## Official / Sensitive



# Equalities Comprehensive Impact Assessment v3 - Head of service review

Reference: ECIA585730710

Submitted: 15 March 2024 16:54 PM

#### **Executive summary**

Title of policy / decision: Future of Reablement Services in Essex 2024

Policy / decision type: Cabinet Decision

**Overview of policy / decision:** This decision seeks to gain permission to secure Reablement capacity post May 2024 when the current ECL contract expires and Additional Reablement Capacity post September 2024 when our current Additional Reablement Capacity (ARC) contracts come to an end. In doing so it will secure some necessary improvements to the service offer including additional Trusted Assessor resources, and revised KPIs and objectives.

What outcome(s) are you hoping to achieve?: Reablement services are in place to support people to improve their independence following a hospital stay, or to avoid a hospital admission in the first place. Reablement interventions are for up to 6 weeks in duration and focus activities with enable people to better manage personal care. This decision will secure reablement capacity in Essex for a further period of time and seeks to enable better flow through the service thereby increasing the number of people who will benefit from the provision.

**Executive Director responsible for policy / decision:** Nick Presmeg (Adult Social Care)

**Cabinet Member responsible for policy / decision:** Cllr John Spence (Health, Adult Social Care and ICS Integration)

Is this a new policy / decision or a change to an existing one?: New policy / decision

How will the impact of the policy / decision be monitored and evaluated?: The impact of the decision will be monitored through regular reporting, both on contractual performance and also via insight and metrics from health and social care systems including hospital delays, utilisation of long term care and placements in care homes following hospital (which should be minimised if reablement is functioning well).

Will this policy / decision impact on:

Service users: Yes

**Employees:** Yes

Wider community or groups of people: No

If the policy decision impacts on employees, provide details here and include potential impacts on identified groups later in the form: Via the recruitment of additional trusted assessor roles supported via this decision, ECC social care staff will be enabled to focus on other priorities

What strategic priorities will this policy / decision support?: Health, Independence and Wellbeing for All Ages

Which strategic priorities does this support? - Health: Promoting independence

What geographical areas of Essex will the policy / decision affect?: All Essex

# **Digital accessibility**

Is the new or revised policy linked to a digital service (website, system or application)?: No

## **Equalities - Groups with protected characteristics**

Age

Nature of impact: Positive

**Extent of impact: Medium** 

**Disability - learning disability** 

Nature of impact: Positive

**Extent of impact: Medium** 

Disability - mental health issues

Nature of impact: Positive

Extent of impact: Medium

**Disability - physical impairment** 

Nature of impact: Positive

Extent of impact: Medium

**Disability - sensory impairment** 

Nature of impact: Positive

Extent of impact: Medium

Sex

Nature of impact: None

**Gender reassignment** 

Nature of impact: None

Marriage / civil partnership

Nature of impact: None

Pregnancy / maternity

Nature of impact: None

Race

Nature of impact: None

Religion / belief

Nature of impact: None

Sexual orientation

Nature of impact: None

Rationale for assessment, including data used to assess the impact: • The decision will support adults in varying age ranges. It will encourage people with disabilities, older people and those with comorbid mental health issues to recover as fully as they can, enabling independence in their own home and avoiding hospital admission.

• The decision will enable people with disability to recover as well as they can do/to the level they can, enabling them to be as independent in their own home for longer and avoid readmission to hospital ensuring that they have the right outcome, for them and their needs, at the right time.

Available data tells us who is using reablement services and the outcomes they are achieving.

What actions have already been taken to mitigate any negative impacts?: no negative impacts

How could you strengthen any positive impact(s)?: Reablement is part of a wider system landscape and can be impacted by performance in both NHS and social care systems. Further refinement in these will help strengthen positive impacts by ensuring the right people enter reablement at the right time.

#### Levelling up - Priority areas & cohorts

Children and adults with SEND, learning disabilities or mental health conditions (taking an all-age approach)

Nature of impact: Positive

Extent of impact: Medium

**Children on Free School Meals** 

Nature of impact: None

Working families

Nature of impact: Positive

**Extent of impact:** Low

Young adults (16-25 who have not been in education, training or employment for around 6-12 months)

Nature of impact: None

**Residents of Harlow** 

Nature of impact: Positive

**Extent of impact:** Low

**Residents of Jaywick and Clacton** 

Nature of impact: Positive

**Extent of impact:** Low

**Residents of Harwich** 

Nature of impact: Positive

Extent of impact: Low

Residents of Basildon (Town) housing estates

Nature of impact: Positive

Extent of impact: Low

**Residents of Canvey Island** 

Nature of impact: Positive

**Extent of impact:** Low

Residents of Colchester (Town) - Housing Estates

Nature of impact: Positive

**Extent of impact:** Low

**Residents of Rural North of the Braintree District** 

Nature of impact: Positive

**Extent of impact:** Low

Rationale for assessment, including data used to assess the impact: Our insight tell us where reablement is delivered and our recontracting exercises, recommended in the paper will lead to a strengthening of requirements for providers to work together to ensure full coverage of the whole Essex geography. This will be tracked via the regular information flows which tell us who is accepted and who is not able to be picked up by the service.

Adults with MH needs may benefit if they have comorbid conditions that would benefit from a reablement service.

similarly working families where a wage earner is employed in reablement care will benefit via the sustainability of provision supported via the decision.

What actions have already been taken to mitigate any negative impacts?: no negative impacts

**How could you strengthen any positive impact(s)?:** Reablement is part of a wider system landscape and can be impacted by performance in both NHS and social care systems. Further refinement in these will help strengthen positive impacts by ensuring the right people enter reablement at the right time.

### Equalities - Inclusion health groups and other priority groups

Refugees / asylum seekers

Nature of impact: None

Homeless / rough sleepers

Nature of impact: None

People who experience drug and alcohol dependence

Nature of impact: None

Offenders / ex-offenders

Nature of impact: None

Victims of modern slavery

Nature of impact: None

**Carers** 

Nature of impact: Positive

**Extent of impact: Low** 

Looked after children / care leavers

Nature of impact: None

The armed forces community (serving personnel and their families, veterans, reservists and

cadets)

Nature of impact: Positive

**Extent of impact:** Low

People who are unemployed / economically inactive

Nature of impact: Positive

**Extent of impact:** Low

People on low income

Nature of impact: Positive

**Extent of impact:** Low

**Sex workers** 

Nature of impact: None

**Ethnic minorities** 

Nature of impact: None

Gypsy, Roma, and Traveller communities

Nature of impact: None

People with multiple complex needs or multi-morbidities

Nature of impact: Positive

**Extent of impact:** Low

Rationale for assessment, including data used to assess the impact: As reablement is a service which supports greater independence for people with personal care needs, it is reasonable to conclude that will help sustain caring roles. This conclusion is supported by information we receive via lived experience feedback.

Also, reablement services employ people on a comparatively low income. The decision will support more sustainable roles in care for this cohort.

People who are unemployed or not working due to hospital stays may also benefit from reablement and be able to return to work.

veterans with needs that could be met via reablement could benefit from the service.

What actions have already been taken to mitigate any negative impacts?: no negative impacts

How could you strengthen any positive impact(s)?: Reablement is part of a wider system landscape and can be impacted by performance in both NHS and social care systems. Further refinement in these will help strengthen positive impacts by ensuring the right people enter reablement at the right time.

#### **Equalities - Geographical Groups**

People living in areas of high deprivation

Nature of impact: Positive

**Extent of impact:** Low

People living in rural or isolated areas

Nature of impact: Positive

**Extent of impact:** Low

People living in coastal areas

Nature of impact: Positive

**Extent of impact:** Low

People living in urban areas

Nature of impact: Positive

**Extent of impact:** Low

Rationale for assessment, including data used to assess the impact: Our insight tell us where reablement is delivered and our recontracting exercises, recommended in the paper will lead to a strengthening of requirements for providers to work together to ensure full coverage of the whole Essex geography. This will be tracked via the regular information flows which tell us who is accepted and who is not able to be picked up by the service

What actions have already been taken to mitigate any negative impacts?: no negative impacts

How could you strengthen any positive impact(s)?: Reablement is part of a wider system landscape and can be impacted by performance in both NHS and social care systems. Further refinement in these will help strengthen positive impacts by ensuring the right people enter reablement at the right time.

#### **Families**

Family formation (e.g. to become or live as a couple, the ability to live with or apart from children)

Nature of impact: None

Families going through key transitions e.g. becoming parents, getting married, fostering or adopting, bereavement, redundancy, new caring responsibilities, onset of a long-term health condition

Nature of impact: Positive

**Extent of impact:** Low

Family members' ability to play a full role in family life, including with respect to parenting and other caring responsibilities

Nature of impact: Positive

**Extent of impact:** Low

Families before, during and after couple separation

Nature of impact: None

Families most at risk of deterioration of relationship quality and breakdown

Nature of impact: None

Rationale for assessment, including data used to assess the impact: As a provision aimed at supporting people to be more independent, families who have caring responsibilities will benefit due to the support to make their caring roles potential more manageable. Data from reablement services allows us to see how the number of care hours required for some one has reduced as a result of the reablement stay. Also, families in transition who have a new long term health condition, may benefit directly from a community referral to reablement services.

What actions have already been taken to mitigate any negative impacts?: no negative impacts

How could you strengthen any positive impact(s)?: Reablement is part of a wider system landscape and can be impacted by performance in both NHS and social care systems. Further refinement in these will help strengthen positive impacts by ensuring the right people enter reablement at the right time.

#### Crime & Disorder

Crime and disorder

Nature of impact: None

The misuse of drugs, alcohol and other substances

Nature of impact: None

Re-offending

Nature of impact: None

Serious violence

Nature of impact: None

Rationale for assessment, including data used to assess the impact:

There is no expected impact on these characteristics as a result of this decision.

(If negative impact assessed) What actions will be undertaken to mitigate negative impacts, including timescales:

What actions have already been taken to mitigate any negative impacts?:

No negative impacts

How could you strengthen any positive impact(s)?:

#### **Climate**

Does your decision / policy involve development or re-development of buildings or infrastructure?: No

Does your decision / policy take place in, or make use of, existing buildings or infrastructure?: Yes

The use of existing buildings will always have a climate impact because it requires energy consumption. Please outline how you will mitigate against this impact: Reablement services are delivered in peoples homes. This decision will not impact on that.

Does your decision / policy involve elements connected to transport, travel or vehicles? This includes travel needs / requirements of both service users and staff (including staff you're planning to recruit): Yes

Where are staff or service users coming from and how are they travelling?: Reablement is commonly delivered by care workers travelling in care 'rounds'. These are set out to be as efficient as possible and to minimise the travel required.

If car travel is unavoidable, are you specifying electric cars and vehicles?: No

What is your transition plan to introduce electric vehicles?: Whilst some care agencies do provide electric vehicles, due to the rural nature of some parts of Essex and the requirement to reach all parts of the county, it is anticipated that full transition will occur in line with national policy.

Are you undertaking a procurement exercise?: Yes

Please confirm for purchase over £100k that you have a carbon reduction plan as part of your procurement: No

Please list which climate TOMS (Themes, outcomes & measures) you have included in your procurement and the weighting these have been given: The governance for this project, for submission to Cabinet in March 2024, proposes that the services will be procured using an evaluation model based on 20% price, 60% quality and 20% social value and climate action.

The 20% assigned to SV and Climate will be split equally between the two areas, with the following methodology: Social Value – Version 12 of the TOMs calculator to be applied unless a further update to the TOMs is available. Nine measures (ECCs 21, 23a, 26a, 45-47, 49-51), specifically related to environment/waste performance to be removed, as list in Annex 2. The remaining social value TOMs will be used to determine a proposed SV contribution for each bidder. The scoring methodology to apply to the SV 10% is detailed in Annex 1, recognising the lower potential for value with the removal of 20% of TOMs Measures.

Climate Action – The nine removed Social Value TOMs (Annex 2) will be combined with a list of 12 specific climate recommendations (Annex 3) provided by the Essex Climate Action Commission (ECAC) in order to produce a short set of climate and environmental specific questions, to be evaluated by a specific climate evaluation team to provide an overall climate contribution score to be applied to the overall evaluation process.

Does your decision / policy involve the purchase of goods or materials?: No

Will any waste be generated by this decision? This includes waste from construction, waste generated by service users / staff, and waste generated by replacing existing products / materials with new: No

#### **Nature of impact**

Built Environment / Energy: None

Sustainable Transport / Travel: None

Waste: None

Rationale for assessment, including data used to assess the impact: The decision concerns securing a continuation of reablement services so it is expected that climate impacts will remain the same.

What actions have already been taken to mitigate any negative impacts?: no negative impacts

#### Action plan to address and monitor adverse impacts

Does your ECIA indicate that the policy or decision would have a medium or high adverse impact on one or more of the groups / areas identified?: No

#### Details of person completing the form

I confirm that this has been completed based on the best information available and in following ECC guidance: I confirm that this has been completed based on the best information available and in following ECC guidance

Date ECIA completed: 10/02/2024

Name of person completing the ECIA: Matthew Barnett

Email address of person completing the ECIA: matthew.barnett@essex.gov.uk

Your function: Adult Social Care

Your service area: Commissioning

Your team: Older People Commissioning

Are you submitting this ECIA on behalf of another function, service area or team?: No

Email address of Head of Service: moira.mcgrath@essex.gov.uk