

## Appendix 1

### Equality, Diversity, Cohesion and Integration Screening

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.

|  |   |
|--|---|
| <b>Directorate:</b> Adult Social Care    | <b>Service area:</b> Commissioning      |
| <b>Lead person:</b><br>Ian Brooke-Mawson | <b>Contact number:</b><br>0113 378 1843 |

#### 1. Title

The Leeds Commitment to Carers

Is this a:

**Strategy / Policy**

**Service / Function**

**Other**

**If other, please specify**

The Leeds Commitment to Carers.

#### 2. Please provide a brief description of what you are screening

The Leeds Commitment to Carers sets out what being the best city for carers would look like. It includes a series of carer and organisational statements as well as recognising the Leeds Carers Partnership as a key strategic influencer and champion.

### 3. 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 and any other relevant characteristics (for example socio-economic status, social class, income, unemployment, residential location or family background and education or skills levels).

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

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

### 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 provision of unpaid care is an important policy issue because it not only makes a vital contribution to the supply of care, but can also affect the health and wellbeing, employment opportunities, finances and social and leisure activities of those providing it.

The Leeds Carers Partnership exists to champion the needs of carers and to influence the way that services are planned and delivered in response to the needs of carers.

Membership of the Leeds Carers Partnership includes carers as well as staff from the public, private and voluntary sector.

### 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)*

The more care you provide the more likely you are to experience bad or very bad health and there is strong evidence from various research that many carers pay a heavy price for their caring role in terms of both their health and their wealth, for example:

- 40% of carers experience significant distress and depression
- 20% of carers report back injury as a result of caring
- Just 40% of carers in Leeds say they have as much social contact as they would like
- For 1 in 5 young carers, caring has a negative impact on their education
- 65% of carers who are struggling to make ends meet cut back on seeing family and friends to cope
- 73% of carers say that worrying about their finances is affecting their health
- Providing higher levels of care is associated with a 23% higher risk of stroke

The tables below set out the numbers of carers and the level of unpaid care they provide by age, gender and ethnicity:

| Gender       | 1-19 Hrs      | 20-49 Hrs    | 50+ Hrs       | Total         |
|--------------|---------------|--------------|---------------|---------------|
| Male         | 19,322        | 4,036        | 6,695         | 30,053        |
| Female       | 26,063        | 5,398        | 9,716         | 41,177        |
| <b>Total</b> | <b>45,385</b> | <b>9,434</b> | <b>16,411</b> | <b>71,230</b> |

| Age        | Population     | Carers        | 1-19 Hrs      | 20-49 Hrs    | 50+ Hrs       |
|------------|----------------|---------------|---------------|--------------|---------------|
| Age 0-15   | 137,493        | 1,388         | 1,133         | 136          | 119           |
| Age 16-24  | 115,808        | 4,574         | 3,374         | 709          | 491           |
| Age 25-34  | 113,316        | 6,894         | 4,501         | 1,013        | 1,380         |
| Age 35-49  | 152,748        | 19,058        | 12,497        | 2,665        | 3,896         |
| Age 50-64  | 122,522        | 25,080        | 17,254        | 3,171        | 4,655         |
| Age 65+    | 109,598        | 14,604        | 6,925         | 1,779        | 5,900         |
| <b>All</b> | <b>751,485</b> | <b>71,598</b> | <b>45,684</b> | <b>9,473</b> | <b>16,441</b> |

| <b>Ethnicity</b>                              | <b>1-19 Hrs</b> | <b>20-49 Hrs</b> | <b>50+ Hrs</b> | <b>Carers</b> |
|---|-----------------|------------------|----------------|---------------|
| English/Welsh/Scottish/Northern Irish/British | 39,866          | 7,554            | 14,212         | 61,632        |
| Irish   | 487             | 111              | 214            | 812           |
| Other White                                   | 714             | 195              | 255            | 1,164         |
| Mixed/multiple ethnic group                   | 695             | 172              | 195            | 1,062         |
| Asian/Asian British                           | 2,605           | 982              | 1,115          | 4,702         |
| Black/African/Caribbean/Black British         | 1,045           | 372              | 319            | 1,736         |
| Other ethnic group                            | 272             | 87               | 131            | 490           |
| <b>Total</b>                                  | <b>45,684</b>   | <b>9,473</b>     | <b>16,441</b>  | <b>71,598</b> |

### **Actions**

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

The Leeds Commitment to Carers seeks to address inequalities experienced by unpaid carers by raising awareness and encouraging action at both an organisational and community level to better identify, recognise and support carers.

Identification of carers and support to maintain and improve carers' physical and mental health and wellbeing are identified as priorities in supporting strong, engaged and well-connected communities and are integral to the development of local care partnerships.

The more teams and organisations that make a commitment, the more likely it is that carers in Leeds are being better identified, their role and contribution is being recognised, and the support they need is in place.

Further development of the Leeds Commitment to Carers will aim to extend reach beyond organisations who are in the health and care sector. In addition, the NHS Leeds CCG funded post at Carers Leeds will support and encourage participation from GP practices.

Decisions and changes made to implement the aspirations outlined in the Leeds Commitment to Carers will be subject to Leeds City Councils Equality and diversity policy and will under-go Equality Impact Screening to detail any potential impacts and mitigating actions or if a full equality impact is required.

To ensure that the document is accessible to all citizens of Leeds it will be considered by our communications department to ensure it is accessible to all citizens of Leeds including those whose first language is not English

**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: |  |
| Date to complete your impact assessment        |  |

|  |  |
|--|--|
|  |  |
| Lead person for your impact assessment<br>(Include name and job title) |  |

### 6. Governance, ownership and approval

Please state here who has approved the actions and outcomes of the screening

| Name           | Job title                              | Date                      |
|----------------|--|---------------------------|
| James Woodhead | Head of Commissioning<br>(Integration) | 5 <sup>th</sup> June 2018 |

### 7. Publishing

This screening document will act as evidence that due regard to equality and diversity has been given. If you are not carrying out an independent impact assessment the screening document will need to be published.

If this screening relates to a **Key Delegated Decision, Executive Board, full Council** or a **Significant Operational Decision** a copy should be emailed to Corporate Governance and will be published along with the relevant report.

|  |                           |
|--|---------------------------|
| <b>Date screening completed</b>  | 5 <sup>th</sup> June 2018 |
| If relates to a Key Decision - <b>date sent to Corporate Governance</b>            |                           |
| Any other decision – <b>date sent to Equality Team (equalityteam@leeds.gov.uk)</b> |                           |