

Equality Impact Assessment

Section 1: Identifying details

Your function, service area and team: STC, Transformation Support Unit, Live at Home Project

If you are submitting this EqlA on behalf of another function, service area or team, specify the originating function, service area or team:

Title of policy or decision: Live at Home Procurement of Services - Year 4 refresh

Officer completing the EqlA: Georgia Dedman Tel: 03330 131031 Email:
Georgia.Dedman@essex.gov.uk

Date of completing the assessment: 05/11/2019

Section 2: Policy to be analysed

2.1	<p>Is this a new policy (or decision) or a change to an existing policy, practice or project?</p> <p>This EqIA relates to the re-procurement of Live at Home Support Services which commenced in February 2017. The Live at Home Framework (LAHF) provides domiciliary services for all client groups and across Essex.</p> <p>This will support all eligible individuals within Essex boundaries (excluding Southend and Thurrock)</p> <p>Live at Home services are social care support packages that allow residents to maintain their independence whilst receiving services that will support their social care needs.</p>
2.2	<p>Describe the main aims, objectives and purpose of the policy (or decision):</p> <p>The purpose of this re-procurement is to continue to secure existing supply of Live at Home services by way of a Best Value Ranked List ("BVRL"). This contract commenced on the 12th February for a period of 4 years.</p> <p>In November of each year Providers will have the ability to submit new prices and new providers will be able to join the LAHF however due to delay in governance this will take place in December 2019 for the final year of contract. Essex can amend elements of the framework to support the direction of the Authority or support the stability of the domiciliary market. Year 4 of the LAHF will commence on the 5th April 2020.</p> <p>What outcome(s) are you hoping to achieve (ie decommissioning or commissioning a service)?</p> <p>To continue to deliver domiciliary services on the Live at Home Framework (LAHF) and to manage existing and new Providers on the Market who provide Domiciliary Services.</p>

2.3	<p>Does or will the policy or decision affect:</p> <ul style="list-style-type: none">• Adults• Employees• The wider community or groups of people, particularly where there are areas of known inequalities? <p>The LAHF commenced on the 12th February 2017, therefore the great risks were managed through the initial procurement. The risk predominantly link to Adults receiving packages of care. The mitigating risks were:</p> <ul style="list-style-type: none">• Providers who fail to meet minimum standards may have care packages removed from them.• Providers may exit the market and could hand back existing packages of care. <p>The LAHF has one particular element known as a 'target supply area' (TSA) to encourage market workforce growth in wards that are hard to source. These are reviewed on an annual basis through market insight and evidence based analysis. The LAHF allows ECC to remove multiple TSAs or add additional TSAs to support the evidence that presents that it is hard to source.</p>
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	<p>The impact of this annual review may affect an Adult receiving a package in an existing TSA ward. There is a small risk that in the event an Adult needs change or are reviewed, and their package changes the provider will no longer receive the TSA rate agreed within that area. The provider may decide to hand back the package.</p> <p>Will the policy or decision influence how organisations operate?</p> <p>The Care Provider(s) selected will be required to help Essex County Council pay due regard to the Public Sector Equality Duty in regards to both service users and any employees.</p> <p>Providers on the framework that have existing TSAs will need to factor into their new submission any additional costs that could occur with existing packages in the event that the TSA no longer applies to a reviewed care package.</p>
2.4	<p>Will the policy or decision involve substantial changes in resources?</p> <p>It is unlikely that the decision will impact internal resources. The only possible implication for Adult Operations staff would be if a provider ceases business with Essex County Council, e.g. they refuse the new framework and return all of their packages.</p> <p>In these circumstances, additional reviews may be required for service users moving to a new provider, increasing demand on Adult Operations staff.</p>

2.5	<p>Is this policy or decision associated with any of the Council's other policies and how, if applicable, does the proposed policy support corporate outcomes?</p> <p>The Live at Home service supports two of the High Level Outcomes directly:</p> <ul style="list-style-type: none"> • People in Essex Enjoy Good Health and Wellbeing, • People in Essex can live independently and exercise choice and control over their lives <p>By providing an enabling service that builds on the principles of the Care Act, Essex County Council will be able to work with residents to provide them with a service that they can feed into, to achieve the outcomes that are important to them.</p> <p>Outcomes will be based around achieving good health and independence, and this will vary from each individual using the service as independence and good health are variable to each individual's lives.</p>
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Section 3: Evidence/data about the user population and consultation¹

As a minimum you must consider what is known about the population likely to be affected which will support your understanding of the impact of the policy, eg service uptake/usage, customer satisfaction surveys, staffing data, performance data, research information (national, regional and local data sources).

3.1	<p>What does the information tell you about those groups identified?</p> <p>There are 6500 service users across all groups, e.g. Older People (65+), Adults with Learning Disabilities, Adults with Mental Health Needs, Adults with Physical and Sensory Impairments and Carers. Between April 2018 and March 2019 there was an average of over 546 new homecare packages each month.</p>
3.2	<p>Have you consulted or involved those groups that are likely to be affected by the policy or decision you want to implement? If so, what were their views and how have their views influenced your decision?</p> <p>Initial consultation on the domiciliary services took place in April 2016. Additional consultation has not taken place for this re-procurement.</p>
3.3	<p>If you have not consulted or engaged with communities that are likely to be affected by the policy or decision, give details about when you intend to carry out consultation or provide reasons for why you feel this is not necessary:</p> <p>Minimal impact is expected for the service users receiving Live at Home services so further consultation is not planned.</p>

¹ Data sources within EEC. Refer to Essex Insight:
<http://www.essexinsight.org.uk/mainmenu.aspx?cookieCheck=true>
with links to JSNA and 2011 Census.

Section 4: Impact of policy or decision

Use this section to assess any potential impact on equality groups based on what you now know.

Description of impact	Nature of impact Positive, neutral, adverse (explain why)	Extent of impact Low, medium, high (use L, M or H)
Age	Likely to be neutral. Although older people are the largest group of service users, the service is tailored to the needs of the individual.	L
Disability	<p>Likely to be neutral. Live at Home Services are provided to anyone with eligible need. This includes those with physical, sensory and learning disabilities.</p> <p>Providers will be expected to be able to engage and support all referrals including where these referrals have additional needs.</p>	L
Gender	<p>Likely to be neutral. The service is open to both men and women. It is for anyone who has eligible social care needs.</p> <p>There is a chance that women over the age of 65 may be more impacted as the anticipated population for the year 2017 (when the extension terminates) is split 45% male and 55% female.</p>	L
Gender reassignment	<p>Likely to be neutral. The service is open to both men and women regardless of any possible previous gender reassignment / and transgendered people. The service is provided where there is eligible social care need.</p> <p>Any care provider will be required to comply with the Equality Act 2010 in reducing discrimination and harassment in the provision of goods and services.</p>	L
Marriage/civil partnership	Likely to be neutral. There is no restriction on access according to marital status and civil partnership and all Live at Home plans are person-centred.	L
Pregnancy/maternity	Likely to be neutral. The service is provided where there is eligible social care need.	L

Race	<p>Likely to be neutral. Essex has a responsibility to support all those with eligible Social Care needs and this will be regardless of the race of the individual with the need. These are universal services that anyone can access.</p> <p>Providers of this service are being given clear instruction through the service specification that respect should be given to the cultural beliefs of those in receipt of the service, regardless of whether those cultural beliefs impact upon the achievement of their outcomes.</p> <p>Any care provider will be required to comply with the Equality Act 2010 in reducing discrimination and harassment in the provision of goods and services.</p>	L
Religion/belief	<p>Likely to be neutral. We require providers to be culturally sensitive to the needs of service users (eg: providing a female care worker for a Muslim woman). It is important to recognise and meet cultural needs and build links with relevant community groups.</p> <p>Any care provider will be required to comply with the Equality Act 2010 in reducing discrimination and harassment in the provision of goods and services.</p>	L
Sexual orientation	<p>Likely to be neutral. The provider will be contracted to deliver services as appropriate according to individual preference. For example, a key aspect of Live at Home is to enable people within their communities and this would include the individual's definition of community.</p> <p>Providers of this service are being given clear instruction through the service specification that respect should be given to the sexuality of those in receipt of the service, regardless of whether their sexuality impact upon the achievement of their outcomes.</p> <p>Any care provider will be required to comply with the Equality Act 2010 in reducing discrimination and harassment in the provision of goods and services.</p>	L
Cross-cutting themes		

Description of impact	Nature of impact Positive, neutral, adverse (explain why)	Extent of impact Low, medium, high (use L, M or H)
Socio-economic	Likely to be neutral. Impact on the Provider Market has been considered throughout.	L
Environmental, eg housing, transport links/rural isolation	Likely to be neutral. Decision should not change any of these factors.	L

Section 5: Conclusion

		Tick Yes/No as appropriate	
5.1	Does the EqIA in Section 4 indicate that the policy or decision would have a medium or high adverse impact on one or more equality groups?	No <input checked="" type="checkbox"/>	
		Yes <input type="checkbox"/>	If ' YES ', use the action plan at Section 6 to describe the adverse impacts and what mitigating actions you could put in place.

Section 6: Action plan to address and monitor adverse impacts

What are the potential adverse impacts?	What are the mitigating actions?	Date they will be achieved.
Removal of the TSAs in the 3 districts could result in 261 packages potentially being impacted. If the provider does not choose to continue the with the additional rate these packages will need to be re-sourced.	Impact analysis on the 261 packages has been complete to understand what providers are impacted. Discussion with those specific providers to ensure they are aware of the impact. Additional training in the future to ensure providers are clear about the TSA use.	3 Dec 2019.

Section 7: Sign off

I confirm that this initial analysis has been completed appropriately.

Signature of Head of Service: Zoe Harriss

Date: 5th November 2019

Signature of person completing the EqIA: Georgia Dedman

Date: 5th November 2019