



North

Yorkshire County Council

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

(Form updated December 2015)

Assessment Pathway

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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 پوچھئے۔

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
Lead Officer and contact details	Chris Jones King 01609 798364
Names and roles of other people involved in carrying out the EIA	Dave Chapman – Senior Project Manager
How will you pay due regard? e.g. working group, individual officer	Reablement working group; HAS Leadership Team; Assessment Pathway Project Board; 2020 Governance & Reporting.
When did the due regard process start?	Project Initiation (August 2015)

Section 1. Please describe briefly what this EIA is about. (e.g. are you starting a new service, changing how you do something, stopping doing something?)

This EIA is focused on the the Assessment Pathway for Adult Social Care, under the Independence With Support Where I Need It (IWSWINI) programme.

The Assessment Pathway project has been informed by legislation and policy drivers, including the Care Act 2014, the NHS Five Year Forward View and emerging countywide and local collaborative working with NHS and other partners, as well as the consequences of the national deficit reduction programme and subsequent organisational transformation.

The Independence Programme aims to re-design the service pathway within Health and Adult Services, which includes prevention, assessment and reablement.

Proposals include the reconfiguration of the HAS reablement resource to make sure that the people who can derive most benefit from reablement can access it; the reconfiguration of Locality Assessment Teams, with a particular emphasis on assessment and review practice to take greater account of people's own family and community assets; and alternative methods of service delivery and funding (e.g. Continuing Health Care). Wherever possible, revised arrangements will make sure that people can be supported in their own home (including in alternative accommodation models such as Extra Care and Supported Living) and not placed in permanent residential or nursing care unnecessarily, thus enabling people to maximise their independence and their own ability to self-manage by preventing and/or reducing the need for social care.

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

The proposed changes seek to address the challenges presented by an ageing population, and the organisational need to prevent and reduce the need for social care. We want to encourage more independence for residents of the County, hopefully leading to people having reduced care needs, a reduction in the number of falls of people over 65 and a reduction in the number of people referred into the locality teams. The proposals will also contribute to identified savings as part of national reductions in funding.

To achieve this, it is necessary to restructure the reablement service. A new Reablement resource developed with the NHS will enable more people to experience a period of Reablement, maximising their independence and reducing or removing their need for on-going care and support.

A new management structure will be created, which will allow it to work more closely and flexibly with the NHS.

Through this activity the Council hopes to support the savings profile of North Yorkshire 2020 Programme.

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

National evidence suggests that revisiting reablement for people receiving care and support can be highly beneficial.

Customers should see an improvement, as services will be more streamlined and should consequently provide a better, more targeted service. Eligible individuals will have access to a more proportionate and effective service, which will help people to maximise their own self-

management abilities by preventing and/or reducing the need for social care. This will include drawing on the person's own assets, including family and carer support and community resources and networks. This will support to better outcomes for individuals through improving health, wellbeing and independence.

There will be a significant change for staff across the whole of the assessment pathway which will see a reduction in the overall staffing costs within adult social care. This will include:

- a separate management structure for Personal Care at Home in Extra Care schemes where the Council are the care and support provider;
- not bringing people into reablement where it is clear at the point of referral in the Customer Resolution Centre (CRC) that they do not need or would not benefit from it;
- working with partners and providers to undertake recuperation activities under the oversight of the reablement resource;
- enhancing the Council's reablement specification alongside NHS Intermediate Care services, with a clear assessment role resulting in significant changes to roles and structures;
- delivering a 7 day a week health and social care service, including the establishment of new models, including joint proposals to establish a collection of services across the County in which community health teams, social care teams, Intermediate Care and other services will work closely together and in some cases will be co-located.

Proposed changes may also result in revisions to working practices for staff across the County, including line management arrangements.

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?)

No consultation activity has been undertaken to date in relation to assessment pathway proposals and, given the internal, structural nature of the proposals for the period 2015- 2017, formal public consultation is not required.

