

App 8.3 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 – our strategy 2020-25

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. People with dementia may rely entirely on others doing the right thing to uphold human rights and other legal entitlements.

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.
- Carers are represented directly on Leeds Dementia Partnership, and contribute lived experience to the discussions.
- A series of ten Dementia Information Roadshows were held during 2018 and 2019. At nine of these, the speakers included a person living with dementia and a carer, and other contributions came from the audience.
- Gaining knowledge and understanding by a range of methods: - studying demographics, gathering information and participating in events over the 5 years since the previous dementia strategy. This includes Leeds BAME dementia forum; a BAME dementia event in 2015 followed up with a report and grant funding programme; experience of LGBT older people; faith and older people.
- The development of the strategy included a consultation event in October 2019, with a workshop on the needs of people in BAME communities; and another on diversity, inclusion and rights. This was followed up with a small group meeting to discuss approach and actions.
- Improvements by Leeds GP practices in the recording of ethnicity has enabled analysis of dementia diagnosis data. This shows that recorded diagnoses for people in the main Census BAME groupings is in the expected proportions compared to people aged 65+ in those population groups.
- There are 50 Memory Cafes in Leeds which cover all geographical areas, and diverse BAME communities (Irish, south Asian, Caribbean, Jewish).
- BAME dementia support is provided by Touchstone Leeds; this was originally funded by a series of grants (from 2011 onwards) and is now a longer-term contract with NHS Leeds Clinical Commissioning Group.
- Supporting Leeds Gypsy and Traveller Exchange have produced 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 support via a new Memory Café and carer support worker.

- **Key findings**

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 BAME 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. Alzheimer's 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 more often 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. Leeds has a specialist NHS younger dementia team, and day services for younger people with dementia. There is an active carers group whose experiences have influenced this strategy.
- People with learning disabilities, particularly Down's Syndrome, are at greater risk of developing dementia, and difficulties in recognising symptoms and diagnosing the condition. Therefore, when adults with a learning disability are supported by older parent carers, there is risk of dementia for both generations.
- 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

The strategy includes a range of initiatives arising from engaging with people and organisations:

- A whole-person approach to living with dementia, long-term conditions and frailty.
- Seeking funding to commission an evaluation of the experience of people from BAME communities of dementia diagnosis and support, and develop commissioning intentions from the findings (a proposal from the BAME dementia forum).
- Engagement and listening via events or otherwise, with BAME communities, people who are Deaf or hearing impaired; people in rural areas; LGBT older people. . A BAME dementia roadshow had been scheduled for May.
- Work with the 'Mindful Employers' network for working-age adults with dementia to have reasonable adjustments to stay in paid work for as long as possible.
- Ambition to commission residential short stays with language and cultural competence.
- Develop a 1-2 hour training session on dementia and diversity: "well-informed person-centred care".

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 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: