Official / Sensitive



Equalities Comprehensive Impact Assessment v2 - Head of service review

Reference: ECIA542751866

Submitted: 07 September 2023 13:56 PM

Executive summary

Title of policy / decision: New Countywide Independent Advocacy Service

Policy / decision type: Cabinet Decision

Overview of policy / decision: The purpose of this paper is to seek agreement to go out to the market to procure a new countywide independent advocacy service.

The recommissioning of the service will:

- Deliver in line with the commitment in Everyones Essex, to enable people to live healthy, happy and full lives.
- Ensure that the new service reflects the views of people with Lived Experience who have called for a better understanding of advocacy, greater accessibility, a more visible service and access to specialist advocates.
- Ensure that Essex County Council (ECC) meets its statutory responsibility to provide Independent Advocacy under legislation including Mental Capacity Act 2005, Mental Health Act 1983, Children and Families Act 2014 and Care Act 2014.

Advocacy services provide support which enables an individual, to understand and communicate their views, express a choice on issues and participate in decision making which affects them.

An advocate can talk through the situation a person is currently in and the options open to them.

They can help the person to make informed decisions and then how to communicate these to the people or professionals involved.

ECC deliver the following mandatory services as part of the current contract and they will be replicated in the new contract:

Independent Mental Capacity Advocacy (IMCA);

Paid Relevant Person Representative (RPR);

Independent Mental Health Advocacy (IMHA);

Independent Care Act Advocacy (ICAA);

Independent Health Complaints Advocacy (IHCA); and

Independent Advocacy for Children and Young People

The new contract will also include the following services which deliver in line with the wider requirements:

- Advocacy for the parents of a child or young person who is either subject to, or being assessed for, a Child in Need or Child Protection Plan
- General Advocacy
- Peer and Citizen Advocacy

Significant legislative and policy changes have been proposed in the Health and Care Act, the Mental Health Act and following the independent review of Children's Social Care however the final legislation and any implementations dates are still being considered by Government. The potential impacts on the scale of delivery have been considered in the design of the new service.

What outcome(s) are you hoping to achieve?: The decision will make a positive difference to people who use the service and those who prospectively will require the service. It ensures a service which has been designed

using the views of people with lived experience and ensures:

An equitable offer across Essex with access to specialist advocates regardless of location or type of advocacy required

People will feel more empowered and able to self-advocate

Greater local, community or group support available

Children and young people will have independent advocacy support available as soon as they are identified.

This decision will have positive effects upon the quality of the advocacy received, remove barriers to access and improve outcomes achieved. It will continue to offer advocacy that can be accessed below the statutory threshold, ensuring people feel like they do not have to hit crisis before support becomes available. If people are achieving greater outcomes and are supported to live their lives as they wish it can support building resilience in individuals, communities and families.

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

Cabinet Member responsible for policy / decision: John Spence (Health and Adult Social Care)

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 mobilisation of the new service will monitored closely by commissioning, contracts and procurements staff within ECC. This will ensure a smooth transition between the old and new services, allowing for quick intervention if any issues are identified.

The new service is due to commence July 2024 with mobilisation occurring from March 2024 to May 2024. Once the new service is live, contract management arrangements will commence which will include regular service reviews, quarterly service reporting from the provider and review of feedback from people who have used, or referred someone to, the service.

Will this policy / decision impact on:

Service users: Yes

Employees: Yes

Wider community or groups of people: Yes

If the policy decision impacts on employees, provide details here and include potential impacts on identified groups later in the form: Service Users will be positively impacted by having access to specialist providers of advocacy with improved access and better outcomes achieved. There will be greater visibility of the service across Essex which should result in Service Users benefitting from knowledge of the service, its offer and how to access it resulting in it being accessed in a timely manner reducing the risk of people reaching crisis (Service Users)

The decision will impact (positively) the workforce, as the service should receive a stable flow of referrals which can result in better resource planning for an organisation and therefore a more secure offer of employment. The continued inclusion of generic, peer and citizen advocacy can offer a route to employment for those with Lived Experience who may want to use the skills they have built and experience they have to help others. This decision may also result in recruitment of additional staff in order to meet the demand for the service. TUPE has also been considered if a different provider were awarded the new contract. ECC HR Business Partner will be engaged to make sure EqIA impact will be considered. ECC employees would not be affected by the implementation of a new advocacy service. (employees)

The wider community will benefit from this decision as the local authority intends to work with the service to ensure they enhance the awareness and presence of the service in our most at-risk communities. The single point of access and co-ordinated approach to drawing on specialist advocates where needed can reduce how

many times someone will have to tell their story. Returning customers may be able to be supported by the same advocate or specialist provider as the single point of access for referrals will mean the lead provider will be able to view a customers support history. Additional groups have been identified and included as a priority for support in the next contract and who will be invited to contribute to shaping the specification for the new service (Wider community or groups of users).

