

Adult Social Care

Equality Impact Assessment

Work Programme/Policy Being reviewed:

Vision for the future of Southwark adult social care services – 3 year budget strategy

Name of Responsible Manager:

Sarah McClinton

Name of Lead Director:

Susanna White

Directorate:

Adult & Social Care

Service:

All

Key aims of this work programme:

To design and implement adult social care services that deliver the Council's statutory duties within a reduced financial envelope, in a way that achieves better value for money and promotes independence.

Who is intended to benefit from this piece of work?

People who need adult social care support.

Which partners are involved in this work programme:

Early discussions have commenced with housing, children's services, Community Action Southwark, trade unions and PCT. Further engagement will be required as programme is shaped up, including with affected organisations, people who use services and carers.

Date EIA assessment completed:

28 January 2011

Section 1: Overview Equality Impact Assessment of Proposed Work Programme/Policy

1. Description of Policy/Service Redesign	
Provide an outline of the proposed change, including key drivers; how the particular approach was determined; financial implications and links to key local and national policy and strategic drivers	<p>The key drivers for this change are the government Spending Review¹ and Putting People First concordat.² It also takes into account the national vision for adult social care³. The approach has been developed by working with managers through facilitated events. We have taken a diagnostic approach to understanding the current provision and performance of adult social care services in Southwark and looked at potential savings realisation if we modernise our services, focus resources on the most vulnerable and shift the balance of care for Fair Access to Care Services (FACS) eligible people toward community-based support.</p> <p>The vision for Southwark is to support people to live independent and fulfilling lives, based on choices that are important to them. This requires services to be more effective and more personalised, focusing on individuals rather than institutions and shifting the balance of care away from residential homes and towards more personalised services in community settings. This also requires a different relationship between the council and the community, moving from a model of dependency to one where older and disabled people are seen as people who can contribute and exercise control over their own lives, improving their own health and wellbeing. Proposals for the redesign of services seek to contribute to this overall vision, in line with the financial context of a reduced public purse.</p> <p>The Council is required to meet its statutory duty to disabled people with FACS eligible needs and these services have been prioritised within this approach above discretionary services. The redesign of services aims to focus resources on helping people to help themselves so as to minimise the impact on disadvantaged groups.</p> <p>Frontline services have been prioritised above buildings-based provision. New technology and the personalisation approach to support people to live independently and well at home as far as possible means we can continue to provide more services if we reduce fixed costs associated with buildings and realise capital assets for investment.</p>

¹ HM Treasury (2010), *Spending Review 2010*, London

² HM Government (2007), *Putting People First: a shared vision and commitment to the transformation of adult social care* – HM Government (December, 2007), London

³ Department of Health (2010), *A vision for adult social care: capable communities and active citizens* – Department of Health (November, 2010), London

	<p>In addition, the offer of personal budgets to support flexibility and choice in accessing services, will continue to develop in light of the Coalition Government’s commitment to offering everyone with an ongoing, eligible care need a personal budget, preferably in the form of a direct payment, by 2013.</p> <p>There is also an overall drive in commissioning services to work towards ensuring that best value is obtained from contracts and that resources are being targeted most effectively to achieve the best outcomes for people. Any work around this will need to be sensitive to the particular impact on individual equality strands and take this into account as we seek to develop a system that is focused on personalised services that people can access support from to help meet their own needs.</p> <p>Detailed proposals are being developed to sit within the framework set out in our vision will seek to achieve savings in a model that is ‘front-loaded’ so that the bulk of savings are delivered earlier in the budget period. Individual proposals that are agreed to be taken forward will need individual, detailed equality impact assessments, set within this overall framework.</p>
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2. Purpose and Benefits	
Which groups are the intended to benefit from the implementation of this policy/service redesign?	<p>People who are at risk of needing long term social care support and people who have been identified with eligible care and support needs, as outlined through FACS criteria.</p>

3. Impact Assessment

Outline the main issues for your policy or service change in relation to equality, diversity and social cohesion (e.g. access, cultural sensitivity, impact of service change/policy etc.)

This EIA is being carried out in accordance with Southwark Council's Equality and Human Rights Scheme, 2008–2011⁴. It seeks to consider how this programme of work around the budget strategy and vision for adult social care will impact on key equality strands highlighted in the Equality Act 2010, particularly considering the impact on proposals in terms of direct and indirect discrimination of individuals. Southwark is aware of the key issues around equalities across an array of groups and we will deliver this programme in a way that is sensitive to people's different backgrounds and needs.

Specific issues are set out below.

4. Monitoring and reviewing the policy/service change

Describe arrangements for monitoring or carrying out regular checks on the impact of this policy post-implementation

The overall vision for the future of adult social care in Southwark has been discussed with a range of stakeholder groups in draft form to help support its development and seek input on the overall approach and direction. Presentations have been given to the following groups and feedback sought.

- Adult social care service user and carer panel
- Adult social care managers' forum
- Health and Wellbeing Board
- Adult social care provider market forum
- Older People's Partnership Board

Further presentations are also planned with the Carer's Forum, Disability Partnership Board and we propose making a draft version of the vision available on the Southwark Council website to invite further comments.

Feedback from these groups has been used to refine the vision but, in general, to date there has been an acceptance of the overall approach and direction for the future of adult social care.

This strategy and equalities impact will be reviewed at least every 12 months. We will seek to develop a range of success measures to allow us to monitor the impact of changes in terms of access to services, the extent to which individual outcomes are achieved and customer satisfaction levels. The profile of

⁴ http://www.southwark.gov.uk/downloads/download/281/equalities_and_human_rights_scheme_2008_to_2011

people using services will also be monitored and reviewed.

Individual projects that lead to staffing reorganisations will be reviewed in line with HR policy.

As highlighted previously, detailed Equality Impact Assessments for specific elements of service redesign proposals arising from the vision and proposals in the budget report will need to be completed and reviewed as proposals develop, in the context of the overall vision framework. This will include seeking the views of organisations, people using services and carers on whom the proposals may impact.

We recognise that we will need to work closely with partner across the council, particularly in areas like housing and employment, to understand the cross-cutting impacts of the need to reduce spend in these areas and our desired outcome of helping more people to live independently and well at home and in the community.

Section 2: Pre-Implementation Equality Impact Assessment

5.1 Disability (mental, physical, sensory, long term health, learning disabilities)

a. Statutory Duties: In respect of the proposed policy & service change, list key legislation in relation to this group

Disability Discrimination Act 2005
Human Rights Act 1998
Equality Act 2010
Community care legislation

The protected characteristic of disability applies to a person who has a physical or mental impairment that has a substantial and long-term adverse effect on their ability to carry out day-to-day activities, which would include things like using a telephone, reading a book or using public transport. A person's disability (physical or mental impairment) itself can often create a barrier for them accessing services. For example if a person is housebound, blind or visually impaired.

b. Likely impacts of proposed changes & mitigating actions: Describe the proposed changes that are likely to affect people in Southwark and set out mitigating actions

The key impact is around services not continuing to exist or being offered in a different way. As part of our overall vision for adult social care, it is likely that, in future, there will be fewer people receiving ongoing, long-term social care support. In addition, those eligible people entitled to personal budgets may have a reduced offer. However, this in the context of a drive to support people to live independently and well for as long as possible, with choice and control over the support they access so they can effectively use the resources available to them and achieve the outcomes they want. It is also in the context of focusing resources on time-limited interventions, such as re-ablement services, to help people get back on their feet and support people to be able to actively engage in their local community.

We are specifically looking to review current day centre provision across the borough for older people, mental health and learning disability services. Again, this may include examining the effectiveness of current services in meeting our aims of supporting independence, choice and control as well as considering the number of buildings through which services are delivered. To mitigate this, the personalised approach for services by which people have choice and control in achieving the outcomes they want, and know how much is to be spent on their care and support in the form of a personal budget should help people make decisions on the types of services they want to access to lead the lives they wish.

There are also proposals to reshape the universal offer around discretionary services available to people who do not necessarily receive support from the Council. This is about moving away from building-based services to a model of hubs in communities that enable people to access a range of support in one place at a single visit. It is likely that a number of people who access these discretionary services are disabled although they are unlikely to be eligible for Council support in terms of FACS criteria. The impact of the proposals may result in the number of people receiving such discretionary services is reduced, which could include some people with disabilities.

To try and mitigate the impact on people who currently use discretionary services, the council will investigate pump priming and small injections of cash for projects that support independence and can become financially self sustaining where possible.

Budget proposals on reviewing charging policy will also necessarily impact on disabled people who are accessing adult social care services. Any changes will need to remain in line with government guidance on this issue, and that is the approach being proposed.

Proposals to move away from residential care provision to more personalised services through community support may also have a long-term positive impact in supporting increased independence and choice for people and providing them with opportunities for supported, independent living to achieve the outcomes they want. This includes further work for those people who use supporting people services. However, it will be necessary to consider the position of people who may have spent a considerable amount of time in residential care and may require additional support during any period of transition.

Another key driver of the proposals are about the importance of partnership involving individuals, communities, voluntary and private sectors, the NHS and the council's wider services, particularly employment and housing. This is designed to create a greater focus on supporting people to help themselves and each other as active citizens, and working with the wider community and voluntary groups to build social capital within communities. Signposting and effective time-limited interventions such as re-ablement will be further developed and regularly used to work towards supporting people to live independently and well without the need for long-term interventions. This has the potential to help more disabled people through provision of appropriate and accurate information at an earlier stage, as well as support to use resources within their own families and communities.

A key aspect of this is helping people understand how much is to be spent on their care and support – their personal budget – and supporting them to make their own decisions about how their money should be used in an effective. It will be important to recognise that people with mental health needs, autism and those with complex care packages may require additional support to access personal budgets (Department of Health, 2010).

5.2 Age

a. Statutory Duties: In respect of the proposed policy & service change, list key legislation in relation to this group

Equality Act 2010

b. Likely impacts of proposed changes & mitigating actions: Describe the proposed changes that are likely to affect people in Southwark and set out mitigating actions

Adult social care services are provided to people over the age of 18. The proposals for the Southwark vision for adult social care apply to all adults who may require care and support. Frailty and disability associated with old age means that it is likely the proposals will impact on older people and indeed the majority of users of social care in Southwark are over 65.

While the proposed changes mean that fewer people are likely to receive long term support and the personal budget offer may be reduced, we are seeking to mitigate the impact of this by focusing on providing timely and accurate information earlier in the process through a single point of informed contact, signposting people to a wide range of services that are available to them in the wider community. We recognise that it will be important to consider, as part of this, the formats in which information is available locally, to ensure that everyone can make use of the information and advice provided. In addition, there will be a focus on effective time-limited interventions, such as re-ablement, that seek to help people get back on their feet after a period of ill health or trip to hospital, often with reduced or even no need for ongoing care. There is some emerging evidence to suggest that the

use of re-ablement type services can result in improved health-related and social care-related quality of life, as well as being cost effective and being associated with a decrease in subsequent social care service use over time⁵. Early re-ablement work in Southwark has also suggested that a large proportion of people using the re-ablement service have not accessed an ongoing care package afterwards although further work will be required to understand the longer-term outcomes in this area.

Proposals around targeting prevention work to where there is demonstrable impact on how investment early on can ultimately reduce demand for longer-term social care support may also have a particular benefit to older people in terms of them achieving the outcomes they want. This is a group that often places particular importance in these 'low level' type interventions as a means of supporting them to stay independent and well.

We are specifically looking to review current day centre provision across the borough for older people, mental health and learning disability services. Again, this may include examining the effectiveness of current services in meeting our aims of supporting independence, choice and control as well as considering the number of buildings through which services are delivered. To mitigate this, the personalised approach for services by which people have choice and control in achieving the outcomes they want, and know how much is to be spent on their care and support in the form of a personal budget should help people make decisions on the types of services they want to access to lead the lives they wish.

There are also proposals to reshape the universal offer around discretionary services available to people who do not necessarily receive support from the Council. This is about moving away from building-based services to a model of hubs in communities that enable people to access a range of support in one place at a single visit. The vast majority of these services, which are often lunch clubs/day services are focused on providing a service to older people, although they may not be eligible for council support in terms of meeting relevant FACS criteria. The impact of proposals may result in fewer buildings based services currently accessed by older people.

To try and mitigate the impact on people who currently use discretionary services, the Council will investigate pump priming and small injections of cash for projects that support independence and can become financially self sustaining where possible. In addition, there will be an expectation on any services that continue to be commissioned that they are able to deliver even better value, perhaps through increasing the number of placements available, extending opening hours or collaborating with other organisations to meet wider needs.

There is the potential for a positive impact on all groups as the proposals seek to promote choice and control and support people to live independently and well, and to achieve the outcomes that they want. In terms of the specific personalisation offer of personal budgets, there is currently some national evidence to suggest that older people may need a greater degree of support to access the benefits of personal budgets⁶, which can be addressed by

⁵ Glendinning, C, Jones K, et al. (2010) *Homecare Re-ablement Services: Investigating the longer-term impacts (prospective longitudinal study)* –Personal Social Services Research Unit University of Kent & Social Policy Research Unit, University of York

⁶ Glendinning, C. et al, Individual Budgets Evaluation Network (IBSEN) (2008) *Evaluation of the Individual Budgets pilot programme: final report*, IBSEN, London

ensuring the availability of appropriate support, which can be effectively provided by the third sector. This will need to be considered as the offer of personal budgets is developed across Southwark, for example in commissioning arrangements for any information and advice projects or brokerage services to support people to make decisions about spending and managing their money.

In addition, proposals to move away from residential care provision to more personalised services through community support may also have a long-term positive impact in supporting increased independence and choice for people and providing them with opportunities for supported, independent living to achieve the outcomes they want. However, it will be necessary to consider the position of people who may have spent a considerable amount of time in residential care and may require additional support during any period of transition.

The former Commission for Social Care Inspection found some evidence to suggest that young people in transition between children's and adults' services (particularly 16–17 year olds) may not be getting the support they need from adult social care services⁷. Mitigating actions for this group include the proposals to introduce a new approach to transition, including whole life planning and seeking creative approaches to supporting independence while reducing duplication across services.

Budget proposals on reviewing charging policy will also necessarily impact on older people in terms of them being a key group to access adult social care services. Any changes will need to remain in line with government guidance on this issue, and that is the approach being proposed.

5.3 Race/Ethnicity

a. Statutory Duties: In respect of the proposed policy & service change, list key legislation in relation to this group

Race Relations Act 1976, 2000
Equality Act 2010

For the purposes of the Equality Act 'race' includes colour, nationality and ethnic or national origins. A racial group can be made up of two or more different racial groups (e.g. Black British or White Irish).

b. Likely impacts of proposed changes & mitigating actions: Describe the proposed changes that are likely to affect people in Southwark and set out mitigating actions

⁷ Commission for Social Care Inspection (CSCI) (2008) *State of Social Care in England 2007-08*

It is not anticipated that this strategy will have a significantly differential impact on race and ethnicity for people entitled to statutory services. The personalised approach to service delivery gives people who are entitled to long term care more choice and control over their support. This enables individual culturally sensitive responses to be agreed with individuals. There is also some evidence to suggest that personal budgets have the potential to offer greater independence and flexibility in support arrangements for black and minority ethnic (BME) groups in terms of improved access to culturally sensitive, tailored support. However, this needs to be seen in the context of the importance of there being sufficient options in the local market place to offer the type of support that people want. Southwark's role as market shaper and its approach to quality assurance in the future will need to take account of this need in ongoing work.

Furthermore, our work to shift the balance of care away from residential provision and towards more community-based support will need to take account of particular requirements for culturally-tailored provision, in terms of the role of the council in developing an effective and robust market place for services.

Proposals being considered to reshape resources available for discretionary services, for example lunch clubs, available to people who do not necessarily receive support from the Council, may have an impact on a number of ethnic groups as currently a number of projects commissioned are culturally specific.

To try and take account of this, we are proposing that continued funding for any projects will be dependent on them looking at how they can deliver better value, perhaps through extending the number of places available or opening hours, or working collaboratively with organisations who will not receive council funding in the future. We would expect this to take account of the wide range of different communities that we have in Southwark and seek to promote community cohesion, bringing people together. In addition, proposals are being considered for a small amount of resource to be available to offer pump priming or small injections of cash as part of a process to support financially self-sustaining models of care.

5.4 Gender/Gender Identity (inc. gender reassignment)

a. Statutory Duties: In respect of the proposed policy & service change, list key legislation in relation to this group

Equality Act 2010

b. Likely impacts of proposed changes & mitigating actions: Describe the proposed changes that are likely to affect people in Southwark and set out mitigating actions

As a result of longer life expectancy more women than men use adult social care services and this is also true for Southwark where a majority of adult social care service users are women. In addition, older women tend to be less well off than older men. There is some evidence to suggest that, from a national perspective, there are nearly five times as many women as men in institutional care but they are less able to afford it⁸ (Mayhew, 2009). This all suggests that there is potential for proposals to have a greater impact on women in terms of changes to the number and type of services that will be available in the future as a result of proposals.

Mitigating actions to support this include the specific proposal on re-ablement as a means of helping people get back on their feet and living independently and to attempt to prevent further deterioration and a requirement for ongoing intensive support. The single point of informed contact should also provide clarity about the system of adult social care, how people can engage and the range and types of support available.

Women are more likely to be carers than men (58 percent of carers were women according to the 2001 Census). There is a risk that, if proposals do lead to fewer people receiving long term support this may place a further burden on carers and impact particularly on women. However, the vision for Southwark recognises the key role that carers play, both in delivering care and in preventing people's care needs from increasing. We are seeking to investigate proposals for effective interventions that can provide help and support for carers. In addition, proposals will also need to be carefully considered in the context of the importance of care and support being about partnership between individuals, families, communities, the voluntary and private sector, the wider council and NHS. This means that we are particularly interested in developing social capital within communities and encouraging people to help themselves and each other as active citizens.

There is also some evidence to suggest that personal budgets have the potential to offer greater independence and flexibility in support arrangements for transgender people (for example even in just being able to select for themselves the gender of their carer). However, this needs to be seen in the context of the importance of there being sufficient options in the local market place to offer the type of support that people want. Southwark's role as market shaper and its approach to quality assurance in the future will need to take account of this need in ongoing work..

5.5 Religion/Belief

a. Statutory Duties: In respect of the proposed policy & service change, list key legislation in relation to this group

Equality Act 2010. The Equality Act protects people with or without religion or belief from unlawful discrimination. Belief means any philosophical belief or a lack of such belief. For example, Humanism is a protected philosophical belief but political beliefs would not be protected.

⁸ Mayhew L. (2009) *The Market Potential for Privately Financed Long Term Care Products in the UK* – Faculty of Actuarial Science and Insurance, CASS Business School

<p>b. Likely impacts of proposed changes & mitigating actions: Describe the proposed changes that are likely to affect people in Southwark and set out mitigating actions</p> <p>As with some other areas considered above, the drive towards personalised services and responses for people, combined with the personal budget offer, can provide opportunities for people to purchase services that are culturally sensitive for their needs. As in other areas, Southwark will need to take a lead role in shaping the market and quality assurance so that providers understand and are in a position to offer the types of services that support these choices for local people. It will also be important to ensure that people using services, carers and organisations affected have the opportunity to engage with and shape future proposals, which in turn should help support a drive towards personalised services for people.</p>
<p>5.6 Sexual Orientation</p>
<p>a. Statutory Duties: In respect of the proposed policy & service change, list key legislation in relation to this group</p> <p>Equality Act 2010</p> <p>We know that some people have issues with homosexuality because of misinformation, general prejudice or because of religion or belief. Basic human rights principles and case law makes it clear that no one can be unlawfully discriminated on the basis of their sexual orientation. The Equality Act protects bisexual, gay, heterosexual and lesbian people from unlawful discrimination.</p>
<p>b. Likely impacts of proposed changes & mitigating actions: Describe the proposed changes that are likely to affect people in Southwark and set out mitigating actions</p> <p>We are aware the former CSCI found that people from lesbian, gay and bisexual communities may find themselves in an assessment process that fails to correctly identify their needs, which is likely to result in the provision of services that inadequately meet the needs of individuals⁹. The personalised approach to service delivery gives people who are entitled to long term care more choice and control over their support. This should enable personalised responses to be agreed with individuals, and should take into account any needs arising specifically as a result of an individual's sexual orientation.</p>
<p>5.7 Carers</p>
<p>a. Statutory Duties: In respect of the proposed policy & service change, list key legislation in relation to this group</p>

⁹ CSCI (2008) *Putting People First: equality and diversity matters – providing appropriate services for lesbian, gay and bisexual and transgender people* CSCI, London

The Equality Act 2010 covers the issue of discrimination by association, which may have an impact on those caring for people with an adult social care need.

b. Likely impacts of proposed changes & mitigating actions: Describe the proposed changes that are likely to affect people in Southwark and set out mitigating actions

There is a risk that, if proposals do lead to fewer people receiving long term support this may place a further burden on carers. However, the vision for Southwark recognises the key role that carers play, both in delivering care and in preventing people's care needs from increasing. We are seeking to investigate proposals for effective interventions that can provide help and support for carers. In addition, proposals will also need to be carefully considered in the context of the importance of care and support being about partnership between individuals, families, communities, the voluntary and private sector, the wider council and NHS. This means that we are particularly interested in developing social capital within communities and encouraging people to help themselves and each other as active citizens.

All proposals will need to be considered in the light of how they impact on carers and seek to promote equality. Individual EIAs will need to undertake further detailed analysis on this as appropriate and seek to engage with carers about the impact of proposals on them.

Note: for adult social care it is not expected that proposals will have a differential impact on the equality strand of pregnancy and maternity (as outlined in the Equality Act 2010), consequently it has not been considered in detail here.

Section 3: Equality Impact Assessment, Conclusions & Further Actions

6. Resource Implications	
<p>Will there be any financial or HR implications in ensuring policy/service redesign are non-discriminatory?</p> <p>Provide specific detail where applicable</p>	<p>Individual projects to identify details and work within corporate HR policy. Proposals to workforce redesign will also need to take into account equality and diversity impacts on/for the adult social care workforce.</p> <p>As any proposals are taken forward they will seek to include an assessment of how specific changes will impact on the workforce. This may include collecting anonymised profile data on staff subject to review and looking at whether changes (e.g. in working arrangements) or structural amendments may have an adverse impact on people from a particular group as appropriate. Data is shared with the Trade Unions as part of the formal consultation process, which will include possible measures to mitigate any adverse impact.</p>

7. Further EIA Actions		
Based on the Initial Assessment above. Please detail key areas identified as requiring more detailed analysis or key mitigating actions. Please be explicit about actions and provide the name or supporting documents		
Number	Description of Issue	Action & Output
1	Continued engagement to ensure that a wide range of people are able to feed into the thinking around the vision for adult social care.	Deputy Director to complete presentations for outstanding groups. Publication of adult social care vision on website to seek comments.
2	Individual projects to ensure that more detailed equality impact analysis is undertaken on proposals	Project leads to complete detailed EIAs on individual proposals

3	Organisations affected by proposals, service users and carers provided with opportunity to comment on proposals and participate in suggestions for future services	Project leads to develop process for engagement as part of EIA development
4	Baseline information on user profiles available to inform ongoing work and proposals	Performance team to collect and collate user profile baseline information
5	Understanding of impact of national policy changes on approach to adult social care	Senior management and project leads to review proposals in light of central government proposals on impact for democratic legitimacy and work of the Law Commission on the statutory underpinning of adult social care, as well as proposed social care White Paper, likely to be published following the report of the independent Commission on Funding for Care and Support.
6	Ongoing review of equality impact on policies	Following consultation and engagement, and otherwise at regular intervals, proposals to be reviewed by project leads to ensure that equality impact is well understood and up to date

8. Publication

All EIAs will be published on an annual basis. Please send a copy to: harjinder.bhara@southwarkpct.nhs.uk or tod.hayder@southwark.gov.uk and the Assistant Director or Director responsible for this programme.

9. Review & Sign Off	
Detail governance process for this EIA, including any sign-off	
Signed-Off by Director, Assistant Director or SRO	Name: Sarah McClinton Date: 19.01.11