Equality & Poverty Impact Assessment 00550 (Version 1)

SECTION ONE: ESSE	SECTION ONE: ESSENTIAL INFORMATION								
Service & Division:	Social Work Adult Services	Lead Officer Name:	Nicola Morrison						
	Community Care	Team:	Learning Disability Team						
		Tel:	+447731941899						
		Email:	nicola.morrison@falkirk.gov.uk						
Proposal:	The project is for the procurement of a new Falkirk HSCP Primary Framework Agreement for the Provision of Care Homes for Adults Under 65 with Learning Disability (LD), Mental Health (MH), Physical Disability (PD), Drugs and Alcohol Related Brain Injury (ARBI) and Complex and Challenging Behaviour from 01 April 2024. There is currently no national or local framework in place to cover all care categories. A key requirement of the framework is to provide flexibility for Falkirk HSCP to meet the requirements of people in their local area. The intention of the framework will be to maximise the number of providers capable of delivering high quality residential care to Falkirk residents. The adult framework for all care categories seeks to stimulate further market interest in this area and potentially create more capacity and increase choice and control and improve lifestyles for all care groups/supported persons requiring a service. It will seek to ensure sufficient quality and value for money provision with the capability and capacity to deliver high quality service to all care categories. The framework will make positive differences to people who are seeking a care home placement as they will be able to look at the list of care homes that are available and make a choice of where they want to be placed in line with their requirements.	Reference No:	00550						

The key principles for this framework are:-

1. Enhance pricing transparency and minimise payment queries to improve quality data.

2. Maximise collaboration and enhance a partnership approach in the market.

3. Stimulate interest in this area of work and create a wide choice of high-quality, person-centred services and control for people using services.

4. Ensure continuity of care and focuses on the achievement of personal outcomes.

5. Promote health and social care standards.

6. A more coordinated approach to sourcing Adult Care Home placements which in turn will create efficiencies for HSCP staff.

7. Provide a mechanism for improving quality and consistency in standards and outcomes for people using the service.

8. Gain a greater understanding of the nature of the services including training and specialisms through the tender

process, leading to better informed decisions.

9. Incorporate the principles of Ethical Commissioning into the process.

10. Ensure spend undergoes a full procurement exercise and improves governance.

The rationale for this framework builds on local and national policy drivers all aimed at upholding values and delivering high standards and improving the quality and consistency of support for people who require residential care and to ensure a more co-ordinated approach to sourcing adult care home placements which in turn will create efficiencies for

HSCP staff and overall ensure intelligent led procurement. The framework agreement for care homes for adults under 65 is the first agreement for this service category and represents an opportunity to capture all spend in this area under a robust procurement route, improve governance and to contract with providers with agreed terms and conditions. It seeks to encourage innovative approaches to promoting choice and control, increasing life choices, and improving lifestyles for adults with LD/Autism, MH, Drugs & ARI, PD and complex and challenging behaviour and supporting people to maintain or develop links with their preferred communities.							
What is the Proposal?		Budget & Other Financial Decision	Policy (New or Change)	HR Policy & Practice	Change to Service Delivery / Service Design		
		Yes	Yes	No	Yes		
Who does the	Proposal affect?	Service Users	Members of the Public	Employees	Job Applicants		
		Yes	Yes	No	No		
Other, please	specify:						
Identify the m	nain aims and projected ou	tcome of this proposal (please	add date of each update):				
24/08/2023	To provide flexibility for F	alkirk HSCP to meet the require	ements of people in their local	area.			
24/08/2023	To maximise the number of providers capable of delivering high quality residential care to Falkirk residents.						
24/08/2023	To stimulate further market interest in this area and potentially create more capacity and increase choice and control and improve lifestyles for all care groups/supported persons requiring a service.						
24/08/2023	Seeks to ensure sufficient quality and value for money provision with the capability and capacity to deliver high quality service to all care categories.						

