

REPORT OF THE PEOPLE SCRUTINY COMMITTEE

The People Scrutiny Committee met on 17 July 2023.

Present: Councillors Sam Adeniji, Mathew Beaver (substitute for Penny di Cara), Charles Clark, Chris Dowling, Kathryn Field, Nuala Geary, Johanna Howell (Chair), Wendy Maples, Stephen Shing, John Ungar (Vice Chair) and Trevor Webb
Mr John Hayling (Parent Governor Representative)
Mr Trevor Cristin (Diocese of Chichester Representative)

Also Present: Councillor Bob Stanley, Lead Member for Education and Inclusion, Special Educational Needs and Disability
Councillor Bob Bowdler, Lead Member for Children and Families (via MS Teams)

1. Scrutiny Review of Equality and Inclusion in Adult Social Care and Health

1.1 The People Scrutiny Committee has completed its Scrutiny Review of Equality and Inclusion in Adult Social Care and Health. A copy of the Committee's full report is attached at Appendix 1.

1.2 The Adult Social Care and Health (ASCH) Department has developed an ASCH Equality and Inclusion Strategy, which is now in its third year of delivery. This sits within the broader One Council approach to Equality, Diversity and Inclusion and focuses on actions which are more specific to ASCH services. In July 2022 the People Scrutiny Committee established a Scoping Board to look into the merit of conducting a scrutiny review of Equality and Inclusion in Adult Social Care and Health (ASCH).

1.3 The Scoping Board heard about the mechanisms ASCH uses for engagement, including its use of consultations and equality impact assessments, and how the Department is trying to improve its engagement with seldom heard communities and people. The Scoping Board concluded, based on the discussion with officers, that whilst they were encouraged by the work underway, there were issues that could benefit from closer examination by scrutiny through a review, in particular identifying key barriers preventing seldom heard groups and people from engaging with and accessing ASCH services.

1.4 The Scoping Board agreed to focus on the following areas:

- Identifying key communities that ASCH seldom hears from, but should
- Barriers preventing groups and people from accessing services
- How ASCH can ameliorate those barriers and improve its engagement with those groups

1.5 The review concluded that there is a strong commitment from the Department to identify and engage with seldom heard groups and to providing an inclusive and accessible service. The Review found that a lack of trust, stigma around using services, and a lack of understanding about services were the biggest barriers for seldom heard groups and communities and made a number of recommendations to

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help overcome those barriers. The Review also recognised that who is seldom heard will change over time, so it was important for the Department to continue to identify and listen to the needs of the community.

1.6 The People Scrutiny Committee **recommends** to the County Council that –

1.6.1 The Adult Social Care and Health Department continue to learn about and listen to seldom heard groups and people. The Department should prioritise resources to take actions and adapt services to ameliorate barriers for these communities through:

- a) The use of internal and external forums and advisory groups and through ongoing conversations with external partners and trusted intermediaries;
- b) Considering whether engagement has taken place with these communities and people by recording this in Equality Impact Assessments, where applicable;
- c) Giving feedback to seldom heard communities about how such feedback has been utilised through appropriate approved mechanisms in a timely manner including in print and online.

1.6.2 The Adult Social Care and Health Department work closely with internal and external partners and intermediaries, with expertise on working with seldom heard people and communities, to tackle stigma and lack of trust. Including (but not limited to):

- a) Collaborating with the Homeless Inclusion Health Service to make signposting/ referral to Adult Social Care and Health easier and simplified;
- b) Collaborating with Gypsy and Traveller Team to gain better insight into the communities they work with and to spread awareness about accessing ASCH services.

1.6.3 The Adult Social Care and Health Department reach out to the communities where they are and through community events with trusted intermediaries to engage with groups and record, disseminate and share feedback within the Department to embed learning.

1.6.4 The Adult Social Care and Health Department draw upon the links with people associated with Adult Social Care and Health including Members, volunteers, People Bank and Citizens Panel members to share information about Adult Social Care and Health services with wider residents.

1.6.5 The Adult Social Care and Health Department work closely with the Corporate Equality Diversity Inclusion Board to make progress on a One Council Approach to community engagement through:

- a) Establishing mechanisms for engagement with communities identified as being seldom heard and ensuring Adult Social Care and Health regularly involves them in their work;
- b) Developing best practice with a community engagement framework, to ensure groups are clear on how their feedback will be used and how any outcomes of engagement work will impact the work of the Council;
- c) Ensuring the needs of seldom heard groups are considered in engagement work through formal mechanisms like Equality Impact Assessments.

1.6.6 The Adult Social Care and Health Department develop staff knowledge and skills through ensuring appropriate priority in the budget for:

- a) The development of peer learning opportunities to enable staff to share knowledge and experience;
- b) Embedding knowledge and skills about working effectively with people from seldom heard communities into ESCC Equality, Diversity and Inclusion training;
- c) Developing the Equality, Diversity and Inclusion training offer to staff through training by expert partners, incorporating this into staff CPD plans, and ensuring that training is responsive to changing local need;
- d) Ensuring managers support and actively encourage staff to attend Equality, Diversity and Inclusion training.

1.6.7 The Adult Social and Health Department should ensure communication about its services is accessible and inclusive by:

- a) Promoting and supporting the use of ESCC interpreting and translation services to wider staff in the Department, and using this to respond to changing local need;
- b) Using a variety of all available and appropriate communication media, formats and languages to target particular groups including non-text and translated versions, including the publication of newsletters and information leaflets in different formats;
- c) Communicating clearly what the service and offer is in promotional material;
- d) Ensuring that the priorities identified in the Digital Inclusion Review are considered in communications.

1.6.8 The Adult Social Care and Health Department increase inclusivity at initial contact to adapt services, where possible, to support the needs of communities and individuals, considering:

- a) How to support people to access services;
- b) The location, timing and staffing at meetings to support different needs, including being sensitive to cultural and religious values;
- c) How information is presented to and gathered from people.

1.6.9 The Adult Social Care and Health Department develop a systematic way of working with a range of VCSE partners by:

- a) Building upon existing relationships and exploring new partnership work by regularly reviewing and expanding the list of identified partners to help build trust with seldom heard groups;
- b) Supporting partners to facilitate Equality, Inclusion and Diversity conversations through guidance;
- c) Where possible, sharing data with other local authorities and groups to support people moving in and out of East Sussex.

[See also Report of the Cabinet – 28 September 2023]

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JOHANNA HOWELL
Chair