# Appendix 1 Equality, Diversity, Cohesion and Integration Screening

Directorate: Adult Social Care



Service area: ASC Commissioning

As a public authority we need to ensure that all our strategies, policies, service and functions, both current and proposed have given proper consideration to equality, diversity, cohesion and integration.

A **screening** process can help judge relevance and provides a record of both the **process** and **decision**. Screening should be a short, sharp exercise that determines relevance for all new and revised strategies, policies, services and functions. Completed at the earliest opportunity it will help to determine:

- the relevance of proposals and decisions to equality, diversity, cohesion and integration.
- whether or not equality, diversity, cohesion and integration is being/has already been considered, and
- whether or not it is necessary to carry out an impact assessment.

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Lead person: Georgia Young	Contact number: 0113 247 8885	
1. Title: Home Care Redesign and Commissioning Project		
Is this a:		
Strategy / Policy Service	ce / Function X Other	
If other, please specify		
Procurement of home care services		
2. Please provide a brief description of what you are screening		

The aim of Home Care Redesign and Commissioning Project is to review, improve, implement and evaluate the service delivery model, procurement and contracting approach for independent sector home care provision in Leeds by April 2016.

This screening document will be provided to Executive Board in November 2014 as

an appendix to a report on the 'External Provision of Home Care Services'.

# 1. Relevance to equality, diversity, cohesion and integration

All the council's strategies/policies, services/functions affect service users, employees or the wider community – city wide or more local. These will also have a greater/lesser relevance to equality, diversity, cohesion and integration.

The following questions will help you to identify how relevant your proposals are.

When considering these questions think about age, carers, disability, gender reassignment, race, religion or belief, sex, sexual orientation. Also those areas that impact on or relate to equality: tackling poverty and improving health and well-being.

Questions	Yes	No
Is there an existing or likely differential impact for the different	Yes	
equality characteristics?		
Have there been or likely to be any public concerns about the	Yes	
policy or proposal?		
Could the proposal affect how our services, commissioning or	Yes	
procurement activities are organised, provided, located and by		
whom?		
Could the proposal affect our workforce or employment		NO
practices?		
Does the proposal involve or will it have an impact on		
<ul> <li>Eliminating unlawful discrimination, victimisation and</li> </ul>	Yes	
harassment		
<ul> <li>Advancing equality of opportunity</li> </ul>		
Fostering good relations		

If you have answered **no** to the questions above please complete **sections 6 and 7** 

If you have answered **yes** to any of the above and;

- Believe you have already considered the impact on equality, diversity, cohesion and integration within your proposal please go to section 4.
- Are not already considering the impact on equality, diversity, cohesion and integration within your proposal please go to **section 5**.

### 4. Considering the impact on equality, diversity, cohesion and integration

If you can demonstrate you have considered how your proposals impact on equality, diversity, cohesion and integration you have carried out an impact assessment.

Please provide specific details for all three areas below (use the prompts for guidance).

• How have you considered equality, diversity, cohesion and integration? (think about the scope of the proposal, who is likely to be affected, equality related information, gaps in information and plans to address, consultation and engagement activities (taken place or planned) with those likely to be affected)

The central importance of equality is clearly recognised within the project. The importance of ensuring that care is being provided in a holistic manner, at a time and by individuals that operate in a way that maximises the achievement of the individual's desired outcome. Such a holistic approach ensures that consideration is given to cultural ethnic and other equality related outcomes. The impact of these factors cannot and is not being under estimated in this piece of work.

This impact screening covers the initial investigations and information gathering stage which have identified what information and evidence is already available and expanded on this using information from a variety of sources including appropriate and proportionate consultation and involvement, with both users and potential user of home care and their carers. The information identified so far comes from a range of sources:

- a service user reference group has been formed consisting of service users,
- a home care strategic commissioning group was established which includes cross party representation, service providers, service users, trade union, NHS etc.
- RAP information that has been submitted to central government. This information will provide initial information on numbers and trends over time across a number of equality strands
- Service user satisfaction surveys to identify potential issues cross referenced against disability groups etc.
- Complaints to identify any trends.
- Looking at any research both National and Local
- Previous equality screenings

As issues and potentials barriers are identified these will be investigated and where possible suggestions for potential mitigating actions developed to put forward to decision makers.

Conversely where beneficial outcomes are uncovered then all efforts will be made to identify ways of enhancing those beneficial outcomes.

This screening is in addition to the equality considerations that ASC carry out as standard during assessment of service users and when procuring services. All of the service users using services that are within the scope of this project will have been assessed prior to commencement of provision of the service.

The project is undertaking a fact finding process regarding the context of home care in Leeds to ensure that as many barriers to service are identified and mitigated against as possible. The proposals being made by the project have been informed by:

- data gathered from ASC on the existing provision and demand for and usage of contracted home care services in Leeds:
- information on other local authorities approaches to commissioning of home care services and associated service delivery models;
- consultation with service users and carers, providers (contracted and noncontracted), stakeholders within ASC, trade unions and elected members.

The equality impact was considered at an options appraisal workshop held in April 2014 which a range of stakeholders including service users and providers attended. To support this market analysis was undertaken which looked at the current service user profile and potential demand for services based on demographic information for the city.

Letters were sent to all service users currently in receipt of services provided under the Community Home Care Support Framework Agreement advising them a review of the home care service and the way it is procured was going to be undertaken and giving them the option of participating in various ways, e.g. written survey, focus groups, one to one discussion. This was to ensure that the people involved in consultation were representative of the people in receipt of the services which were the subject of the consultation. Access, language and other needs were taken into account and action taken to overcome any associated barriers, e.g. through use of accessible venues. providing sufficient notice of sessions so appropriate support could be arranged. Representation was also sought through Leeds Involving People from people not in receipt of these contracted services. People who participated in the consultation were asked if they would provide information for equality monitoring purposes. During the consultation process, some participants gave their views on services to diverse communities. Focus groups took place with people who represented the equality characteristics described in Leeds City Council's 'Equality, Diversity, Cohesion and Integration Impact Assessment Guidance'.

All contracted providers were written to asking them if they would like to be involved in the consultation. In addition, non-contracted providers were also given the opportunity to participate. Early and continued involvement of providers during the options appraisal and development phases are critical to ensuring that the proposals have the potential to impact positively on people with diverse needs and minimise any adverse impacts.

Recommendations were made to ASC's Directorate Leadership Team in August 2014. These identified risks, benefits, additional implications and elements requiring further exploration including equality impact.

# 1. Key findings

(think about any potential positive and negative impact on different equality characteristics, potential to promote strong and positive relationships between groups, potential to bring groups/communities into increased contact with each other, perception that the proposal could benefit one group at the expense of another)

At the early stages of the project many of the issues being investigated were based on

hearsay and a range of hypothesis based on research. This stage of the work is about evidencing the actual issues that exist here in Leeds.

Issues identified so far (and evidenced by the most recent census figures) are that though the increase in the overall population in Leeds has slowed the increase in the BME population according to the last census is increasing especially within the younger age groups. Hence there will be an increasing demand for BME targeted and BME sensitive services in the coming years.

Another issue that has been identified through a service user satisfaction survey which impacts upon the quality of some provider services is the issue of inconsistent staffing, the quality of the interaction between staff and service users and the accuracy of time slots.

The project's proposals which were refined through the options appraisal process and in consultation with the ASC DLT are intended to make improvements to the way that service users' needs are met by contracted home care providers and to the terms and conditions of employment of care staff within contracted home care providers. As a result, it is envisaged that the proposed changes will have positive impacts on different equality characteristics. Examples are given below.

## Promotion of positive impacts

- 1. Increased choice and control and access to services for service users.
- 2. Improved terms and conditions for home care staff.
- 3. Improved well-being of service users.

# Reduction of potential negative impacts:

- 1. Fewer providers available to meet the diverse needs of people needing support from home care providers.
- 2. Service users are unable to take up the offer of a self-managed personal budget or individual service fund as they require support to understand and manage these.

#### Actions

(think about how you will promote positive impact and remove/ reduce negative impact)

Below are some examples of how the project is seeking to promote positive impact and reduce/remove negative impact.

#### Promotion of positive impacts

- Increased choice and control and access to services for service users:
- The project is proposing that all service users of the contracts which are due to be replaced by the new home care contract will be given by letter the option of having a face-to-face discussion about the changes and their options. In cases where service users have informed ASC of their specific communication needs, these will

- be taken into account when communicating with them.
- It is being proposed that service users will be given the option of taking up a self-managed personal budget (also known as 'direct payment') or individual service fund which would enable them to have care provided by a provider of their choice and have greater control over the support provided. This will help to ensure that any service user who receives a service from a provider that is unsuccessful in the tendering process for the new contract could continue to have a service from the existing provider.
- 2. Improved terms and conditions for home care staff:
- Throughout the consultation there was support from all stakeholder groups to try
  and move to implementation of Unisons Ethical Care Charter, however much of
  this relates to staff terms and conditions of provider organisations. Naturally, to
  incentivise organisations to comply with all the expectations of the Charter due
  regard would need to be given to the assessment of the costs in the establishment
  of the pricing model described previously.
- 3. Improved well-being of service users:
- The project is recommending that the contract stipulates that providers have a locality focus to their service delivery teams and develop relationships with other agencies operating within that locality, e.g. neighbourhood networks, integrated teams, reablement services, intermediate care teams. It is envisaged that improved locality working and relationships with other providers will increase the ability of providers and other agencies to better meet the needs of specific communities.
- The project is recommending that changes are made which will give providers greater flexibility to meet service users changing needs.

#### Reduction of potential negative impacts:

- 1. Fewer providers available to meet the diverse needs of people needing support from home care providers:
- There are over 100 home care providers in Leeds. Approximately a quarter of these have contracts with ASC. Service users with a self-managed personal budget or individual service fund can have their care provided by any of these providers, regardless of whether or not they have a contract with ASC.
- ASC funds Care and Repair to provide the Leeds Directory which provides information on, and checking and vetting of, home care providers. This helps a diverse range of providers to market their business and people needing support to find out about them easily and have some reassurance that the providers have met relevant standards. Leeds Directory therefore, is one way of protecting vulnerable people. When people are informed of the changes to the services provided, they will be given information about Leeds Directory.
- It is proposed 2 contracts will be put out to tender one block contract which would

give up to 12 providers a guaranteed number of hours to deliver over the lifetime of the contract, and a Framework Agreement which would ensure that other providers had been quality assured and approved by ASC. People with eligible needs could make use of any of these contracted services as well as any other provider of their choosing.

- Block providers would be given responsibility for ensuring that the home care services required to meet service users' needs are delivered to appropriate standards. To do this they may need to work in partnership with the Framework Agreement providers or other providers.
- 2. Service users are unable to take up the offer of a self-managed personal budget or individual service fund as they are unable to understand and/or manage these:
- Ways will be identified to enable service users and / or their carers to make an
  informed decision about how their care can be provided and they can fully
  understand the benefits/implications of a self-managed personal budget or
  individual service fund. It is proposed that staff within ASC will be trained to
  explain these options to service users and that each service user that the changes
  impact on will be given the option of having a face-to-face discussion with one of
  these workers.
- In the case of individual service funds ASC would work with providers to put these in place where required thus giving the service user greater choice and control over who provides their care without the responsibility for managing the budget.

Implementation of the proposals (particularly those that relate to improving the terms of conditions of care staff) will have significant financial implications for the local authority. Given the current financial pressures the local authority has, there may be some public concern regarding proceeding with implementation of the proposals. If the proposals are not implemented the positive impacts are likely to be reduced. As a result, an initial report is being submitted to Executive Board in November 2014 to raise awareness of the issues which the project is aiming to address and the potential implications of these with the recommendation that further work is undertaken to more fully determine the financial implications, including equality impacts of proceeding with implementation of the proposals.

5. If you are <b>not</b> already considering the impact on equality, diversity, cohesion and integration you <b>will need to carry out an impact assessment</b> .		
Date to scope and plan your impact assessment:	February 2015	
Date to complete your impact assessment	March 2015	
Lead person for your impact assessment (Include name and job title)	Michelle Atkinson Commissioning Manager Older People's Services	

6. Governance, ownership and approval				
Please state here who has approved the actions and outcomes of the screening				
Name	Job title	Date		
Michelle Atkinson	Commissioning Manager Older People's Services	22.10.2014		
Date screening complet	ed	20/10/14		

#### 7. Publishing

Though all key decisions are required to give due regard to equality the council only publishes those related to Executive Board, Full Council, Key Delegated Decisions or a Significant Operational Decision.

A copy of this equality screening should be attached as an appendix to the decision making report:

- Governance Services will publish those relating to Executive Board and Full Council.
- The appropriate directorate will publish those relating to Delegated Decisions and Significant Operational Decisions.
- A copy of all other equality screenings that are not to be published should be sent to <a href="mailto:equalityteam@leeds.gov.uk">equalityteam@leeds.gov.uk</a> for record.

Complete the appropriate section below with the date the report and attached screening was sent:

For Executive Board or Full Council – sent to Governance Services	Date sent:
For Delegated Decisions or Significant Operational Decisions – sent to appropriate <b>Directorate</b>	Date sent:
All other decisions – sent to equalityteam@leeds.gov.uk	Date sent: