

Equality Impact Assessment

Project or Service Template

Name of the proposal, project or service
Reconciling Policy Performance and Resources (RPPR) 2018/19: Proposed changes to Learning Disability Directly Provided Services

File ref:		Issue No:	
Date of Issue:	June 2018	Review date:	May 2019

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Part 1 – The Public Sector Equality Duty and Equality Impact Assessments (EIA)

1.1 The Council must have due regard to its Public Sector Equality Duty when making all decisions at member and officer level. An EIA is the best method by which the Council can determine the impact of a proposal on equalities, particularly for major decisions. However, the level of analysis should be proportionate to the relevance of the duty to the service or decision.

1.2 This is one of two forms that the County Council uses for Equality Impact Assessments, both of which are available on the intranet. This form is designed for any proposal, project or service. The other form looks at services or projects.

1.3 The Public Sector Equality Duty (PSED)

The public sector duty is set out at Section 149 of the Equality Act 2010. It requires the Council, when exercising its functions, to have “due regard” to the need to

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited under the Act.
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it. (see below for “protected characteristics”

These are sometimes called equality aims.

1.4 A “protected characteristic” is defined in the Act as:

- age;
- disability;
- gender reassignment;
- pregnancy and maternity;
- race (including ethnic or national origins, colour or nationality)
- religion or belief;
- sex;
- sexual orientation.

Marriage and civil partnership are also a protected characteristic for the purposes of the duty to eliminate discrimination.

The previous public sector equalities duties only covered race, disability and gender.

1.5 East Sussex County Council also considers the following additional groups/factors when carry out analysis:

- Carers – A carer spends a significant proportion of their life providing unpaid support to family or potentially friends. This could be caring for a relative, partner or friend who is ill, frail, disabled or has mental health or substance misuse problems. [Carers at the Heart of 21st Century Families and Communities, 2008]
- Literacy/Numeracy Skills
- Part time workers
- Rurality

1.6 Advancing equality (the second of the equality aims) involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristic
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people including steps to take account of disabled people's disabilities
- Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low

NB Please note that, for disabled persons, the Council must have regard to the possible need for steps that amount to positive discrimination, to "level the playing field" with non-disabled persons, e.g. in accessing services through dedicated car parking spaces.

1.6 Guidance on Compliance with The Public Sector Equality Duty (PSED) for officers and decision makers:

1.6.1 To comply with the duty, the Council must have "due regard" to the three equality aims set out above. This means the PSED must be considered as a factor to consider alongside other relevant factors such as budgetary, economic and practical factors.

1.6.2 What regard is "due" in any given case will depend on the circumstances. A proposal which, if implemented, would have particularly negative or widespread effects on (say) women, or the elderly, or people of a particular ethnic group would require officers and members to give considerable regard to the equalities aims. A proposal which had limited differential or discriminatory effect will probably require less regard.

1.6.3 *Some key points to note :*

- The duty is regarded by the Courts as being very important.

- Officers and members must be aware of the duty and give it conscious consideration: e.g. by considering open-mindedly the EIA and its findings when making a decision. When members are taking a decision, this duty can't be delegated by the members, e.g. to an officer.
- EIAs must be evidence based.
- There must be an assessment of the practical impact of decisions on equalities, measures to avoid or mitigate negative impact and their effectiveness.
- There must be compliance with the duty when proposals are being formulated by officers and by members in taking decisions: the Council can't rely on an EIA produced after the decision is made.
- The duty is ongoing: EIA's should be developed over time and there should be evidence of monitoring impact after the decision.
- The duty is not, however, to achieve the three equality aims but to consider them – the duty does not stop tough decisions sometimes being made.
- The decision maker may take into account other countervailing (i.e. opposing) factors that may objectively justify taking a decision which has negative impact on equalities (for instance, cost factors)

1.6.4 In addition to the Act, the Council is required to comply with any statutory Code of Practice issued by the Equality and Human Rights Commission. New Codes of Practice under the new Act have yet to be published. However, Codes of Practice issued under the previous legislation remain relevant and the Equality and Human Rights Commission has also published guidance on the new public sector equality duty.

Part 2 – Aims and implementation of the proposal, project or service

2.1 What is being assessed?

a) Proposal or name of the project or service.

Reconciling Policy, Performance and Resources 2018 – Learning Disability Directly Provided Services

On 6 February 2018, at a full Council meeting, a decision was taken to reduce the Learning Disability Directly Provided Services budget by £1.17m.

Day Services –

- Reduce five day support packages to four days maximum
- Close each day centre for one day a week, accommodating all clients over four days
- Cease extended day service at Hookstead (this is a service which runs until 9pm one day per week as an extension to the day service. It only runs in Crowborough)

Respite Services –

- To not normally exceed 49 respite nights per year per client, unless exceptional circumstances and for a time limited period
- Structure all breaks as weekdays or weekend breaks, with 50/50 split

Community Support Services

- To provide services in future only to people who would be unsafe if support is not provided
- Reduce supported employment service, focusing resources on people leaving day service provision and people who have already found employment and require support
- Retain two Community Support Worker posts to provide outreach respite in the family home – (as a proposed mitigation to the impact of reducing respite services)

Shared Lives/Supported Accommodation

- Reduce staffing levels in Shared Lives by one FTE
- Reduce management of Supported Accommodation/Shared Lives by one FTE

Reduce central management and administration costs

b) What is the main purpose or aims of proposal, project or service?

With less Council funding available, Adult Social Care and Health has had to reduce budgets allocated to directly provided services. Within this context Adult Social Care has sought to protect, as far as possible, statutory services for vulnerable adults. However, it is recognised that a reduction to services may have significant impact on the lives of current and potential clients and carers.

c) Manager(s) and section or service responsible for completing the assessment

Kay Holden, Head of Service

2.2 Who is affected by the proposal, project or service? Who is it intended to benefit and how?

Learning Disability Directly Provided Services provide support to over 600 clients across East Sussex. . Early indications suggest that 58 clients may experience a total withdrawal of their service. A further 158 clients would experience a reduction to the support they receive, 27 of whom would experience a decrease in support from more than one service. Clients who use Learning Disability Day, Respite and Community Support Services, including ChoicES supported employment service, as well as their families / carers may be adversely affected.

On their own each element of the service represents a medium to low risk if the proposals go ahead, however, collectively these services being reduced at the same time could mean a significant gap in service provision. An alternative provision may need to be considered for some people to reduce the impacts on clients, carers and demand on other providers. Without these preventative activities there may be increased reliance on mainstream health services such as Primary Care and Mental Health and may also result in increased levels of social isolation, reduction in aspirations to get paid employment, increased levels of carers' physical and mental ill health.

2.3 How is, or will, the proposal, project or service be put into practice and who is, or will be, responsible for it?

The proposals will go through a process of consultation with the public, clients, families / carers and key stakeholders. Any viable alternative that will realise the same level of saving will be fully considered as part of this process. If Cabinet decide to go ahead, services will be withdrawn or reduced.

A three month notice period will be given to clients and their families / carers to inform them of changes. Each person affected by a change to their service will be offered a review of their support package by Care Management teams, and unpaid carers will be offered a carers assessment or a review of their current one.

The provider will communicate changes to clients and their parents/carers and will work with them to identify action needed, where appropriate.

Options may include:

- information and advice about alternative services where available,
- referral to advocacy services,
- where accessing these services has been part of meeting eligible need, suitable alternatives will need to be found if the reduced service no longer fulfils this requirement

2.4 Are there any partners involved? E.g. NHS Trust, voluntary/community organisations, the private sector? If yes, how are partners involved?

Some of the clients who may be affected by the changes to day service provision live with private sector providers. In these situations, providers may need to offer additional support to fill the gap that may arise if the proposals are agreed.

In addition colleagues from the East Sussex County Council Transport division, Health managers and Care managers have also been invited to take part in the Consultation.

All key stakeholders will be encouraged to put forward alternative, viable proposals as part of this process

The Stakeholders involved are:

- East Sussex County Council Transport
- Community Learning Disability Care Management teams
- Sussex Partnership NHS Foundation Trust
- Avens Limited
- Eastbourne Mencap
- Mencap OpenDoor
- Southdown Housing Association
- Parkgate Manor Residential Home
- Eastview Housing Limited
- Lifeways
- 1066 Housing Association Limited
- Regard Partnership
- Seeability

- Fitzloy Homes
- Tinkers Hatch Limited
- Parchment Trust
- Saxon Court Care Home
- Caring Homes
- Affinity Trust
- Liveability
- Aspens Care

2.5 Is this proposal, project or service affected by legislation, legislative change, service review or strategic planning activity?

The proposals are made as part of ESCC's budget planning process, Reconciling Policy, Planning and Resources for 2018-19.

2.6 How do people access or how are people referred to your proposal, project or service? Please explain fully.

The majority of referrals are made by Care Managers from the Adult Social Care & Health Community Learning Disability Teams, which includes the Transitions service.

Some referrals are made via Care Managers from the generic Care Management teams within Adult Social Care and Health.

2.7 If there is a referral method how are people assessed to use the proposal, project or service? Please explain fully.

All assessments are made in accordance with the Care Act 2014.

Care managers will carry out an assessment of needs for the individual. Clients must meet the eligibility criteria for services: be eligible for ASC funding and have a learning disability to access a service.

Care managers complete a referral on behalf of the client and submit this to the relevant service. The service then assesses the referral to ensure it can meet the needs of the client, at which point the service is agreed.

2.8 How, when and where is your proposal, project or service provided? Please explain fully.

Day Services are currently available five days per week from 9am to 4.30 pm. There are four sites: Linden Court, Eastbourne; St Nicholas Centre, Lewes; Hookstead in Crowborough; Hastings and Rother services which operate from Beeching Park in Bexhill and Working Wonders in St Leonards.

Hookstead in Crowborough also provides an extended day service one day per week on Thursday, until 9pm.

Community Support Services offer support to people in their homes across the County. The ChoicES supported employment service is also provided to people across the County.

Respite services are offered from Grangemead in Hailsham and Greenwood in Bexhill. This service provides breaks for parents/carers from their caring role. The number of respite nights is allocated following an assessment of need.

Emergency respite is also provided from Grangemead when a person or their family may be in crisis.

Shared Lives and Supported Accommodation is offered across the County. The staff team sources and supports people to become Shared Lives Carers who offer clients accommodation in their home or in supported accommodation. Available placements are then matched to referrals to find temporary or permanent accommodation for vulnerable people.

Part 3 – Methodology, consultation, data and research used to determine impact on protected characteristics.

3.1 List all examples of quantitative and qualitative data or any consultation information available that will enable the impact assessment to be undertaken.

Types of evidence identified as relevant have X marked against them			
	Employee Monitoring Data		Staff Surveys
X	Service User Data		Contract/Supplier Monitoring Data
x	Recent Local Consultations		Data from other agencies, e.g. Police, Health, Fire and Rescue Services, third sector
X	Complaints		Risk Assessments
X	Service User Surveys		Research Findings
X	Census Data	X	East Sussex Demographics
X	Previous Equality Impact Assessments		National Reports
	Other organisations Equality Impact Assessments		Any other evidence?

3.2 Evidence of complaints against the proposal, project or service on grounds of discrimination.

There are currently no Complaints recorded relating to the proposals. However this may change once the consultation period has ended and ESCC Cabinet’s decision is made on 26 June 2018.

3.3 If you carried out any consultation or research on the proposal, project or service explain what consultation has been carried out.

Learning Disability Directly Provided Services undertook consultation events with clients and parents/carers between 13th February 2018 and 12th March 2018 across the County as follows:

Dates	Type
13 February to 23 rd April 2018	Public consultation period launched. Information available on ESCC website setting out proposals. People were invited to complete surveys with their comments
15 February	Letters and Consultation information packs sent to families/carers and

2018	clients with information relating to the proposals, feedback sheets and invitations to consultation meetings across the County. 500 packs were sent to parents/carers and 500 in easy read format sent to clients
19 February 2018	Letters sent to stakeholders with information relating to proposals and an invitation to a Stakeholder consultation meeting
Week beginning 5 th March 2018	Client consultation meetings organised by Day Services and Community Support Services held throughout the week commencing 5 March. Advocacy Service, POhWER, involved in process. For Respite Services, information was shared and discussed at client meetings regularly held on a Friday and Monday, to capture as many respite users' views as possible
5 March 2018	Families/carers Consultation meeting held in Bexhill
6 March 2018	Families/carers Consultation meeting held in Eastbourne
7 March 2018	Families/carers Consultation meeting held in Bexhill
8 March 2018	Families/carers Consultation meeting held in Eastbourne
9 March 2018	Families/carers Consultation meeting held in Uckfield
12 March 2018	Key Stakeholders Consultation meeting for independent service providers, health colleagues and ESCC Transport colleagues.
w/b 12 March 2018	4 drop-in sessions available for parents/carers
w/b 12 March 2018	3 drop in sessions available for clients led by POhWER advocacy services
23 March 2018	Frequently Asked questions and Comments raised at Parent/Carer events were circulated to all attendees and posted on the ESCC website

Accessible information was made available to clients who were supported by staff within their services to go through and have any questions answered. Information was displayed in services and in the Consultation Pack sent out to parents/carers and clients, and included:

- Easy read Client Consultation pack and covering letter

- Easy read leaflets relating to proposed changes in each service i.e. Day Services, Respite Services, Community Support and ChoicES Employment Services
- Easy read posters giving details of Consultation meetings in each service area
- Easy read posters giving details of Advocacy support and scheduled Advocacy meetings
- Easy read questionnaire/survey for comments relating to the Consultation

In addition, consultation meetings for parents/carers were scheduled to take place both during the day and in the evenings to provide flexibility for people who work during the day or whilst people they cared for were at their daily activities. Meetings were held in a range of venues across the county and parents/carers could choose which event to attend, depending on where they lived or which services people they cared for attended.

3.4 What does the consultation, research and/or data indicate about the positive or negative impact of the proposal, project or service?

Key messages from public consultation

Overall themes

- The majority of family and carers strongly disagree with the proposals, although they are most concerned about the cap for respite nights and the closure of day centres for one day a week.
- Adults living with their families would be hardest hit because of the way the cuts are being done.
- People who use services are sad, concerned and uncertain about the proposals.
- People with a learning disability need structure and routine and any changes are likely to affect their behaviour.
- The proposals would have a significant impact on carers and their ability to have a break, maintain their employment and continue in their caring role.
- The proposals would cause carers and family more stress, affect their health and could affect their mental health.
- Older carers are particularly concerned about how they will manage in future.
- Decisions about which services people can use and how much they need them should be based on individual assessed need.
- Continuity of service is important, so offering alternative provision to meet assessed need

won't work for some people.

- Reducing essential services like day and respite means that some people will have to consider residential care. The cost of residential care will be much higher.
- For all the proposals, clients said the thing that would help them get ready was to be kept updated about the plans.
- People suggested that the Council look make savings in other departments instead or to bring in income from unused properties.

Respite

- People mainly strongly disagree with the proposal to cap respite nights.
- They think it is short sighted and will be more expensive in the long run, as it risks people not coping and families having to consider residential care.
- People say they need, or have been assessed as needing, their current level of respite and say that it enables them to continue in their caring role.
- They are less concerned about the proposal to change the way respite is booked, although some say it would limit their respite options and others say their relative couldn't cope with longer stays.
- Families said the change in their family member's routines would be hard and could have a big impact on their behaviour.
- There is little interest in using the proposed at-home respite service, while people don't think offering single nights at short notice is practical.

Day services

- People generally strongly disagree with the proposals, although a small number of families and clients agree with them.
- People like seeing their friends & staff and taking part in activities and worried about the changes impacting on them, although some clients don't mind staying at home.
- Families said the change in their family member's routines would be hard and could affect their behaviour.
- Organisations and families are concerned that it would be harder to retain good quality staff if they aren't offered full time positions.
- If the proposals go ahead, more thought needs to go into the days the services would close in order to manage routines and link up with respite.

- The day services cuts could affect the cost of living in supported homes or limit the access to activities for those people.

Community Support Service

- Clients aren't happy about the proposal, while families and carers nearly all disagree with it.
- They are worried about being safe at home and in the community without the community support service.
- The changes would impact on people's independence, limit their learning, increase their isolation and impact on their ability to access the community.
- Clients said they wouldn't be able to do, or would forget to do, everyday tasks and would be more isolated.
- It could be more costly in the long term if people aren't able to continue living at home and have to move into residential care.
- People suggested that having some skills training might help them to get ready.

ChoicES

- People were least concerned about the proposals for ChoicES, although some people did say that they need the service to find or keep a job and volunteering opportunity, and a few families were concerned that future access to the service.

Sample quotes

"The people that are targeted by these proposed cuts are vulnerable adults, all with various disabilities. With too many changes, all in one go, the effect of these cuts will be detrimental to them and their carers. The cuts to their services will be very difficult for them to understand and for most, their behaviour will become more challenging and put extra emotional stress on their carers."

"The cuts would affect not just my son and me but all of his extended family who will share his pain as the cuts bite. The cuts are also very short-sighted as they increase the possibility that parents and other carers will not be able to cope in the future which will lead to more expensive outlay by ESCC in the future."

"It would cause indescribable upset and confusion to the person we support, resulting in escalation of behavioural and challenging behaviour."

Part 4 – Assessment of impact

4.1 Age: Testing of disproportionate, negative, neutral or positive impact.

a) How is this protected characteristic reflected in the County/District/Borough?

The overall population of East Sussex is 527,209 (2011 Census data) and is projected to continue increasing over the next few years. The population by age breakdown for East Sussex is

Age	Population
15 – 29	83,791
30 – 34	90,220
45 – 64	147,613
65+	120,722
Total	442,346

Source: East Sussex in Figures 2011

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

The overall number of clients affected by the proposals is 216.

Age	Number of clients
15 – 29	63
30 – 34	69
45 – 64	64
65+	20
Total	216

Clients who can access services are 18+. There is no upper age limit to access services.

4.2 Disability: Testing of disproportionate, negative, neutral or positive impact.

a) How is this protected characteristic reflected in the County /District/Borough?

Residents (working age only) with limiting long-term illness in 2011 by districts (numbers)

Type	All people	People with long-term health problem or disability	Day-to-day activities limited a little	Day-to-day activities limited a lot	People without long-term health problem or disability
Geography					
England & Wales	56075912	10048441	5278729	4769712	46027471
South East	8634750	1356204	762561	593643	7278546
East Sussex	526671	107145	58902	48243	419526
Eastbourne	99412	20831	11209	9622	78581
Hastings	90254	19956	10375	9581	70298
Lewes	97502	19054	10583	8471	78448
Rother	90588	21242	11591	9651	69346
Wealden	148915	26062	15144	10918	122853

b) How is this protected characteristic reflected in the population of those impacted by the proposal, project or service?

Learning Disability Directly Provided Services currently support over 600 people with a learning disability across East Sussex. Some people may have further complexities such as sensory impairment, physical disabilities and other health problems which may impact on them further.

c) Will people with the protected characteristic be more affected by the proposal, project or service than those in the general population who do not share that protected characteristic?

All clients accessing the services included in the proposals have a learning disability or are deemed to be vulnerable. Some people may have further complexities such as sensory impairment, physical disabilities and other health problems which may impact on them further.

People with a learning disability are often unable to access the same opportunities as people without these disabilities. The services affected by the proposals are provided for people with learning disabilities and they will therefore be disproportionately affected.

d) What is the proposal, project or service's impact on people who have a disability?

Clients whose services are withdrawn or reduced may experience a breakdown in community life, increased levels of social isolation and reduced aspirations to get paid employment.

A change in routine may also cause clients anxiety and less opportunity for social interaction and ongoing skills development.

Any changes agreed may also cause clients increased emotional and/ or psychological distress.

There may be an increased reliance on other services for example, mainstream health services such as Primary care and Mental Health.

An increased demand on independent providers (private and voluntary sectors) may be an additional impact, both in their capacity to fill the gap in services and supporting their existing clients' increased demand/needs as a result of the proposals.

e) What actions are to/ or will be taken to avoid any negative impact or to better advance equality?

Following Consultation and if the proposals are agreed by Cabinet:

- Individual reviews of client's support needs will be undertaken for everyone affected by a reduction in service;
- A transition plan is proposed to ensure that all clients experience a consistent level of support from at least one service until April 2019.
- Care Managers, clients and parents/carers will be involved in reviewing the impact on individuals and discussing options (including identifying appropriate alternatives) with a view to revising assessments and support plans, where appropriate.
- Clients will also be able to access advice and information from their Care Managers to explore alternative services
- Clients will be able to access advocacy support where applicable.

f) Provide details of any mitigation.

Please see actions in section (d) above. We will continue to work closely with clients and their parents/carers. Options for addressing negative impact on individuals eligible for services will include:

- Where a client will experience a reduction in day and respite services, the person's current allocation of respite nights will be retained until the end of the financial year (end of March 2019)
- Where a client experiences a reduction in day and community support services, the person's allocation of Community Support hours will be retained until the end of the financial year (March 2019)
- The proposed days of closure for day services will take into account any impact on the carers' respite breaks i.e. clients will still be able to access their respite stays straight from their day service, and return directly to their day service when their weekend respite stay has ended.
- Identifying clients who require a high level of support for whom a reduced support package may not be viable. Where possible new solutions would be sought through the use of Direct Payments which can be used flexibly and clients would be supported to make choices and decisions about available options.
- Clients will be able to access advice and information from their care managers to explore alternative services. Please see appendix 1.
- Providing advocacy services where applicable
- Supporting the communication needs of people with a learning disability during all stages of this process

g) How will any mitigation measures be monitored?

Please see actions in (e) above

The Learning Disability Management Team RPPR group consists of Operations and Practice Managers for each of the service areas included in the proposals and the Head of Learning Disability Services. The group will be responsible for monitoring, analysing and addressing issues from information collected via:

- Enquiries and comments received by the Community Learning Disability Assessment from clients and carers relating to individual support needs, advice and requests for revised assessments
- Feedback and comments from the Consultation process
- Listening to you customer satisfaction surveys
- Complaints

4.3 Ethnicity: Testing of disproportionate, negative, neutral or positive impact.

A disproportionate impact is not expected for this group.

4.4 Gender/Transgender: Testing of disproportionate, negative, neutral or positive impact

A disproportionate impact is not expected for this group

4.5 Marital Status/Civil Partnership: Testing of disproportionate, negative, neutral or positive impact.

A disproportionate impact is not expected for this group

4.6 Pregnancy and maternity: Testing of disproportionate, negative, neutral or positive impact.

A disproportionate impact is not expected for this group

4.7 Religion, Belief: Testing of disproportionate, negative, neutral or positive impact.

A disproportionate impact is not expected for this group

4.8 Sexual Orientation - Gay, Lesbian, Bisexual and Heterosexual: Testing of disproportionate, negative, neutral or positive impact.

A disproportionate impact is not expected for this group

4.9 Other: Additional groups/factors that may experience impacts - testing of disproportionate, negative, neutral or positive impact. –

4.9.1 Carers

a) How are these groups/factors reflected in the County/District/ Borough?

Provision of unpaid care in 2011 - districts

Provision unpaid care	All people	People provide no unpaid care	People provide unpaid care	Provides 1 to 19 hours unpaid care a week	Provides 20 to 49 hours unpaid care a week	Provides 50 or more hours unpaid care a week
Geography						
England & Wales	56075912	50275666	5800246	3665072	775189	1359985
South East	8634750	7787397	847353	577114	96883	173356
East Sussex	526671	467262	59409	39537	6745	13127
Eastbourne	99412	88894	10518	6678	1261	2579
Hastings	90254	80812	9442	5708	1321	2413
Lewes	97502	86001	11501	8000	1197	2304
Rother	90588	79327	11261	7279	1250	2732
Wealden	148915	132228	16687	11872	1716	3099

There are 141 unpaid carers providing support who will be affected by the proposals.

b) How is this group/factor reflected in the population of those impacted by the proposal, project or service?

The proposals will have an impact on unpaid carers as these services are primarily accessed by people with learning disabilities who have carers.

Carers benefit from the services provided to clients as they provide respite, day opportunities, skill building and maintain the clients' wellbeing.

These services currently support carers to fulfil and continue in their caring role and prevent deterioration in their health and wellbeing.

c) Will people within these groups or affected by these factors be more affected by the proposal, project or service than those in the general population who are not in those groups or affected by these factors?

Yes.

d) What is the proposal, project or service's impact on the factor or identified group?

Carers of working age who are employed may be negatively impacted, particularly where clients they care for will receive a reduction to day services from 5 to 4 days a week. This may result in carers not being able to maintain their current employment and potentially experience a reduction to their income.

Older carers may be unable to continue caring full time if services are withdrawn or reduced, as this may impact on their physical and/or mental health and their ability to continue to care for the client.

The proposals may cause additional stress on family environments and family life as a whole. Carers may also have other caring responsibilities for other family members e.g. children or other relatives.

In addition, some carers' services are also facing cuts which could mean multiple impacts on some carers in receipt of these services.

e) What actions are to/ or will be taken to avoid any negative impact or to better advance equality?

Consultation meetings and events have been held with both clients and their carers to discuss the proposed changes, inviting comments and ideas about how savings may be made in alternative ways.

Consultation events have also included Care Managers who have been available to answer any specific questions about individual client's and services.

Following Consultation, if the proposals are agreed by Cabinet:

- Individual reviews of client's support needs will be undertaken for everyone affected by a reduction in service;
- A transition plan is proposed to ensure that everyone experiences a consistent level of support from at least one service until April 2019.
- Care Managers, clients and parents/carers will be involved in reviewing the impact on individuals and discussing options with a view to revising assessments and support plans where appropriate.
- Clients who are eligible for ASC services and funding will also be able to access advice and information from their Care Managers to explore alternative services

Clients will be able to access advocacy support where applicable

f) Provide details of the mitigation.

Please see actions in section (d) above. We will continue to work closely with clients and their parents/carers. Options for addressing negative impact on individuals eligible for services will include:

- All carers who are impacted by the proposals will be offered a review of their current carer's assessment. Those carers who have not yet undertaken a carer's assessment will also be offered one.
- Where there is a reduction or changes to allocations of respite stays, the carer's current allocation of respite nights will be retained until the end of the financial year (end of March 2019)
- As part of the Consultation process, it has been proposed that an Outreach service is set up and developed to mitigate the impact of the reduction in respite and community support services.
- Where a client experiences a reduction in day and community support services, the client's allocation of Community Support hours will be retained until the end of the financial year (March 2019)
- The proposed days of closure for day services will take into account any impact on a Carers' respite breaks i.e. clients will still be able to access their respite stays straight from their day service and return directly to their day service when their weekend respite stay has ended.
- Identifying people who require a high level of support for whom a reduced support package may not be viable. Where possible new solutions would be sought through the use of Direct Payments and Carers and clients would be supported to make choices and decisions about available options.
- Direct payments – which can be used flexibly – may assist carers to retain employment (where appropriate provision is available in the local care market)
- Clients will be able to access advice and information from their care managers to explore alternative services. Please see appendix 1.

g) How will any mitigation measures be monitored?

Please see actions in (e) above

The Learning Disability Management Team RPPR group consists of Operations and Practice Managers for each of the service areas included in the proposals and the Head of Learning Disability Services. The group will be responsible for monitoring, analysing and addressing issues from information collected via:

- Enquiries and comments received by the Community Learning Disability Assessment from clients and carers relating to individual support needs, advice and requests for revised assessments
- Feedback and comments from the Consultation process
- Listening to you customer satisfaction surveys
- Complaints

4.9.2 Rurality

a) How are these groups/factors reflected in the County/District/Borough?

Population by age groups and gender in 2011

Age	All people	0-14	15-29	30-44	45-64	65+
Geography						
England and Wales	56075912	9891138	11183239	11515165	14263297	9223073
South East	8634750	1535168	1604028	1761278	2252256	1482020
East Sussex	526671	84910	83732	90763	147503	119763
Eastbourne	99412	15574	18407	18195	24933	22303
Hastings	90254	15659	17149	17677	24368	15401
Lewes	97502	15832	14854	16907	27755	22154
Rother	90588	13214	12047	13026	26538	25763
Wealden	148915	24631	21275	24958	43909	34142

Areas	Number of clients
Eastbourne	57
Hastings	41
Lewes	42
Rother	27
Wealden	49
Total number of clients	216

- b) How is this group/factor reflected in the population of those impacted by the proposal, project or service?

Map of East Sussex showing rural/urban areas and transport links



The services affected by the proposals are located across East Sussex as follows:

- Day Services – Hastings, Crowborough, Eastbourne and Hastings/Rother
- Community Support Services and Choices – Countywide
- Respite Services – Hailsham and Bexhill on Sea
- Shared Lives and Supported Accommodation – Countywide

- c) Will people within these groups or affected by these factors be more affected by the proposal, project or service than those in the general population who are not in those groups or affected by these factors?

Yes. However, 98 Clients that live in urban areas (Eastbourne and Hastings) will be less affected than those living in the more rural areas of East Sussex (118 clients). The majority of these clients do however live in, or nearby, the more populated towns of rural East Sussex.

- d) What is the proposal, project or service's impact on the factor or identified group?

Transport links and services are less available in some rural areas compared to larger towns, which may reduce the availability and choice of alternative services e.g. personal assistants, day time opportunities should these be required. Clients who live in rural areas may experience a sense of isolation and social contact/connection where services are withdrawn or reduced. A change to day services routines may mean clients and parent/ carers face additional barriers attending because of other commitments or inadequate transport links. However feedback received during the Consultation has not suggested this to be an issue.

e) What actions are to/ or will be taken to avoid any negative impact or to better advance equality?

Please see 4.9.1. (d)

f) Provide details of the mitigation.

Please see (d) above

Access to services for people living in rural areas would remain the same via the current transport arrangements, whether these are provided by ESCC or parents/carers.

If clients affected by the proposals remain eligible for alternative services, then transport would continue to be provided by ESCC where appropriate.

If the proposals are agreed, all clients who are affected will be offered an individual review to consider whether their support package, in light of service reductions, continues to meet their

g) How will any mitigation measures be monitored?

The Learning Disability Management Team RPPR group consists of Operations and Practice Managers for each of the service areas included in the proposals and the Head of Learning Disability Services. The group will be responsible for monitoring, analysing and addressing issues from information collected via:

- Enquiries and comments received by the Community Learning Disability Assessment from clients and carers relating to individual support needs, advice and requests for revised assessments
- Feedback and comments from the Consultation process
- Listening to you customer satisfaction surveys
- Complaints

4.10 Human rights - Human rights place all public authorities – under an obligation to treat you with fairness, equality, dignity, respect and autonomy. **Please look at the table below to consider if your proposal, project or service may potentially interfere with a human right.**

Articles	
A2	Right to life (e.g. pain relief, suicide prevention)
A3	Prohibition of torture, inhuman or degrading treatment (service users unable to consent, dignity of living circumstances)
A4	Prohibition of slavery and forced labour (e.g. safeguarding vulnerable adults)
A5	Right to liberty and security (financial abuse)
A6 &7	Rights to a fair trial; and no punishment without law (e.g. staff tribunals)
A8	Right to respect for private and family life, home and correspondence (e.g. confidentiality, access to family)
A9	Freedom of thought, conscience and religion (e.g. sacred space, culturally appropriate approaches)
A10	Freedom of expression (whistle-blowing policies)
A11	Freedom of assembly and association (e.g. recognition of trade unions)
A12	Right to marry and found a family (e.g. fertility, pregnancy)
Protocols	
P1.A1	Protection of property (service users property/belongings)
P1.A2	Right to education (e.g. access to learning, accessible information)
P1.A3	Right to free elections (Elected Members)

Part 5 – Conclusions and recommendations for decision makers

5.1 Summarise how this proposal/policy/strategy will show due regard for the three aims of the general duty across all the protected characteristics and ESCC additional groups.

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010;
- Advance equality of opportunity between people from different groups
- Foster good relations between people from different groups

We will be paying due regard to the above when supporting clients through the changes, providing services that are accessible and meet their needs and preferences ,taking into account their eligibility for services.

5.2 Impact assessment outcome Based on the analysis of the impact in part four, mark below ('X') with a summary of your recommendation.

X	Outcome of impact assessment	Please explain your answer fully.
x	A No major change – Your analysis demonstrates that the policy/strategy is robust and the evidence shows no potential for discrimination and that you have taken all appropriate opportunities to advance equality and foster good relations between groups.	<p>The overall rationale underpinning the proposals to achieve the required saving is to avoid the need to close services, instead focussing on reduced support to save money without putting vulnerable people at risk. As such, the overall aim is:</p> <ul style="list-style-type: none"> • to protect day and respite services from closure; • to continue to provide services that offer people a home; • to continue to support people who would be unsafe if an existing service is withdrawn. <p>If the proposals are agreed, all clients who are affected will be offered an individual review to consider whether their support package, in light of service reductions, continues to meet their assessed needs.</p> <p>Where it is deemed that the services</p>
	B Adjust the policy/strategy – This involves taking steps to remove barriers or to better advance equality. It can mean introducing measures to mitigate the potential effect.	
	C Continue the policy/strategy - This means adopting your proposals, despite any adverse effect or missed opportunities to advance equality, provided you have satisfied yourself that it does not unlawfully discriminate	
	D Stop and remove the policy/strategy – If there are adverse effects that are not justified and cannot be mitigated, you will want to consider stopping the policy/strategy altogether. If a policy/strategy shows unlawful discrimination it <i>must</i> be removed or changed.	

Equality Impact Assessment


		directly provided by Adult Social Care are not sufficient to meet the assessed needs of individuals, Care Managers will seek alternative support solutions.
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5.3 What equality monitoring, evaluation, review systems have been set up to carry out regular checks on the effects of the proposal, project or service?

Issues relating to individuals will be identified and addressed should they arise. Other options for addressing negative impact on individuals who are eligible for services will include analysing feedback from the Consultation, Listening to You customer satisfaction surveys and Complaints

5.4 When will the amended proposal, proposal, project or service be reviewed?

The proposals will be presented to the Cabinet on 26 June 2018. Any reviews to the proposal will be based on the decisions made by the Cabinet at that time.

Date completed:	June 2018	Signed by (person completing)	Kay Holden
		Role of person completing	RPPR Lead
Date:	June 2018	Signed by (Manager)	 Samantha Williams, Assistant Director, Planning, Performance and Engagement Adult Social Care and Health

Part 6 – Equality impact assessment action plan



If this will be filled in at a later date when proposals have been decided please tick here and fill in the summary report.

The table below should be completed using the information from the equality impact assessment to produce an action plan for the implementation of the proposals to:

1. Lower the negative impact, and/or
2. Ensure that the negative impact is legal under anti-discriminatory law, and/or
3. Provide an opportunity to promote equality, equal opportunity and improve relations within equality target groups, i.e. increase the positive impact
4. **If no actions fill in separate summary sheet.**

Please ensure that you update your service/business plan within the equality objectives/targets and actions identified below:

Area for improvement	Changes proposed	Lead Manager	Timescale	Resource implications	Where incorporated/flagged? (e.g. business plan/strategic plan/steering group/DMT)

6.1 Accepted Risk

From your analysis please identify any risks not addressed giving reasons and how this has been highlighted within your Directorate:

Area of Risk	Type of Risk? (Legal, Moral, Financial)	Can this be addressed at a later date? (e.g. next financial year/through a business case)	Where flagged? (e.g. business plan/strategic plan/steering group/DMT)	Lead Manager	Date resolved (if applicable)
Clients whose services are affected may experience emotional/psychological distress due to change in routine and social anxieties around loss of connection/interaction leading to social isolation	Moral	No – continued monitoring throughout the changes (if agreed) and beyond.	Via a report to Adult Social Care and Health DMT and Cabinet. EIA	Kay Holden, Head of Service	Ongoing monitoring
Negative impact on families and carers health and wellbeing due to increased pressure on their supporting roles and their ability to continue providing this support.	Moral and financial	No – continued monitoring throughout the changes (if agreed) and beyond.	Via a report to Adult Social Care and Health DMT and Cabinet EIA	Kay Holden, Head of Service	Ongoing monitoring

Equality Impact Assessment

It is likely that some clients may require other care services as a result of LD Directly Provided Services being reduced	Financial	No – continued monitoring throughout the changes (if agreed) and beyond.	Via a report to Adult Social Care and Health DMT and Cabinet EIA	Kay Holden, Head of Service	Ongoing monitoring
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Appendix 1

Care Act Information and Advice duties:

As a local authority, and under the Care Act 2014, East Sussex County Council has a commitment to the provision of information and advice relating to care and support for all people in the county. It meets this in a number of ways including:

- **Health and Social Care Connect (HSCC)**, Adult Social Care and Health's contact centre. There are many different ways to contact them, including phone, email, type-talk and webchat via the Council's website. HSCC's specially trained staff offer free, tailored information and advice regardless of whether or not someone qualifies for social care funding or help. This includes about residential and nursing care options, as well as up-to-date information about local and community health and care services. Anyone can ask for an assessment of their social care needs, and it's free for them to do that. They are also the first point of contact for enquiries about safeguarding, Blue Badges and provide referrals for health professionals.
- **Public information leaflets**; we publish and widely distribute 5 printed leaflets which cover a range of basic information about adult social care and health for people who might need it. These leaflets – and accompanying factsheets, which can be given to clients in tailored situations – offer clear, plain English information about options and guidance about processes and expectations of adult social care. They also include information in them as standard on how to contact HSCC and find out about local health and care services, complain or give feedback, how to report safeguarding concerns or get alternative formats. The leaflets and factsheets are available to download for free, and also in other languages, audio, large print, easy read and braille on request.
- **Online directories**
There a range of online directories to support people to find the most appropriate care and support. These include **East Sussex 1Space** – an free online directory specialising in listing care, support and wellbeing services, which is maintained by Adult Social Care. It is mainly for adults, and is a sister site to ESCIS (see below). It was designed with the help of volunteers including service users, carers, members of the public and service providers to ensure it is easy to use and understand for both visitors looking for services and service providers registering their services. We also provide **Support with Confidence**, an accreditation scheme for providers of health and social care akin to Buy with Confidence, a Trading Standards scheme. These facilities are searchable via the council's website.
- **East Sussex Community Information Service (ESCIS)**; a computer database of local and community information developed and managed by the Library and Information Services of East Sussex County Council in association with Brighton and Hove Library Service. It is a free resource for everyone. It is free to be listed and free to use. ESCIS is a broad directory, encompassing all community information & events in East Sussex.

In addition to the above, we work with a range of partners such as our NHS Clinical Commissioning Groups, healthcare trusts, Citizens Advice Bureaux and other voluntary sector partners to provide up-to-date and tailored information in our own factsheets and online, and we contribute to others' publications (such as a local 'Care Choices' brochure) where they are credible and distribution is wide.