However, co-design with service users, carers and engagement with partners is considered to be key to the successful development and delivery of the Assessment Pathway project and such activity will be incorporated into future work. For example the development of assessment tools and online self serve/self-management solutions, and engaging with service users on their understanding of the customer journey within a redesigned pathway.

As the proposals for the assessment pathway involve changes to staffing structures, a full staff consultation will form part of the proposals for 2015/17. It may be necessary to engage with partners as the proposal develops, and a decision regarding will be taken when this becomes clearer.

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

Overall the Assessment Pathway aims to save £12.3m by 2020, This figure may change as government settlements on local authority grants are understood. There are other factors that will have an impact on the final savings profile, for example the Living Wage.

For the first two years of this project there are planned savings of £3.85m from Care and Support budgets.

In the future, an asset based assessment pathway will help to support the delivery of future savings, as individual's independence will be maximised and people will be helped before they enter the care system.

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?		<p>61.4% of people receiving an open service as at 7th January 2016 are aged 65 or over. Of those, two thirds (66.6%) are female.</p> <p>We do not anticipate there to be a negative impact to older people who are our main service users. We expect any change to have a positive impact for older people in relation to ease of access and receiving the right information at first point of contact. Any changes to the service will consider the impact to older people. This will be taken into account in more detailed planning phases and addressed accordingly. Any changes to the ways in which people who use services interact with services are delivered will be subject to Customer Journey Mapping approaches, which will include the views of people regarding design and revision. Therefore, any issues relating to this protected characteristic will also be addressed at this stage.</p>
Disability		X		<p>Overall, the impact should be positive - see information for 'age', above.</p> <p>The highest proportion of people receiving a service are older people who require personal care support (32.5%). There is also a sizeable group of people with learning disability (12.2%), the majority of whom are aged 18-64.</p> <p>In terms of people's specific impairment, disabled people will not be disproportionately affected as the proposals will be equally applied across the County on an assessed basis. If and when individuals come into contact with the Service, their needs will be assessed on an individual basis taking into account their personal strengths, community networks and resources.</p> <p>Service performance information is available which provides current demographic</p>

				information, and this will be used to inform the development of reablement proposals and any subsequent implementation.
Sex (Gender)	X			<p>The HAS service user base is predominantly female (63.2% of people receiving an open service as at 7.1.16) so any positive or negative impacts will have a larger impact on this group in terms of numbers. However, this is a result of the population profile rather than any specific facet of the programme. Any proposed changes will be considered in terms of their impact on people who use services.</p> <p>Any consultation regarding the proposed service change will also include engagement with service users. Any changes to the ways in which service users interact with services will be subject to Customer Journey Mapping approaches, which will include the views of people regarding design and revision. Therefore, any issues relating to this protected characteristic will also be addressed at this stage.</p>
Race	X			<p>93% of people with an open service are White British, 2% BME and White Other, and 5% not known. 94.4% of the population of North Yorkshire were recorded as White British in the last Census.</p> <p>There is no evidence to suggest the proposals will have a negative impact on minority ethnic people; when individuals come into contact with the Service, their needs will be assessed on an individual basis.</p> <p>Arrangements are in place for contacting, informing and supporting minority ethnic/non-English speaking individuals and/or groups. Current arrangements, including interpretation and translation services, will need to be reviewed regularly to ensure that they continue to be fit for purpose.</p>
Gender reassignment	X			<p>There is no evidence to suggest the proposals will impact on individuals with reference to gender reassignment, although national sources suggest that individuals within this protected characteristic are less likely to have extensive familial support and/or networks. When individuals come into contact with the Service, their needs will be assessed on an individual basis.</p>
Sexual orientation	X			<p>There is no evidence to suggest the proposals will impact on individuals with reference to</p>

				their sexual orientation, although national sources suggest that individuals within this protected characteristic are less likely to have extensive familial support and/or networks. When individuals come into contact with the Service, their needs will be assessment on an individual basis.
Religion or belief	X			There is no evidence to suggest the proposals will impact on individuals with reference to their religion or beliefs, but when individuals come into contact with the Service, their needs will be assessment on an individual basis.
Pregnancy or maternity	X			There is no evidence to suggest the proposals will impact on individuals with reference to this protected characteristic, but when individuals come into contact with the Service, their needs will be assessment on an individual basis.
Marriage or civil partnership	X			There is no evidence to suggest the proposals will impact on individuals with reference to their marital/civil partnership status, but when individuals come into contact with the Service, their needs will be assessment on an individual basis.

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			Issues of rurality will be considered in any redesign of the assessment pathway in order to assure equitable service provision across the County.
...have a low income?		X		<p>A stronger preventative and a more professional Reablement assessment should lead to improved outcomes for people, increasing independence and wellbeing and a reduction in the need for ongoing services.</p> <p>People on a low income will not be disproportionately affected by the proposals.</p> <p>People who are just above the benefits threshold are likely to experience positive impact as there should be a reduced need for chargeable services.</p>

Section 8. Will the proposal affect anyone more because of a combination of protected characteristics? (e.g. 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.

There is potential for impact on older, disabled people, particularly women, given the profile of people who access adult social care. However, it is anticipated that impact will be positive, as outlined in section 9 below.

<p>Section 9. 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)</p>	<p>Tick option chosen</p>
<p>1. No adverse impact - no major change needed to the proposal. There is no potential for discrimination or adverse impact identified.</p>	<p>X</p>
<p>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.</p>	
<p>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)</p>	
<p>4. Actual or potential unlawful discrimination - stop and remove the proposal – The EIA identifies actual or potential unlawful discrimination. It must be stopped.</p>	
<p>Explanation of why option has been chosen. (Include any advice given by Legal Services.) It is anticipated that the new Assessment Pathway will improve outcomes for people who come into Adult social care services. The proposals are currently in early development, however have been informed by best practice research; as highlighted above we do not anticipate there to be a negative impact to people who use adult social care services. As the proposal progresses, this EIA will be reviewed and updated.</p>	

Section 10. 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?)

Proposals will include appropriate performance metrics to measure any impact of service change, and will include mechanisms for capturing service user, staff and partner feedback.

Section 11. 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
Agree and finalise model for adult social care services	Anne Marie Lubanski	April 2016	Ongoing	Via Corporate Management Board
Draft restructure proposals	Chris Jones-King	April 2016	Ongoing	Via Assessment Pathway working group
Engagement Events	Chris Jones-King	April 2017	Ongoing	Via Assessment Pathway working group
Co-production events	Chris Jones-King	April 2017	Ongoing	Via Customer working group

Section 12. 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 Assessment Pathway will include a management restructure, which may lead to further revisions in working practice across the County, including line management arrangements. Additionally, the proposed service redesign will reduce management costs and contribute to future savings.

Through this change, the intention is to streamline services, and create a better, more targeted service for eligible client groups.

The Council aims to encourage independence, to maximise individuals' abilities to self-manage and so to prevent and/or reduce the need for social care in the future.

As this change will mainly affect the staffing structure of the service, formal public consultation is unnecessary, although some consultation activity may be considered with regards to partners.

From this initial work there appears to be minimal impact on people with protected characteristics. Any proposals will be applied equally across all customers. As it is an assessed service this will ensure those with a high level of need will still receive the service.

The biggest impact will be on age, as older people are the main users of the service and so this characteristic may encounter a change in service provision. People in rural areas and those on low incomes should not notice a change, but will always be considered in proposals in order to assure equitable service provision across North Yorkshire.

As this project is still in the early developmental stage, this EIA will be reviewed and updated as necessary.

Section 13. Sign off section

This full EIA was completed by:

Name: Chris Jones-King

Job title: Head of Practice

Directorate: Health and Adult Services

Completion date authorised by relevant Assistant Director(signature):

Anne Marie Lubanski

Date: 19th January 2016