What strategic priorities will this policy / decision support?: Health, Independence and Wellbeing for All Ages, A good place for Children and Families to Grow

Which strategic priorities does this support? - Health: Healthy lifestyles, Promoting independence, Levelling up health

Which strategic priorities does this support? - Families: Education outcomes, Family resilience and stability, Outcomes for vulnerable children

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)?: Yes

What steps you have taken to meet the digital accessibility: The specification for the new service will ensure that any digital platforms or technology meet accessibility requirements. This will include, but is not limited to, a user being able to adapt font size, colour, subtitles on audio files. Consideration of how the service can adapt posters, leaflets or access translation services (audio, braille, spoken language). Hard copies will be made available for those with limited access to technology.

How have you tested accessibility?: Testing of accessibility will be built into the mobilisation of the service.

How will you monitor and maintain accessibility once it has gone live?: Monitoring and maintenance of digital accessibility will be carried out through our contract management process. Feedback will be requested from people who use the service or who make referrals to the service on behalf of others.

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: High

Disability - physical impairment

Nature of impact: Positive

Extent of impact: Low

Disability - sensory impairment

Nature of impact: Positive

Extent of impact: Low

Sex

Nature of impact: Too early for impact to be known

Gender reassignment

Nature of impact: Too early for impact to be known

Marriage / civil partnership

Nature of impact: None

Pregnancy / maternity

Nature of impact: None

Race

Nature of impact: Positive

Extent of impact: Low

Religion / belief

Nature of impact: Positive

Extent of impact: Low

Sexual orientation

Nature of impact: Too early for impact to be known

Rationale for assessment, including data used to assess the impact: The following areas have been identified as being 'Too early for impact to be known' are Sex, Sexual orientation, Religion, Race and Gender reassignment. An improved and consistent approach to measuring outcomes for these cohorts will provide better evidence for us to measure impacts, which can then be compared to the current service. The data will capture the referral rates and outcomes for these demographics and each quarterly report these can be reviewed against the benchmark set in the current contract. The new service will be required to provided quarterly reporting and attend quarterly contract meetings to report on these protected characteristics so action can be taken to address any concerns in a timely manner.

The areas which 'none' has been identified have been Marriage and Pregnancy. This is because the current service design does not capture this information and we would therefore be unable to quantify or capture outcomes of advocacy in relation to these areas.

The areas identified as having a 'medium' positive impact are Disability and Age. This assessment has been made based upon the change in model of how the advocacy service is being delivered, with increased specialisation available, improvements in access and quality of support. The outcomes are all measurable in the data and reporting and can be demonstrated against the 5 years of data of the current contract.

The improved access to specialist services will enable the provider to respond more appropriately particularly for those with intersectionality of protected characteristics and co-morbidities.

What actions have already been taken to mitigate any negative impacts?: No negative impacts have been assessed at this time.

How could you strengthen any positive impact(s)?: A full, considered and well-discussed action plan for mobilisation of the new service is vital to strengthening the positive impacts. The advocacy service is not well known about and advocacy itself is poorly understood by significant numbers of the public and people who need the service. Key to strengthening the positive impact is the advertising and communication of the service and making sure it is accessible to all cohorts.

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: Too early for impact to be known

Working families

Nature of impact: None

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

Nature of impact: Too early for impact to be known

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: The area identified as 'N/A' is working families. It has been assessed as such due to a non-significant effect upon these groups from the decision.

All geographic areas have been identified as 'Low Impact'. This assessment has been made based upon the small positive effect having an increasingly specialised set of services that would better meet the needs of these areas of increased deprivation. The data shows that there are higher levels of MH and other types of need in the areas identified, therefore making this decision will increase visibility and opportunity to access specialist advocacy support particularly for those requiring IMHA.

The area identified as having a 'Medium Impact' is Children and Adults with SEND need. Historically, the current service provider has had lower referral rates for children's advocacy than the previous contract. Changes to the model of delivery and specification will enhance the awareness of provision, access to advocacy and outcomes of that advocacy. This service will provide vital support to children with disabilities and children in care, ensuring their rights are upheld and their voice is heard when significant decisions are being made about their life, support, living arrangements and any health care.

It is currently considered 'too early for impact to be known' if there will be an impact on Children on free schools meals.

What actions have already been taken to mitigate any negative impacts?: It is not currently considered that there will be negative impacts with the new service

How could you strengthen any positive impact(s)?: A full, considered and well-discussed action plan for mobilisation of the new service is vital to strengthening the positive impacts. Working alongside Levelling Up colleagues to understand their plans and support their ambitions will ensure a co-ordinated approach to Levelling Up and the implementation of a new advocacy service. Key to strengthening the positive impact is the advertising and communication of the service to all communities, groups, organisations, internal and external partners.

Equalities - Inclusion health groups and other priority groups

Refugees / asylum seekers

Nature of impact: Positive

Extent of impact: Low

Homeless / rough sleepers

Nature of impact: Too early for impact to be known

People who experience drug and alcohol dependence

Nature of impact: None

Offenders / ex-offenders

Nature of impact: Too early for impact to be known

Victims of modern slavery

Nature of impact: Too early for impact to be known

Carers

Nature of impact: Positive

Extent of impact: Medium

Looked after children / care leavers

Nature of impact: Positive

Extent of impact: Medium

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: Too early for impact to be known

Sex workers

Nature of impact: None

Ethnic minorities

Nature of impact: Positive

Extent of impact: Low

Gypsy, Roma, and Traveller communities

Nature of impact: Positive

Extent of impact: Low

People with multiple complex needs or multi-morbidities

Nature of impact: Positive

Extent of impact: Medium

Rationale for assessment, including data used to assess the impact: Feedback from people with Lived Experience and stakeholders was that more types of specialist services are required to support Looked after children and their families. (Medium impact) The new model proposes to offer advocacy to the parents which will in turn improve the outcomes for children and young people by ensuring the parents are having their voice heard and supporting professionals to know what is important to people in these situations. For people with multiple complex needs the model offers the opportunity for the lead provider to access specialist services which may be better suited to support an individual. For example a deaf/blind child may be better supported by a deaf/blind specialist advocate than a children's advocate. The model allows for the specialist best suited to support someone to be accessed.

(Low Impact) For those identified as having a low impact such as refugees/asylum seekers, ethnic minorities and gypsy, Roma and travelling communities the inclusion of more socially and culturally appropriate advocacy through the use of specialist providers or generic and peer advocacy will help these groups to access support appropriate for them and possibly delivered by people with lived experience who have been part of these communities themselves. There is an emphasis on the new service giving greater choice to individuals on who they receive their support from.

For those groups where it is too early to tell the impact we do not have sufficient data from the current service for us to be able to model a predicted impact for these groups. For example, the criteria for accessing advocacy does not include drug and alcohol dependence, but an individual with this need may also experience significant mental health difficulties for which they can access the service. A greater understanding of additional needs for people accessing the service would enable us to more accurately assess the impact on the cohorts above.

Forensic advocacy will be included in the new contract and the data gathered will indicate the nature of the impact. It is currently unknown if there will be an impact to Offenders/ex-offenders by bringing this service in line with ECC's independent advocacy service.

What actions have already been taken to mitigate any negative impacts?: It is not considered that there would be negative impacts associated with the implementation of the new service.

How could you strengthen any positive impact(s)?: Data gathering in these fields has not been robust therefore it makes it hard to paint a full picture for each cohort. A full, considered and well-discussed action plan for mobilisation of the new service is vital to strengthening the positive impacts and this should include working with the new service provider to make sure their data capture methods are accessible and will give us the greatest opportunity to make informed decisions going forward in shaping the service.

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: Medium

People living in coastal areas

Nature of impact: Positive

Extent of impact: Low

People living in urban or over-populated areas

Nature of impact: Positive

Extent of impact: Low

Rationale for assessment, including data used to assess the impact: It is believed that there will be a low level of positive impact for all types of geographic groups, as the new service will continue to be offered across all areas consistently. A greater level of visibility of the service may increase demand for the service which would in turn produce higher impacts but it is not possible for us to demonstrate from the current data that this would be the case. Continuing to offer peer and generic advocacy will support the aim for people to have access to socially and culturally appropriate advocacy which may be delivered by their peers. Removing barriers to accessing the service through use of technology means the greatest impact would be felt in rural and isolated areas. We will work with the provider to ensure that any rural communities with limited access to technology have equitable access to the service.

What actions have already been taken to mitigate any negative impacts?: We do not consider that there are negative impacts due to the implementation of the new service.

How could you strengthen any positive impact(s)?: Continue to advance the use of peer and generic advocacy by linking communities with training and support.

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: Medium

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: Medium

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: Positive

Extent of impact: Medium

Rationale for assessment, including data used to assess the impact: Advocacy services for 'Families most at risk of deterioration of relationship quality and breakdown', 'Family members' ability to play a full role in family life' and 'Families going through key transitions' all have been assessed as having a medium positive impact upon them. This assessment was made due to the inclusion of support for parents whos children and subject to, or having an assessment for, a Child in Need or Child Protection plan. Increasing the take up of IMHA will also support families by ensuring peoples rights are upheld and professionals know what is important to people with

regard to remaining active participants in family life.

What actions have already been taken to mitigate any negative impacts?: It is not considered that there will be negative impacts due to the implementation of a new service

How could you strengthen any positive impact(s)?: Making sure services which support families experiencing difficulties are aware of the rights of parents to receive advocacy support if they meet the criteria as this will be a new inclusion in the contract specification.

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?: No

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?: Staff may be travelling to Mental Health wards around Essex, to peoples homes or to agreed meeting spaces. Service users may be travelling to agreed meeting spaces. Staff need to consider accessibility needs of service users and arrange meeting spaces which are appropriate. For instance a service user may not drive, therefore they need to be able to use public transport to get to a location, or the member of staff travel to them. There will be ongoing discussions with the provider to assess how to minimise staff travel requirements whilst also maintaining confidentiality for individuals by having access to appropriate meeting spaces.

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

What is your transition plan to introduce electric vehicles?: This will be in line with any government legislation placing a requirement on the use of electric vehicles

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: ECC 21, 22, 23, 24, 25 and 26 will be included in our procurement as we do consider that there are social value steps which could be taken to help reduce the carbon footprint of the service

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: Yes

Most of our activities will generate waste so it is important that this waste is managed properly. Generally, the more waste produced the greater the greenhouse gas impact. What approaches are in place to maximise reuse, recycling and composting of any waste generated by this decision? Please specify how you are:

Measuring the amount of waste being generated and setting targets to reduce, for example setting reuse requirements: It is not possible to assess the amount of waste that will be generated in the form of leaflets and posters as over the lifetime of the previous contract these will have been distributed on an individual basis and the individuals may have disposed of these appropriately. Leaflets will have been left on ward, surgeries, schools and in peoples homes and recycled as each setting has seen fit.

Requiring recycling - such as setting targets for waste recycled, or providing facilities to recycle: The new service may result in the need for all leaflets and posters previously circulated to be recycled and replaced

with new ones which advertise the new service and provider. The provider will be required to ensure they recycle all old promotional materials they replace.

Operating the service in a digital way to reduce use of material resources: The new provider will be asked to consider how they will continue to develop their digital offer. This will include the use of a website, online referrals and online marketing. They can send posters and leaflets electronically to partners to reduce the use of envelopes and transportation of materials. This is already successfully being done by the current provider.

Sharing goods and services with others to reduce resource use: Due to the nature and sensitivity of the service being provided by the independent advocacy service we would not expect sharing of goods and services.

Donating or selling materials and products that are no longer required to keep them in use elsewhere: We will ask the new service provider to consider how they recycle redundant tech products.

Avoiding over-packaged or difficult to recycle goods: We will ask the new service provider to consider the materials they use for promotional materials such as leaflets and posters. There should be no packaging and where possible avoid the use of envelopes with plastic windows

Avoid single-use items, in particular single use plastic: The nature of the service does not require the use of plastics, particularly single use plastics.

Recycling and composting waste where applicable: The new service will be required to recycle all waste where possible. This is most likely to be in the form of paper waste through leaflets and posters.

Where will waste be treated and disposed of? This includes general rubbish and recycling: Leaflets and posters can be disposed of in general household recycling unless stated otherwise on the item.

Nature of impact

Built Environment / Energy: None

Sustainable Transport / Travel: None

Waste: None

Rationale for assessment, including data used to assess the impact: It is difficult to quantify the number of leaflets and posters distributed over the life cycle of the last contract. There will always be a need for paper materials to be used particularly for those who may need information to be made more accessible to them, eg they may request braille. Young people in the service have requested more use of technology to advertise the service such as using QR codes to access websites but this will not be suitable for all and therefore a blanket approach to only using digital marketing/solutions would be discriminatory. In secure settings there may be the restriction to accessing online materials and therefore a paper copy of information is paramount to the individual understanding their rights to support.

What actions have already been taken to mitigate any negative impacts?: An action plan will be formed once we have undertaken a procurement exercise and the new contract has been awarded.

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: 29/08/2023

Name of person completing the ECIA: Kim Wallace

Email address of person completing the ECIA: kim.wallace@essex.gov.uk

Your function: Adult Social Care

Your service area: Commissioning

Your team: ASC Mental Health and Advocacy Commissioning Team

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

Email address of Head of Service: emily.oliver@essex.gov.uk