

**KENT COUNTY COUNCIL
EQUALITY ANALYSIS / IMPACT ASSESSMENT (EqIA)**

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Directorate:

Adult Social Care and Health

Name of policy, procedure, project or service

Recommissioning of Residential Care Home services for Individual with a Learning Disability (LD), Individual a Physical Disability (PD) and individual with Mental Health (MH) Needs, collectively referred to as LDPDMH.

What is being assessed?

This EqIA assesses the impact of the new tendered contract on individuals who are living in residential care homes, either on a long or short-term basis.

Responsible Owner/ Senior Officer

DMT representative, Richard Smith, Corporate Director, Adult Social Care and Health
Senior Responsible Officer, Clare Maynard, Head of Commissioning Portfolio– Communities, Older and Vulnerable Individuals
Commissioning Lead, Paula Watson, Senior Commissioner

Date of Initial Screening

06 June 2018.

Version	Comments/ Author	Date	Comment
1	Paula Watson	06/6/18	First draft
2	A Agyepong	20/6/18	Comments for review
3	S Rolfe/P Watson	09/12/19	Review
4	S Rolfe/P Watson	20/05/20	Review
5	A Agyepong	21/05/20	Comments for review

Characteristic	Could this policy, procedure, project or service, or any proposed changes to it, affects this group less favourably than others in Kent? YES/NO If yes how?	Assessment of potential impact HIGH/MEDIUM LOW/NONE UNKNOWN		Provide details: a) Is internal action required? If yes what? b) Is further assessment required? If yes, why?	Could this policy, procedure, project or service promote equal opportunities for this group? YES/NO - Explain how good practice can promote equal opportunities
		Positive	Negative	Internal action must be included in Action Plan	If yes you must provide detail
Age	<p>NO,</p> <p>1)The project applies to individual with a learning disability (LD), physical disability (PD) or individual with mental health (MH) needs over 18 years and therefore this age group will be the only one which is impacted by the letting of the contract.</p> <p>2) If the current care home provider chooses not to tender or is unsuccessful in their tender or they decide they no longer wish to do business with KCC, they may give notice to current individuals. A small number of individuals may be required to move to another residential care home. By definition, as this client group have a disability there will be a disproportionate impact on them compared to other</p>	Medium	High for the small number who could be affected. But this will be only in limited cases, if at all.	<p>a) Internal action is required.</p> <p>All providers with existing KCC placements will be encouraged and supported to tender for the new contract.</p> <p>2) Where current providers choose not to tender, negotiation will take place with the provider to agree a service continuity plan, in addition, a conversation will be held with these providers to gain an understanding about their decision. Only in exceptional circumstances will individuals be moved. In the event that a move is required, an action plan will be drawn up for each of the individuals affected by this decision.</p> <p>The risk of anxiety for individuals, relatives and carers will be minimised by providing appropriate assurances and through involving affected individuals in action planning and decision making.</p> <p>This process will be managed by Care Managers who have a good knowledge of their clients' needs and a dedicated team of purchasers and commissioners who have knowledge and understanding of the average</p>	<p>Yes.</p> <p>1) The intention of the letting the new contract to ensure there is more equitable provision of residential care across Kent at an affordable price. The relet also aims to commission services where there are gaps in current provision for certain specialist needs. Both these actions will result in a positive impact for individual over 18 years with disabilities and mental health needs.</p> <p>An online Care Directory has been developed for this purpose and will provide information, advice and guidance on all available services, both those contracted and those who choose not to tender for a contract.</p>

	<p>individuals of the County. However, the intention is that moves will only happen in exceptional circumstances, but this could cause anxiety and disruption. Any move will ensure the new residential care provider embraces the individual's person-centred plan with any projected needs.</p> <p>No change will arise if the existing residential provider is successful in their bid.</p>			<p>price of care in that area and will know the market. It is not intended that there be any impact on new individual going into residential care.</p> <p>This EqIA will be updated if the proposed service is amended in a way that could affect this group.</p> <p>b) No further assessment is required.</p>	<p>Promotion of equality, human rights and equal opportunities will be reflected in the new contract service specification and terms and conditions that will ensure that this group of individuals receive services dedicated to their needs.</p> <p>Quality of care and good practice can be monitored and improved through regular monitoring of all care homes.</p> <p>Individuals, their families and carers should have better information about the contracted and non-contracted homes being commissioned on their behalf.</p> <p>It is expected that quality will improve through making price reviews more robust and transparent. Price reviews will allow providers to identify financial difficulties and consideration of price reviews will take place when it is clear that quality and cost issues are directly linked.</p> <p>Based on the implementation of the pricing decision the EqIA will be kept under review.</p>
<p>Disability</p>	<p>See above</p>	<p>Medium</p>	<p>Medium</p>	<p>Action will be taken when there are challenges in communicating with family members as well as individuals who have learning disabilities, physical disabilities, mental health needs, sensory impairments, appropriate communication methods will be</p>	<p>Yes. It is expected that individuals with greater physical disability and individual with Challenging behaviour are likely to be placed in newer homes or purpose-built accommodation which will strive to meet Part M of the Building Regulations.</p>

				used for all. Where necessary Advocates will be engaged to support the individuals effected and ensure every individual has appropriate support.	There are a number of care homes that are converted dwellings which have smaller corridors and stairs/steps and therefore individual will struggle to mobilise or use the environment effectively in some of the older care homes. It is also known that the use of specialist equipment in smaller homes is more difficult to use.
Sex	No	Low	Low	The tender will not impact on the availability of services across Sex.	Yes – equalities must be promoted through ensuring that care providers comply with the contract specification for ensuring equality on the basis of Sex.
Gender reassignment/ Trans*	No.	Low	Low	No.	Yes – equalities must be promoted through ensuring that care providers comply with the contract specification for ensuring equality for all gender groups.
Race	No.	Low	Low	Action will be taken when there are challenges in communicating with individuals for whom English is not their first language or those whose knowledge of English is limited.	Yes – equalities must be promoted through ensuring that care providers comply with the contract specification for ensuring equality for all races.
Religion or belief	No.	Low	Low	No.	Yes – equalities must be promoted through ensuring that care providers comply with the contract specification for ensuring equality for all religious or belief groups.
Sexual orientation	No.	Low	Low	No.	Yes – equalities must be promoted through ensuring that care providers comply with the contract specification for ensuring equality for individuals with any sexual orientation.
Pregnancy and maternity	No.	Low	Low	No.	Not applicable
Marriage and	No.	Low	Low	No.	Yes – equalities must be promoted through ensuring that care providers

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Civil Partnerships					comply with the contract specification for ensuring equality for marriage and civil partnerships.
Carer's responsibilities	No	Low	Low		<p>Improved commissioning of residential services across Kent may benefit carers as identifying a home for the cared for should improve and there will be more equitable provision of services across the county.</p> <p>The new contract aims to commission residential respite services which will potentially have a positive impact on carers as it will improve the availability of respite care.</p>

Part 1: INITIAL SCREENING

Proportionality - Based on the answers in the above screening grid what weighting would you ascribe to this function – see Risk Matrix

Low	Medium	High
Low relevance or Insufficient information/evidence to make a judgement.	Medium relevance or Insufficient information/evidence to make a Judgement.	High relevance to equality, /likely to have adverse impact on protected groups

State rating & reasons

Medium – because the potential impact for the vast majority of individual living in residential care homes will have a limited impact on them. Assessed as medium, as there may be a limited number of cases where discussion and negotiation would need to take place with residential providers who are not awarded a contract or did not tender.

Context

The tender of the Residential Care Contract for individual with LDPDMH supports local and national strategies as follows:

The Accommodation Strategy

The Strategy was developed and launched in July 2014. It clearly articulates the agreed direction of travel in relation to residential care home provision. The conclusion of the Strategy for individuals with LDPDMH is to:

- Increase the provision of specialist and specialist plus homes and reduce the provision of standard Mid and High category residential homes; and
- Remodel services to be better geared up to accommodating individuals with specialist needs.

The new tender is in line with the Authority’s responsibilities under the Care Act 2014 and strategic drives as set out the KCC Strategic Vision published in March 2015 and contributes to one of the key strategic outcomes of ‘Older and vulnerable individuals feel socially included, individuals have greater choice and control over the health and social care they receive’.

Commissioning were tasked to review these services as part of the Accommodation Strategy.

Aims and Objectives

The aim of this tender is to have the new Residential Care Home contract for Individual with LDPDMH in place by April 2020, with the objectives of:

- Providing good outcomes for individuals;
- Achieving enough capacity and coverage;
- Ensuring a consistent and quality service countywide; and
- Delivering value for money.

The timeline has been revised to have the new Residential Care Home contract in place by June 2020

Beneficiaries

The Residential Care Home service for individuals with a Learning Disability, individuals with a Physical Disability and individuals with Mental Health needs is available to individuals who are assessed as requiring this type residential care by the local authority. Carers and families will also benefit from these residential care services by knowing that their family members are well cared for and being able to see far more transparency in the information collected and provided.

Information and Data

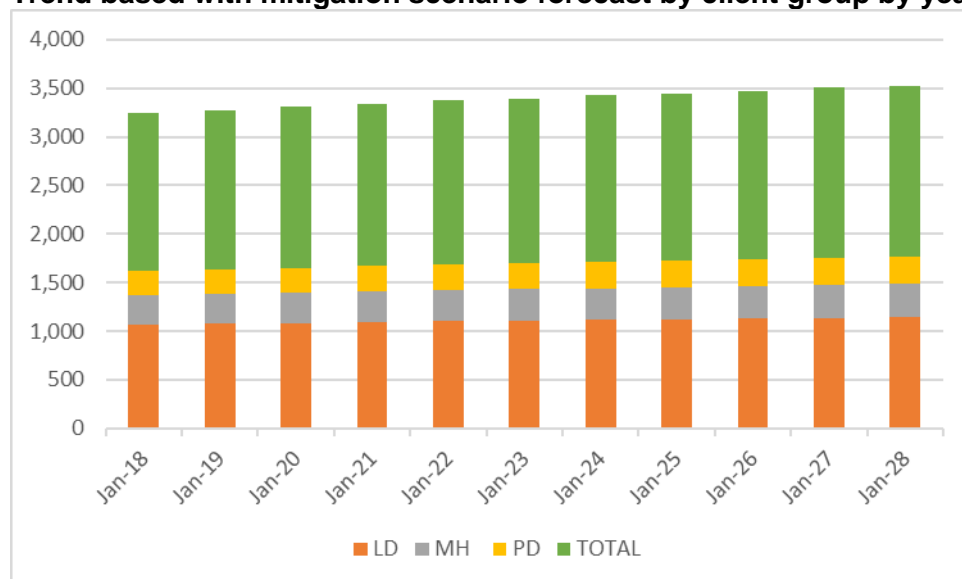
All KCC funded individuals must meet the eligibility criteria to receive a residential care service.

Age profile of current placements

Age Range	LD	PD	MH
18-24	70	10	2
25-34	160	20	15
35-44	188	28	29
45-54	260	60	61
55-64	196	100	90
65-74	119	45	71
75Plus	42	17	18
	1035	280	286

Average length of stay in residential services	Years
LD	10
PD	7
MH	6

Trend based with mitigation scenario forecast by client group by year



Increase in overall placements over a 10-year period 139
69 LD, 31 PD, 39 MH

Current number of residential beds available in Kent:

	LD	PD	MH	Total
Existing Residential Homes	2038	222	428	2688

The majority of residential care clients are individuals with a learning disability. There are around 1,600 individuals with LDPDMH who are in residential care in Kent.

LD clients make up the majority of placements, but as age increases the proportion of clients with physical disability or mental health increases. Some of this movement is a movement of clients from one category to another, with a higher proportion of LD clients aged 55 and over. The number of PD clients in residential care peaks in the age range 55-64 and drops sharply in the age range 65-74.

But also, in line with KCC's strategy, residential care is considered the last resort and the Social Care, Health & Wellbeing Directorate aims is to keep individual at home and independent for as long as is possible.

Therefore, in line with KCC's strategy, if the need for residential care placements can reduce through prevention and policies. If future demand by 2028 is 10% less across all client groups and all ages up to age 65. This leads to an increase of 139 overall placements over a 10 year period up to 2028.

Detailed data on the LDPDMH care home market is set out in Kent's Accommodation Strategy. The evidence indicates there is sufficient alternative supply of residential care available across Kent for the homes that may close.

The EqIA for the Accommodation Strategy can be found via the following link:

http://www.kent.gov.uk/_data/assets/pdf_file/0015/14460/Accommodation-Strategy-equality-analysis-impact-assessment.pdf

Scope

The current contracts for residential care services for individuals with a physical disability, individuals with learning disabilities and individuals with mental health needs were last let in 2002 for the Disabilities contract and 2004 for the Mental Health contract.

The market for residential care services within Kent is disparate and as the existing contracts have not been let for over 14 years, the sector may not be familiar with tendering for services within Kent. The introduction of the Care Act 2014 in April 2015 brought a number of historic laws into one Act. Therefore, the contracts are no longer fit for purpose or meet the needs of the Council.

The new contract will procure both long and short-term residential care provision and will be in place for a period of 4 years with an option to extend the contract for a further two years and after that, another two years.

Involvement and Engagement

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There needs to be a commitment to involving those who use these services in planning, commissioning and delivery. Engagement is required with both internal and external; stakeholders. Those that are internal need to be aware and understand all of the relevant changes to ensure the new contract is implemented efficiently and effectively.

Those that are external and connected to the Council will include the providers of care themselves. It is vital that engagement is conducted prior to the tender exercise for this contract and throughout the contract term. Early engagement will allow providers the time to prepare for the necessary tender submission and ask any questions of the Council to remove all ambiguity. This will also allow the benefits to be promoted to encourage providers to join the contract. Furthermore, feedback can be collected and, if necessary, implemented before anything is formally published.

Strategic Commissioning will hold market events in 2018. Additional market events took place in 2019. These market events will introduce the tender which will include the timescales, expectations and requirements to strengthen the relationship with the market and continue to collaborate on emerging issues.

Service User (Individuals) engagement – plans include engagement with individuals through; Healthwatch, the Learning Disability Partnership Board and District Partnership Groups; in addition, community PD and MH forums.

To avoid anxiety and concern for current individuals, consultation with them will take place when it is appropriate and when the likely impact on individuals is known.

During the tender period, individuals will continue to receive the same service. Where, as a result of this tender, there is a financial impact on individuals, engagement will take place with those affected and their families at the most appropriate time and at a localised level.

Throughout the engagement process where equality issues have been raised, they either have or will be added to this EqIA. As it stands, there have been no equality issues raised as part of the engagement process.

Following the first procurement process in September 2019, further work was completed to review the market and assess the reasons behind some providers choosing not to tender. The results gave multiple reasons including some specific to the individual provider; however, in the main, providers did not engage with the process due business oversight.

The Impact of the Coronavirus Act 2020

The Project Team recognises there is emerging evidence detailing some groups with protected characteristics and their carers having a higher impact than others by the coronavirus pandemic, this includes the impacts which may be a result of the Government's response and the control measures put in place to manage the emergency situation with the coronavirus. At this stage, the government is being directly lobbied by the Women and Equalities Commission to publish information related to negative equality impacts and the Older Persons Commission (Wales) has logged a complaint against the government with the Human Rights and Equalities Commission regarding the negative impacts of the corona virus.

These impacts may be perceived as having significantly unequal and different impacts on people because of race, gender, age, having a disability, sex, whether they are married or are in a civil partnership, being pregnant or having a baby,

religion or belief and/or sexual orientation and gender reassignment/trans. The project team will continue to factor in the vulnerability of different groups with protected characteristics, and inequalities in access, experience and outcomes in health and social care for these groups. In addition, the project team will continue to examine the emerging evidence detailing the wider cultural and societal systems of disadvantage which have an impact on those accessing this service, with a view to making positive changes.

The project team will ensure the relevant toolkits are used to support everyone with a protected characteristic e.g the Advancing Mental Health Equalities Toolkit in order to help make a difference to those who are disproportionately affected by the coronavirus and/or the government's response measures.

A request has been made to the government to publish the Equalities Impact Assessment of the Coronavirus Act 2020, which to date has been withheld. The outcomes from the assessment cannot be filtered into local strategies until published. Once this has been published a more in-depth understanding of the potential inequalities may be examined and further Action Planning and front-line support will be put in place. This has been reflected in the Action Plan.

***Gender reassignment/Trans**

The Project Team recognise the standardised use of 'Gender reassignment' as a reference to this group of people as directed by the Equalities Act 2010. However, research as been conducted with people who are recognised within this group, one report detailed that the use of the term 'gender reassignment' and 'transsexual' in the act are now out of date and perceived as misleading and possibly offensive. The preferred umbrella term is Trans. In order to comply with the act and respect the wishes of people within this group the term 'Gender reassignment/Trans' has been used within this report.

Potential Impact

For the vast majority of current individuals, this tender will have no material impact on them at all. But it is anticipated that the new contract will have a positive impact and given the population of the residential market it will have a greater impact in relation to Disability groups. This new contract points to KCC's commitment to transform the service over coming years.

Adverse Impact

In very exceptional circumstances a small number of individuals may lose continuity of care in the event that their current provider does not tender or is not awarded a contract or refuses to accept the terms and conditions of KCC. A change of this kind and/or an amendment to the contribution that they pay may cause anxiety and disruption to existing relationships. This will be addressed by the development of an individual service continuation plan to help minimise disruption and offer a number of options. It is not expected that this will affect a large number of individuals.

In the unlikely event that, following discussions, a home does decide that it will not continue to provide a service for existing (current) individuals, KCC will work closely with the individual, their carers and relatives and the home, to ensure there is a smooth transition to a home which meets their needs fully.

Positive Impact

The tender provides the opportunity to review and update the contract documentation to place more emphasis on:

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- Equality and the minimisation of discrimination;
- Protecting the individual's Human Rights; and
- Reinforcing provider responsibility.

These positive impacts will contribute to raise the quality and standard of service delivery to the benefit of all individuals.

It is anticipated that there will be a more equitable provision of services across the county and services with gaps in provision have been identified.

The impact will be evidenced through performance monitoring through key performance indicators.

JUDGEMENT

Option 2 – Internal Action Required

There is potential for adverse impact on particular groups.

The tender of the Residential Care Home Contracts for individuals with LDPDMH is not a complete redesign of service and does not directly impact on the protected characteristics of individuals.

Given the population of residential care homes, there will be an impact on individuals with disabilities and individuals with mental health needs. There could be some providers choosing to leave the market and, in these circumstances, KCC would find the most appropriate alternative care provision for them and following assessment, a different service may be required. Given the current unprecedented situation with the Covid 19 pandemic there may be both short and long-term changes to the business functions of some providers. KCC is working closely through the local teams to manage this situation.

Action Plan

The Action Plan indicates a requirement to develop service continuation plans to minimise any disruption and to offer a choice of options for affected individuals. KCC will continue to work with all providers to ensure all service continuation plans are revised and updated to reflect the heightened needs given the continued learning from the Covid 19 pandemic.

Monitoring and Review

The development of an exit strategy has been identified on the Risk Log for this tender and will be built into the implementation timetable to ensure this occurs. Monitoring and review requirements will be developed as part of the exit strategy.

The working group allocated to this project will regularly review this EqlA and agree further actions as required.

Attestation

I have read and paid due regard to the Equality Analysis/Impact Assessment concerning the Recommissioning of Residential Care Home services for Individual with a Learning Disability, Individual a Physical Disability and Individual with Mental Health Needs.

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I agree with risk rating and the actions to mitigate any adverse impact(s) that has /have been identified.

Signed:

Name: Clare Maynard

Job Title: Head of Commissioning Portfolio– Communities, Older and Vulnerable Individual

Date:

DMT Member

Signed:

Name: Richard Smith

Job Title: Corporate Director, Adult Social Care and Health

Date:

Equality Impact Assessment Action Plan

Protected Characteristic	Issues identified	Action to be taken	Expected outcomes	Owner	Timescale	Cost implications
Age, Disability and Race	Current individuals <u>may</u> see a change to either their care provider or cost which may cause anxiety and disruption to existing relationships. It is not intended that individual will move, however if the provider requests that the individual moves there will be little option	<p>A service continuation plan will be developed for individuals affected.</p> <p>Assurances will be provided, and impact will be discussed. All individuals affected will be fully engaged in any move on plans, as will relatives.</p> <p>Communication will be provided in a range of texts, formats suitable for individual with a disability or sensory impairments or for those whose first language is not English or if this is limited.</p>	<p>Work towards minimising disruption to individuals.</p> <p>Individuals and their family carers will be informed and have the opportunity to influence changes that affect them.</p>	DCALDMH / Assistant Directors	Development is in progress.	<p>Adult Purchasing Team already in place.</p> <p>Care Management time.</p>
Age and Disability	New individuals will be better supported to secure	Yes, the purchasing process will offer equal opportunities	It is intended that this process will be managed by a	DCALDMH / Assistant Directors	Development is in progress.	Adult Purchasing Team is already in place.

	residential care placements. This will allay fears and provide support at a difficult time.	for all providers.	dedicated team of purchasers who have knowledge and understanding of the average price of care in that area and will know the market. It is not intended that there be any impact on new individual going into residential care.			
Age, Disability, Sex, Gender reassignment/Trans, Race, Sexual orientation, Religion or belief, and Marriage and Civil Partnership	Data required to understand the changing needs of the individuals accessing the service.	Data to continue to be collected in line with GDPR to support the commissioning of new services towards the end of the life of this contract.	A clear and concise picture of those accessing our services is captured to inform future need e.g. individual living with a learning disability may have a higher prevalence of dementia which would need specialist provision.	DCALDMH / Assistant Directors	Throughout the life of the contract	Unknown at present
All people with protected	Need EqIA for Coronavirus Act	Project Team to Check Human	Improved health and social care	Paula Watson	Development in progress.	Unable to assess or estimate due to

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characteristics	2020 to understand all outcomes.	Rights and Equality Commission website for updates on monthly basis.	outcomes – this can only be fully assessed once the EqIA has been received.			unprecedented circumstances.
All people with protected characteristics	Unassessed impacts from societal systems, etc related to the inequalities from the corona virus.	Project Team to check Human Rights Commission website for updates on a monthly basis.	Unable to assess outcomes until results published.	Paula Watson	Development in Progress	Unable to assess or estimate due to the unprecedented circumstances.