

Improving People's Lives

Equality Impact Assessment / Equality Analysis (Updated Dec 2024)

Item name	Details
Title of service or policy	Inflation Request
Name of directorate and service	Adults Services
Name and role of officers completing the EIA	Natalia Lachkou
Date of assessment	2 nd December 2024

Equality Impact Assessment (or 'Equality Analysis') is a process of systematically analysing a new or existing policy or service to identify what impact or likely impact it will have on different groups within the community. The main aim is to identify any discriminatory or negative consequences for a particular group or sector of the community, and also to identify areas where equality can be better promoted. Equality impact Assessments (EIAs) can be carried out in relation to services provided to customers and residents as well as employment policies/strategies that relate to staffing matters.

This toolkit has been developed to use as a framework when carrying out an Equality Impact Assessment (EIA) or Equality Analysis. **Not all sections will be relevant – so leave blank any that are not applicable**. It is intended that this is used as a working document throughout the process, and a final version will be published on the Council's website.

1.1 Identify the aims of the policy or service and how it is implemented

Key questions	Answers / notes
 1.1 Briefly describe purpose of the service/policy e.g. How the service/policy is delivered and by whom If responsibility for its implementation is shared with other departments or organisations Intended outcomes 	The local authority commission placements and packages of care for people who have been assessed under the Care Act 2014 and have an eligible care and support need. The placement or package of care is arranged and managed by the Strategic Commissioning Hub. The primary objective is to ensure our statutory duties under the Care Act are carried out, whilst ensuring this is undertaken in an approach that is financially sustainable to the local authority.
 1.2 Provide brief details of the scope of the policy or service being reviewed, for example: Is it a new service/policy or review of an existing one? Is it a national requirement?). How much room for review is there? 	It is a statutory requirement to undertake a care and support assessment to anyone who may be deemed eligible for support under the Care Act 2014. It is then the responsibility of the local authority to ensure the eligible support needs identified are met. The placements and support contracts are procured either through framework agreements or spot-purchasing arrangements. The fees paid to providers for these placements and support contracts are subject to annual inflationary reviews.

	The local authorities in the region will work together to share information and plans to ensure a sustainable provider market that delivers both quality and value for money. Due to the differences of each local authority such as size, deprivation levels and economic markets, the fees paid will vary between authorities, but they will access services and support from the same provider market.
1.3 Do the aims of this policy link to or conflict with any other policies of the Council?	No

2. Consideration of available data, research and information

Key questions	Data, research and information that you can refer to		
2.1 What equalities training have staff received to enable them to understand the needs of our diverse community?	All staff are expected to complete the mandatory training on Equality, Diversity and Inclusion.		
2.2 What is the equalities profile of service users?	 The equalities profile against the protected characteristics for those who have been assessed under the Care Act and provided with long term support are as follows: Age: 95% of people supported in nursing care are 65+ but the percentage of people over 65 reduces for residential care (67%) and community care (42%). Sex: 68% of people in nursing care identify as Female. This is higher than the percentage of Female residents of residential care (58%) and those supported by community care (52%). Ethnicity: 85% of people describe their ethnicity as White. The next largest group is those who have not declared their ethnicity at 11%. Disability: 55% of people in nursing care have a physical support need, compared to 34% in residential care and 41% in community care. In relation to learning disability, 		

	only 3% of nursing care of placements have stated this as their primary support reason (PSR), whereas 24% of residential care placements and 32% of people supported in community care. Finally, 27% of nursing placements have stated their PSR as mental health support compared to 22% in residential care and 13% with community care. There is no data held related to gender reassignment, marriage or civil partnership, pregnancy and maternity or religion or belief.
2.3 Are there any recent customer satisfaction surveys to refer to? What were the results? Are there any gaps? Or differences in experience/outcomes?	No
2.4 What engagement or consultation has been undertaken as part of this EIA and with whom? What were the results?	N/A
2.5 If you are planning to undertake any consultation in the future regarding this service or policy, how will you include equalities considerations within this?	This will form part of the public consultation on council budgets.

3. Assessment of impact: 'Equality analysis'

Based upon any data you have considered, or the results of consultation or research, use the spaces below to demonstrate you have analysed how the service or policy:

• Meets any particular needs of equalities groups or could help promote equality in some way.

• Could have a negative or adverse impact for any of the equalities groups

Key questions	Examples of what the service has done to promote equality	Examples of actual or potential negative or adverse impact and what steps have been or could be taken to address this
3.1 Issues relating to all groups and protected characteristics	The commissioning team promotes equality for groups with protected characteristics by ensuring services are inclusive, accessible, and responsive to diverse needs.	No known adverse impact based on this budget growth.
	This includes conducting Equality Impact Assessments, designing culturally appropriate and tailored services, and removing barriers to access.	
	Tenders for new contracts and frameworks will seek assurance from bidding organisations around their compliance to the Equality Act and will exclude those who do not provide this assurance from contracting with the local authority.	
	The commissioning team monitors outcomes to address disparities, supports providers to promote equality and inclusion, and is working towards a coproduction model across all services.	
	By embedding equality at every stage of the commissioning process, the team ensures that everyone receives high-quality, equitable support.	
3.2 Sex – identify the impact/potential impact of the policy on women and men.	In relation to sex, the commissioning team promotes equality by ensuring that services are designed to meet the needs of everyone while addressing any disparities in outcomes.	No known adverse impact based on this budget growth.

	Regular data monitoring ensures that any differences in access or outcomes are identified and addressed.	
3.3 Pregnancy and maternity	In relation to pregnancy and maternity, the commissioning team promotes equality by ensuring services support people who are pregnant or parenting who have support needs eligible for support under the Care Act.	No known adverse impact based on this budget growth.
3.4 Gender reassignment – identify the impact/potential impact of the policy on transgender people	In relation to gender reassignment, the commissioning team promotes equality by ensuring services are inclusive, supportive, and responsive to the needs of transgender and non-binary young people. The team works with providers to ensure policies are inclusive.	No known adverse impact based on this budget growth.
3.5 Disability – identify the impact/potential impact of the policy on disabled people (ensure consideration of physical, sensory and mental health needs/differences)	In relation to disability, the commissioning team promotes equality by ensuring that services are accessible, inclusive, and tailored to meet the diverse needs of disabled people. Many of the services commissioned are focused on meeting a primary support need to ensure services are tailored appropriately to meeting specific health and wellbeing outcomes.	No known adverse impact based on this budget growth.
3.6 Age – identify the impact/potential impact of the policy on different age groups	In relation to age, the commissioning team promotes equality by ensuring that services are tailored to meet people of different ages and the	No known adverse impact based on this budget growth.

	specific needs associated with people of different ages. Services commissioned are defined by services for working age adults (18-64) and older adults (65+). This aligns to the registration of services with the Care Quality Commission. However, services can define their services to meet both people under and over 65. The services commissions are appropriate to the individual in terms of ensuring their health and wellbeing outcomes.	
3.7 Race – identify the impact/potential impact on across different ethnic groups	In relation to race, the commissioning team promotes equality by ensuring services are culturally sensitive and address the specific needs of people from all racial and ethnic backgrounds. The services commission affected by these inflation proposals are checked for their adherence and compliance to the Equality Act when joining the relevant frameworks. The commissioning team will confirm this compliance when undertaking contract reviews of services, which will include seeking feedback from those being supported by the provider.	No known adverse impact based on this budget growth.
3.8 Sexual orientation – identify the impact/potential impact of the policy on	In relation to sexual orientation, the commissioning team promotes equality by ensuring services are inclusive and affirming of all sexual orientations.	No known adverse impact based on this budget growth.

lesbian, gay, bisexual, heterosexual, questioning people	Services are designed to address challenges such as discrimination, stigma, or mental health concerns in relation to maximising their health and wellbeing outcomes.	
3.9 Marriage and civil partnership – does the policy/strategy treat married and civil partnered people equally?	In relation to marriage and civil partnerships, the commissioning team promotes equality by ensuring that services are inclusive and sensitive to the diverse family structures and legal partnerships. The team ensures that commissioned services do not discriminate based on marital or partnership status and that all families are treated equitably.	No known adverse impact based on this budget growth.
3.10 Religion/belief – identify the impact/potential impact of the policy on people of different religious/faith groups and also upon those with no religion.	The commissioning team will commission services that are respectful of religious beliefs and support individuals	No known adverse impact based on this budget growth.
3.11 Socio-economically disadvantaged* – identify the impact on people who are disadvantaged due to factors like family background, educational attainment, neighbourhood, employment status can influence life chances (this is not a legal requirement, but is a local priority).	The commissioning team will seek to promote services throughout the region to meet the full range of economic needs providing choice where possible. Access to services is not impacted by economic status and individuals assessed under the Care Act are means-tested for a financial contribution. However, this will not restrict access to services that meet are designed to meet health and wellbeing outcomes.	No known adverse impact based on this budget growth.

3.12 Rural communities* identify the impact / potential impact on people living in rural communities	In relation to rural communities, the commissioning team will promote the development and access to services needed by people living in rural areas. This includes addressing issues such as geographical isolation, limited local resources, and travel barriers to accessing services, such as education, healthcare, and social care support. Monitoring and addressing the impact of rural isolation on well-being and service access is key to maximising health and wellbeing.	No known adverse impact based on this budget growth.
3.13 Armed Forces Community ** serving members; reservists; veterans and their families, including the bereaved. Public services are required by law to pay due regard to the Armed Forces Community when developing policy, procedures and making decisions, particularly in the areas of public housing, education and healthcare (to remove disadvantage and consider special provision).	The determination of support is covered under the eligibility contained within the Care Act and this will include those who are serving or have served in the armed forces.	No known adverse impact based on this budget growth.
3.14 Care Experienced *** This working definition is currently under review and therefore subject to change:	There are working procedures in place to ensure those transitioning from Children's to Adult Services are managed effectively.	No known adverse impact based on this budget growth.

In B&NES, you are 'care- experienced' if you spent any time in your childhood in Local Authority care, living away from your parent(s) for example, you were adopted, lived in residential, foster care, kinship care, or a special guardianship arrangement.		
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4. Bath and North East Somerset Council Equality Impact Assessment Improvement Plan

Please list actions that you plan to take as a result of this assessment/analysis. These actions should be based upon the analysis of data and engagement, any gaps in the data you have identified, and any steps you will be taking to address any negative impacts or remove barriers. The actions need to be built into your service planning framework. Actions/targets should be measurable, achievable, realistic and time framed.

^{*}There is no requirement within the public sector duty of the Equality Act to consider groups who may be disadvantaged due to socio economic status, or because of living in a rural area. However, these are significant issues within B&NES and have therefore been included here.

^{**} The Equality Act does not cover armed forces community. However, the Armed Forces Bill (which came in on 22 Nov 2022) introduces a requirement to pay 'due regard' to make sure the Armed Forces Community are not disadvantaged when accessing public services.

^{***}The Equality Act does not cover care experienced people. B&NES adopted this group as a protected characteristic in March 2024 alongside over 80 other Local Authorities. Although we have data for care leavers and children/young people who are currently in the care of B&NES we do not have wider data on disadvantage experienced through being in care.

Issues identified	Actions required	Progress milestones	Officer responsible	By when
There is a risk that providers will serve notice on a placement or package due to an insufficient price being paid.	Discussion will take place with all providers (both in groups and individually as needed) to determine risk and consequence of inflationary uplift decisions.	Discussions have already begun and will continue until the work is concluded.	Ian Stenner	April 2024
	An assessment of any notice received will be undertaken to determine impact on individual and ability to find an alternative provider or service to meet needs.			
	Negotiations will take place with providers who provide essential services to seek resolution.			
	Services that close down will be managed through the Provider Failure Policy.			

5. Sign off and publishing

Once you have completed this form, it needs to be 'approved' by your Divisional Director or their nominated officer. Following this sign off, send a copy to the Equalities Team (equality@bathnes.gov.uk), who will publish it on the Council's website. Keep a copy for your own records.

Signed off by: Suzanne Westhead, Director of Adult Services

Date: 05/12/2024