Equality Impact Analysis (EIA)
Resident/Service User

1. Details of function, policy, procedure or service:	
Title of what is being assessed: Progression for people with a Learning Disability (formerly: 'Support for Working age adults') (A&S15)	
Is it a new or revised function, policy, procedure or service? Procedure	
Department and Section: Adults and Health Directorate, Learning Disability Service	
Date assessment completed: Updated October 2020	
2. Names and roles of people completing this assessment:	
Lead officer	Will Hammond (Adults, Communities and Health Programme Lead) Andrew Maskell (Head of Integrated Learning Disabilities)
Stakeholder groups	N/A
Representative from internal stakeholders	N/A
Representative from external stakeholders	N/A
Delivery Unit Equalities Network rep	Will Hammond
Performance Management rep	N/A
HR rep (for employment related issues)	N/A

3. Full description of function, policy, procedure or service:

This work is a continuation and evolution of the previous savings line "R8: Support for Working age adults". The work is based on the principle of 'progression', which is that individuals with a learning disability often have the potential to move to a higher level of functioning if they are given the appropriate care and support. There are several strands of work to achieve this saving, and it will include work with people known to the social care learning disabilities service and those who are due to transition into that service at the age of 25 (from Family Services). The strands are:

- Continuing to review support packages and develop support plans to increase independence, improve wellbeing and reduce costs. Some people will require less support in their current accommodation, while others may move to a different type of accommodation to promote independence and progression. There will also be a focus on supporting individuals to gain and maintain employment.
- Expanding the Shared Lives service within LBB and increasing the number of referrals and placements
- Working closely with providers to ensure that their models of support promote independence and progression
- Utilising technology to promote independence and ensure appropriate levels of care and support. This will include the use of Electronic Call Monitoring (ECM) systems in supported living systems to effectively manage contracts with providers

LBB have a statutory duty to carry out reviews of care plans and ensure that eligible care needs will continue to be met, and this work supports the delivery of this duty. As part of the work,

increased scrutiny will be given to these reviews to ensure that they are effective and robust, with staff given extra support and training in progression-based practice and developing independence for clients. Work will also take place with existing providers of care to ensure that they are delivering value for money and supporting the independence and / or progression of clients. The development of other services and supports, such as Shared Lives, will also contribute to this agenda, by providing alternative forms of accommodation and care that promote independence and improve service uses outcomes.

Clients and their carers / families should benefit from this work, as robust reviews and support plans should increase client independence, ensure that care needs are still being met, and ensure that providers are focussing on improving outcomes for the client. One outcome of a review in support packages could result in individuals being supported into employment, this inevitably has a positive impact upon individuals who are currently unemployed; employment gives them a chance to develop greater independence.

Where more independence-focused care plans are agreed, these will also likely be at a lower cost, either in the short-term or through reducing dependence in the long-term. This will help the authority to ensure financial sustainability and continue to provider other vital services.

<table>
<tr><td colspan="4">How are the equality strands affected? Please detail the effects on each equality strand, and any mitigating action you have taken so far. Please include any relevant data. If you do not have relevant data please explain why.</td></tr>
<tr><th>Equality Strand</th><th>Affected ?</th><th>Please explain how affected</th><th>What action has been taken already to mitigate this? What further action is planned to mitigate this?</th></tr>
<tr><td>1. Age</td><td>Yes ☒ / No ☐</td><td>As described above, this work focusses mainly on clients of a working age (18-64 years old), as shown by the breakdown of current people in receipt of care from the Barnet Integrated Learning Disabilities Service:
<table><tr><th>Age Group</th><th>Number</th></tr><tr><td>18-64</td><td>815</td></tr><tr><td>65+</td><td>149</td></tr><tr><td>Grand Total</td><td>964</td></tr></table>
There may be some disruption, mainly in the short term, to clients and their families, where changes to care packages are agreed. There may also be some dissatisfaction for clients and carers / families where they would prefer to use more traditional forms of care.
However, overall this work is anticipated to impact clients positively by improving independence, supporting individuals in gaining and maintaining employment, and reducing the intrusiveness of care.</td><td>All social worker reviews will continue to be completed in line with the Care Act. They will involve the service user, their carer and families and existing providers. They will continue to take the views of the service user and their carers/families into account and ensure that eligible needs are identified and met where appropriate through the support plan.</td></tr>
<tr><td>2. Disability</td><td>Yes ☒ / No ☐</td><td>All clients affected by this work will have a disability, as they will be a client of the Learning Disability Service.
The assessment of impact in the section above applies equally to this equality strand.</td><td>All social worker reviews will continue to be completed in line with the Care Act. They will involve the service user, their carer and families and existing providers. They will continue to take the views of the service user and their carers/families into account and</td></tr>
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<tr><td></td><td></td><td></td><td>ensure that eligible needs are identified and met where appropriate through the support plan.</td></tr>
<tr><td>3. Gender reassignment</td><td>Yes ☐ / No ☒</td><td>We do not hold data on numbers of clients in this cohort with a gender reassignment. There is no foreseen impact on any client based on gender reassignment</td><td>All social worker reviews will continue to be completed in line with the Care Act. They will involve the service user, their carer and families and existing providers. They will continue to take the views of the service user and their carers/families into account and ensure that eligible needs are identified and met where appropriate through the support plan.</td></tr>
<tr><td>4. Pregnancy and maternity</td><td>Yes ☐ / No ☒</td><td>We do not hold data on numbers of clients in this cohort who are pregnant / mothers. There is no foreseen impact on any client based on these characteristics.</td><td>All social worker reviews will continue to be completed in line with the Care Act. They will involve the service user, their carer and families and existing providers. They will continue to take the views of the service user and their carers/families into account and ensure that eligible needs are identified and met where appropriate through the support plan.</td></tr>
<tr><td>5. Race / Ethnicity</td><td>Yes ☐ / No ☒</td><td><table><tr><th>Ethnic Groups</th><th>%</th></tr><tr><td>White British</td><td>63%</td></tr><tr><td>Asian or Asian British</td><td>12%</td></tr><tr><td>Black or Black British</td><td>11%</td></tr><tr><td>Mixed/Multiple Ethnic groups</td><td>4%</td></tr><tr><td>Any other ethnic group/Refused/ Not Recorded</td><td>9%</td></tr><tr><td>Chinese</td><td>0%</td></tr><tr><td>Not Stated</td><td>1%</td></tr></table>
The reported ethnicities of people in this cohort aligns with the overall demographic of Barnet according to the JSNA.</td><td>All social worker reviews will continue to be completed in line with the Care Act. They will involve the service user, their carer and families and existing providers. They will continue to take the views of the service user and their carers/families into account and ensure that eligible needs are identified and met where appropriate through the support plan.</td></tr>
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<tr><td></td><td></td><td>There is no foreseen impact on any client based specifically on these characteristics.</td><td></td></tr>
<tr><td>6. Religion or belief</td><td>Yes ☐ / No ☒</td><td>We do not report on data on the religion / beliefs of clients in this cohort compared to the population of Barnet and the UK.

There is no foreseen impact on any client based specifically on these characteristics.</td><td>All social worker reviews will continue to be completed in line with the Care Act. They will involve the service user, their carer and families and existing providers. They will continue to take the views of the service user and their carers/families into account and ensure that eligible needs are identified and met where appropriate through the support plan.</td></tr>
<tr><td>7. Gender / sex</td><td>Yes ☐ / No ☒</td><td><table><tr><th>Gender</th><th>%</th><th>Barnet</th></tr><tr><td>Male</td><td>57%</td><td>49.5%</td></tr><tr><td>Female</td><td>43%</td><td>50.5%</td></tr></table>
The proportion of males in this cohort is slightly higher than that of females, despite there being overall more females in the Barnet population as a whole (according to the Barnet JSNA).

There is no foreseen impact on any client based specifically on these characteristics.</td><td>All social worker reviews will continue to be completed in line with the Care Act. They will involve the service user, their carer and families and existing providers. They will continue to take the views of the service user and their carers/families into account and ensure that eligible needs are identified and met where appropriate through the support plan.</td></tr>
<tr><td>8. Sexual orientation</td><td>Yes ☐ / No ☒</td><td>We do not hold data on the sexual orientation of clients in this cohort. There is no foreseen impact on any client based on these characteristics.</td><td>All social worker reviews will continue to be completed in line with the Care Act. They will involve the service user, their carer and families and existing providers. They will continue to take the views of the service user and their carers/families into account and ensure that eligible needs are identified and met where appropriate through the support plan.</td></tr>
<tr><td>9. Marital Status</td><td>Yes ☐ / No ☒</td><td>We do not hold data on the marital status of clients in this cohort. There is no foreseen</td><td>All social worker reviews will continue to be completed in line with the Care Act. They will</td></tr>
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		impact on any client based on these characteristics	involve the service user, their carer and families and existing providers. They will continue to take the views of the service user and their carers/families into account and ensure that eligible needs are identified and met where appropriate through the support plan.
10. Other key groups? Carers Some families and lone parents People with a low income	Yes ☒ / No ☐ Yes ☐ / No ☒ Yes ☒ / No ☐	Many of the clients in this cohort will have a carer. Increases in independence and quality of care for clients could have a beneficial impact for carers in terms of peace of mind and seeing a cared for person achieve better life outcomes. As stated in the 'Age' section, there could be some disruption or dissatisfaction, especially in the short term, for carers who prefer traditional methods of care or are happy with their current provision. In some instances, changes could relate in carers taking a more (or less) active role in the care of the person, which could be seen by them as a positive or negative impact. This will affect families and some lone parents in the ways described above, although there is no reason to suspect that this will be a disproportionate impact based on this characteristic. As social care provision is means-tested, there will be a disproportionate number of people in this cohort with low incomes.	All social worker reviews will continue to be completed in line with the Care Act. They will involve the service user, their carer and families and existing providers. Although other key groups such as lone parent families, people on low incomes or unemployed may be impacted, social workers will continue to take their views and those of their carers/families into account and ensure that eligible needs are identified and met where appropriate through the support plan. These groups will continue to receive information and advice, signposting to support services, assessments and support plans as needed and set out in the Care Act.

Unemployed people	Yes ☒ / No ☐	People with a disability are significantly less likely to be in employment that those without a disability[1], so change will have a disproportionate impact on this group.	
Young people not in employment education or training	Yes ☐ / No ☒	This will not affect people below the age of 18.	

[1] http://researchbriefings.files.parliament.uk/documents/CBP-7540/CBP-7540.pdf

4. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

As set out in section three, overall this should improve the satisfaction of adults with learning disabilities and their carers / families, through increased levels of independence, better care and outcomes.

However, there may be some dissatisfaction, especially in the short term, for carers who prefer traditional methods of care or are happy with their current provision.

5. How does the proposal enhance Barnet's reputation as a good place to work and live?

This supports inclusion of people with (learning) disabilities who are more likely to access mainstream services and support or take a more active role in the community through, for example, employment or volunteering.

6. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

N/A

7. Please outline what measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? *Include information about the groups of people affected by this proposal. Include how frequently the monitoring will be conducted and who will be made aware of the analysis and outcomes? This should include key decision makers. Include these measures in the Equality Improvement Plan (section 16)*

- The department has a complaints procedure and reports on these to committee and internal governance meetings.
- Client satisfaction is measured through an annual survey with the results published and taken to committee.
- Clients' and their carers' views will be taken into consideration as part of standard social work procedures. This is done through the social care reviewing and support planning processes.
- The quality of social work reviews is monitored through the Quality and Learning Framework that includes case audits, supervision and the use of panel to ensure correct decision making on cases.

8. How will the new proposals enable the council to promote good relations between different communities? *Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.*

This supports inclusion of people with (learning) disabilities who are more likely to access mainstream services and support, or take a more active role in the community through, for example, employment or volunteering.

9. How have employees and residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? *Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community. Please refer to Table 2*

As this builds on the standard social work function, and statutory guidance requires that the service user is at the centre of the care planning process and clients and carers are consulted on an individual basis as part of each review, no additional formal consultation is deemed as necessary.

The department takes resident engagement seriously and has an Involvement Board and several forums for residents to give views and influence service delivery.

Overall Assessment

10. Overall impact		
Positive Impact ☒	Negative Impact or Impact Not Known[2] ☐	No Impact ☐
11. Scale of Impact		
Positive impact: Minimal ☒ Significant ☐	Negative Impact or Impact Not Known Minimal ☐ Significant ☐	

12. Outcome			
No change to decision ☒	Adjustment needed to decision ☐	Continue with decision *(despite adverse impact / missed opportunity)* ☐	If significant negative impact - Stop / rethink ☐

13. Please give full explanation for how the overall assessment and outcome was decided.

By virtue of the work targeting working age adults with a learning disability, it will have a disproportionate impact based on age, disability, level of income and levels of employment. Many clients will also have a carer.

We will continue to take into consideration the individual's preferences goals and desired level of support. By reviewing support packages and support plans, we will be able to improve the independence and wellbeing of residents who are of working age and may produce more cost-effective support plans. This will include stepping-down users to less intensive accommodation, stepping-up accommodation where there is a risk of carer breakdown, identifying appropriate day opportunities for those in residential care, supporting individuals in gaining and maintaining employment, utilise care technologies to improve independence and reduce intrusiveness of care, and increasing access to the Shared Lives offering within LBB.

There could be some disruption or dissatisfaction where clients or their carers are happy with their current provision or prefer more traditional forms of care. However, overall, this represents a positive impact for clients with the characteristics mentioned above.

[2] 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

14. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Various	Complete analysis on ethnicity, race and gender proportions within this cohort	To understand whether any of these characteristics are over-represented in this cohort	Will Hammond	Completed 16/10/2019 Updated 1/11/2020

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1st Authorised signature (Lead Officer/Project Sponsor)	**2nd Authorised Signature (Service lead/Project Manager)**
James Mass	**Will Hammond**
Date: 04/11/20	**Date: 04/11/20**