From: Graham Gibbens, Cabinet Member for Adult Social

Care

Penny Southern, Corporate Director of Adult Social

Care and Health

To: Adult Social Care Cabinet Committee - 4 July 2018

Subject: ANNUAL EQUALITY AND DIVERSITY REPORT

Classification: Unrestricted

Past Pathway of Paper: Adult Social Care Directorate Management Team

Meeting – 6 June 2018

Future Pathway of Paper: None

Electoral Division: All

Summary: This report sets out a position statement for Adult Social Care and Health regarding equality and diversity work and progress on equality objectives for 2017/18. The report is to provide assurance to Cabinet Committee members that the Directorate can demonstrate it is compliant with the Public-Sector Equality Duty and as a result provides accessible and usable services.

Recommendation(s): The Adult Social Care Cabinet Committee is asked to

- a) **CONSIDER** and **COMMENT** on performance against the equality objectives for 2017/18;
- b) **CONTINUE** to ensure that equality governance is observed in relation to decision making; and
- c) **AGREE** to continue to receive the report annually in order to comply with the Public Sector Equality Duty (PSED) and ensure progress against the Council's objectives.

1. Introduction

- 1.1 Publication of equality and diversity information is compulsory in England for all public authorities, as stipulated in the Public-Sector Equality Duty (PSED) 2010. Proactive publication of equality and diversity information ensures not only compliance with the legal requirements, but also transparency for the public in how this Directorate ensures equality and diversity considerations throughout our work.
- 1.2 The main 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.

2. Financial Implications

2.1 There are no financial implications in producing this annual report.

3. Policy Context

- 3.1 In 2016, Kent County Council published a new Equality and Human Rights Policy and Objectives. The objectives have been set against six domains recognised by the Equality and Human Rights Commission (EHRC) as having a significant impact on the quality of life of individuals. The domains are:
 - Education
 - Work
 - Living standards
 - Health
 - Justice and Personal Security
 - Participation
- 3.2 Kent County Council Equality Human Rights Objectives, 2016-2020:
 - All Members and Officers will be responsible for ensuring that the Public Sector Equality Duty is met in their day to day work and when making decisions
 - We will use equality analysis when procuring and commissioning
 - We will gather and analyse knowledge and information to get a clear understanding of the protected characteristics of our servcie users
 - We will continue to be an inclusive employer
 - We will listen to and engage with employees, communities and partners to inform the way we plan, design, commission and deliver services.
 Communities can have their say through consultations and engagement
 - We will put residents and service users at the heart of all our work by embedding the Public Sector Equality Duty into everything we do so that we can continue to build strong and inclusive communities.
- 3.3 The Adult Social Care and Health Directorate is working to four equality objectives for the second year running which underpin and guide our work. At the heart of this is strength-based practice, providing meaningful a personcentred approach tailored to the particular characteristics of the person. The four equality priorities are to:
 - Safeguard vulnerable adults from harm.
 - Improve life chances and outcomes of vulnerable adults through service developments and modernisation.
 - Ensure the quality and range of services are improved through increasing engagement with service users and carers.
 - Ensure that the number of Black and Ethnic Minority people and women in the mental health system is reduced.
- 3.4 Details of the actions that will deliver against these objectives have been set out in the Divisional Business Plans. This report will evidence activity against the Directorates objectives and general activity that has been undertaken within the

Directorate to meet the requirements of KCC's Equality and Human Rights policy.

4. How we are working to meet Public Sector Equality Duty (PSED)

4.1 The below table sets out the evidence which demonstrates how the Directorate is progressing against the Directorate objectives for 2017/18.

Objective: Safeguard vulnerable adults from harm Evidence:

- The Kent Enablement Recovery Service (KERS) Completed a case file audit on 100 cases. The audit checked that case notes were written in plain, non-discriminatory or oppressive language, Service users views or preferences and feelings were recorded and that Safeguarding issues were recorded on AIS (the Social Care Management Information System) case notes. This informed training sessions on best practice.
- Mental Health teams considers cultural concerns around linking with services. Ensuring that a person can engage in their safety plan that is culturally sensitive and doesn't alienate a person's wider community. Also use services that are from within the wider cultural population. For example Karma Nirvana, Travelling community. Using alternative buildings to meet authority services such as the police. Support plans are tailored around gender considerations such as using Mankind for men experiencing domestic abuse. When a person who is transgender has been referred to the service, the data is now captured. In West Kent, the team supported a person to start up a Transgender support group as there was a gap in support. There are now dedicated police officers within acute psychiatric settings.
- The Council's Adult Safeguarding Unit worked closely with the Kent and Medway Safeguarding Adults Board (KMSAB) members during 2017/18 to develop and deliver Safeguarding Adults Review (SAR) Lessons Learnt Workshops, following the reviews of the following three cases:
 - Mrs C Mrs-C-executive-summary-KMSB.pdf
 - Mrs Violet Hughes Mrs-Violet-Hughes-executive-summary-KMSB.pdf
 - Mrs Beryl Simpson Beryl-Simpson-executive-summary-KMSAB.pdf

These workshops were delivered to ensure that all multi-agency partners were fully informed of the SAR outcomes and recommendations, self-neglect and to disseminate the relevant learning. During these workshops issues relevant to equality are considered.

 During 2017/18 the Vulnerable Adult pathway was rolled out and now being embedded in practice to ensure those that are deemed vulnerable are receiving appropriate support, care and safeguarding. Governance is in place with partners to manage information effectively and Vulnerable Adult leads are working across the County.

Objective: Improve life chances and outcomes of vulnerable adults through service developments and modernisation Evidence:

- In November 2017, approval was given to implement the New Operating Model from the Strategic Commissioning Board and the Budget Programme and Delivery Board. The New Operating Model will redesign new pathways which have been informed by pilots to deliver more person-centred care and support, keep people safe, help people to have reasonable choice and control, making sure that there are enough care and support services available and that we work in partnership to make better use of our resources.
- The ESTHER programme continued to be rolled out across Kent during 2017/18, 50 coaches and 329 ambassadors were trained in this approach. The ESTHER approach focuses on what is important to the individual and the professionals working as one to address the issues facing the individual. The Kent ESTHER philosophy and way of working gained recognition by national bodies, such as Health Education England and the Department of Health and Social care and was highlighted as a model of good practice within the Lyn Romeo Chief Social Worker Annual Report for 2017/18.
- Delivered an Equality and Human Rights development day to 150 staff to help them understand that one of the values underpinning the work we do in Adult Social Care is adopting a person-centred approach tailored to the person so that they can achieve the things that matter most to them. This means supporting people's own sense of identity and working from a clear diversity perspective so that we acknowledge and celebrate the difference people bring and the impact it can have on their outcomes.
- Kent Supported Employment (KSE) worked with over 350 clients who have learning disabilities, mental health needs, sensory needs or autism, moving them into employment. Over 54% of these clients sustain employment. Other pathways include work placements and voluntary work until clients are ready to progress into paid employment. Key partners are KCC, schools, colleges, the Job Centre and other professionals working with disabled people. However, it was identified that the referral routes for new cases not currently known to Social Care were cumbersome, which caused delay and duplicated processes. Therefore, the Service Specification was updated in order for KSE to assess clients' needs and draw up a person-centred Action Plan. We are encouraging a culture of aspiration, responsibility and independence which links in with the Lifespan Pathway changes as well as KCC's Strategic Outcomes, so we should be empowering clients to have direct access to the support they require, and not draw them into Social Care unnecessarily.
- During 2017/18 a Deaf Community Worker role was introduced to improve wellbeing, promote independence and build community capacity, amongst Deaf adults and children, who use British Sign Language (BSL), in Kent. Outcomes achieved through this post:
 - Issues for Deaf people raised with the East Kent Hospital Diversity
 Manager and meetings facilitated with the Deaf forum
 - East Kent University Hospital Foundation Trust improved accessibility to hospitals and community health services
 - KCC 'front door' made more accessible for Deaf people

- Deaf user group meetings facilitated with Kent Police
- Deaf accessible 'quit smoking' group
- Deaf accessible Sensory Services Facebook page
- Deaf friendly Sensory Services leaflets

Objective: Ensure the quality and range of services are improved through increasing engagement with service users and carers Evidence:

- Service users are regularly part of interview panels.
- Over the year we have worked closely with Healthwatch Kent to present various topics to the People Panel events to engage people in the design and implementation in a range of key projects. Topics covered:
 - Integrated Neurodevelopmental (ND) Multidisciplinary (MDT) and Social Care Autistic Spectrum Conditions (ASC) Team Redesign
 - Autism and disabled Children services/mental health Outcomes Based Care project
 - Assessment and Integrated Rehab
 - Overview of Pioneer, the Design and Learning Centre, ESTHER, Medication and Buurtzorg
 - Carers' strategy
 - o KCC Core Standards for Social Care
 - Health and Wellbeing Strategy
 - Adults New Operating Model
- We held five ESTHER cafes during 2017/18. An ESTHER Café is an informal meeting place where ESTHERs and all the organisations involved in their care can informally come together. As part of the ESTHER Café, ESTHERs share their experience of care with those in the room so that health and social care providers can hear experiences first hand and from this can seek to work together to make improvements that matter to ESTHER and make best use of resources. An ESTHER café in January 2018, focused on people accessing Mental Health services, outcomes from the café have informed where improvements are required.
- We now have user groups for all client groups with many supported by Healthwatch: Senior Citizens, PD group, Autism Collaborative, LD Partnership Board and Mental Health has several forums.
- Over the past year Adult Social Care and Health has engaged with the public around the provision and content of public information. Focus groups took part with carers, learning disability and older people's groups. Each group were asked to look at, comment and suggest improvements to our public information. This considered content and accessibility of the documents as well as where people sourced their information. Feedback from all the groups was positive around the provision of information and that the content was useful to them. It was raised that information should be provided in other formats, specifically in large print and which can be adapted for those with sight issues. The pamphlets; 'Your guide to accessing adult social care in Kent' and 'What we do for people with a learning disability' have and are being updated following these engagement sessions.

Objective: Ensure that the number of Black and Minority Ethnic (BME) people and women in the mental health system is reduced

- Within KERS supervision documents include a standard question addressing BME issues. There is also a standard agenda item on the rolling KERS Seniors meeting.
- Mental Health has put benchmarking and data collection in place processes to better understand pathways for women, especially those who have experienced domestic abuse, black men and veterans to help identify gaps.
- During 2017, there were 284 black and minority ethnic people accessing mental health services. This is the benchmark data which will be used to compare the data at the end of 2018 to see if the actions in place around this objective have been effective, as this is the second year that this objective is in place.

4.2 The table below sets out the evidence which demonstrates how the Directorate is meeting the requirements of the KCC's Equality and Human Rights policy

Policy

All Members and Officers will be responsible for ensuring that the Public Sector Equality Duty is met in their day to day work and when making decisions

Evidence

Equality Impact Assessments are carried out for all service developments, projects and decisions relating to services and staff, as a mechanism to ensure all activity is inclusive and responsive to customer needs. During 2017/18, 15 Key Decisions were made in which reports reference EqIA.

During 2017/18 Adult Social Care set up an Equality and Human rights steering group which plays a role in ensuring that across Social Care protected groups - staff and the people we support have fairer outcomes.

We will use equality analysis when procuring and commissioning

During 2017/18 analysis was undertaken on services provided in prisons, which identified that the current volume of social care usage, together with access issues inherent in providing services within a prison establishment indicate that KCC commissioning a separate service for social care in prisons was not practical or an attractive proposition for a service provider. Working in partnership with NHS England, a new approach was undertaken, and NHS England took the lead for the procurement of health and social care services in prisons.

We will gather and analyse knowledge and information to get a clear understanding of the protected characteristics of our servcie users.

The collection of 'About You' information is built in to all assessment and data gathering processes in Social Care and the resulting information is routinely presented to and discussed by Divisional Management Teams to inform business planning, commissioning processes and the production of equality impact assessments.

During 2017, detailed analysis was undertaken by Strategic Commissioning to understand the profile of people accessing the Advocacy hub. This informed the funding allocation, identified gaps such as knowledge is particularly poor around carers being entitled to Advocacy and referral rates were low. Therefore, Support Empower Advocate Promote (seAp) has been allocated funding to increase the awareness of advocacy and more resources have been put into advertising the contract over the next year to ensure people know about the service.

During 2017 Strategic Commissioning and the Kent Public Health Observatory completed work to identify and analyse the profile of Carers, which identified that there were 53,701 adults aged 16+ providing 20 or more hours of care per week. These Carers are those who are eligible and most likely to access the carers support services provided by KCC. There are 19,073 active Carers currently registered with KCC on the SWIFT/AIS (Adult Social Care Management Information) This has informed system. а Commissioning exercise which is due to be completed 2018/19 and highlighted that the Carers Strategy 2009 needed a review. Various engagement workshops with Carers have since taken place to start to shape the new strategy.

Appendix 1 sets out the current profile of our service users. Most of the profiles remain unchanged since the 2017 Annual report, apart from a reduction in reporting against unknown/not yet for religion and sexual orientation, which demonstrates that staff are starting to understand the importance in collating and reporting accurately.

We will continue to be an inclusive employer.

During 2017/18 Older People and Physical Disability (OPPD) developed a work experience programme to encourage younger people to consider a career in social care.

Action Plans are place and link with the Organisation Development Plan to ensure that trends are reviewed such as reasonable adjustments, to ensure managers and staff are putting the appropriate interventions in place.

Fair employment practices are monitored and reported on a regular basis to the Adult Social Care and Health Directorate Management Team (DMT) and the next level down Divisional Management Team meetings (DivMT), to ensure managers are engaged in their responsibilities.

Appendix 2 sets out the profile of the Adult Social Care and Health workforce. Through analysising this data, we have identified that Adult Social Care and Health still has the lowest percentage of staff aged 25, which has triggered work with HR and Communications to look at the recruitment and Engagement strategies of younger people

(predominantly under 25), this includes a work experience programme, attendance at career events and utilising the apprenticeship levy. Along with one other Directorate, Adult Social Care and Health has the highest proportion of workforce aged 50 +, in response to the ageing workforce the Directorate has put in place succession planning.

We will listen to and engage with employees, communities and partners to inform the way we plan, design, commission and deliver services. Communities can have their say through consultations and engagement

Then annual Employment Value Proposition (EVP) survey took place in September - October 2017 with one Adult Social Care team. No equality issues were identified.

The Kent Enablement Recovery Service completed a survey with 45 service users during November 2017 - January 2018, there was a 91% response rate. 83% of respondents were very satisfied with the service and 17% fairly satisfied, feedback from the survey has informed where service improvements are required.

For another measure of how responsive our services are to customers, complaints are closely monitored with details routinely reported to management teams for their engagement and action. Complaints from service users about discrimination and other prohibited conduct are monitored as part of this process, during 2017/18 there were no complaints received on this subject.

During 2017 a Sensory Strategy was produced with the vision of supporting d/Deaf, deafblind and sight impaired people of all ages to be independent, to have choice and control and to participate fully in society. The strategy included extensive consultation with individuals with sensory impairments and their Carers. The strategy was updated in the light of feedback from a formal public consultation. The strategy will be launched in Summer 2018.

We will put residents and service users at the heart of all our work by embedding the Public Sector Equality Duty into everything we do so that we can continue to build strong and inclusive communities.

Examples of how this has been acieved are set out in the table under section 4.1.

5. Key Challenges

- 5.1 Demographic changes and resource pressures continue to provide the biggest challenge for Adult Social Care and Health. The people we support 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.
- 5.2 Reporting under unknown/not yet for religion and sexual orientation is still high. Although over the last year we have seen a small reduction in reporting against this category due to work with staff, ensuring that they understand the importance of accurate data collection. There will be an ongoing need to deliver this training, helping staff understand that they need to be transparent with people as to why they are collecting data and how the data is used. We need to continue to ensure that equality and diversity is *integrated* into mainstream KCC activity by encouraging a culture that supports good practice in service delivery and employment. From June 2018 we have introduced the Adults Principal Social Worker (PSW) role which will work to address this challenge.
- 5.3 Work is underway with the Care Sector to ensure there is an understanding of its duties regarding Equalities. The Care Quality Commission (CQC) has emphasised that there is a real focus on providers demonstrating that there is an understanding and processes are in place to ensure that there is no discrimination within the services they provide.

6. Governance

6.1 In 2012 governance arrangements were agreed to ensure compliance with the Public Sector Equality Duty (PSED) following an internal audit. Governance is based on decisions having an EqIA at both Departmental Management Team and Member levels. If decisions are taken without full equality analysis the authority is open to potential Judicial Review.

7. Legal Implications and Risk Management

- 7.1 The Public Sector Equality Duty (Section 149 of the Equality Act 2010) requires the Council to publish its Equality Annual Report each year.
- 7.2 The configuration for the new Adult Social Care system has just begun, and through this design we will be ensuring that we can continue to meet the requirements of the Equality and Human Rights Act to enable us to record and ultimately report in respect of the nine protected characteristics where they are appropriate in Adult Social Care.

8. Equality Implications

8.1 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.

9. Conclusion

9.1 The Directorate can demonstrate that it provides accessible and usable services. However, with the changing population, combined with the limits on finances, means that we need to be increasingly creative about how we respond to the needs of residents of Kent which will include promoting preventative strategies, greater independence and resilience for local people. The implementation of the New Operating Model provides an opportunity to address identified inequalities and inconsistencies in service delivery and make the best use of available resources.

10. Recommendation(s)

- 10.1 Recommendation(s): The Adult Social Care Cabinet Committee is asked to:
- a) **CONSIDER** and **COMMENT** on performance against the equality objectives for 2017/18:
- b) **CONTINUE** to ensure that equality governance is observed in relation to decision making; and
- c) **AGREE** to continue to receive the report annually in order to comply with the Public Sector Equality Duty (PSED) and ensure progress against the Council's objectives.

11. Background Documents

Kent County Council Equality and Diversity page: http://www.kent.gov.uk/about-the-council/strategies-and-policies/corporate-policies/equality-and-diversity

Design and Learning Centre: https://designandlearningcentre.com/

12. Report Author

Georgina Walton

Executive Support Manager and Design and Learning Centre Programme Manager, Older People and Physical Disability 03000 415535

Georgina.walton@kent.gov.uk

Relevant Director:

Anne Tidmarsh
Director for Older People and Physical Disability
03000 415521
anne.tidmarsh@kent.go.uk