

**From:** Graham Gibbens, Cabinet Member for Adult Social Care and Public Health  
Andrew Ireland, Corporate Director for Social Care, Health and Wellbeing

**To:** Adult Social Care and Health Cabinet Committee  
11 September 2015

**Subject:** **ANNUAL EQUALITY AND DIVERSITY REPORT 2014-2015**

**Classification:** Unrestricted

**Previous Pathway:** Social Care, Health and Wellbeing Directorate Management Team

**Future Pathway:** Governance and Audit Committee

**Electoral Division:** All divisions

**Summary:** This report sets out a position statement for services within Social Care, Health and Wellbeing regarding equality and diversity work and progress on KCC Equality objectives for 2014/15.

**Recommendation(s):** Members of the Adult Social Care and Health Cabinet Committee are asked to:

- a) **COMMENT** on key achievements (Section 5)
- b) **AGREE** the proposed changes to equality Objectives and to receive revised objectives in 2016 (Section 8)
- c) **AGREE** to receive the report annually in order to comply with Public Sector Equality Duty (PSED) and ensure progress against County Council objectives

## 1. Introduction

- 1.1 Publication of equality information is compulsory in England for all public authorities. Proactive publication of equality information ensures not only compliance with the legal requirements, but also greater understanding by the public of the difficult decisions an authority faces, and why it takes those decisions. Gathering equality information and using it to inform decision-making can also enable authorities to achieve greater value for money in the services they deliver through better targeting of services.

## 2. Financial Implications

- 2.1 There are no financial implications in producing an annual report.

### **3. Policy Framework**

- 3.1 Advancing equality and reducing socio-economic inequalities in Kent contributes towards the Council's Medium Term Plan, 'Increasing Opportunities, Improving Outcomes'. As such the objectives correspond with existing council priorities and the objectives support the aims of, helping the Kent economy to grow, putting the citizen in control and tackling disadvantage.
- 3.2 The council has published its equality and diversity objectives for 2012-2016. Each service was asked to provide equality information and to demonstrate how they complied with equality legislation between 1 April 2014 – 31 March 2015, and what performance measures they have in place to achieve the Kent County Council (KCC) Equality Objectives.

### **4. Adult Social Care**

- 4.1 Despite a continuing, difficult financial climate there is a commitment to achieving fairness and equality for all Kent's residents, and shaping services accordingly. The Social Care, Health and Wellbeing Directorate (SCHW) has a leading role in discharging the Council's statutory responsibilities for public health and social care. Above all, the Directorate aims are about building on peoples' strengths and capabilities and promoting their independence to improve their health and wellbeing, assisting people to achieve outcomes that matter to them and working with statutory and non-statutory partners to protect the most vulnerable children and adults.
- 4.2 The principal responsibilities of the Directorate include undertaking individual and population needs assessment, commissioning and arranging services to meet the eligible needs of people and safeguarding vulnerable children and adults. Adult Social Care demonstrates its commitment by embedding equality throughout the organisation to ensure that the needs of all communities are considered in the commissioning and delivery of services.
- 4.3 The Health and Social Care sector continues to operate in an era of unprecedented change. Every aspect of social care provision, including how services are commissioned is being transformed. This is being brought about by a number of significant legislative and regulatory changes and integration of services. The Social Care, Health and Wellbeing Directorate is contributing to the delivery of KCC's whole council transformation as described in the Transformation Plan – 'Facing the Challenge: Whole Council Transformation'. This is the way in which the council will transform services to meet the financial challenges it faces, while meeting the increasingly complex needs of the people it supports. The council leads by example to influence its partners, contractors, local businesses and residents, and by embedding equality as an integral part of its policies and programmes.
- 4.4 In addition, the following principles are important:
- Focus on outcomes rather than process
  - Focus on prevention and addressing underlying causes rather than symptoms
  - Focus on evidence based policy and practice

- 4.5 It is not surprising then, that at time when faced with significant reductions in resources and with increased demands on services, that the focus is on supporting the most vulnerable groups living in Kent: older people, people with learning disabilities or physical disabilities, people with mental health needs and other vulnerable adults. Since implementation of the Care Act there are additional vulnerable groups that need to be taken in to consideration e.g. prisoners and carers.
- 4.6 The changing population, combined with the limits on finances, means that there is a need to be increasingly creative about responding to the needs of residents including promoting preventative strategies, greater independence and resilience for local people. The people supported have increasingly diverse and complex needs. The population is living longer with complex needs putting further demand on social care, and people want better quality and choice in the services they use.
- 4.7 A key challenge in Adult Social Care has been to develop a better understanding of the diversity of service users. Whilst the service works on a personal basis with many clients and has an understanding of an individual's care needs, it is recognised that there is an ongoing need to better understand change in population and the broader patterns of experience to help plan resources for the future. This information will be used to reflect more fully the local communities worked with in future editions of our Local Account Annual Report.

## **5. Key Achievements**

- 5.1 Achievements in adult social care are published in the Local Account Annual Report 2014-15. Achievements illustrate how the Directorate has worked hard to:
- Keep vulnerable adults safe
  - Monitor and improve the quality of services
  - Tailor services to meet the needs of specific groups within the population
  - Introduce and develop services to meet newly identified needs
  - Enable people to regain their independence and remain at home
  - Reduce the number of permanent admissions to residential care
  - Support more people through a person-centred process and receive a personal budget
  - Use surveys and other feedback to look at what is being done well and what needs further work
  - Deliver joint services with health and work towards further integration of services.
- 5.2 Some examples of these achievements are highlighted below to show how adult social care work covers the nine protected characteristics of age, disability, gender and gender reassignment, pregnancy and maternity, race, religion or belief, marriage and civil partnership and sexual orientation, where relevant to the service provided.
- 5.3 As part of the newly transformed service, Older People and Physical Disability has increased its service access hours to 8am to 8pm, seven days

a week, including Bank Holidays, providing access to support for vulnerable people whenever they need it.

- 5.4 Older People and Physical Disability Care Pathways have been re-designed to better address the needs of our service users. The outcomes achieved in 2014-15 mean service users receive the most appropriate support, with a focus on enabling independence and reducing dependency. As a result more older and disabled people have benefited from enablement, and are now living independently in their own homes with less or no homecare support.
- 5.5 The Autistic Spectrum Conditions service has developed through establishing the Autism Collaborative. A draft Kent Strategy on Autism has been produced and covers access to services, workforce planning and links with the criminal justice system.
- 5.6 When children with learning disabilities become adults and transition to adult support services, they can experience disruption in the support they receive, which can have a negative impact on their wellbeing and outcomes. During this year, services for children with disabilities has joined the Learning Disability and Mental Health division, in order to ensure that children with disabilities receive a joined-up service through their life, including in the transition from childhood to adulthood.
- 5.7 During 2014/15, work has continued in partnership with Kent and Medway Commissioning Support, the Clinical Commissioning Groups, Public Health England and NHS England to improve the uptake of health screenings and health promotion by people with learning disabilities. The following health areas continue to be targeted: obesity, diabetes, cardio vascular disease and epilepsy.
- 5.8 Information is shared between organisations in order to ensure that people with a learning disability are identified by GP practices. Training has been provided for GPs to ensure that they understand the barriers for people with learning disabilities to use health checks and that the GP is provided with tools to overcome this, and developing an audit of screening practice in GP surgeries for people with learning disabilities with colleagues from Public Health England.
- 5.9 About 28,000 adults in Kent have a learning disability and more than 4,000 are supported by the council. The publication Adult Learning Disabilities in Kent - review 2013 captures the work we and our partners, including Kent Community Health Trust and Kent and Medway Partnership Trust, do for people. The service also works to make learning disability part of everyone's planning with services that are inclusive and personalised.
- 5.10 The council continues to invest in Easy Read publications to make important and relevant information more understandable and familiar. Easy Read is one of the ways the council is helping people who may need information presented in a way which is easier to understand.
- 5.11 The Kent Advanced Mental Health Professional (AMHP) service continues to be delivered as a 24 hour dedicated service supported by a mixed team of

mental health social workers and community psychiatric nurses, on a rota for a week at a time, based in the Community Mental Health Teams.

- 5.12 The Live It Well website provides information and signposting to support people to improve their wellbeing and mental health. The website contains a database of free or low cost resources in the community to improve wellbeing and mental health which people can search for. Use of this search function has increased by 181% over the last year.
- 5.13 To effectively manage the increase in demand for Deprivation of Liberty Safeguards (DOLS) applications, we have taken a number of actions. These have included introduction of a triage system to prioritise the highest risk cases and providing staff training to ensure we have the right specialist skills in our workforce to carry out the assessments of need and best interest. The key change is that it is no longer necessary for someone to be actively trying to leave before DOLS is applied. The impact of this judgement means that considerably more people will now be subject to DOLS authorisations. It is more likely that people with some disabilities (mental health conditions) and older people (with age-related mental disorders such as dementia) are more likely than the general population to need to be subject to DOLS authorisations. Therefore it is important that the increase in DOLS activity is managed effectively, ensuring that the needs and best interests of these vulnerable people are protected.
- 5.14 In light of the Care Act a Self-Neglect Policy and set of procedures has been developed working with our partners. This was commissioned by the Safeguarding Adults Board to ensure that there is equity in terms of a formal multi-agency response to support people who place themselves and others at significant risk of harm because they are unwilling or unable to provide adequate care for themselves.
- 5.15 Making Safeguarding Personal (MSP) was launched in November 2014. Multiagency workshops have been carried out to introduce the principles of MSP to practitioners, and have been very successful. This approach engages people who are victims of abuse or neglect in a conversation about how best to respond to their safeguarding situation in a way that enhances involvement, choice and control as well as improving quality of life, wellbeing and safety.
- 5.16 In response to the Care Act a Carers commissioning strategy has been developed to improve Carers support services through assessment and short breaks contracts, including joint commissioning with clinical commissioning groups. This creates equity in terms of access to services for carers with those who are cared for.
- 5.17 The Public Health service have developed the Suicide Prevention Strategy. The equality impact assessment showed that age, gender and disability were identified as characteristics that could impact on suicide rates. Subsequently the strategy will focus on action in these areas. The impact assessment showed that there is a lack of local information about suicide in relation to race and religion. National research is being used to ensure any needs

related to these characteristics are met. The strategy was finalised in July 2015.

- 5.18 The role we play in improving health and wellbeing continues to grow in prominence. Through the Health and Wellbeing Board organisations are brought together to coordinate and oversee the development of integrated approaches to the commissioning of services. The council has a lead responsibility for a range of local public health improvement and prevention work. Addressing health inequalities and ensuring access to public health information is continues to be a priority. Healthwatch continues to be the consumer voice for health and social care. Through these arrangements, the voices of people at risk of discrimination and inequalities continue to be heard.
- 5.19 Equality and Diversity information relating to staff is reported to Divisional Management Team meetings as part of routine HR reporting. Any specific issues are picked up through this route for management action. The council's Personnel Committee receives an annual report on staffing figures.

## **6. Key Challenges**

- 6.1 Demographic changes and resource pressures covered in Section 4 continue to provide the biggest challenge in a generation. The Directorate has coped well with the introduction of the Care Act and providing access to services for additional groups within the population. Although the estimated 8,000 additional assessments of individuals was not realised, the Care Act has had a significant impact on the service.
- 6.2 Plans to ensure a proportionate response to manage the additional workload continue to be developed, within resource constraints. Equality considerations are embedded within core processes to ensure they are not overlooked despite the pace of change.

## **7. Due regard**

- 7.1 The council continues to use Equality Impact Assessments (EqIA) to capture and evidence analysis on the impact of its decisions and policies on the People of Kent. The Equality Act abolished the need for EqIAs but is clear on the need to undertake equality analysis in order to demonstrate that due regard has been paid to our Equality duties. The council evidences this by way of an EqIA. Decisions taken without full equality analysis leaves the authority open to potential Judicial Review.

## **8 Future reporting**

- 8.1 Equality Objectives are now being reviewed as existing Objectives are due to expire in 2016. Successive annual reports demonstrate that the council has and continues to make good progress against them. As such last year's report proposed that the authority further embeds its equality objectives in the council's Strategic Statement, Increasing Opportunities Improving Outcomes and its Commissioning Framework. This will allow the organisation to develop

equality objectives that are further embedded in the core work of SCHW and KCC.

- 8.2 Duplication has been reduced through streamlining the council's equality duty by including public information within other published reports such as the 'Here for you, how did we do?' Local Account for Kent Adult Social Care and the 'Adult Learning Disability in Kent Review'.

## **9 Legal Implications and Risk Management.**

- 9.1 The Public Sector Equality Duty (Section 149 of the Equality Act 2010) requires the Council to publish its Equality Annual Report each year.

## **10 Equality Impact Assessment**

- 10.1 There is no requirement to undertake an Equality Impact Assessment because this paper reports performance monitoring on the previous year's work and internal governance arrangements.

## **11. Conclusion**

The annual report has been able to identify progress on the relevant equality objectives. The Directorate can demonstrate that it provides accessible and usable services but it needs to continue to improve its governance arrangements and review how it communicates and provides information with service users.

- 12. Recommendation(s):** Members of the Adult Social Care and Health Cabinet Committee are asked to:
- a) **COMMENT** current performance (Section 5)
  - b) **AGREE** the proposed changes to equality Objectives and to receive revised objectives in 2016 (Section 8)
  - c) **AGREE** to receive the report annually in order to comply with Public Sector Equality Duty (PSED) and ensure progress against County Council objectives

## **13. Background Documents**

Kent County Council Equality Objectives <http://www.kent.gov.uk/about-the-council/strategies-and-policies/corporate-policies/equality-and-diversity/equality-and-diversity-objectives>

2014-15 Local Account – Here for you, how did we do?

## **14. Contact details**

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