

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 or has already been considered, and
- whether or not it is necessary to carry out an impact assessment.

Directorate: Adults & Health	Service area: Commissioning
Lead person: Tim Sanders	Contact number: 0113 378 3853

1. Title: Living with dementia in Leeds – developing the strategy for 2019-24

Is this a:

Strategy / Policy

Service / Function

Other

If other, please specify

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

The impact of developing and setting policy to support living well with dementia in Leeds. This includes:

- Leeds as a dementia-friendly and inclusive place;
- services which offer diagnosis and support;
- partnership with and support for families / carers
- the quality and capability of health and social care services to work well with people living with dementia.

The effect of dementia is different for every individual, and a person-centred approach is the only way to understand how the biological, psychological and social factors interact. All the 'protected characteristics' are relevant for the local population living with dementia, and the condition is itself a disability. This increases the risks for individuals, that needs will not be communicated and understood; and that the application of human rights and other legal entitlements will, in practice, be subject to the decisions of others and variations within services.

1. Relevance to equality, diversity, cohesion and integration

All the council's strategies and policies, service and functions affect service users, employees or the wider community – city wide or more local. These will also have a greater or 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?	✓	
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">• Eliminating unlawful discrimination, victimisation and harassment• Advancing equality of opportunity• 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)

- Commissioning Leeds Older People's Forum to support and co-ordinate dementia-friendly Leeds, and support people living with dementia to form a group to give voice to the experience in Leeds – this is the 'Up & Go' group.
- Working with Carers Leeds to invite carers to join Leeds Dementia Partnership, and to listen to lived experience.
- Person with dementia and a carer speaking at each Dementia Information Roadshow.
- Gaining knowledge and understanding by a range of methods: - studying demographics, listening to people, gathering information and participating in events over the 5 years since the previous dementia strategy. This includes Leeds BME dementia forum; a BME dementia event in 2015 followed up with a report and grant funding programme; experience of LGBT older people; faith and older people; 'Ageing Without Children' group.
- A total of 50 Memory Cafes in Leeds to cover all geographical areas, and diverse BME communities (Irish, south Asian, Caribbean, Jewish).
- Commissioning BME dementia support from Touchstone Leeds.
- Supporting Leeds Gypsy and Traveller Exchange to produce a resource for commissioners of dementia services.
- Establishing GP-hosted memory clinics, to reduce travel distances and the sense of stigma, compared to attending outpatient locations.
- Improving day services for younger people with dementia and enabling more people to access eg. Memory Café and carer support.
- Plans to engage further in the development of the strategy to December 2019, and after the strategy is published, in particular to commission research in the experience of local people from BME communities, and a further event.

• **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).

There are a range of considerations which influence eg. strategy, service design, staff training needs, sometimes in quite nuanced ways. For example:

- whilst age is the main risk factor for developing dementia, age-related risk is higher for people at a disadvantage from health and social inequalities; so needs are present in all local communities.
- Carers of people with dementia are at particular risk of health inequalities, related to eg. lack of sleep, putting one's own needs second, the emotional and psychological

effects of loss on the relationship with the person.

- People with dementia are particularly vulnerable at points of transition between services, eg. to and from hospital, or changes of where one lives. Important factors are the changes in environment causing disorientation; and increased reliance on professionals and systems to share information, especially when small details make a big difference.
- dementia is an increasing concern for the diverse Leeds BME communities. There are some populations which are decreasing in numbers as younger generations might not identify on the Census as eg. 'Irish'; but dementia is still an important concern as the populations grow older. Older people who came to the UK from Caribbean and south Asian origins are developing dementia, and assumptions cannot be made about patterns of family life.
- Dementia can take away the ability to speak English for people who learned it as a second language. Reported experience is that people from south Asian communities are looking to use eg. residential short stays for carer breaks and the language capability of services is a difficulty.
- LGBT older people have grown old at a time of changing social attitudes and inclusiveness, and both developing dementia and coming into contact with care services can lead to difficulties and uncertainties. Alzheimers disease in particular can take away recent memories and lead to a sense of the past being the current reality, which can be distressing for the person and loved ones to eg. be back in a time when sexuality or gender identity was concealed.
- Dementia is usually 'co-morbid' with one or more other long-term conditions. An holistic approach to living well with long-term conditions / disabilities is required to support people to live well with dementia; with access to specialist support when required. Acquired hearing loss is a risk factor for dementia, and the importance of supporting people to access and use hearing aids is important.
- Younger people with dementia (generally under age 65) have specific needs related to both the prevalence of different types of dementia, and family, social and economic circumstances.
- People with learning disabilities, particularly Down's Syndrome, are at greater risk of developing dementia, and difficulties in recognising symptoms and diagnosing the condition.
- Generally, people wish for mainstream services to work well and be competent with diverse needs – eg. Memory Services, hospital care. However, specific services are often valued, such as a memory café where mother tongue language is used and understood; groups for older LGBT people.
- 'Dementia-friendly' approaches have had considerable success to improve understanding of the condition and acceptance of people living with dementia. However, a rights-based approach will complement and strengthen inclusion and quality of services.

- **Actions**

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

- The strategic approach will continue to be an integrated and holistic one, to live well with long-term conditions including dementia, and ensuring services work well together.
- Understanding emerging demographic needs from a combination of demographic data

and listening to lived experience. Staff working for community groups are an important source of reported information.

- Commission an evaluation of the experience of people from BME communities of dementia diagnosis and support; a further event to discuss findings and actions;
- Organise an event with local services for people with sensory impairment.
- Seek opportunities to improve support for working-age adults with dementia to have reasonable adjustments to stay in / find paid work.
- Continue to involve advocacy services and community groups in setting priorities for service development, including at Leeds Dementia Partnership.
- Throughout the lifetime of the strategy, continue to formulate actions in response to identified needs.

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 (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
Caroline Baria	Deputy Director, Commissioning, Adults & Health	1 st July 2019
Date screening completed		1 st July 2019

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	Date sent:
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Governance Services	
For Delegated Decisions or Significant Operational Decisions – sent to appropriate Directorate	Date sent:
All other decisions – sent to equalityteam@leeds.gov.uk	Date sent: