

EQUALITY IMPACT ASSESSMENT

Proposals considered in July 2012

The public sector Equality Duty (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The City Council’s Equality Impact Assessments (EIA) includes an assessment of the community safety impact assessment to comply with section 17 of the Crime and Disorder Act and will enable the council to better understand the potential impact of the budget proposals and consider mitigating action.

<p>Portfolio Reference No.</p>	<p>Proposal:</p> <p>The planned efficiencies in 2013 will be delivered by two programmes of work.</p> <p>1. To tender Domiciliary Care Frameworks by April 2013 that will:</p> <ul style="list-style-type: none"> • Renegotiate current rates to fixed; • Prioritise ‘spot’ packages onto new frameworks; • Differentiate rates between high and moderate levels of need. <p>2. To implement the agreed commissioning options for seven residential units (early scoping indicates not all will be required for LD residential care) but these could be remodelled into other registered services such as Supported Living or Older Persons Residential Care.</p>
<p>Volumes (number of customers) and profile</p>	<p>Approximately 300 customers under Domiciliary Care. 40 residential placements (with 33 placements currently filled). Profile consists of individuals meeting Adult Health and Social Care Eligibility Criteria (Critical and Substantial) need that have Learning Disabilities.</p>
<p>Staffing and budget</p>	<p>Learning Disability Domiciliary spend 5.5m (dependent on increase or decrease in housing this figure can increase or decrease). Residential spend 2.4m.</p>
<p>Summary of impact and Issues</p>	<p>There are likely to be some changes to the current providers across Domiciliary and Residential schemes. We recognise that many of our customers find change difficult and therefore to mitigate this we have invested in a local advocacy organisation to work with us in supporting individual customers with any transition to a new provider. The advocacy support will also support those customers wishing to take up a personal budget.</p>
<p>Potential Positive Impact</p>	<ul style="list-style-type: none"> • To promote the take up of personalised budgets and reduce the numbers of individuals on the new frameworks. • To ensure providers have the capabilities and capacity to meet individual needs identified through client assessment and

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	<p>reviews.</p> <ul style="list-style-type: none">• To ensure providers deliver specified quality standards in domiciliary care and residential care services through implementation of SCC's Quality Framework and monitoring tools.
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Responsible Service Manager : KATE DENCH	
Date: 3rd September 2012	
Approval by Senior Manager	
Name:	Stephanie Ramsey
Signature:	
Date:	3 rd August 2012

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POTENTIAL IMPACT		
Group	Details of impact	Possible Solutions/ Mitigating Actions
Age	A number of people are older (over 65) within residential services and growing population receiving domiciliary care.	Delivery of care will be based on individual needs including age related needs as outlined within the specifications.
Disability	All of this group have learning disabilities as well as a high level of physical health needs that can develop into long term conditions if prevention not put in place.	Delivery of care will be based on individual needs and especially disability as outlined in the specifications. Standards identified to support include REACH and CQC, as well as identifying support for Annual Health checks to maintain optimum health and well being.
Sex	Males are more likely to have Autism (this is reflected nationally and locally) and there is an increase in males with learning disabilities (nationally).	Delivery of care will be based on individual needs including gender related needs as outlined in specifications.
Race	The culture within some BME communities is not to engage services. Therefore carers can be 'hidden' and need additional support to engage and meet individual needs of customers.	Delivery of care will be based on individual needs including race and ethnicity related needs as outlined in specifications.
Religion/ Belief	A diverse religious community exists and the Framework providers will work with local faith networks to ensure needs are met.	Delivery of care will be based on individual needs including religion and beliefs as outlined in specifications.
Marriage and Civil Partnership	There are a small number of people that are in marriages and civil partnerships.	Delivery of care will be based on individual needs including any relevance to marriage and civil partnership. Maintaining and building positive relationships are a key aspect of the specification.
Pregnancy and maternity	There are an increasing number of adults with learning disabilities having children. There is often stronger scrutiny from children's services regarding capability to parent.	Delivery of care will be based on individual needs including pregnancy and maternity. The Frameworks will provide additional support to those that need it when caring for infants and children. Safeguarding adults and children is within the specification.
Gender reassignment	Numbers of people having had or waiting for Gender reassignment within Southampton's Learning Disabilities population are unknown.	Delivery of care will be based on individual needs including gender reassignment as outlined within the specification. Working with mainstream services is a key

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Community Safety	There are increasing numbers of Adults with Learning Disabilities that are diverted from Criminal Justice System. Specification outlines support for offenders and victims.	Delivery of care will be based on individual needs including community safety.
Sexual Orientation	National evidence suggests that adults with learning disabilities sexual orientation is scrutinised heavily at times due to risks of exploitation.	Delivery of care will be based on individual needs including sexual orientation as identified within the specification.
Poverty	As the economic pressure increase Care Managers and Framework providers will need to identify any individuals at risk of poverty.	Delivery of care will be based on individual needs including poverty as identified within the specification.
Staff	As this will be managed by contracted providers it is difficult to describe impact. However, information from Skills for Care suggests an increase in workforce. Ensuring there is capacity to deliver the Support Plan for individuals could be an impact (but this would be an issue with or without tendering).	There will be no reduction in workforce required although there are likely to be changes to the contracted organisations which may have an effect on staff terms and conditions.

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