

# 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: Tender for home support services

Officer completing the EqlA: Lucy Johnson Tel: 0330136110 Email: lucy.johnson2@essex.gov.uk

Date of completing the assessment: 24<sup>th</sup> March 2016

## 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 proposal is for a new procurement approach of Live at Home Support Services in Essex.</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> <p>Live at Home services are care services delivered in the person's home. This includes personal care, cleaning and house care, practical and social support, minor health related tasks (excluding district nurse tasks), administration of medication and support during the night (either night sleep or night sitting).</p> <p>This will support all eligible individuals within Essex boundaries (excluding Southend and Thurrock)</p>
2.2	<p>Describe the main aims, objectives and purpose of the policy (or decision):</p> <p>This is a tender to procure a Live at Home Framework for the next 4 years to support home care services and support for Adults in Essex. The Live at Home Framework Model consists of a number of elements which factor into the Provider Specification and Tendering Contract:</p> <ul style="list-style-type: none"><li>• A Ranked List of providers which factors in pricing and quality/supplier performance.</li><li>• An Enhancement premium for exceptional circumstances based around the Adult.</li><li>• Target Supply Areas (TSA) for districts/wards where demand is not being sourced due to workforce capacity, the locality or other geographical demand/issues.</li></ul>



	<p>What outcome(s) are you hoping to achieve (ie decommissioning or commissioning a service)?</p> <ul style="list-style-type: none"> <li>To procure a new Live at Home Framework for the next 4 years with the intent to stabilise the provision of home care services.</li> <li>To develop at Live at Home Strategy that supports the direction of the Authority and to support the transformation of the Domiciliary Market in alignment with the Market Shaping Strategy, Essex 2021 Strategy and Corporate Outcomes.</li> </ul>
2.3	<p>Does or will the policy or decision affect:</p> <ul style="list-style-type: none"> <li>Adults</li> <li>Employees</li> <li>The wider community or groups of people, particularly where there are areas of known inequalities?</li> </ul> <p>ECC currently purchases Live at Home services for Older People (aged 65+), Adults with Learning Disabilities, Adults with Mental Health Needs, Adults with Physical and Sensory Impairments and Carers. It is expected that this decision will improve the provision and continuity of home support services for adult service users.</p> <p>Will the policy or decision influence how organisations operate? 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>
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 Live at Home 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 ECC's corporate outcomes:</p> <ul style="list-style-type: none"> <li>People in Essex Enjoy Good Health and Wellbeing,</li> <li>People in Essex can live independently and exercise choice and control over their lives</li> </ul> <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>



## Section 3: Evidence/data about the user population and consultation<sup>1</sup>

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>The current spend on the Live at Home services is £92m per annum for over 15,000 service users utilising services from over 190 providers. £52m of this money is spent via current BVRL contracts. These contracts were tendered in 2010 and awarded in 2011 and extended by mutual agreement in February 2016. If no 'ranked' provider will accept a placement then it is awarded on an individually negotiated 'spot' rate. Approximately £40m per annum is spent on spot placements.</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 Engagement with service users via survey, interviews and focus groups to collect their views about domiciliary care and how it impacts on their ability to live at home has been completed.</p> <p>Of the survey respondents and interviewees around 75% were female and over half were aged 66 and over therefore representative of the service users who have a home care package. 86% of people thought that they already had a say in HOW their care and support is given to them. 80% of people thought that they already had a say in WHEN their care and support is given to them.</p> <p>Over 50% of people said that the most important reasons that they want to continue living at home are:</p> <ul style="list-style-type: none"> <li>• Staying independent (58%)</li> <li>• Having a good quality of life (58%)</li> <li>• Having good quality care that is personalised (55%)</li> <li>• Family and friends live nearby (39% and 35%)</li> </ul> <p>Some concerns were raised about being less able to do tasks such as preparing a meal in the future; other concerns included living in rural or isolated areas, deterioration in health and budget cuts which may affect the support they receive.</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>

<sup>1</sup> 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	Positive. Older people are the largest sub-group of service users, the service is tailored to the needs of the individual.	H
Disability	Positive. Live at Home Services are provided to anyone with eligible need. This includes those with physical, sensory and learning disabilities, including adults with mental health needs.  Providers will be expected to be able to engage and support all referrals including where these referrals have additional needs.	H
Gender	Neutral. The service is open to both men and women. It is for anyone who has eligible social care needs.  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.	L
Gender reassignment	Neutral. The service is open to both men and women who are seeking, undergoing or have received gender reassignment surgery. The service is provided where there is eligible social care need.  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.	L
Marriage/civil partnership	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	Neutral. The service is provided where there is eligible social care need.	L
Race	<p>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>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>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
<b>Cross-cutting themes</b>		
<b>Description of impact</b>	<b>Nature of impact</b> Positive, neutral, adverse (explain why)	<b>Extent of impact</b> 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	Neutral. Decision should not change any of these factors.	L



## Section 5: Conclusion

		Tick Yes/No as appropriate	
5.1	Does the EqlA 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 ' <b>YES</b> ', use the action plan at <b>Section 6</b> 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.



**Section 7: Sign off****I confirm that this initial analysis has been completed appropriately.**

Signature of Head of Service: Nick Presmeg

Date: 24 March 2016

Signature of person completing the EqIA: Lucy Johnson

Date: 24 March 2016

