

Equality impact assessment (EIA) form: evidencing paying due regard to protected characteristics

(Form updated April 2019)

Short Term Care Home

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যদি আপনি এই ডকুমেন্ট অন্য ভাষায় বা ফরমেটে চান, তাহলে দয়া করে আমাদেরকে বলুন।

如欲索取以另一語文印製或另一格式製作的資料，請與我們聯絡。

اگر آپ کو معلومات کسی دیگر زبان یا دیگر شکل میں درکار ہوں تو برائے مہربانی ہم سے پوچھیے۔



Equality Impact Assessments (EIAs) are public documents. EIAs accompanying reports going to County Councillors for decisions are published with the committee papers on our website and are available in hard copy at the relevant meeting. To help people to find completed EIAs we also publish them in the Equality and Diversity section of our website. This will help people to see for themselves how we have paid due regard in order to meet statutory requirements.

Name of Directorate and Service Area	Health and Adult Services Care and Support
Lead Officer and contact details	Jonathan Prince Head of Operational Support Jonathan.prince@northyorks.gov.uk
Names and roles of other people involved in carrying out the EIA	
How will you pay due regard? For example, working group, individual officer	Lead officer as named above, Adult Social Care Leadership Team meetings, individual Care and Support assessment staff

When did the due regard process start?	April 2024
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Section 1. Please describe briefly what this EIA is about. (For example, are you starting a new service, changing how you do something, stopping doing something?)

This is a targeted piece of work to reduce spend on Short Term Care Home beds by Health and Adult services. This will be achieved by a combination of better social care practice, better recording, different commissioning and more effective resource management.

Section 2. Why is this being proposed? What are the aims? What does the authority hope to achieve by it? (For example, to save money, meet increased demand, do things in a better way.)

Data from the Strategy and Performance team has shown that use and spend on short term care home beds grew exponentially from 2019 to 2023. Much of this is attributed to changes in demand and ways of working during the Covid-19 pandemic. Although the crisis period of the pandemic ended, demand on short term care home beds remained at high levels. Dip sampling a range of examples showed that excess demand was being put on these services because social workers had continued the same practice they had during the pandemic, and in some cases, reviews were not taking place in a timely enough way.

The aim of this work was to collectively improve strength based practice, timeliness of reviews, and allocation of resources to ensure that short term care home beds were being used appropriately and for as short a period of time as possible. It is also the aim to make sure short term bed services are being recorded accurately on peoples records, for instance, making sure the these services are recorded as permanent if/when this becomes the onward plan.

It is anticipated that this will result in:

- better outcomes for people
- reduced costs for the council (both directly, and in potential onward support requirements)
- more accurate recording

Savings in the MTFs for this work were calculated against a growth assumption, if not interventions were put in place.

Section 3. What will change? What will be different for customers and/or staff?

There should be a general improvement in outcomes for people who receive services. It is well established that a short term care home bed should only be used for short term rehabilitation, crisis, or as a discharge to assess option from hospital. Data shows that the longer someone spends in a short term bed, the more likely it is that it will become permanent, and the less likely that someone will be able to return to their previous home. It's therefore imperative that people only go into beds where necessary, with clear outcomes to achieve and are reviewed in a timely manner. This gives them the best chance of regaining as much independence as possible.

For staff, clear expectations will be set out around the social care practice that should underpin their work with people (for example, strength based). Resources will be appropriately allocated to make sure that all reviews are carried out in a timely manner. Additional governance will be implemented to help share best practice and to review progress on a locality-by-locality basis.

Section 4. Involvement and consultation (What involvement and consultation has been done regarding the proposal and what are the results? What consultation will be needed and how will it be done?)

Information has been disseminated to staff via Head of Care and Support to drive forward the changes. No further involvement or consultation is required at this stage as the project is delivering already known statutory, legislative and best practice requirements.

Section 5. What impact will this proposal have on council budgets? Will it be cost neutral, have increased cost or reduce costs?

The project is projected to deliver savings of £2M in 2025/26, then £1.5M in both 2026/27 and 2027/28. £5M in total.

