

Equality impact assessment (EIA) form: evidencing paying due regard to protected characteristics

Care provider inflation award 2026/27

An Equality Impact Assessment (EIA) form is a document that proves paying due regard by considering protected characteristics. EIAs that accompany reports presented to Councillors for decision-making are published with the committee papers on our website and are also available in hard copy at the relevant meetings.

Section 1: Initial Equality Impact Assessment Screening

This section documents the equality screening process of actual or potential impacts of the proposed activity on a specific protected characteristic, along with NYC's additional agreed-upon characteristics, to determine whether a full Equality Impact Assessment (EIA) is necessary or appropriate.

Basic Details

Directorate	Health & Adult Services
Service area	Service Development
Proposal being screened	Care provider inflation award 2026/27
Officer(s) carrying out screening	Jo Waldmeyer, Head of Service Development, joanne.waldmeyer@northyorks.gov.uk
Lead Officer and contact details	Jo Waldmeyer, Head of Service Development, joanne.waldmeyer@northyorks.gov.uk
Date of the assessment	23 rd February 2026
Please describe briefly what this EIA is about. (e.g. are you starting a new service, changing how you do something, or stopping doing something?)	Assess the impact of the 2026/27 annual inflation award for care and support services commissioned via contracts with care providers.
What does the authority hope to achieve by it? (E.g. to save money, meet increased demand, do things in a better way.)	The Care Act 2014 places several explicit legal duties on local authorities to ensure a sustainable, high-quality care market and to manage fee-setting in a way that reflects actual provider costs. The proposed inflationary increase is deliverable within the Councils budget. It recognises the financial pressures facing providers and ensures the care market remains sustainable.

Further Details

<p>1.1 How have stakeholders been involved in this policy/ decision/ proposal? (e.g. a consultation exercise)</p>	<p>The uplift was consulted on via the ICG, who consulted all providers that hold contracts with the Council, including their own members.</p> <p>Lead officers with input from other colleagues have also drawn on feedback from ongoing communications with the care market via provider forums and surgeries; Market Development Board and through routine contract relationship management conversations.</p>
<p>1.2 Will the proposal have a significant effect on how other organisations operate? (e.g. partners, funding criteria, etc.). Please explain briefly</p>	<p>The award of an inflationary increase will have a significant effect on the financial sustainability of care and support providers contracted to deliver care on behalf of the Council.</p> <p>The inflation award is targeted at the lower end of fees and historical contracts. This means some contracts will not receive an inflationary award which may impact financial sustainability.</p>

1.3 Impact on people with any of the following protected characteristics as defined by the Equality Act 2010, or NYC’s additional agreed characteristics

As part of this assessment, please consider the following questions:

- To what extent is this service used by particular groups of people with protected characteristics?
- Does the proposal relate to functions that previous consultation has identified as important?
- Do different groups have different needs or experiences in the area the proposal relates to?

If for any characteristic, it is considered that there is likely to be an adverse impact or you have ticked ‘Don’t know/no info available’, then a full EIA should be carried out where this is proportionate. You are advised to speak to your directorate representative for advice if you are in any doubt.

Tick and indicate which protected characteristics are identified as relevant to the proposal (positive, negative, neutral or don’t know).

Protected characteristic	Impact				Comments
	Positive	Negative	Neutral	Don't know	
Age	X				Most people accessing social care are elderly. People access this service through an “assessment” which takes account of needs linked to protected characteristics. There is potential for an improved service to older people via increased quality.
Disability	X				Providers of service that support people with a disability will be offered the same inflationary increase in line with other care providers delivering other types of services.
					While some specialist services supporting adults under 65 will not receive an increase due to rates exceeding agreed thresholds for uplifts, the Council has a robust sustainability policy and process that provides an avenue for providers to raise concerns and for

					the Council to agree support where appropriate. Furthermore, the rates the Council pay are already significantly higher than the national average.
Sex	X				More women than men access social care. This is likely due to the gender profile of people aged 65+. This means that the positive impact of improved quality standards will affect more women than men.
Race (including GRTS)			X		The impact of the proposal should be neutral. However, improved quality standards should positively impact as for other groups.
Gender reassignment			X		The impact of the proposal should be neutral. However, improved quality standards should positively impact as for other groups. The collection of data for this group of people is not routinely collected.
Sexual orientation	X				Research indicates that older LGBT people are less likely to have informal support from family and so are more likely to receive social care support. Improved quality standards should positively impact as for other groups. The collection of data for this group of people is not routinely collected.
Religion or belief				X	No evidence for impact. Improved quality standards should positively impact as for other groups.
Pregnancy or maternity				X	No evidence for impact
Marriage or civil partnership				X	No evidence for impact
NYC's additional characteristics					
People in rural areas			X		The setting of fee levels has no direct impact on where an individual resides, however, it is acknowledged that for those living in more rural areas, the choice of support may be more limited and that family may encounter travel difficulties when visiting their family members in a care home. The inflationary uplift specifically recognises the additional cost to providers delivering home care in rural and super rural areas.
People on a low income			X		Income plays no factor in assessing for social care support. Maximum

					client contributions fixed by national regulations.
Carer (unpaid family or friend)			X		It is hoped that by improving fee levels and having improved quality standards this should positively impact carers due to the person they support receiving good quality care.
Are from the Armed Forces Community (including veterans)			X		Income plays no factor in assessing for social care support. Maximum client contributions fixed by national regulations.

1.4 To which Part(s) of the Public Sector Equality Duties is the Policy/decision/proposal relevant? Tick and briefly describe.

General Duties	Yes	No	Details
Eliminate unlawful discrimination, harassment and victimisation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Advance equality of opportunity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Improved quality standards should positively impact care delivery across groups.
Foster good relations between different groups	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

1.5 Decision (Please tick one option)

Decision to recommend this policy/ decision for an Equality Impact Assessment?

Yes



No



If the answer is “Yes”, or you indicate a negative impact on any of the characteristics mentioned in the table above, please continue to Section 2 and complete the full Equality Impact Assessment. If the answer is “No”, please give a brief reason here.

Signed (Assistant Director or equivalent)

Abigail Barron

Date

26.02.26

Section 2: Equality Impact Assessment

This section aims to provide a full assessment of the actual or potential impacts on specific protected characteristics, along with NYC's additional characteristics. It will also identify the proper actions to mitigate these impacts, if needed.

2.1 Evidence, Consultation and Data: What data or evidence source(s) has/ have been used to inform this assessment? Select the relevant source (s):

- Demographic data
- Service usage data
- Consultation feedback
- National/local research and report
- Expert opinion
- Others

The proposed uplift has been informed by:

- Previous work undertaken to calculate the actual cost of care and fair cost of care

- Evidence about the estimated financial impact of the Employment Rights Bill in relation to day one sickness rights.
- Feedback from the care market about staffing and non staffing related cost pressures (albeit only 11 providers responded to the data collection exercise)
- Nationally published benchmarking data about average care fees. This shows the rates the Council pays are already significantly higher than the national average [Market Sustainability and Improvement Fund 2025 to 2026: care provider fees - GOV.UK](#)

	NYC rate	Average	Difference
Home Care (hour)	26.01	25.05	4%
Supported Living (hour)	26.20	22.95	14%
Residential 65+ (week)	1,086.18	955.56	14%
Nursing 65+ (week)	1,357.78	1,089.48	25%
Residential under 65s (week)	2,006.47	1,835.41	9%
Nursing under 65s (week)	1,762.17	1,485.67	19%

- Feedback from other local authorities on their proposed increases.

2.2 Stakeholder Engagement: What engagement has been done regarding the proposal and what are the results?

- Who has been consulted?
- How were they consulted?
- What feedback was received?

The uplift was agreed following extensive negotiations with the Independent Care Group, acting on behalf of the whole care market.

The ICG circulated the proposed rates along with a survey to 708 providers. Of those only 96 responded. 20 (21%) agreed with the proposals while 76 (79%) did not. The vast majority of the market did not respond.

2.3 What positive impact will this proposal have on the council budget, people, community, economic growth and environment, etc? Please explain briefly

About the 2026/27 inflationary offer

The inflationary uplift for 2026/27 takes account of general inflation and the increase in employment related costs. It has been informed by feedback from the ICG about the pressures that providers are facing. This is balanced with the need to ensure the uplift is affordable within the Council's limited resources. The offer is designed to:

- **Increase the Actual Cost of Care rate for placements for people aged 65 and over**
- **Ensuring that all relevant 65+ Care Home placements in North Yorkshire are paid at least the 2026/27 ACOC rate.** This will fulfil the commitment made to the Care Market when ACOC was implemented in 2022/23.
- **Increase the fees paid for lower cost services on contracts that pre-date the 2022-27 APL.** These are sometimes referred to as legacy contracts and are often paid at lower rates than equivalent care on the current APL. This will help to narrow the gap between lower historic rates and the sustainable rates that providers submitted for the current APL.

- **Recognises the exceptional circumstances of the increase in Day-One Costs (sick pay)** effective from April 2026 and which providers will not have foreseen when submitting their fee rates for the period 2022-2027.

Providers may receive an uplift for some, but not necessarily all contracts they have with North Yorkshire Council.

The cost of this award is funded within the allocated inflation in the 2026/27 budget approved by Council on 13 February 2026.

In addition to the annual inflationary uplift, the Council fulfils its duty to ensure a sustainable market through:

- A robust Sustainability Policy/Process to prevent provider failure and ensure contracts are financially sustainable for providers and the Council/ICB
- Using a nationally recognised benchmarking tools to support sustainability conversations/fee negotiations where providers request an increase via the Sustainability Process
- Ensuring a proactive response where there is a risk of provider failure to ensure service continuity for affected individuals

2.4 Please briefly describe how will this proposal affect people with protected characteristics? Only those who are identified as relevant to the proposal in section 1.

protected characteristics	Negative	Don't know	Why will it have this effect? Provide evidence from engagement, consultation and/or service user data or demographic information, etc.
Age			
Disability			
Sex			
Race (including GRTS)			
Gender reassignment			
Sexual orientation			
Religion or belief			
Pregnancy or maternity			
Marriage or civil partnership			
NYC's additional characteristics			
People in rural areas			
People on a low income			
Carer (unpaid family or friend)			
Are from the Armed Forces Community (including veterans)			

2.5 Geographic impact: Please detail where the impact will be (please tick all that apply)

North Yorkshire wide	X
Craven	
Hambleton	
Harrogate	
Richmondshire	
Ryedale	
Scarborough	
Selby	

If you have ticked one or more areas, will specific town(s)/ village(s) be particularly impacted? If so, please specify below.

The proposal will have a North Yorkshire wide impact, due to the location and spread of care providers across North Yorkshire.

2.6 Will the proposal affect anyone more because of a combination of protected characteristics? (e.g. older women or young gay men) State what you think the effect may be and why, citing evidence from Q2.1 & Q2.2, e.g. engagement, consultation and/or service user data or demographic information, etc.

Not applicable

2.7 Mitigation and Actions: List the actions that will be taken to reduce or eliminate any negative impact identified above and how positive impacts will be enhanced. Briefly describe the action you defined.

Actions	Lead	By when
Proactive contract relationship management conversations to enable providers to raise sustainability concerns about services or individual contracts.	Contract Relationship Management	On-going BAU
Continue to apply the Sustainability Policy/Process to prevent provider failure and ensure contracts are financially sustainable for providers and the Council/ICB	Contract Relationship Management	On-going BAU
Use Care Cubed benchmarking tools to support sustainability conversations/fee negotiations where providers request an increase via the Sustainability Process	Contract Relationship Management	On-going BAU
Ensure a proactive response where there is a risk of provider failure to ensure service continuity for affected individuals	Quality and Service Continuity Team	On-going BAU

2.8 Monitoring and Review: If the proposal is to be implemented, how will the impact be monitored? Briefly describe the monitoring arrangements/systems that will be put in place to find out how the expected outcomes have been achieved in practice.

We will continue to monitor the number/nature of sustainability conversations in order to identify sectors of the market that are disproportionately impacted by financial concerns.

2.9 Conclusion: Please summarise the findings of your EIA, including impacts, recommendations in relation to addressing impacts, including any legal advice, and next steps. This summary should be used as part of the report to the decision maker.

No negative impact identified with the inflation award for 26/27. The cost of this award is funded within the allocated inflation in the 2026/27 budget approved by Council on 13 February 2026.

2.10 Sign off section

This full EIA was completed by:

Name: Jo Waldmeyer
Job title: Head of Service Development
Directorate: Health & Adult Services
Signature:

Completion date: 25/02/26

Authorised by relevant Assistant Director (signature): Anton Hodge

Date: 25/02/26