Equality Impact Assessment Template

LD Provider Efficiencies Project - part of the LD Efficiencies Programme

If you would like this information in another language or format such as Braille, large print or audio, please contact the Communications Unit on 01609 53 2013 or email communications@northyorks.gov.uk.

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۔

August 2010

Undertaking an Equality Impact Assessment

Equality Impact Assessments (EIA) should be undertaken at the business case stage when:-

- You are developing a new service or policy
- You are reviewing an existing service or policy
- You are proposing a change to an existing service or policy
- You are reviewing a service or policy carried out on behalf of the council or another organisation
- Your service is re-organised.

They should be referenced in your final recommendations on the service changes so that decision makers can reach an informed decision on the service/policy.

An EIA should cover all the social identity characteristics protected by equality legislation – referred to as '**protected characteristics'** or equality strands. These are;

- Sex
- Sexual orientation
- Religion or belief
- Race – this include ethnic or national origins, colour and nationality
- Disability – including carers
- Pregnancy and maternity
- Gender reassignment
- Age
- Marital/civil partnership status

There is a lot of information available to support you in completing this assessment on the EIA pages on the NYCC intranet

Equality Impact Assessments are public documents. Full EIAs accompanying reports going to County Councillors for decisions are published with the committee papers on our website and available in hard copy for people attending the relevant meeting. To make it easier for people to find equality impact assessments the Council will also publish full equality impact assessments on the NYCC website.

Name of the Directorate and Service Area	Health and Adult Services: Procurement, Partnerships and Quality Assurance				
Name of the service/policy being assessed	LD Provider Efficiencies				
Is this the area being impact assessed a	Policy & its implementation?	x	Service?		
	Function		Initiative?		
	Project?	x	Procedure & its implementation?		
Is this an Equality Impact Assessment for a

(Note: the Equality Impact Assessment (EIA) is concerned with the policy itself, the procedures or guidelines which control its implementation and the impact on the users) | Existing service or a policy and its implementation? | | | | |
	Proposed service or a policy and its implementation?				
	Change to an existing service or a policy and its implementation?				x
	Service or Policy carried out by an organisation on behalf of NYCC?				x
How will you undertake the EIA?
Eg team meetings, working party, project team, individual Officer	Project Team				
Names and roles of people carrying out the Impact Assessment	Avril Hunter Commissioning Manager
Mike Bedford, Project Officer
David Firth, Resources				
Lead Officer and contact details	Avril Hunter, avril.hunter@northyorks.gov.uk 01609 536898				
Date EIA started	March 2012				
Date EIA Completed	June 2012 (minor amendments to layout plus update to section 2.4 made 26.10.12)				
Sign off by Assistant Director (or equivalent)	Mike Webster, Assistant Director Procurement, Partnerships & Quality Assurance				
Date of Publication of EIA	26 November 2012				
Monitoring and review process for EIA					

1. Operating Context

Please consider issues around impacts (positive or negative) raised for **all protected characteristics** and show your evidence

1.1 Describe the service/policy What does the service/policy do and how? How would you describe the policy to someone who knows very little about Council Services? If there is a proposal to change the service or policy, describe what it looks like now and what it is intended to look like in the future. What are the drivers for this proposed change? Who does it benefit? What are its intended outcomes? Who is affected by the policy? Who is intended to benefit from it and how? Who are the stakeholders? identify those protected characteristics for which this service is likely to have an impact (positive or negative) Are there any other policies or services which might be linked to this one? Have you reviewed the EIA for these policies/services? What do they tell you about the potential impact? How will the policy be put into practice? Who is responsible for it?	North Yorkshire County Council as a top-tier local authority has a statutory duty in regard to the provision of community care services to individual adults with needs arising from physical, sensory, learning or cognitive disabilities and impairments or from mental health difficulties. This function is carried out by the Health and Adult Services Directorate. (HAS). HAS also manages the Supporting People (SP) function on behalf of the SP partnership which commissions services for a range of vulnerable groups and the partners re the district/borough councils, probation and health as well as NYCC. The Council is transforming its approach to social care support in response to several different drivers, including affordability and financial constraints in the context of increasing demand and reducing resources. It is also implementing the approach to personalisation which means the creation of indicative budgets and personal budgets. The council has a comprehensive approach to ensuring value for money in services that it commissions. In February 2012 a Learning Disability Efficiencies Programme Board was created to bring together several strands of work relating to people with learning disabilities and complex needs. This EIA focuses on one project within the programme, the LD Provider Efficiencies project. The Council spends £28 million with 30 providers in providing services and a number of issues have been brought together to address the commissioning approach to a number of services. It has been found, for example, that services charge a widely varying range of hourly rates for services and that there are different approaches to the treatment of voids. Linked to the above, the project will also review the charging system; some supported living services have an element of SP funding contributing towards the total cost of the service. SP has a different charging policy and means that people are subject to different charging mechanisms which can affect the contributions that they are assessed to pay. The aim of the review is to rationalise this and place it on a more equitable footing. This project is linked to the other projects in the LD Efficiencies Programme and also the Domiciliary Care Project which identified the need to address the issue of provider rates in

learning disability services in the End of Stage Report. It was agreed that this work would transfer to this project.

The main outcomes expected of the project are:

- To achieve consistency of hourly rates for supported living and domiciliary care services both for current service and future services

- To develop a model for assessing support required in supported living

- To integrate the administration of SP funding that is included in individual packages of support

- To analyse and develop a consistent approach with respect to the treatment of voids in supported living

The expected outcomes of the project are:

Provider Efficiencies

It is expected that there will be an impact on the hourly rates that are charged for support. In most cases, this is expected to reduce the cost of overall packages of support but in some cases it may mean an increase. Initial analysis has shown that there is a wide variance of hourly rates both between providers and within providers. This has been benchmarked against other areas and it has indicated that some costs are significantly higher and some are lower than benchmark. There will be a reduction in the administration required for both providers and commissioners as there will be more consistency of costs across the sector.

A number of models are being assessed to use in providing an equitable framework for assessing costs.

Integration of SP funding
North Yorkshire has a locally ring fenced budget for "Supporting People" which is for commissioning housing related support services for a range of vulnerable groups. These are preventative housing services for older people such as community (warden) support and lifelines, refuges and other temporary accommodation for women experiencing domestic abuse and homeless families, housing pathways for young potentially homeless young

people, homeless prevention services for single vulnerable people, people at risk of offending and gypsies and travellers. Short term services are non-chargeable. Longer term services are chargeable and these principally affect older people and people with learning disabilities.

The SP budget contributes to services for people with learning disabilities, £1.54m for Camphill communities and £3.3m for other supported living services. There are 360 individuals, 128 in Camphill and 232 others with some element of their care and support package receiving funding through this route.

Historically, some people with learning disabilities in supported housing were granted funding through Supporting People, until the funding stream ended. If an individual was granted funding through SP and they got Housing Benefit then they automatically got the support charge paid. There are still individuals to whom this applies; however, other people with learning disabilities in supported housing with similar needs where all the funding is though HAS are subject to the HAS Fairer Contributions policy.

In other words, where the SP funding covers all the care and support, those individuals are therefore not subject to a Fairer Contributions Assessment and also therefore are not in receipt of a benefits check.

People who are in supported living services with no SP element to the funding package are being assessed against the full cost, whereas those with an SP element are assessed only against the NYCC element.

The services that are provided are the same, it is only the difference in the historic funding source that is creating the difference in charging arrangements.

The proposal is that with the integration of the SP element of funding, people would be assessed against the whole charge.

There will be some people who will therefore end up paying a contribution who do not so at the moment or whose contribution will increase. The people that will be affected are those whose income means that they would be assessed as being able to pay an amount towards their support and whose NYCC element of the cost is less than their assessed charge.

1.2 How do people use the policy/service?	The key services that this project will address are supported living or domiciliary care in the community for people with learning disabilities.
How is the policy/service delivered? How do people find out about the policy/service? Do they need specialist equipment or information in different formats? How do you meet customer needs through opening times/locations/facilities? Can customers contact your service in different ways? How do you demonstrate that your service/policy is welcoming to all groups within the community?	This will be people living in their own homes, in supported living services. Residential services are not affected.

People access these services via the assessment process, through which eligibility and need is established, and a support plan put in place.

All people accessing social care will have the same customer pathway (as per appendix 2). As part of this pathway the Council undertakes an individual assessment of need and then determines eligibility to support as defined by the Fair Access to Services Criteria (FACS)*. |
| Does the policy/service support customers to access other services? Do you charge for your services? Do these changes affect everyone equally? Do some customers incur greater costs or get 'less for their money'? Are there eligibility criteria for the service/policy? | *As updated by the "Prioritising Need" Guidance (Prioritising Need in the context of Putting People First: a whole system approach to eligibility for social care - guidance on eligibility criteria for adult social care, England 2010)*

To maintain our eligibility criteria and therefore maintain good access to social care support, particularly to be able to provide appropriate support for people at 'substantial' and 'critical' levels, we need to ensure that resources are distributed fairly to meet eligible needs now and in the future by using the same customer pathway for all adults. |
| How do you ensure that staff/volunteers delivering the service follow the Council's equality policies? Does the Council deliver this policy in partnership or through contracts with other organisations? How do you monitor that external bodies comply with the Council's equality requirements? | Everyone in receipt of services is subject to a financial assessment through the Fairer Contributions policy. |

2. Understanding the Impact (using both qualitative and quantitative data)

Please consider issues around impacts (positive or negative) raised for **all protected characteristics** and show your evidence

2.1 What information do you use to make sure the service meets the needs of all customers?	Using information available from AIS, the social care database, we have analysed the profile of service users by protected characteristic (see below).

What data do we use now? Is it broken down across protected characteristics (and are these categories consistent across all data sets)? How current is the data? Where is it from? Is it relevant? What engagement work have you already done that can inform this impact assessment? Who did you talk to and how? What are the main findings? Can you analyse the results of this consultation across the protected characteristics? Are there differences in response between different groups? How has this changed the plans for the policy/service?	We have also used information on funding arrangements to identify those in receipt of some SP funding. There are 1,236 people with learning disabilities receiving services that may be subject to scrutiny through this project. Of those 1,236, there are 274 people who are in receipt of some SP funding. The detailed breakdown by protected characteristic has not been included as there are some very small numbers and individuals may be identifiable.
2.2 What does the information tell you? Are there any differences in outcome for different groups e.g. differences in take up rates or satisfaction levels across groups? Does it identify the level of take-up of services by different groups of people? Does it identify how potential changes in demand for services will be tracked over time, and the process for service change? **Please include data and analysis as an appendix**	**Overall LD Provider Efficiencies Project** Disability (people with learning disability) Positive: that services will be challenged to provide better value for money. Therefore people on personal budgets will benefit from reduced costs for the same level of service. Negative: There is a risk that inappropriate changes to services are made in the interest of efficiencies without due regard to assessed needs. Age: We have not identified any impact on this from this project. Gender: We have not identified any impact on this from this project. **Integration of SP Funding** Disability Positive: That service providers will have to spend less time on administration and will spend more time on developing quality of services. That the service users who will become subject to a financial assessment will have access to the benefits maximisation service. Negative: That a maximum of 274 service users may face an increase in their financial contribution. These are likely to be the service users with higher rate DLA.

The changes in the Welfare Reform Act, in particular the change from DLA to PIP, may affect individuals' financial situation but the details of this are not yet known. Watching brief to be kept.

Age: the age profile for the group of people potentially affected is older than the whole group of people with LD receiving services in the community. 58% are over 35 compared to 44% of the wider group and 20% are over 60, compared to 13% of the wider group. This is because the services that are affected by this were set up between 5 and 10 years ago when there was SP funding available.

	Wider group	In receipt of SP
18-34	22.3%	42.80%
35-59	57.70%	43.80%
60+	20.10%	13.40%

Gender: the gender profile for the group of people potentially affected is 58% male and 42% female and is broadly the same as the whole group of people receiving services in the community.

Both Efficiencies and integration:

Ethnicity:

93.4% White, 2.2% BME, 4.5% not known/not stated,

The majority of service users are White British, which is reflected in the current profile of service users overall. We have not identified any impact on ethnicity from this project.

Gender reassignment (Trans): We do not have data on the trans gender status of people accessing social care services as this information is not currently collated, although we do know that we have a small number of Trans people accessing support overall (eg all HAS services). We have not identified any impact on this from this project.

Religion/Belief: North Yorkshire's majority religion is Christian, with a higher proportion of

	people self-declaring as Christian than the national average. In a review of access to social care services conducted in 2009, it was noted that people of Christian faiths are represented roughly in accordance with the wider demographics of North Yorkshire. We have not identified any impact on this from this project.
	Pregnancy/Maternity: We have not identified any impact on this from this project.
	Sexual Orientation: We do not have data on the sexual orientation of people accessing social care services as this information is not currently collated, although we do generally apply the Stonewall estimate of 5-7% of the population. We have not identified any impact on this from this project.
	Marriage and Civil Partnership: We have not identified any impact on this from this project.
2.3 Are there areas where we need more information? How could we get this information? What data is available? Do other directorates, partners or other organisations hold relevant information? Is there relevant information held corporately e.g. compliments and complaints? Are there national datasets that would be useful? Is there relevant census data? Do you need to collect more data? How could you do this? Do you need to do more engagement work to inform this impact assessment? Have you identified information in other sections of this EIA that you need to assess the impact on different groups of people? What do you want to find out? Which existing mechanisms can you use to get this information? Please refer to the Community Engagement toolkit on the NYCC intranet	The information does not exist to give a comprehensively forensically accurate view of the impact across the county. However, using a sample of 77 people in services, it is estimated that of the people that could be affected (274), it is likely to affect up to 150 using the pattern of service packages from the sample. This estimate is based on service packages where the NYCC element of services with SP funding is less than £75.00. What this estimate cannot take into account is the level of assessed charge. A reasonable guess however would be that of those 150, no more than 50% (i.e. 75) would have an assessed charge that would mean they are at detriment. In order to get the actual level of impact, Financial assessments would need to undertaken for all the individuals that will be affected by the proposal.
2.4 How will you monitor progress on your	

| **policy/service, or take-up of your service?**

 What monitoring techniques would be most effective? What performance indicators or targets would be used to monitor the effectiveness of the policy/service? How often does the policy/service need to be reviewed? Who would be responsible for this? | |

3. Assessing the Impact

Please consider issues around impacts (positive or negative) raised for **all protected characteristics** and show your evidence.

| **3.1 Has an adverse impact been identified for one or more groups?**

 Has this assessment shown anything in the policy, plan or service that results in (or has the potential for) disadvantage or discrimination towards people of different groups? Which groups?

 Do some needs/ priorities 'miss out' because they are a minority not the majority? Is there a better way to provide the service to all sections of the community? | In terms of protected characteristics, the group most affected will be disabled people, specifically those with learning disability.

 LD provider efficiencies:

 Positive: That services will be challenged to provide better value for money. Therefore people on personal budgets will benefit from reduced costs for the same level of service.

 Negative: There is a risk that inappropriate changes to services are made in the interest of efficiencies without due regard to assessed needs.

 Integration of SP funding:

 Overall, the policy should deliver a more equitable approach to funding for support by removing an historical inequity.

 For a number of people affected by the removal of this funding, there should be little to no actual change, depending on the individual's financial assessment.

 However, there is potential for negative impact for those people that are in receipt of higher-rate DLA, as they will have a higher contribution to make themselves where previously they did not. |

	Positive: That service providers will have to spend less time on administration and will spend more time on developing quality of services. That the service users who will become subject to a financial assessment will have access to the benefits maximisation service.

Negative: That a maximum of 274 service users (likely to be in the region of 75-150 people) may face an increase in their financial contribution. These are likely to be the service users with higher rate DLA.

Age: Of the people affected by the removal of SP subsidy, the age profile is slightly older than the wider group of people with learning disability. |
| **3.2 How could the policy be changed to remove the impact?**

Which options have been considered? What option has been chosen? | **Transitional protection could be put in place to mitigate any increased charges.** This could be the same as that provided when the Fairer Contributions policy was implemented at 12 months. People affected could be informed with a long notice period in order to prepare for the change.

For mitigation; people could end up paying up to £60 more per week.   People in receipt of Higher rate DLA more likely to be affected.

Against mitigation: the majority of people in supported living services are being assessed against the full charge of the service. It is a historic anomaly that people with SP funding are being charged with a different system.

Protection for the life of the service: individuals could be protected for the life of the service

For mitigation: people could end up paying up to £60 more per week

Against Mitigation: the majority of people in supported living services are being assessed against the full charge of the service. It is a historic anomaly that people with SP funding are being charged with a different system

Recommendation that transitional protection be put in place in line with the Fairer Contributions policy i.e. 12 months with people affected being informed with a long notice period in order to prepare for the change. |
| **3.3 Can any adverse impact be justified?** | If there is any adverse impact following financial assessment and transition period, this can be |

If the adverse impact will remain, can this be justified in relation to the wider aims of the policy or on the grounds of promoting equality of opportunity for one target group? **Please seek legal advice on whether this can be justified.**	justified for this group on grounds of equity with similar service users. Service users who are in services where there is not a contribution towards the care and support package are assessed through Fairer Contributions for the full cost of the service.
3.4 Are you planning to consult people on the outcome of this impact assessment? When and how will you do this? How will you incorporate your findings into the policy?	It is judged that there is no requirement for consultation with the individuals concerned as this policy change is bringing the services in line with the Fairer Contributions Policy which has already gone through a process of consultation and has been approved.
3.5 How does the service/policy promote equality of opportunity and outcome? Does the new/revised policy/service improve access to services? Are resources focused on addressing differences in outcomes?	The policy promotes equality of outcome for all individuals who are in supported living services by making the financial assessment process the same for individuals irrespective of whether there is an element of former SP funding as part of their support package.
Don't forget to transfer any issues you have identified in this section to the Equality Action Plan	

Action Plan

What are you trying to change (outcome)?	Action	Officer responsible	Deadline	Other plans this action is referenced in (e.g. Service Performance Plan, work plan)	Performance monitoring
Integration of SP funding into individuals package of support	HASMB Approval	AH	Sept 2012	LD Efficiencies Programme Board SP Service Plan	
	Inform potentially affected individuals of the change	AH	Sept 2012	LD Efficiencies Programme Board SP Service Plan	
	Liaise with HAS Brokerage staff and Benefits and Assessments officers to affect the administration	AH	By March 2013	LD Efficiencies Programme Board SP Service Plan	