

Equality Impact Assessment for Service changes / Budget proposals



WHAT IS AN EIA?

An EIA is a tool which will help you assess whether there are any positive or negative equality impacts on people affected by proposed changes. This EIA form is for use in two circumstances (service changes and budget proposals):-

- (a) Service change involves redesigning or reshaping, (and in some cases the removal of) current service provision – whether directly provided by Council officers or commissioned by the Council for provision by an external provider.
- (b) Budget proposals should arise from service changes that you are considering throughout the year in light of the current financial climate. The EIA for budget proposals should cover the same issues as considered for service changes.

Our public sector equality duty requires us to ensure that we do not discriminate against any protected group or person with protected characteristics (see below) covered by the Equality Act 2010 when taking decisions that affect them. Potential negative impacts that we disregard or ignore could mean discrimination. We also have a duty to actively promote positive impacts that advance equality of opportunity. The protected characteristics covered by the Equality Act 2010 are:

- Age
- Disability
- Gender reassignment
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation.

The EIA template has a series of questions that you need to answer in order to identify any positive or negative equality impacts arising from the work you are doing. If there are negative impacts, this does not mean we cannot go ahead. Decision makers must have “due regard” to the findings and consider (if they do decide to go ahead) whether any mitigating actions can be taken to address negative impacts.

WHY IS AN EIA REQUIRED?

An EIA helps us assess whether we are meeting our public sector equality duty: eliminating discrimination and promoting equality of opportunity.

For example: Providing equality of access to services or other opportunities (such as employment related issues) because of barriers some groups may experience which may not be in place for others (language, information, or location).

The action plan identifies what steps we can reasonably take as a consequence of the EIA findings.

An EIA also enables us to identify where we do not have the data or information necessary to equality impact a decision. The EIA action plan enables us to map out how and when this data gap will be addressed.

WHEN DO WE NEED AN EIA?

The first thing to do is to assess whether there is any equality impact. This can be done by filling in a **screening questionnaire** as soon as you start your project/report. Answer the screening questions in order to determine whether an EIA is needed.

HOW IS AN EIA CARRIED OUT?

Before you start: If you are not sure whether you need to do an EIA, fill in the screening questionnaire to determine whether you need to complete one. The screening questionnaire is not obligatory, but will help.

What to do: When an EIA is required:

Step 1 The proposal

This part is at the start of the planning process. It sets out the service user profile, the proposed change to the service, and potential equality impacts arising as a result of the proposal.

Step 2 Consultation

This part highlights the outcome of consultation with service stakeholders about the service change proposal and likely equality impacts.

Step 3 The recommendation

The final part of the EIA identifies any changes made to the original proposal in Step 2 as a result of consultation and further consideration.

Completing the form requires you to consider the impact on **service users**, with the exception of a single question about staff. In order to assess the equality impact of staffing changes, complete the separate **EIA template for organisational reviews** which presents the 'before' and 'after' staff profiles of services affected.

NB Any Actions you identify through completing this EIA, you must add to the Action Plan at the end.

Equality Impact Assessment for service changes / budget proposals

Name of service	Older Persons Mental Health Day Services (Martin House and Visamo)
Lead officer and Contact details	Swarsha Bhalla
List of other(s) involved	Equality officer: Irene Kszyk Finance officer: Stuart McAvoy

What is this EIA about?

(Please tick✓)

Budget proposal for existing service or service contract to achieve savings	√
Budget proposal for new or additional service expenditure	
Commissioning a new service or service contract	
Changing or removing an existing service or service contract	√

Step 1: The proposal (how you propose to change the service)

Question 1:

<p>What is the proposal/proposed change?</p> <p>It is proposed to change the focus of in house day services aimed at providing more choice and control for people in line with the personalisation agenda. Adult Social Care services are changing and people who meet the eligibility criteria are now given a personal budget so that they can buy services directly from a range of providers. The direction of travel was set out in the Putting People First concordat (2007) and was re-iterated in the Coalition Governments vision for Adult Social Care 'Capable communities and Active Citizens'.</p> <p>Existing internal day services need to change as they do not meet people's aspirations about living independently as reflected in national research. This reflects local feedback as well.</p> <p>Department of Health Vision for Adult Social Care</p> <p><i>'Individuals not institutions take control of their care. Personal budgets preferably as direct payments are provided to all eligible people'.</i></p> <p>Putting People First also emphasises the need for change.</p> <p><i>' The current model of focusing day-time support in day centres and traditional home care services needs to shift to a much wider range of opportunities'.</i></p> <p>Personalisation recognises that the menu of day services currently provided or commissioned by Councils offers limited choice. They do not offer flexibility in that they run at the same time each day, from Monday to Friday.</p> <p>For a variety of reasons, fewer people are using in house day care than ever before. From</p>
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January 2011 to January 2013, the number of service users receiving an in house service for older people's mental health fell by 68% in Martin House and 39% at Visamo. People have made other choices, such as taking up places in a voluntary sector day service, and a small number have taken up a direct payment. Customers are finding that they can buy more hours of service with their personal budget from voluntary sector day service than from an in house service. There is also a wider range of day services available externally.

The changes on how people choose to spent their personal budget means that services at Martin House and Visamo have become operationally unviable. They therefore offer poor value for money for the Council.

The current day services are limited in the extent to which they can respond to individual choice, and can be inflexible in the way they operate. They offer set opening hours, and do not cater for activities in the evenings or weekends. They also struggle to provide many activities outside of the building. They can tend to limit the independence of some individuals, in that they focus on the group of attendees as a whole

The Council is considering going out to statutory consultation about the future of its in house day services for Older People Mental Health Services. Martin House has predominately white service users attending. Visamo is predominately attended by Asian elders and the service is attached to Herrick Lodge residential care home.

The following is the Consultation proposal:

The council is proposing to stop running Martin House and Visamo.

After the consultation, and if the proposed change is agreed, a social worker from the council would review the needs of people affected and would support them to find other services that suit them.

There are also vacancies within our current block contracts within the Voluntary Sector for Older People and Mental Health day services for those who prefer a traditional service and which are culturally appropriate to meet the needs of service users. This would also support the further development of services provided by the Voluntary Sector.

Many Councils across the country have undertaken stakeholder consultation exercise as part of considering the approach to reshaping services for Mental Health. Examples include Birmingham City Council, Leeds City Council and Leicestershire County Council.

Who will it affect and how will they likely be affected?

There are currently 35 service users attending OPMH in house day service, age ranging from 72 to 92 years of age.

Martin house 13
Visamo 22

The population of Leicester is ageing. It is expected to rise by 24% by 2025. Prevalence rates suggest that there are 2,631 people with Dementia.

Question 2:

What is the equality profile of current service users?

Establishment	Ethnicity	Age	Religion	Gender
Martin House	White British 63% White other 6% Black 19% Asian British 6% Dual 6%	71 years and over 100%	Christian 83% Other 17%	Female 8 Male 4
Visamo	Asian (Indian) 93% Asian (Pakistani) 7%	Under 71 years old 17% 71 years and over 83%	Hindu 67% Muslim 29% Sikh 4%	Female 16 Male 6

Service users have 100% mental health issues with 41% diagnosed with Dementia

Do you anticipate any changes to your service user profile as a result of your proposal/proposed change? If yes, how will it change?

No.

What are the main service needs and/or issues for those receiving the service because of their protected characteristic?

	Service needs and/or issues by protected characteristic
Age	Services need to offer older people the opportunity for social inclusion and remain as independent as possible.
Disability	Services that can meet their mental health needs i.e. Dementia
Gender reassignment	Not known
Pregnancy and maternity	Not applicable
Race	To allow for services to be culturally appropriate and person centred
Religion or belief	To allow for services to take into consideration peoples varying religious beliefs
Sex (gender)	To take into consideration gender differences and differing needs.
Sexual orientation	To take into consideration sexual orientation differences

Question 3:

Will the proposal have an impact on people because of their protected characteristic? Tick the anticipated impact for those likely to be affected and describe that impact in the questions 4 & 5 below.

	No impact ¹	Positive impact ²	Negative impact ³	Impact not known ⁴
Age		√		
Disability		√		

¹ The proposal has no impact (positive or negative) on the group sharing a protected characteristic.

² The proposal addresses an existing inequality experienced by the group sharing a protected characteristic (related to provision of services or facilities).

³ The proposal disadvantages one or more of the group sharing a protected characteristic.

⁴ There is insufficient information available to identify if the group sharing a protected characteristic will be affected by the proposal.

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	No impact ¹	Positive impact ²	Negative impact ³	Impact not known ⁴
Gender reassignment				√
Pregnancy and maternity	√			
Race		√		
Religion or belief		√		
Sex (gender)		√		
Sexual orientation				√

Question 4:

Where there is a positive impact, describe the impact for each group sharing a protected characteristic. How many people are likely to be affected?

For the 34 service users in Older Personal Mental Health services (over 65years old), future provision will be closer to where they live and culturally appropriate. A number of options are available in the Voluntary and Independent sector that is culturally appropriate and which people can access using a Direct Payment or Personal Budget.

Question 5:

Where there is a negative impact, describe the adverse impact for each group sharing a protected characteristic. How many people are likely to be affected?

Proposal: To review customers' needs who are currently using Visamo and Martin House Day services and support them to find other services that meet their needs.

The change of day care settings will have an impact on clients, who are all over 65 year of age, with 58% suffering from some level of Dementia. All 34 users have some level of mental health capacity.

Over 60% of the users are from an Asian background.

How can the negative impact for each group sharing a protected characteristic be reduced or removed?

Person centred approach plans will entail working closely with families, carers and professionals. 1:1 interviews will be carried out exploring and addressing their individual needs.

The case studies below illustrate how a personalised approach provides a better situation for the customer.

National Case Study

Mrs N is a 97 year old woman of Hindu religion. She speaks Gujarati and needs an interpreter to help with communication. She suffers from short term memory loss. Before moving onto a personal budget she did not feel her services were tailored closely enough to her cultural needs. Mrs N now receives a personal budget which she takes as a direct payment and her granddaughter helps her to manage this. She employs a Gujarati speaking personal assistant. The personal assistant accompanies Mrs N to the shops and helps her cook fresh vegetables. She also attends an Asian day centre, where she meets friends from a similar background. She also uses some of her money to visit family members in other parts of London.

Mrs C has experienced significant mental health issues throughout her life. She had lost confidence and had not left the house for 12 years. She also needed help with her personal care. Her daughter lived next door, but caring for her mum was placing a lot of pressure on her, as she also had to work full-time. With help from the Council, she took on a personal assistant to help build her confidence to go out again. Mrs C was nervous at first, because she thought it just wouldn't work. After a while she found the right kind of support worker, and gradually her confidence grew. They're now out and about, and not just locally. Mrs C is now enjoying trips further afield and particularly enjoys large shopping malls.

Question 6:

Which relevant stakeholders were involved in proposing the actions recommended for reducing or removing adverse impacts arising from the proposal?

Senior officers

What data/information/analysis have you used to inform your equality impact findings?

Information to support this EIA has been taken from the below documents;

Data analysis from:

- Our Health Our Choice Our Say 2008
- Putting People First 2007
- Think Local Act Personal 2011
- Joint commissioning Strategy for Mental Health
- Dementia Strategy

Supplementary information

Question 7:

Is there other alternative or comparable provision available in the city? Who provides it and where is it provided?

There are approx. 22 organisations that provide day care services in the City, provided by the Independent and Voluntary Sector. There are currently 64 weekly vacancies with blocked commission services. Additionally a web facility is in place for the city and county called 'Choose my support'. This enables people to purchase support for example through a PA. As people are assessed onto personal budgets, some people are likely to exercise their right to choose these services.

There are also a number of organisations in the Independent sector that provide culturally appropriate day centre.

Can this alternative or comparable provision help reduce or remove the negative impacts identified in Question 5? If not, why not?

Alternative services are culturally appropriate and provide services within their own local communities. This will help reduce the travelling time service users experience when accessing current services.

Would service users negatively affected by the proposal be eligible to use this alternative or comparable provision? Would it meet their identified needs?

Yes. The majority of services users affected by the proposals are from the Asian (Hindu)

background where we have a number of alternative providers who are able to provide culturally appropriate services locally.

Question 8:

Will any particular area of the city be more affected by the proposal than other parts of the city? What area and why?

The current provision for OPMH operates from;

Martin House – Knighton Ward
Visamo – Latimer

Alternative services are based within the City and depending on the outcome of personal centre plans; options for consideration are located in the Castle, Belgrave and Latimer area.

Question 9:

Is it likely that there may be other sources of negative impacts affecting service users over the next three years that need to be considered? What might compound the negative effects of this proposal? Describe any additional negative impacts over time that could realistically occur.

Through Personalisation, the introduction of personal budgets and direct payments has the potential of seeing day services attendee numbers depleting. The option for merger may lead to people having to move twice. Over time as the numbers reduce, the potential for closure becomes greater. Services become financial unviable and providing a meaningful service to the user is not achieved.

Question 10:

Will staff providing the service be affected by the proposal/proposed changes? If yes, which posts and in what way?

There are currently 17 members of staff employed across both day centres. Should the proposal be approved staff will be subject to review. Full engagement with HR and Unions will ensure a fair and equitable process is undertaken with due regard to all employment law and equalities legislation.

Current data:

Gender	Ethnic origin
Female: 15 Male: 2	Black other 2 Black Caribbean 2 White British 2 British other 2 Asian 9

Date completed

NB Any Actions you identify through completing this EIA, you must add to the Action Plan at the end.

Step 2: Consultation on the proposal

Question1:

**What consultation on the final proposal has taken place?
When, where and who with?**

Consultation period: 11 March to 9 June 2013

Letters were sent to all service users attending Martin House and Visamo plus their carers along with the following documents:

- A booklet explaining why we need to change the way we run our day services for older people with mental health.
- Answers to frequently asked questions (FAQ's).
- Details of meeting with service users and their carers/families could attend to talk through the proposal.

Individual one-to-one interviews were offered to all service users and carers. A questionnaire was developed to find out people's views about the proposal affecting Martin House and Visamo. A paper copy of the questionnaire was made available at both the day centres and copies were available at the consultation meetings. The purpose of the one to ones was to complete the questionnaire in a private setting, address individual concerns and issues about the proposal for change. Other recipients of letters were advised about the availability of the questionnaire only on their thoughts about the proposal electronically on the Councils public website.

A programme of meetings was set up at both day centres to meet service users and carers/families. The format for these meetings involved providing an explanation of why the Council needs to change the way it delivers services to older people with mental health in the city.

A generic e-mail address – dayservices@leicester.gov.uk was set up for people to ask questions and submit their comments. Organisations who work with older people mental health were asked to let us know their views on the proposal effecting Martin house and Visamo and to use their networks to ensure that as many people as possible were made aware of the proposal and how they could make their views known.

Provider event was set up on the request of carers during the consultation period. Carers wanted to meet alternative providers of day care and talk through services they provided and begin to understand what other options would be available to them.

Please refer to consultation report for detailed findings.

Question 2:

What potential impacts did consultation stakeholders identify?

The negative impacts perceived by those involved in the consultation were as follows:

1. Negative impact as a result of moving to a new day centre for people with dementia
2. The lack of knowledge or understanding of what is available in the Voluntary and Independent sector
3. The gap in the market for people with Dementia.

Closing both Martin House and Visamo could affect people health and well-being, especially for those with Dementia. Perceived impacts could be poorer standards of care impacting on their health and well-being.

What positive equality impacts were identified? For people with which protected characteristics?

No positive impacts were identified, as the overriding message in the consultation was that people would prefer not to move day centres.

People did begin to understand the difficulty the council was facing and if the decision was made to stop running the day centres could the council notify them in person and support them in finding alternatives.

What negative equality impacts were identified? For people with which protected characteristics?

See above

Question 3:

Did stakeholders indicate how positive impacts could be further promoted? How?

People did not think they would benefit from the proposed change but did accept if change did occur they would wish for the council to support them to find alternative services.

Did stakeholders indicate how negative impacts could be reduced or removed? How?

Negative impacts could be reduced imposing no change or by providing support to service users and carers to find alternative culturally appropriate day services.

Date completed

Step 3: The recommendation (the recommended decision on how to change the service)

Question 1:

Has your recommended proposal changed from the proposal in Step 1 as a result of consultation and further consideration?

Yes No If 'no', go to Question 2.

If yes, describe the revised proposal and how it will affect current service users?
What are the equality implications of these changes? Identify the likely positive and negative impacts of the final proposal and the protected characteristic affected.
How can any negative impacts be reduced or removed?

Question 2:

Are there any actions⁵ required as a result of this EIA?

Yes No

If yes, complete the action plan on the next page.

Date completed

Step 4: Sign-off

This EIA completed by	Name	Signature	Date
Lead officer	Swarsha Bhalla		18/06/2013
Countersigned by Equalities Officer	Irene Kszyk		18/06/2013
Signed off by Divisional Director	Tracie Rees		

Completion - Keep a copy for your records, and **send an electronic copy** of the completed and signed form to the [Corporate Equalities Lead](#) for audit purposes

⁵ Actions could include improving equality information collected or identifying the actions required to mitigate adverse impacts identified in the EIA.

NB Any Actions you identify through completing this EIA, you must add to the Action Plan at the end.

EIA Action Plan

Please list all the equality objectives, actions and targets that result from the Equality Impact Assessment. These should be included in the relevant service plan for performance management purposes.

Equality Objective	Action required	Target	Officer responsible	By when?
Example: To know equality profile of all service users.	Example: collect monitoring data on disabled users (currently not being provided)	Example: To have data for first performance review	Example: Joe Smith	Example: Start collection of data in April 2013
To ensure inclusive communication	Draft communication plan	To agree a detailed consultation approach	Swarsha Bhalla/Angela Hepplewhite	End of January 2013
Ensure equalities needs are fully considered as part of person centred planning	Identify any barriers to current of future provision	Identify any gaps with alternatives provision	Angela Hepplewhite/Swarsha Bhalla	

What to do next?

If this EIA has identified any issues that need to be addressed (such as plugging a data gap, or carrying out a specific action that reduces or removes any negative impacts identified), complete the attached EIA Action Plan to set out what action is required, who will carry it out, and when it will be carried out/completed.

Once your EIA has been completed, (countersigned by the equalities officer/finance officer **and signed off by your Director**) the equality officer will work with you to monitor this action plan.

Officers to contact: Corporate Equalities Lead/Corporate Resources and Support & Adult Social Care, Health & Housing: Irene Kszyk 296303

NB Any Actions you identify through completing this EIA, you must add to the Action Plan at the end.

Children's Services: Sonya King 297738

City Development & Neighbourhoods: Daxa Patel 296674

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