Section 6. How will this proposal affect people with protected characteristics?	No impact	Make things better	Make things worse	Why will it have this effect? Provide evidence from engagement, consultation and/or service user data or demographic information etc.
Age		X		Current use of short term bed service is weighted heavily to people age 65+. Therefore it is envisaged that there will be a general improvement in outcomes for them as a result of this work
Disability	X			There is no evidence or expectation of an impact based on this characteristic.
Sex	X			For people receiving services there is no evidence or expectation of an impact based on this characteristic.
Race	X			There is no evidence or expectation of an impact based on this characteristic.
Gender reassignment	X			There is no evidence or expectation of an impact based on this characteristic.
Sexual orientation	X			There is no evidence or expectation of an impact based on this characteristic.
Religion or belief	X			There is no evidence or expectation of an impact based on this characteristic.
Pregnancy or maternity	X			There is no evidence or expectation of an impact based on this characteristic.
Marriage or civil partnership	X			There is no evidence or expectation of an impact based on this characteristic.

Section 7. How will this proposal affect people who...	No impact	Make things better	Make things worse	Why will it have this effect? Provide evidence from engagement, consultation and/or service user data or demographic information etc.
..live in a rural area?		X		If someone has gone into a short term care home bed, they may have had to move away from a local rural area due to market availability. This work should help more people to return to their local area in a timely manner.
...have a low income?	X			There is no evidence or expectation of an impact based on this characteristic.
...are carers (unpaid family or friend)?		X		It is noted that in many scenarios when someone goes into a short term care home bed, a carer is indirectly given a break from their caring role. Conversely, when someone returns home from a short term care home bed, they may have been able to do this on the basis of support from a carer with new or changed responsibilities. It is envisaged that more strength-based practice and regular review will help the carer in terms of supporting their role.

Section 8. Geographic impact – Please detail where the impact will be (please tick all that apply)	
North Yorkshire wide	X
Craven district	
Hambleton district	
Harrogate district	
Richmondshire district	
Ryedale district	
Scarborough district	
Selby district	
If you have ticked one or more districts, will specific town(s)/village(s) be particularly impacted? If so, please specify below.	

<p>Section 9. Will the proposal affect anyone more because of a combination of protected characteristics? (for example, older women or young gay men) State what you think the effect may be and why, providing evidence from engagement, consultation and/or service user data or demographic information etc.</p> <p>Based on demographics, most changes to adult social care services have a disproportionate impact on older women as they make up a large part of those accessing services. Any impact is due to this demographic position rather than anything inherent to the work.</p>

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Section 10. Next steps to address the anticipated impact. Select one of the following options and explain why this has been chosen. (Remember: we have an anticipatory duty to make reasonable adjustments so that disabled people can access services and work for us)		Tick option chosen
1. No adverse impact - no major change needed to the proposal. There is no potential for discrimination or adverse impact identified.		X
2. Adverse impact - adjust the proposal - The EIA identifies potential problems or missed opportunities. We will change our proposal to reduce or remove these adverse impacts, or we will achieve our aim in another way which will not make things worse for people.		
3. Adverse impact - continue the proposal - The EIA identifies potential problems or missed opportunities. We cannot change our proposal to reduce or remove these adverse impacts, nor can we achieve our aim in another way which will not make things worse for people. (There must be compelling reasons for continuing with proposals which will have the most adverse impacts. Get advice from Legal Services)		
4. Actual or potential unlawful discrimination - stop and remove the proposal – The EIA identifies actual or potential unlawful discrimination. It must be stopped.		
Explanation of why option has been chosen. (Include any advice given by Legal Services.)		
No negative impacts identified as a result of this work.		

<p>Section 11. If the proposal is to be implemented how will you find out how it is really affecting people? (How will you monitor and review the changes?)</p> <p>Post Implementation reviews will be planned periodically and the overall change to the service is planned to take place over a number of years. Progress and expectations will be continually reviewed over this period and changes will be made and reflected in this document.</p>
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Section 12. Action plan. List any actions you need to take which have been identified in this EIA, including post implementation review to find out how the outcomes have been achieved in practice and what impacts there have actually been on people with protected characteristics.				
Action	Lead	By when	Progress	Monitoring arrangements
Data review to monitor changes in trends	Jonathan Prince Head of Service	Q4 2024		HASLT
Regular reviews of locality implementation and practice	Jonathan Prince Head of Service	Q4 2024	Held quarterly through 24/25	ASCLT

Section 13. Summary Summarise the findings of your EIA, including impacts, recommendation in relation to addressing impacts, including any legal advice, and next steps. This summary should be used as part of the report to the decision maker.

The impact of the project on people receiving service should be positive and as such poses no issues, although performance and outcomes will be closely measured through ASCLT/HASLT.

Section 14. Sign off section

This full EIA was completed by:

Name: Jonathan Prince

Job title: Head of Operational Support

Directorate: Health and Adult Services

Signature: J. Prince

Completion date: 6/1/25

Authorised by relevant Assistant Director (signature):

Date: