# 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 and Health	Service area: Public Health
Lead person: Rachel Brighton	Contact number: 07712 214857

# 1. Title:

	fication of the Grant A Ft) Service	greement End Dates for the Supp	porting We	llbeing in Frailty
Is thi	s a:			
	Strategy / Policy	☐ ✓ Service / Function		Other
lf oth	ner, please specify			

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

The decision to modify the end dates of grant agreements with 11 third sector providers of the Supporting Wellbeing and Independence for Frailty (SWIFt) service to end 31<sup>st</sup> March 2022.

SWIFt is currently delivered by eleven lead voluntary, community and social enterprise (VCSE) organisation partners (following a competitive grants process) experienced in working with and supporting people living with frailty and who understand the needs of their population. A citywide offer and offers focusing on culturally diverse communities and those experiencing additional mental health support needs are also commissioned as part of the service.

The service is meeting its aims and annual targets and an evaluation has demonstrated

positive and statistically significant outcomes for service users around health and wellbeing, loneliness and independence despite the challenges COVID has presented this cohort.

#### 3. 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	Х	
equality characteristics?		
Have there been or likely to be any public concerns about the		Х
policy or proposal?		
Could the proposal affect how our services, commissioning or		Х
procurement activities are organised, provided, located and by		
whom?		
Could the proposal affect our workforce or employment		Х
practices?		
Does the proposal involve or will it have an impact on		Х
<ul> <li>Eliminating unlawful discrimination, victimisation and</li> </ul>		
harassment		
<ul> <li>Advancing equality of opportunity</li> </ul>		
<ul> <li>Fostering good relations</li> </ul>		

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)

SWIFt was established to focus on providing one to one support for older people (50+) that are socially isolated and/or lonely and living with frailty to improve their wellbeing and independence. The SWIFt service has been delivered by a partnership of eleven different delivery partners across Leeds taking a person-centred approach to encourage and support the older person to increase their levels of confidence, emotional wellbeing and resilience. This in turn aims to reduce their vulnerability to frailty.

The outcomes for SWIFt which are aligned to what matters most to people living with frailty demonstrate that the service will promote equality, cohesion and integration for people living with frailty:

- Older people living with frailty will have improved health and wellbeing as a result of the service (Being active and healthy & Being able to do the things I enjoy)
- Older people living with frailty will feel less isolated as a result of the service (Being socially connected & Being able to do the things I enjoy)
- Older people living with frailty will live independently and safely in their own homes as a result of the service (Being independent)

The need for the service was identified through an extensive engagement process with older people, carers, community workers, statutory sector partners and decision makers across Leeds.

As part of the development of the SWIFt model, a workshop with providers and other key stakeholders was held. This considered how the service would address those people with the greatest need, defined by levels of moderate and severe frailty and deprivation. In addition, consideration was given to how existing delivery partners would provide support to share learning with particular focus on those from culturally diverse backgrounds and those living with complex physical and mental health needs.

The service continues to target older people aged 50 and above living with frailty to improve their wellbeing and independence through one to one support. This recognises that some vulnerable groups are more likely to be living with frailty at a younger age. The groups of older people identified as 'most at risk' are those with:

- Moderate or severe frailty
- Higher use of health and social care services
- Restricted to their own homes
- Carers of people living with frailty
- Older people experiencing mental health problems such as anxiety and depression

A recent evaluation of the service found positive evidence that SWIFt delivery partners are working well to attract people to the service that are most in need of support and in some cases, SWIFt is supporting proportionately more people with certain characteristics than the Leeds population. Importantly, it is people from these groups (those from culturally diverse backgrounds and deprived communities in particular) where there is clear evidence within the literature that they are more likely to suffer from loneliness and social isolation, and be more likely to need support to maintain their independence and wellbeing.

## • 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)

Referrals and self referrals continue be made to the service by Health and Social Care professionals and others irrespective of their race, ethnicity, gender, disability, beliefs, socio-economic status, social class and location within the city boundaries.

The Sevice brings older people living with frailty together with partner organisations who have experience of working with these groups and are involved in delivery the project. The service visits the older person in their own home or through a COVID safe alternative (eg over the phone or online) and together consider their needs and more importantly aspirations. They develop an action plan as to how to achieve the goals set. Goals can be to attend an organised group, get out of the home or connect with their local community. The worker will continue to support the older person until a point when there is mutual agreement that the goal has been met, or that they feel they have enough support to enable them to meet it.

The SWIFt model includes a strand supporting those from culturally diverse backgounds who are living with frailty and people living with frailty with complex physical and mental health needs. This will ensure there is a positive impact on these equality groups.

The service provides an opportunity to strengthen community cohesion. This is achieved by supporting people to access groups and activities and providing opportunities to connect to their local community either virtually, via telephone or in person.

### • Actions

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

Amending the grant agreement end dates will ensure the service can continue to promote

positive impact and remove/reduce negative impact by:

- 1) Ensuring continued service delivery that:
- is fair across protected characteristics
- emphasises a person-centred service;
- requires engagement and involvement with the local community;
- considers equality, diversity, cohesion and integration in relation to both clients and staff;
- 2) Ensuring that delivery partners provide support and opportunities to share best practice amongst local SWIFt workers in each locality for example supporting those from culturally diverse backgrounds who are living with frailty and the needs of people living with frailty and complex physical and mental health needs. This is supported through a robust contract monitoring process and through SWIFt peer support meetings for frontline workers.
- 3) Undertaking monitoring on a quarterly basis to review the usage of the service and ensure that the target groups are accessing the service. Actions will be taken to target and improve uptake amongst any groups that are poorly represented.
- **4)** Gathering further insight and using findings and recommendations from the evaluation to adapt the service to ensure that positive/negative impacts are addressed.

<b>5.</b> 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:	
Date to complete your impact assessment	
Lead person for your impact assessment (Include name and job title)	

<b>6. Governance, ownership and approval</b> Please state here who has approved the actions and outcomes of the screening				
Name	Job title	Date		
Lucy Jackson	Chief Officer /Consultant in Public Health FFPH Older people, Long Term Conditions, Cancer, localities and primary care	14.5.21		
Date screening completed	I. 14.5.21			

# 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 <u>equalityteam@leeds.gov.uk</u> 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: 10.6.21
All other decisions – sent to equalityteam@leeds.gov.uk	Date sent: