

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.

Directorate: Adult Social Care	Service area: ASC Commissioning
Lead person: Michelle Atkinson	Contact number: 0113 247 6088

1. Title: Redesign and re - Commissioning of Home Care
Is this a:
<input type="checkbox"/> Strategy / Policy <input type="checkbox"/> Service / Function <input checked="" type="checkbox"/> Other
If other, please specify
Procurement of Homecare services

2. Please provide a brief description of what you are screening
<p>The aims of the Redesign and Commissioning of the external Home Care Service is to review, improve, implement and evaluate a new service delivery model, procurement and contracting approach for the independent sector home care provision in Leeds by 2016.</p> <p>This screening document will be provided to the Executive Board on 22nd April 2015 as an appendix to the report on the 'External Provision of Home Care Services'.</p>

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 equality characteristics?	No	
Have there been or likely to be any public concerns about the policy or proposal?	Yes	
Could the proposal affect how our services, commissioning or procurement activities are organised, provided, located and by whom?	Yes	
Could the proposal affect our workforce or employment practices?		No
Does the proposal involve or will it have an impact on <ul style="list-style-type: none">• Eliminating unlawful discrimination, victimisation and harassment• Advancing equality of opportunity• Fostering good relations	Yes	

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 this re-design and re-commissioning process. 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 has not been under estimated in this piece of work.

This impact screening covers the identified information and evidence already available from a variety of sources including appropriate and proportionate consultation and involvement, with both users and potential users of home care and their carers. The information comes from a range of sources:

- *a service user reference group was 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 has provided the initial information on numbers and trends over time across a number of equality strands*
- *Service user satisfaction surveys identified potential issues cross referenced against disability groups etc.*
- *Looking at any research both National and Local*
- *Previous equality screenings*

(reports, minutes, research information are available from Michelle Atkinson)

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

Conversely where beneficial outcomes were identified then efforts were made to identify ways of enhancing those beneficial outcomes, for the benefit of the service user.

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 has undertaken a fact finding process regarding the context of home care in

Leeds to ensure that as many barriers to service were identified and mitigated against. The proposals made 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 non-contracted), stakeholders within ASC, trade unions and elected members.*

(information/reports available from Michelle Atkinson)

An initial equality impact was considered at an options appraisal workshop held in 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 re-procurement of the service was going ahead and gave them the option of participating in various ways, e.g. written survey, focus groups, one to one discussion. This ensured that the people in receipt of a Homecare service 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 sought through Leeds Involving People from people not in receipt of these contracted services. People who participated in the consultation were asked to 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 was critical to ensure that the proposals will 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.

The Executive Board report dated 22nd April 2015, and entitled 'External Provision of Homecare', identifies the proposed homecare model and future monitoring will include equality strands..

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)

During the early stages of the process evidencing the actual issues in Leeds were investigated rather than relying on hearsay and a range of hypothesis based on research.

Issues identified (evidenced by the census figures) demonstrated that although the increase in the overall population in Leeds has slowed, the increase in the BME population has increased, especially within the younger age groups. Hence there will be an increasing demand for BME targeted and BME sensitive services in the coming years.

Inconsistent staffing, the quality of the interaction between staff and service users and the accuracy of time slots, was also identified through a service user satisfaction survey.

In response to this issue, proposals, refined through the options appraisal process and consultation with the ASC DLT, were put forward 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, the proposed changes will have a positive impact 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 procurement process will continue to promote a positive impact and reduce/remove negative impact.

Promotion of positive impacts

- 1. Increased choice and control and access to services for service users:*
 - 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.

- *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 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 the 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 has been given to the assessment of the costs in the establishment of the pricing model described previously.*

3. Improved well-being of service users:

- *The contract should stipulate 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. 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.*
- *Changes to be 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 primary contract which would give up to 6 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.

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. ASC staff 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.*

Given the current financial pressures the local authority has, improving the terms and conditions of care staff will have significant financial implications, which may lead to some public concern. Failure to address care staff terms and conditions however, will lead to the positive impacts being reduced.

Equality monitoring will be undertaken as part of the normal contract monitoring and staff terms and conditions will also be monitored.

5. If you are *not* already considering the impact on equality, diversity, cohesion and integration you *will need to carry out an impact assessment*.

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	05.03.2015
Date screening completed		05/03/15

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 equalityteam@leeds.gov.uk 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 Directorate	Date sent:
All other decisions – sent to equalityteam@leeds.gov.uk	Date sent: