for non-residential care would come into effect.

40. Subject to the decision at Council on 22 October, the next steps will include:

- Publishing a policy and guidance document on non-residential charging.
- HSCP ensuring continued communication, engagement and support with those impacted.
- MART undertaking Financial Assessments for all people impacted by March 2026.
- Charging would commence in April 2026, taking into account the latest COSLA guidance on non-residential charging and reflecting any impact to financial assessments from updated DWP benefits and allowances for 2026/27.

## **CONSULTATION AND ENGAGEMENT**

41. As set out in paragraphs 20 to 25 above, our approach was to co-produce our communications and engagement activity and to listen to those impacted by the proposals. This informed a comprehensive Communications and Engagement Programme.

42. Due to this a series of drop-in events were also held in Eastwood and Barrhead to allow people to ask questions and get further information. These were staffed by colleagues from MART, Social Work, HSCP Finance, Carers' team and partners from the SDS Forum and Carers' Centre. The SDS Forum and Carers Centre also hosted independent sessions which the HSCP supported.

43. A variety of approaches were taken to ensure inclusive engagement. It has been a priority to ensure that materials meet accessibility guidelines and a Lived Experience group has been engaged throughout the process supporting communications, including a video with subtitles to explain the financial assessment process.

44. We've taken a targeted and proactive approach to involving local partners, particularly commissioned services. By engaging the people residents already know and trust, we've enabled informed conversations about the charging process and financial assessments in familiar, supportive settings.

45. There have also been direct conversations and drop-in events to ensure that partners understand the charging process and had the opportunity to contribute feedback for the revised EFRIA and to help us break down any barriers to participation in a financial assessment or income maximisation. Partners have included: Include Me 2; Community Pathways Service; Alcohol & Drug Recovery Service; Fairweather Hall drop-in; and Talking Points. We have also continued to work closely with the SDS Forum and Carers' Centre, who have been part of the communications and engagement subgroup.

## **IMPLICATIONS OF THE PROPOSALS**

### Equality, Fairness & Rights Impact Assessment for Affected Individuals

46. An Equality, Fairness & Rights Impact Assessment (EFRIA) was completed throughout early November 2024 to accompany the initial proposal for charging.

47. An updated EFRIA has now been completed, available at the attached Annex, to reflect the feedback from engagement and consultation with individuals eligible for charging, and the outcomes of the financial assessments and income maximisation completed to date. We have also proactively asked residents who agree to take part in case studies to further understand individual impact.

48. Residents have been open and honest, which we are grateful for. We would have hoped that more people put themselves forward for a financial assessment but recognise this was a



voluntary process with some residents telling us they will refrain from participating until the policy is enacted.

49. The views of people are reflected in the EFRIA. These can be summarised as follows:

- *Although legally entitled to introduce this proposal, it is not the right thing to do. This is acknowledged by the Scottish Government, hence the Government's commitment to abolish these charges. Just because you can, doesn't mean you should.*
- *The proposal is unfair as it will disproportionately affect the learning disability community, many of whom are reliant solely on benefits.*
- *People with learning disabilities/difficulties have already been most affected by the introduction of the Supporting People Framework and there is already a lack of community groups and activities in East Renfrewshire.*
- *The proposal will put even more pressure and stress on carers who already contribute financially to support the people they care for.*
- *Families with someone who has a disability, and carers are already most likely to be in poverty or experience financial hardship. This is supported by the Council's own most recent Child Poverty Action Group report.*
- *Will impact on the ability of families/carers to financially plan for the future of their loved ones for when they are "no longer here".*

50. There have been no indications nationally that charging for non-residential care will be abolished for the financial year 2026/2027 and beyond, or the associated funding provided to HSCP to deliver free non-residential care. Due to this, mitigations included in the EFRIA are:

- Income maximisation is available for all residents and, as demonstrated in paragraph 29, this can have significant benefit for individuals. Income maximisation aims to support people in obtaining Adult Disability Payments and Pension Adult Disability Payment benefits, which are used to support costs of disability related expenditure.
- Adult Disability Payments and Pension Adult Disability Payment in themselves are a mitigation as people receive this to help with the costs of a disability/long-term health condition.
- The ability to pay is a key safeguard within the policy as set out in paragraph 31.
- Individual circumstances are fully assessed throughout the process.
- It is only chargeable income which is considered – currently being proposed as 60% of that income.
- Personal care is not chargeable. Personal care is support with daily living tasks and intimate personal hygiene including washing, dressing, toileting, or eating, which are not included in the charging policy.
- Support is available for carers via the Carers' Centre / care support plans.
- This would not affect the offer of community groups, as these are not funded through charging or individual's personal income.
- Charging offers an alternative to other mitigations needed to address the £1.5m recurring pressure.

51. To conclude, an EFRIA seeks to highlight where a policy or change will result in poorer or improved outcomes generally and if this would disproportionately impact any group or groups of people.

52. Any impact on finances will contribute to a negative outcome and the EFRIA outlines this alongside ensuring the views of people are clearly articulated. Individual circumstances are such that it is unlikely everyone would be impacted in the same way.

53. Whereas those with greater needs, who therefore receive higher levels of support are more likely to be eligible for a charge, it is only the non-personal care (support to go shopping or preparing food, housework, travelling in the community, day activities and help communicating with others), which is chargeable and therefore equitable to all people to a greater or lesser extent.

54. As highlighted at points 27 and 28, the role of income maximisation is to ensure people are aware of and supported to access the benefits they're entitled to, which includes Adult Disability Payment and Pension Adult Disability Payment. These benefits provide support with the additional costs associated with a disability or long-term health condition.

#### Finance and Efficiency Implications

55. The HSCP Medium Term Financial Plan highlights that the IJB is facing a potential £25m financial gap over the next 4 years, based on a flat cash approach in relation to a settlement from Scottish Government.

56. For 2026/27, the financial pressure is estimated at £9.2m across health and social care, subject to the budget settlement. This results from £2.4 million of a pressure in the current year being met from non-recurring funding and a possible £6.8 million of new pressures in 2026/27. The proportion of this pressure in the current year, that relates to social care, is £1.7 million.

57. In addition, the IJB is meeting the £1.5 million pressure from the decision to defer this charging from its own reserve, with a commitment from the Council for support of up to £1.5 million if required in the current year. This funding is not recurring and therefore not sustainable to be provided on a recurring basis to meet the gap.

58. The IJB's external auditors included the following extract as part of their audit on the 2024/25 annual report and accounts, as discussed at IJB on 24 September:

*"The financial outlook for the IJB remains very challenging. While the IJB was able to rebuild General Reserves in 2024/25, key pressures including the decision to defer charging for non-residential services, and ongoing prescribing demand and costs mean that the contingency is likely to be depleted again in the short term. At this stage, General Reserves are projected to fall to 0.1% of net expenditure in 2025/26.*

*This is unsustainable and presents real risk that services will have to be scaled back in an unplanned and reactive basis. IJB members need to work at pace with officers to ensure that*

*adequate savings and transformation can be developed to reduce the level of financial challenge facing the IJB.”*

59. This means the IJB has a recurring cost pressure of £1.5m which was proposed to be resolved through charging, by the IJB as part of the 2025/26 budget. Anything less than £1.5m income from non-residential care charging will result in an ongoing cost pressure and will mean that the IJB and Council will need to identify options to close that £1.5m pressure on a recurring basis. Combined with the current £1.7m pressure, this makes a total of £3.2 million recurring pressure.

60. If the IJB is unable to achieve the required £1.5m income from charging for non-residential care / support, or if the Council did not fund the £1.5m difference on a recurring basis then immediate actions will need to be put in place within the 5 months between November 2025 and March 2026 to ensure an equivalent reduction in cost by 1 April 2026 on a recurring basis and there is not a £1.5m financial gap in 2026/2027.

61. It is important to note that any large-scale service redesign that involves staffing, resources and property assets is not a viable option for delivery between November and March as a significant period of consultation and engagement, in line with Planning for People guidance, would be required with individuals, families, staff, services and trade unions for the services affected and this would take longer than five months.

62. As any redesign considerations would affect people receiving either substantive or critical level of care, this would mean that vulnerable adults would be affected and even in the longer term should any buildings close or services stop, we would still need to meet the costs of alternative care and support, which may be more expensive, depending on the services considered.

63. Given that staffing and care costs are the key components of our social care spend, there are limited options to deliver the £1.5m recurring pressure in the timescale needed in addition to the other savings underway. Due to this, an assessment of options from staffing and care spend would be required to make recommendations to the IJB in November 2025. Given there are limited options and a short timescale, the immediate actions may have to include a freeze on any recruitment, a change to care criteria to support only those people with a critical level of need and at risk of harm only, a review of all grants provided and an urgent review of services delivered.

64. This would affect a significant number of people in East Renfrewshire and mean that the HSCP would become risk and protection focused, likely leading to negative impacts on individuals' wellbeing, delays in hospital discharge, reduced level of care delivered and unpaid carers feeling unsupported.

65. For those recommendations, consultation and engagement with individuals, staff, trade unions would require to be undertaken alongside an EFRIA, Legal and Human Resources review given the significant implications for vulnerable children, adults and staff, leaving a risk that the £1.5m would not be found in this year and therefore a risk of a recurring £1.5m funding gap which the IJB cannot afford.

66. Of note, the IJB, as the governing body with responsibility for these decisions, may also decide not to approve the considerations or recommendations, given the implications for individuals and unpaid carers wellbeing and on staff, leading to a risk that the IJB will require to seek financial assistance from the Council to cover costs of care on a recurring basis to meet the gap.

67. Due to this, **a taper level of 60% is proposed for charging for non residential care services.** This would look at an income of between £1.5m and £1.6 million per year and deliver the cost pressure identified.

68. This funding gap is currently being contained on a non-recurring basis from IJB reserves, recognising that the Council committed to support the IJB in the current financial year if required.

#### Legal Implications

69. The Community Care & Health (Scotland) Act 2002 provides the ability for local authorities to charge for non-residential care. The Community Care & Health (Scotland) Act 2002 provides the ability for local authorities to charge for non-residential care. Alongside the lawful authority to apply charges this also sets out where, as a result of other legislation, where charges cannot be applied, such as when an individual is subject to Mental Health Care and Treatment (2003) act.

70. There have been no indications that charging for non-residential care will be abolished for the financial year 2026/2027 and beyond and the associated funding provided to HSCP to deliver free non – residential care. A review of information from COSLA indicates that that 31 out of 32 local authorities have a charge in place for some services, with 21 of the authorities responding to advise that their taper is between 25% to 75%

71. COSLA has produced annual guidance which defines a set of principles to underpin the development of local charging policies for social care support for people at home. The Guidance is subject to ongoing revision as appropriate, on an annual basis or as policy develops. Any change to the guidance requires approval by the political leadership of COSLA. The National Guidance is intended to assist Local Authorities and Integration Authorities to determine whether to charge a person for social care support at home, and in calculating how much, which is usually done through a financial assessment process.

72. The Guidance describes several best practice steps which should be taken when developing local charging policy, taking into consideration the full range of legal, financial and policy drivers. Charging policies at both a national and local level should be accessible, transparent, fair and equitable, and developed from a human rights perspective.

73. East Renfrewshire's draft Policy has been developed using COSLA Guidance.

## **CONCLUSION**

74. Full Council on 26 February 2025, asked officers to provide an updated equalities, fairness and rights impact assessment on those service users who would be actually asked to contribute; provide an analysis of the income maximisation efforts made to support all potentially affected users; and include an analysis of the amount of revenue expected to be generated and the taper level recommended.

75. Non-residential care services describe services that help people live more fulfilling, independent lives and are very different to personal care. This includes support to go shopping or prepare food, do housework, travelling in the community for things like going to college, work, social activities or appointments, day activities and help communicating with others or help understanding information. The aim of income maximisation is to enable the 515 people eligible for non-residential care charging to receive benefits, where they do not already do so.

76. The IJB has a recurring cost pressure of £1.5m which was proposed to be resolved through charging, by the IJB as part of the 2025/26 budget. Anything less than £1.5m income from non-residential care charging will result in a recurring cost pressure and will mean that the IJB and Council will need to identify options which deliver recurring efficiencies to close that £1.5m pressure.

77. Implications and options for alternatives to closing that gap, if charging is not accepted or progressed by Council, are provided which includes a recommendation towards a move towards delivery of critical risk services only, recruitment freeze, and ending contracts which do not support delivery of critical care to close that £1.5m recurring pressure. This may lead to a risk to vulnerable children and adults if accepted by the IJB.

78. A taper level of 60% is recommended to close the £1.5m pressure, based on analysis and with reference to IJB medium term financial analysis, learning from the external auditors' report and alternative implications to deliver the £1.5m cost pressure between November and March 2026, in order that the full saving is in place for commencement of 2026/27.

## **RECOMMENDATIONS**

79. Council is asked to:

- a) note the updated equalities impact assessment on service users actually asked to contribute;
- b) note the analysis of the income maximisation efforts made to support all potentially affected service users;
- c) note the analysis of the amount of revenue expected to be generated by taper levels of 25% to 60%; and
- d) agree a taper level of 60% based on the analysis.

Chief Officer, IJB: Alexis Chappell  
September 2025

**REPORT AUTHOR**

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**BACKGROUND PAPERS**

Deferral of Decision to Council: Health & Social Care Partnership (HSCP) Charging for Non-Residential Care Services 2025/26, Council 26 February 2025.

[https://www.eastrenfrewshire.gov.uk/media/11145/Item-04-HSCP-Charging-for-Non-Residential-Care-Services-in-2025-26/pdf/Item\\_04 -](https://www.eastrenfrewshire.gov.uk/media/11145/Item-04-HSCP-Charging-for-Non-Residential-Care-Services-in-2025-26/pdf/Item_04_-_HSCP_Charging_for_Non_Residential_Care_Services_in_2025-26.pdf?m=1749469149093)

[\\_HSCP Charging for Non Residential Care Services in 2025-26.pdf?m=1749469149093](https://www.eastrenfrewshire.gov.uk/media/11145/Item-04-HSCP-Charging-for-Non-Residential-Care-Services-in-2025-26/pdf/Item_04_-_HSCP_Charging_for_Non_Residential_Care_Services_in_2025-26.pdf?m=1749469149093)

HSCP Charging for Non-Residential Care Services 2025/26, Cabinet 6 February 2025.

[https://www.eastrenfrewshire.gov.uk/media/11145/Item-04-HSCP-Charging-for-Non-Residential-Care-Services-in-2025-26/pdf/Item\\_04 -](https://www.eastrenfrewshire.gov.uk/media/11145/Item-04-HSCP-Charging-for-Non-Residential-Care-Services-in-2025-26/pdf/Item_04_-_HSCP_Charging_for_Non_Residential_Care_Services_in_2025-26.pdf?m=1749469149093)

[\\_HSCP Charging for Non Residential Care Services in 2025-26.pdf?m=1749469149093](https://www.eastrenfrewshire.gov.uk/media/11145/Item-04-HSCP-Charging-for-Non-Residential-Care-Services-in-2025-26/pdf/Item_04_-_HSCP_Charging_for_Non_Residential_Care_Services_in_2025-26.pdf?m=1749469149093)

HSCP Charging for Services 2025/26, Cabinet 5 December 2024.

[https://www.eastrenfrewshire.gov.uk/media/11007/Cabinet-Item-4-5-December2024/pdf/Cabinet Item 4 - 5 December 2024.pdf?m=1732270393647](https://www.eastrenfrewshire.gov.uk/media/11007/Cabinet-Item-4-5-December2024/pdf/Cabinet_Item_4_-_5_December_2024.pdf?m=1732270393647)

HSCP Charging for Services 2024/25 and Beyond, Cabinet 3 October 2024.

[https://www.eastrenfrewshire.gov.uk/media/10752/Item-05-HSCP-Charging-for-Services-in-2024-25-andBeyond/pdf/Item\\_05 - HSCP - Charging for Services in 2024-25 and Beyond.pdf?m=1726746630563](https://www.eastrenfrewshire.gov.uk/media/10752/Item-05-HSCP-Charging-for-Services-in-2024-25-andBeyond/pdf/Item_05_-_HSCP_-_Charging_for_Services_in_2024-25_and_Beyond.pdf?m=1726746630563)



## Equality, Fairness and Rights Impact Assessment (EFRIA)

The Equality, Fairness and Rights Impact Assessment (EFRIA) is one of our specific duties to [assess the impact](#) of applying a new or revised policy or practice against the needs of the General Equality Duty. This means East Renfrewshire Council must be mindful when assessing impact against these needs to:

- ensure the policy does not discriminate unlawfully
- consider how the policy might better advance equality of opportunity
- consider whether the policy will affect good relations between different groups

The Fairer Scotland Duty places a legal responsibility on particular public bodies in Scotland to actively consider ('pay due regard' to) how they can reduce inequalities of outcome caused by socioeconomic disadvantage, when making strategic decisions. The UN Convention of the Rights of the Child (UNCRC) is an international human rights treaty which sets out the rights every child has and has been incorporated into Scottish Law as the [United Nations Convention on the Rights of the Child \(Incorporation\) \(Scotland\) Act 2024](#).

The Equality, Fairness and Rights Impact assessment considers how a policy\* could impact on the needs of individuals protected by the [Public Sector Equality Duty](#), [the Fairer Scotland Duty](#) and the [UN Convention of the Rights of the Child](#).

Please consult the [EFRIA guidance flowchart](#) to help you complete this assessment.

<b>Name of policy*:</b>	Charging for Non-Residential Care
<b>Description of policy:</b>	<p>Introduction of a means-testing approach to charge individuals for elements of their care and support which are not classed as personal care.</p> <p>Means-testing would be by way of a financial assessment, to determine people's ability to contribute.</p> <p>In line with current legislation there will be no charges for Services to children under the age of 18 Carers Support</p>
<b>Why is the policy required?</b>	For many years, the HSCP has worked hard to avoid the need to introduce charges for non-residential care, and up until now we are the only HSCP in Scotland that does not have a charge for services. Our financial position, the demand for services and the increasing complexity of need, means we need to propose introducing charges.
<b>Date EFIRA completed:</b>	15 September 2025
<b>Completed by:</b>	Mark Mulhern
<b>Lead officer for policy:</b>	Directorate Management Team
<b>Department:</b>	HSCP



\*The term 'policy' covers any work or function of East Renfrewshire Council i.e. customer and service delivery, staffing, criteria, practices, proposals, activities and decision-making

## Guidance – please read

### Section 1

This section enables you to determine if a full assessment is required. If a full assessment is not required, this must be clearly stated in **Section 9** of the form.

Section 2-8 is the full assessment covering the sections listed below:

<b>2</b>	<b>Engagement and Consultation</b>  Give details of how different groups have been consulted about the policy.
<b>3</b>	<b>Impact on individuals or groups with protected characteristics</b>  How will the policy impact individuals or groups who fall under one of the nine protected characteristics: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation?
<b>4</b>	<b>Impact on socio-economic disadvantage</b>  How will the policy impact individuals or groups disadvantaged by poverty, low income, homelessness or lack of or low-level educational qualifications?
<b>5</b>	<b>Impact on Children and Young People</b>  How will the policy impact on the rights and needs of children and young people?
<b>6</b>	<b>Contractors and suppliers</b>  Will the policy be delivered by any contractors or suppliers in full or partially?
<b>7</b>	<b>Outcome of assessment and action plan</b>

	What is your decision based on the assessment and are there any mitigations or actions that need to be addressed?
<b>8</b>	<b>Approval</b>  Details of when and who approved the policy.

**Section 9** should only be completed where the screening shows no assessment is required

When completing the assessment you must consider relevant evidence, including information received from equality groups. This evidence should inform the result of your impact assessment. You're required to take action to address any issues identified, such as removing or mitigating any negative impacts, where possible, and enhancing any potential for positive impact. If any adverse impact could result in unlawful discrimination, the policy must be fully reviewed and amended.

**All impact assessments will be published on the Council website**

### 1. Screening

**This section should be completed to establish if a full assessment is required.**

1.1 What is the nature of the work or activity?	
Select a category from below that explains the work or activity you are doing.	
<input checked="" type="checkbox"/> Policy or Strategy <input type="checkbox"/> Programme or Plan <input type="checkbox"/> Project delivery <input type="checkbox"/> Service or Function <input type="checkbox"/> Budget proposal <input type="checkbox"/> Other please state: Click or tap here to enter text.	<b>Is this work or activity...</b>  <input checked="" type="checkbox"/> New <input type="checkbox"/> Change or review of existing <input type="checkbox"/> Other- Please state: Click or tap here to enter text.

## 1.2 What will happen as a result of this policy?

What changes will come about for individuals and groups through this policy?- Select all that apply

- ☒ Change to Council, Trust or HSCP charging arrangements (including introduction, removal, increase or decrease)  
Change to how a service is delivered (including addition, change or removal of practices/procedures/processes)
- ☐ Change to provision of services or staffing
- ☐ Change to entitlement or eligibility for service delivery or welfare/benefit access
- ☐ Other. Please state: [Click or tap here to enter text.](#)

## 1.3 What groups of individuals are likely to be impacted by this policy?

Select which groups of individuals are likely to be impacted positively or negatively if this policy is implemented.

- ☒ The policy has potential to impact **individuals with protected characteristics\***
- ☒ The policy has potential to impact **socioeconomic disadvantage\*\* for individuals**
- ☒ The policy has potential to impact **children and young people up to the age of 18**
- ☐ The policy has no impact on those specified above.

**\*Protected Characteristics** are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

**\*\*Socio-economic disadvantage** is where an individual is disadvantaged by poverty, low income, homelessness or lack of or low-level educational qualifications

## 1.4 Is there any potential indication or evidence that the policy will discriminate unlawfully; affect equality of opportunity for different groups or affect good relations between different groups?

Will any individuals be treated less fairly than others if this policy is implemented? This includes employees, residents, community groups and visitors to the area.

- ☒ Yes  
☐ No  
☐ Don't Know

The HSCP and people we have consulted with have identified that people who require higher levels of care and support could potentially be impacted more greatly than others, certain groups may be more at risk than others such as people with learning disability / neurodivergent / physical disability particularly where support provided is not aligned to personal care. Our approach aims to mitigate, as far as possible, the risk of unfair impact on all residents of East Renfrewshire.

### Review your answers above.

- If the policy has **no impact on individuals**, and you have selected 'no' to section 1.3, an impact assessment is not required. **GO TO SECTION 9**
- If the policy will have an impact on individuals and/or you have selected 'yes or don't know' to section 1.3, complete the full assessment. **GO TO SECTION 2**

## 2. Engagement and Consultation

This section will assess how the policy is being communicated to certain groups and how you have consulted them.

### 2.1 How have individuals (incl. children & young people) who might be affected by the policy been consulted or involved?

This can include a summary of findings from recent consultations, surveys, user research or customer testing that has been carried out. Include dates and information.

People have been consulted in a number of ways:

- Letters issued to all people in receipt of a care package in East Renfrewshire to make them aware of the proposal and to invite them to information sessions
- Three in person information sessions hosted by a Head of Service supported by other senior staff who are subject matter experts
- Three online information sessions
- Independent event hosted by East Renfrewshire SDS Forum and East Renfrewshire Carers centre
- Dedicated web page with a summary of the proposal including FAQs - <https://www.eastrenfrewshire.gov.uk/Info>
- Survey to inform the EQFRIA
- Smaller sessions hosted with carers to inform the EQFRIA
- Detailed briefings to Elected Members to aid them in supporting constituents
- Correspondence by email – providing contact details and answering questions

The HSCP facilitated six sessions for members of the public. Three in-person events, with one in the Eastwood locality and two in the Barrhead locality. Three online events were held in evenings. Invitation letters were sent via post to all individuals who may be affected by the proposals, and information on the sessions shared with partners.

The SDS Forum for East Renfrewshire, in partnership with East Renfrewshire Carers Centre and SDS Scotland, also hosted an event which HSCP officers also attended to provide information and hear the views of those attending.

Combined these events reached more than 300 individuals with some individuals attending more than one session. However, it should be noted that a large number of attendees were carers and only some of these would have legal decision-making powers. It has been acknowledged that letters were sent at extremely short notice, and that there was no additional mechanisms in place to support accessibility for individuals who could be affected by the proposal including people with learning difficulties/disabilities, dementia, communication needs and mental health issues.

Host	Date	Time	In person/online
HSCP	22 October	2pm – 4pm	In person
HSCP	22 October	6pm – 8pm	Online
HSCP	23 October	2pm – 4pm	In person
HSCP	23 October	6pm – 8pm	Online
SDS Forum	8 November	10:30am – 12:30pm	In person
HSCP	25 November	2pm – 4pm	In person
HSCP	25 November	6pm – 8pm	Online

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Feedback from these events is attached as appendix 1, but the general feedback was one of anger at the proposal and concern at how this will affect vulnerable individuals who rely social care, particularly in terms of inclusion, participation and living full lives. Participants were aware that the Scottish Government have a commitment to abolish social care charges before 2026 and they expressed concern around the conflict between this and the proposal. Although there is no indication that this commitment will be delivered, there was still frustration at the proposals to introduce the policy, and questions around the timing and how this conflicts with the government's commitment.

Carers expressed concern that another policy will add more stress and responsibility to their caring role, impacting on their own physical and mental health and the affect that the policy will have on overall household income and that the increased expense that will often fall onto them.

The SDS Forum and Carers Centre also distributed an online survey to ask for their members views on the proposal. A full breakdown of the results and comments is attached in Appendix 2 but from 91 responses, 82 (90%) strongly disagreed/disagreed with the proposal.

Two smaller sessions were held by HSCP staff on the 19th and 20th of November to inform the Equalities, Fairness and Rights Impact Assessment. These sessions were attended by carers, rather than people with lived experience, and representatives from My Disabilityplus. The views shared during these sessions are incorporated into this assessment

There are some learnings from the engagement:

- People told us the letters should have been sent well in advance of the sessions as the short notice meant many could not attend those in October. We acknowledged the short notice, and arranged additional sessions on 25 November.
- The way our data pulls meant letters sometimes went to have been assessed as an adult without capacity. We have launched a project to look at this for future engagement
- A large majority of the people who attended were carers and that the events were not accessible for people who could be affected by the proposal including people with learning difficulties/disabilities, dementia, communication needs and mental health issues.
- The materials produced were not accessible for people with additional needs who will be impacted by the proposal
- The set-up of the events was limited by the facilities at the venues we used and we will consider this in future i.e. bigger screens, better parking

## **2.2 How will you communicate information about this policy to individuals who have: hearing and/or sight loss; English as an additional language; are digitally excluded; have literacy/numeracy barriers?**

Think about how you will communicate information about the policy to the above individuals. This may include printed materials being accessible in other formats, e.g. Braille, easy to read, translated in other languages. More information can be found [here](#).

The engagement sessions were held in-person and online to maximise the opportunity to attend. There was no additional supports in place to support accessibility for individuals with communication needs or learning difficulties/disabilities.

Slides used at the session and a full write up of the events were shared with the participants who requested this. Feedback was used to produce a “frequently asked questions” document which was also shared with participants, made available online and shared SDS Forum and Carers Centre.

While every effort was made to draft information in plain English, no information materials were created for people with specific needs – such as for blind people or those with a learning disability.

The events were held in wheelchair accessible venues and after the first session a microphone was used to help make sure everyone could hear, however there were no additional supports in place to support accessibility for individuals with communication needs or learning difficulties/disabilities.

There has been strong criticism of the engagement process, particularly the lack of engagement of people most affected by the proposal especially people with learning disabilities/difficulties. There has been further concerns raised regarding the lack of notice for the initial events.

Representatives of the ethnic minority community have expressed concern that members of their community, potentially affected by the proposal do not understand the full extent of what is being proposed. (Appendix 3)

In response to this letter, we delivered an input to the Fairweather Hall drop-in group on the 11<sup>th</sup> September. This is a group that provides social contact and information to the ethnic minority community. No additional comments were received other than to highlight the original letter objecting to the proposal that was delivered to the Provost in November 2024 and attached as an appendix to the original ERFIA.

### 3. Impact on groups with protected characteristics

**This section will assess if the policy has potential to impact individuals with protected characteristics. You should consider any evidence or information you have on how it will affect different groups of individuals, both positively and negatively.**

Below is a suggested list of sources:

- Input from local Councillors
- Findings from engagement exercise and consultations.
- Information or feedback from groups of individuals, such as equality interest organisations or groups who speak on behalf of others
- National, regional or local statistics
- Analysis of enquiries or complaints from customers
- Recommendations from inspections or audits
- National or regional research to identify similar issues
- Comparisons with similar policies in other departments or authorities to identify similar issues

**You may want to consider collecting new evidence that you don't have but think will be relevant.** For example: setting up meetings or focus groups, carrying out user research.

Please find other sources of evidence on page 9 of the [EFRIA guidance flowchart](#).

**3.1 Use the table below to consider how the policy may impact on a particular group with protected characteristics through reviewing the evidence, experience and needs of this group**



Characteristics/circumstances	Evidence, experience and needs- outline any data or research that shows how this group may be impacted (include sources)	Will the impact on this group be positive, neutral or negative and why?
Age	<p>Children and young people under the age of 18 will not be charged however the policy could affect the overall income of parents with disabilities and subsequently impact on their dependents.</p> <p>The Joseph Roundtree Foundation's annual report for 2024 found that disability benefits are making a greater proportion of income within households where someone is disabled and that this means that, "it is increasingly likely that households are either unable to meet the additional cost of being a disabled person and/or unable to meet their other basic needs</p> <p>The report found that children in families where someone is disabled are more than 3 times more likely to experience "material deprivation" than children living in families where no one is disabled.</p> <p>Older people are the biggest users of social care in East Renfrewshire. This population has increased significantly with an increase in those aged over 75 increasing by 61% between 2001 and 2022.</p>	<p>Negative.</p> <p>Although the policy will be means tested, it will likely result in people being left with a lower disposable income, especially for elderly people already affected by the cost of living and the cutting of the winter fuel allowance.</p> <p>It should be noted throughout that the policy will be based on an individual's ability to pay. If the financial assessment deems a charge is not appropriate then individuals will not be charged and their level of care unaffected.</p> <p>In addition the policy also includes a number of mitigation points to prevent people experiencing financial hardship as a result of any charge levied.</p> <p>These points apply to all the protected characteristics and include,</p> <p>Financial Assessment will be on individual's income (unless there is an income maximisation benefit from a joint assessment)</p> <p>Minimum Income Guarantee will be applied.</p>

		<p>The £20 per hour proposed charge is universal, no matter the level of complexity of care. This is lower than care we can buy from any care provider or provide ourselves.</p> <p>Proposing a taper of 60%</p> <p>There will be an upper limit to the weekly charge payable, to recognise that the more complex a person's needs are then generally the higher the cost of care. This limit will be set based on the level of the National Care Home Contract cost for residential care, less the Free Personal Care entitlement. For 2024/25 this will equate to a weekly upper limit of £577.24 (being £825.94 less £248.70 respectively for each component).</p> <p>The COSLA guidance includes a 6-week disregard period for over 65s on discharge from hospital for a period of reablement for up to 6 weeks. This disregard would apply to additional care needed. If there was a charge for care in place before hospital admission. This would remain in place following discharge. We will not distinguish for age. This will apply to all.</p>
Disability or long term health condition	<p>Individuals living with either a learning or physical disability make up just over 50% of those receiving non-personal care services from the HSCP.</p> <p>'The Disabled People, Poverty and the Cost of Living Crisis Report', produced by</p>	<p>Negative. As an individual's disposable incomes will be affected, this may reduce opportunities to participate fully in their community.</p> <p>Although a financial assessment will mean any charge will be based on the ability to pay.</p>

	<p>Inclusion Scotland provided evidence that, “Nearly half (48%) of all the people living in poverty in the UK are disabled or live with a disabled person.</p> <p>The report cites, “social care support costs,” as one of the key drivers of poverty for disabled people in Scotland.</p> <p>Disability Benefits are paid in recognition that disabled people and those living with long term conditions incur additional costs. The report includes Scope’s latest research, “On average, disabled households (with at least one disabled adult or child) need an additional £975 a month to have the same standard of living as non-disabled households. If this figure is updated to account for inflation over the current period 2022/2023, these extra costs rise to £1,122 per month”.</p> <p>Disabled people are more likely to be in low paid and part-time work relying in benefits to keep income above poverty thresholds.</p> <p>The Council’s most recent report into child poverty also highlights families with a disabled person as being more likely to live in poverty.</p>	<p>We will also work with partners, including the Council Money Advice and Rights Team (MART) to help people maximise their income.</p> <p>However, the HSCP is currently working with an eligibility criteria and any income generated will enable the HSCP are able to keep the eligibility for support as low as possible and continuing to meet the needs of our most vulnerable and disadvantaged residents.</p>
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Race	<p>Nationally, ethnic minorities are significantly more likely to live in poverty however the ethnic minority population of East Renfrewshire is dispersed across all communities.</p> <p>The Joseph Roundtree Foundation Report highlights the low uptake of benefit entitlement across the ethnic minority community resulting in a greater level of poverty.</p> <p>Culturally there can be an expectation, particularly on woman, to undertake caring roles</p>	<p>Negative. As people's disposable incomes may be affected with a greater burden placed on carers.</p> <p>However, we will work with the Council Money Advice and Rights Team (MART) to help people maximise their income.</p>
Sex	<p>Woman are more likely to take on the role of caring for a relative (see below) and still experience structural inequalities in the workplace</p>	<p>Negative. As an individual's disposable incomes may be affected.</p> <p>The potential for extra pressure placed on carers.</p> <p>A financial assessment would mean any charge would be based on the ability to pay. We will also work with partners, including the Council Money Advice and Rights Team (MART) to help people maximise their income.</p>
Gender reassignment	N/a	N/a

Marriage/Civil Partnership (only applicable to Council employment policy)	N/a	N/a
Pregnancy / Maternity	N/a	N/a
Religion / Belief	N/a	N/a
Sexual orientation	N/a	N/a
Providing unpaid care	<p>Carers Scotland most recent Valuing Carers Report published in November 2024, puts the number of carers in East Renfrewshire at 11,863, an increase of 27% over the last 10 years.</p> <p>The hours carers spend caring is also increasing. The most recent national Health &amp; Wellbeing Survey found that only 28% of carers in East Renfrewshire “feel supported to continue caring.”</p> <p>Alongside disabled people carers are more likely to experience poverty, with employment opportunities affected.</p> <p>At all the engagement sessions, carers expressed concerns that they may be financially impacted, or have an increased caring role, with additional carers stress as a result.</p>	<p>Potential negative impact on the demands of unpaid carers.</p> <p>Current social care support can have a dual benefit in supporting an individual to have access to their community but at the same time provide respite to carers.</p> <p>Negative impact on the overall household income.</p> <p>Support to carer's including respite/short breaks will remain free of charge and we will continue to work closely with East Renfrewshire Carers Centre to provide support to carers.</p> <p>East Renfrewshire Carers centre is a key partner and they have been informed and involved from the start of the proposal. We</p>

	The Valuing Carers Report calls on the Scottish Government to follow through on the commitment to remove social care charges and the Coalition Carers used Carers Rights day 2024 to launch a campaign for the removal of social care charging.	would continue to work closely with them, and other partners to mitigate the impact of any changes to our charging policy.
Any other relevant groups' e.g. unemployed people, people experiencing homelessness, care leavers, people involved in the criminal justice system, people with literacy/numeracy barriers, people living in rural communities.	N/a	

### 3.2 Are there known inequalities within the policy?

For example: barriers to transport for some groups; opening hours and location, organisational pay, terms or conditions; how public information is provided?

The elements of the social care that the HSCP are able to charge for are most likely to affect the learning disability community and those who have lower personal care needs but rely on social care support to access, education, employment and social opportunities.

This was the main point raised by carers of an adult with learning difficulties. They are highly critical of the proposal and how they deem it to be unfair. The carers have the view that all disposable income is already going to meet the costs of care for their loved ones and in fact additional amounts spent on care already comes from the wider household income.

Carers spoke about experiencing a “double hit” with the implementation of the Supporting People Framework with non-essential social supports being removed and families having to pay for this fully themselves if they want the support to continue. In context this is a recent funding decrease that has impacted residents of East Renfrewshire. The Charging Policy would further impact available funding for non-essential social supports.

There is also a risk that some people will not be able to generate savings. Not for luxury items but items required to live full and meaningful lives, household equipment, mobility vehicles and communication aids.

Carers are immensely concerned about the impact a charging policy will have if, and when they are no longer able to provide care. They question what standard of living their loved one will be left with, if they cannot generate any savings and have only the most basic level of income. The stress and mental health impact this has on carers featured at every engagement session and cannot be underestimated.

### **3.3 In what ways, if any, would this policy contribute to discrimination or help to eliminate it?**

Discrimination means treating individuals differently from others. For example, not recruiting someone as they are deemed too old/young; or a support group running on an upper floor with no lift access will discriminate against people with mobility issues or wheelchair users

There is no direct discrimination as a consequence of this policy. Everyone potentially affected will be treated the same under this policy, with a consistent and clear financial assessments being used to assess an individual's ability to contribute to the cost of their care. If someone can't afford to contribute, they will not be required to and this will not affect the care they receive.

Participants at the engagement sessions feel that the policy will unfairly affect those who rely on elements of social care to live full lives. There was a strong view that the policy would further increase inequality for disabled people, particularly young people who would have to pay to participate in activities that individuals without disabilities do for free, including work and further/higher education, participating in activities and even travelling to participate in anything outside of their house.

### **3.4 In what ways, if any, would this policy advance or undermine equality of opportunity?**

This is when individuals from different backgrounds are treated fairly through providing an equal footing or level playfield to achieve outcomes. For example, children who have additional support needs are provided with teaching support to fully participate in the school curriculum or a deaf BSL user is provided with a BSL interpreter at health appointments.

This policy should help with equality of opportunity by ensuring those who can contribute to their care, do.

In the face of a £12m budget shortfall in 2023/24 and up to £7m deficit predicted for 25/26, the income raised from this policy will support the HSCP to deliver its statutory duties and provide care to those with the greatest needs and help create more community based opportunities/supports that people can be signposted to.

However it is clear that the potential introduction of charging for social care may have an effect on what people can afford and therefore it may undermine equality of opportunity for those who will have less disposable income once charging commences. Some people may be able to reprioritise what they spend their money on but for others the impact could be more severe.

This question is at the heart of people's anger and disagreement with the proposal. Disabled people will be charged to take part in activities that non-disabled people can access for free. Some of these activities are basic human rights, such as the ability to work.

Service users and carers feel the policy reinforces a deficit model of disability which will restrict their ability to have full lives and introduces a level of financial scrutiny into their lives that non-disabled people do not face, impacting on their dignity and the feeling that they are a burden on their families and wider community.

Relevant comments from the survey:

*"I feel that this is discriminatory towards disabled people and their families. The severely disabled will never be able to earn a living and in our case we already contribute towards our sons care and as long as he lives with us, which looks like it could be forever as there are no suitable housing, we will be doing this for as long as we live. As parents who are almost pensioners, we see a bleak future for our son and know that this will just be the start. His benefits back up his support. Without the benefits there can be no support as these expenses are essential. We have campaigned for years to give our son a good life and we are still contributing towards this ourselves. I, and all the other parents I have contact with, are in complete despair over what is to come."*

*"This money was to ensure that people who received it would be able to have support to live life as those without any disability. You are discriminating against the most vulnerable in society where we should be encouraging them to be supported in all aspects of their lives and not charged for it. Every single person and their families who receives support don't want to be disabled and be able to live life as every other person in society and with this charging policy you are ensuring that they are being treated as 3rd class citizens and that their rights do not matter. This was also shown by the lack of councillors who attended the meetings, absolutely shocking that the majority of them are voting on this and have never spoken to those of us it affects."*



*“This is so incredibly unfair to an already marginalised group of people. If this is implemented my son will have the social opportunities he currently enjoys taken away to pay for his support. He is unable to travel or be in the community incident but is working towards this. We either choose to pay the cost so he can work towards some form of independent living in the future but he loses the finances to do any social activity so becomes isolated from his friends and society or we keep him within the network of community he has built up and stop his support so he ceases to have a way to work towards independence making him reliant on ERC funding for good. What a truly hellish set of options to choose between.”*

All comments are available in appendix 2

### **3.5 In what ways, if any, would this policy foster or undermine good relations between groups of individuals?**

Consider aspects that may tackle prejudice or promote understanding between different groups. For example, ensuring new arrivals and refugees are given supports to integrate within local communities or an LGBTQI+ youth group provide training on LGBTQI+ experiences to a local faith group

Many participants in the engagement sessions spoke about the positive experience of social care in East Renfrewshire and how self-directed support has been implemented to support people and carers. The feeling is that this policy will undermine the relationship between people, carers and the HSCP and is creating a more transactional relationship than a supporting one.

People spoke about, “a race to the bottom,” and how it will be difficult to think about, “a good day.”

During this current cost of living crisis, any impact on the disposable income of families could lead to tensions and mental health issues in family members.

This policy may put a strain on relationships between carers and those they care for, if, for example, people disengage with HSCP services to avoid being charged, creating more of a strain on the unpaid carer.

This will be mitigated as much as possible by signposting to community supports, and of course, all charges being subject to ability to pay. Support to carer’s including respite/short breaks will remain free of charge and we will continue to work closely with East Renfrewshire Carers Centre to provide support to carers.

Participants also spoke about the relationship with the wider community. There was a feeling that the disabled community is, “not seen” in the community and has, “no voice.” Any policy that makes it harder for disabled people to engage fully with their communities will only add to this feeling.

Relevant comments from the survey:

*“I would need to put my son into full time residential care.”*

*“I am 54yrs old. I have a 13yr old autistic son. We earn less than 30k per year combined. We care for our son ourselves without a support package. If I or my wife were left to look after our son alone and then fall ill we struggle then paying for carers would not be affordable. Also with the introduction of charges for care does this mean that council tax will now be reduced given that a significant amount was spent on social care? Somehow tells me that’s not going to happen.”*

*“being a carer I feel extreme stress when there are changes in money matters , any rise and extra costs are huge people with small salaries or not working will have to give a second thought about asking for support and without support carer cannot manage alone .well it’s a tough situation.”*

*“I am the mother of a young adult who has just left school and requires 2:1 support 24/7. I had to give up my job and my husband can only work part time. My son’s income helps to pay our bills because I no longer work due to caring for him. There are now 3 adults in our house and only a part time income. Financially this will be devastating for us.”*

All comments are available as appendix 2

#### 4. Impact on socio-economic disadvantage

**This section will assess how the policy may impact socio-economic disadvantage for individuals.**

**Socio-economic disadvantage** is where an individual is disadvantaged by poverty, low income, homelessness or lack of or low-level educational qualifications. Socio-economic disadvantage can be experienced in both geographical communities and communities of interest i.e. a group that share a common characteristic or circumstance. In East Renfrewshire there are a number

of communities, known as locality planning areas, where people are at greater risk of experiencing socio-economic disadvantage including,

- Barrhead – Dunterlie, East Arthurlie and Dovecothall
- Auchenback
- Neilston
- Thornliebank

Consider the policy itself and the way it will be implemented. How will this deliver different experiences for individuals in East Renfrewshire?

**4.1 In the section below consider how the policy may impact socio-economic disadvantage through reviewing the evidence, experience and needs of this group**

Characteristics/circumstances	Evidence, experience and needs- outline any data or research that shows how this group may be impacted (include sources)	Will the impact on this group be positive, neutral or negative and why?
Socio-economic	<p>As already evidenced people with disabilities and carers are more likely to live in poverty or low-income households. It is likely then that the majority of people will not be charged for the care they receive.</p> <p>There will no doubt be people in our communities who can contribute to the cost of their care without it having a significant impact and those on low incomes with no disposable income will not incur a charge for their social care.</p>	<p>Neutral</p> <p>Charges will be based on the ability to pay. If people cannot afford the charge they will not have to pay and the level of care will remain the same.</p> <p>The policy also includes a number of mitigating factors to protect any individuals from being placed into financial difficulty. These include,</p> <p>Financial Assessment will be on individual's income (unless there is an income</p>

	<p>It is therefore likely that a group that will be affected will be those in “middle” income who have a level of disposable income but are also experiencing challenges brought on by the current cost of living crisis.</p> <p>It is acknowledged that any loss of the level of disposable income a person has will have a negative impact however, the proposed financial assessment model guarantees that people’s income will at the very least meet the Minimum Income Guarantee as set by the Scottish Government with a taper applied to ensure that people paying for care services still have a level of disposable income.</p> <p>HSCP are accessed by those across the full breadth of the authority. As the policy is based on ability to pay, those who can’t afford to contribute won’t.</p>	<p>maximisation benefit from a joint assessment)</p> <p>Minimum Income Guarantee will be applied.</p> <p>The £20 per hour proposed charge is universal, no matter the level of complexity of care. This is lower than care we can buy from any care provider or provide ourselves.</p> <p>Proposing a taper of 60%</p> <p>There will be an upper limit to the weekly charge payable, to recognise that that the more complex a person’s needs are then generally the higher the cost of care. This limit will be set based on the level of the National Care Home Contract cost for residential care, less the Free Personal Care entitlement. For 2024/25 this will equate to a weekly upper limit of £577.24 (being £825.94 less £248.70 respectively for each component.</p> <p>The COSLA guidance includes a 6 week disregard period for over 65s on discharge from hospital for a period of reablement for up to 6 weeks. This disregard would apply to additional care needed. If there was a charge for care in place before hospital admission. This would remain in place following discharge. We will not distinguish for age. This will apply to all.</p>
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#### **4.2 Consider the impact outline in section 4.1, In what way would the policy alleviate or increase inequalities in socio-economic disadvantage?**

Consider common inequalities such as poorer skills and attainment; lower paid and less secure work; greater chance of being a victim of crime; less chance of being treated with dignity and respect; lower healthy life expectancy; lower feeling of control over decisions that affect you.

Participants spoke about the impact that this will have on the activities that disabled people in East Renfrewshire are currently able to do. For example, the introduction of a charge may mean that, for some disabled people, it is not worth working, studying or volunteering and the negative consequences this will have on their lives especially physical and mental wellbeing.

#### **4.3 What opportunities are there within this policy and the way it will be implemented to promote inclusion, participation, dignity and empowerment of people experiencing socio-economic disadvantage?**

For example, a new health centre is being built and considers affordability of public transport options for residents.

N/A

#### **4.4 Is there anything in particular that will be done to address the multiple inequalities experienced by some people in Auchenback, Barrhead, Neilston and Thornliebank?**

The policy is based on ability to pay. Charges can be waived if necessary to avoid putting anyone into financial hardship. The Financial Assessment will be able to identify if people are receiving all the benefits and support that they are entitled to, signposting them to the appropriate support such as the Money Advice & Rights Team and Citizen's Advice.

We also recognise that individual's financial circumstances can change at any time and our financial assessments will respond to such changes.

## 5. Impact on Children and Young People

**This section must be completed if any potential impact on children and young individuals up to the age of 18 have been identified in sections 1-4.**

United Nations Convention on the Rights of the Child (Scotland) Act 2024 places a legal duty on public authorities to respect and protect children's rights in the work they do.

There are a range of elements that the Council must consider in supporting these rights including:

- Ensuring that children and young people have a voice in decisions that affect them – both directly and indirectly;
- Undertaking assessments of how well the Council is protecting children, including children's rights and wellbeing impact assessments and considering how budget planning supports better outcomes for children and young people

### **5.1 Are there known impacts on children and young people within the subject matter of the policy?**

For example, changes to out-of-school services, employment support for parents, play parks.

No. Charges do not apply to children.

**If there is no impact on children and young people GO TO SECTION 6**

**5.2 In the section below outline the UN Convention on the Rights of the Child (UNCRC) General principle that is relevant, the particular groups of children that will be affected and how this will impact them**

Which <a href="#">General Principles of UNCRC</a> are relevant to this policy/measure?		Which particular groups of children and young people are affected by this policy? (e.g. young children, children with disabilities, children living in poverty, children in care, young people who offend).
Tick all that apply		
<b>Article 2</b> <b>Non-discrimination</b> Children should not be discriminated against in the enjoyment of their rights. No child should be discriminated against because of the situation or status of their parent/carer(s).	<input type="checkbox"/>	
<b>Article 3</b> <b>Best interests of the child</b> Every decision and action taken relating to a child must be in their best interests. Governments must take all appropriate legislative and administrative measures to ensure that children have the protection and care necessary for their wellbeing - and that the institutions, services and facilities responsible for their care and protection conform with established standards.	<input type="checkbox"/>	
<b>Article 6</b> <b>Life, survival and development</b> Every child has a right to life and to develop to their full potential.	<input type="checkbox"/>	

<b>Article 12</b> <b>Respect for the views of the child</b> Every child has a right to express their views and have them given due weight in accordance with their age and maturity. This includes involving children in budget decisions that affect them. Children should be provided with the opportunity to be heard, either directly or through a representative or appropriate body.	<input type="checkbox"/>	
<b>Which <a href="#">additional articles</a> are relevant to this policy/measure?</b> List all that apply     		

In relation to the articles identified above, explain how the impact will be positive, negative or neutral.

Relevant identified Article of UNCRC	Impact category (Positive/Negative/Neutral)	Assessment of impact (including consideration of whether the policy might impact different groups of children and young people in any other way).
<b>5.3 What opportunities are there within this policy to advance or undermine the rights of children and young people?</b>  Explain how the policy can strengthen or weaken the rights of children and young individuals		



**5.4 What opportunities are there within this policy to protect and promote the wellbeing of children and young people?**

For example promoting physical activity and healthy eating.

**6. Contractors and suppliers**

**6.1 Will the policy be carried out by contractors or suppliers?**

This includes fully or partially. If yes, how will you incorporate equality expectations into the contract?

No. Internal officers only.

## 7. Outcome of assessment and action plan

You have completed sections 1-6 above and assessed the impact of the policy on individuals with protected characteristics, those experiencing socio-economic disadvantage and children and young people. The following section outlines your decision based on this assessment, mitigations and actions that can be taken to reduce any negative impacts.

### 7.1 Having assessed the impact of the policy under sections 3,4 and 5 select the most appropriate outcome

Which option below best describes your next steps?

- ☒ Continue the policy as is
- ☐ Adjust the policy
- ☐ Stop the policy

### 7.2 Are there any significant and relevant information gaps that have not been filled during the development of this policy and how do you plan to address these during the life of the policy?

We have not had the opportunity to engage some disability groups in as much detail as we would have liked, in particular, individuals with a learning disability, dementia and mental health issues.

### 7.3 Briefly summarise how your evidence and assessment demonstrates any potential impacts, both positive and negative, on groups with protected characteristics from this policy?

As evidenced, this policy may impact negatively on older people and people from an ethnic minority background however the biggest impact will be on people living with a disability by asking them to contribute to their care, and any subsequent impact this may have in on informal carers, by potentially increasing the burden of care.

To mitigate this, people will only be asked to contribute what they can afford, and there will be disregards in place for disability related expenditure, if required. This document has outlined a number of mitigation points included in the policy that protect people from financial hardship. These are outlined again in section 7.4 below.

In addition, charges can be waived altogether if the charge would put someone into financial hardship.

Support to carer's including respite/short breaks will remain free of charge and we will continue to work closely with East Renfrewshire Carers Centre to provide support to carers.

**7.4 Briefly summarise how your evidence and assessment demonstrates any potential impact, both positive and negative, on individuals and communities experiencing socio-economic disadvantage from this policy?**

Again it is important to stress that the proposal ensures that any charge is based on the ability to pay.

It is highly unlikely that anyone experiencing socio-economic disadvantage will meet the threshold to be charged.

As detailed previously, there are a number of mitigating factors put in place to ensure people are not placed into financial hardship. These include,

Financial Assessment will be on individual's income (unless there is an income maximisation benefit from a joint assessment)

Minimum Income Guarantee will be applied.

The £20 per hour proposed charge is universal, no matter the level of complexity of care. This is lower than care we can buy from any care provider or provide ourselves.

Proposing a taper of 60%

There will be an upper limit to the weekly charge payable, to recognise that that the more complex a person's needs are then generally the higher the cost of care. This limit will be set based on the level of the National Care Home Contract cost for residential care, less the Free Personal Care entitlement. For 2024/25 this will equate to a weekly upper limit of £577.24 (being £825.94 less £248.70 respectively for each component.

The COSLA guidance includes a 6 week disregard period for over 65s on discharge from hospital for a period of reablement for up to 6 weeks. This disregard would apply to additional care needed. If there was a charge for care in place before hospital admission this would remain in place following discharge. This will apply to all and we will not distinguish on age.

**7.5 Briefly summarise how your evidence and assessment demonstrates any potential impacts, both positive and negative, on the rights of children and young people from this policy?**

N/a

**7.6 How long will this policy be in place and when is it scheduled for review?**

Is this a temporary or permanent change and are there plans to review the policy?

The policy will be a permanent change unless the Scottish Government follow through on the commitment to remove social care charges.

**7.7 Based on the findings from this impact assessment, outline any mitigating actions that will reduce the impact caused by the policy on individuals, including children and young people. The actions should also outline the communication and implementation of the policy.**

Identified adverse impact	Mitigating actions	Timeline	Responsible person
People disengaging with social services	Continue to work in partnership with local organisations to develop and promote early intervention and preventative support. People will be made aware of the Talking points Partnership and how to make contact with HSCP should their circumstances change.	Ongoing	
Financial Hardship	The policy will adhere to the COSLA guidance and personal care will remain free of charge.	Ongoing	

	<p>The policy will ensure a minimum income guarantee and the application of a taper to ensure people have a level of disposable income after any charge is levied.</p> <p>People will only be asked to contribute what they can afford, and there will be disregards in place for disability related expenditure, if required.</p> <p>The financial assessment process will be clear and transparent with people knowing exactly what they are being charged for.</p> <p>In addition, charges can be waived altogether if the charge would put someone into financial hardship.</p> <p>We will ensure people's income is maximised working closely with the Money Advice and Rights Team.</p>		
Burden on unpaid carers	Support for carers themselves will be free of charge however we do recognise that this is potentially another pressure on carers and we will refer carers to East Renfrewshire Carers Centre for further information and advice.	<b>Ongoing</b>	

## 8. Approval

If the full impact assessment has been completed, complete below.

<b>Name of policy:</b>	Charging for Non-residential Care
<b>Date approved:</b>	
<b>Approved by:</b>  (Head of Service/Director level)	
<b>Department:</b>	HSCP

### 9. No assessment required

**If the screening has indicated a full assessment is not required, complete below.**

Policy/Decision Title	
Department/ Service	
Responsible officer for taking decision	

Rationale for decision	<b>Please record why an assessment is not required and what your justification is for making that decision. This must include confirmation that the policy has no relevance for people with protected characteristics or impact on human rights or socio-economic inequalities.</b>
<b>Declaration:</b> I confirm the decision <u>not</u> to carry out an Equality, Fairness and Rights Impact Assessment has been authorised by:  <b>Name and Job Title:</b>  <b>Date Authorisation given:</b>	

## Version Control

Date of change	Amendment	Owner
Feb 2021	First publication	C Coburn
June 2023	Introduction and Guidance sections added and formatting changes throughout	C Coburn
Feb 2024	Updating UNCRC section following legislative change	J Breslin
October 2024	Refinements after reviewing	M McIntyre