SECTION TWO: FINANCIAL INFORMATION			
For budget changes ONLY please include info	rmation below:		Benchmark, e.g. Scottish Average
Current spend on this service (£'0000s)	Total:	£16 million per annum, £72 million over the 4 year period projected to rise to £20 million per annum, £80 million over 4 year period.	Increases have been built into the projected spend, considering the estimated annual uplifts relating to the payment of the Real Living Wage, in accordance with Scottish Government guidance,
Reduction to this service budget (£'0000s)	Per Annum:		Cost avoidance figures are likely to be achieved by rolling out a Falkirk HSCP primary framework with agreed terms and conditions and the HSCP adhering to a set catalogue of prices.
Increase to this service budget (£'000s)	Per Annum:	£4 million per annum, £16 million over 4 year period.	As above, increase has been tapered in for annual uplifts.
If this is a change to a charge or	Current Annual Income Total:	Not Applicable	
concession please complete.	Expected Annual Income Total:	Not Applicable	
If this is a budget decision, when will the	Start Date:	01/04/2025	
saving be achieved?	End Date (if any):		

SECTION THREE: EVIDENCE Please include any evidence or relevant information that has influenced the decisions contained in this EPIA. (This could include demographic profiles; audits; research; health needs assessments; national guidance or legislative requirements and how this relates to the protected characteristic groups.)

A - Quantitative Evidence This is evidence which is numerical and should include the number people who use the service and the number of people from the protected characteristic groups who might be affected by changes to the service.

Data as of January 2023 highlighted there were 193 supported people in Adult Care homes; there was 101 In- Area placements & -92 OOA Placements. 123 of the supported people living in the care homes were male and 70 were female. The breakdown of client groups was as follows: -

Care Category	No Clients	%
Acquired Brain Injury	2	1.03%
Alcohol Related	3	1.55%
Autism	1	0.52%
Dementia	4	2.07%
Drugs	3	1.55%
Elderly/Frail	1	0.52%
Hearing Impairment	1	0.52%
Learning Disability	79	40.93%
Mental Health	54	27.98%
Neurological Condition	2	1.04%
Not Known	8	4.15%
Palliative Care	1	0.52%
Physical Disabilities	33	17.10%
Visually Impaired	1	0.52%

A comprehensive review was carried out using data from several resources which was then fed directly into an option and needs analysis. This analysis then informed consultation with stakeholders and the options concerned were developed from the outcome of these discussions. The data and information analysed as part of this review was sourced from Local and National Policy:-

- Learning Disability and Autism Transformation plan (2021)
- Same as You (2000)
- The Keys to Life (2013)
- Coming Home Implementation Report (2018)
- Public Bodies (Joint Working) (Scotland) Act 2014
- Independent Review of Adult Social Care
- National Care Service
- The Promise
- National Mental Health Strategy (2017 2027)/Mental Health Law Review
- National Dementia Strategy
- See Hear: A strategic framework for meeting the needs of people with sensory impairments in Scotland (2014)
- Drugs and Alcohol National Mission on Drugs Deaths: Plan (Minister recently appointed for Drug and Alcohol)
- Rights, Respect & Recovery: Alcohol and Drug Treatment Strategy

Spend Analysis

Spend Analysis Spend information taken from Abacus/Controc and Integra.

Market Analysis

Benchmarking and networking took place with other local authorities as part of this process all aimed at improved standards and outcomes.

Consultation meetings with teams were facilitated to discuss commissioning data, what it was informing the HSCP and to ensure care management experience was fed into the process. Staff discussed the operation of the contract and options for the future of the contract and gauged views about future requirements. The overall aim was to ensure that the framework meets the HSCP's requirements.

Individual discussions with representative of key statutory organisations

Care Inspectorate Grades Comparisons (Adult Care Homes)

Census Report Analysis March 2022

The Lang and Buission report "Illustrative Cost Models in Learning Disabilities: Social Care Provision" May 2011

Procurement of Care and Social Care Guidance

Service Characteristics

Commissioning Data

Census Report 2022

Service user Breakdown Data

Commissioning Data

Service User Specification Requirements and Considerations

B - Qualitative Evidence This is data which describes the effect or impact of a change on a group of people, e.g. some information provided as part of performance reporting.

Social - case studies; personal / group feedback / other

A main driver in the development of the framework is to improve services for people who use them. It was fundamental that the views and wishes of people who use the services and who have experience of living in a care home service was at the heart of this project. To gain a holistic understanding of this perspective, Falkirk HSCP collated feedback on the support provided to people within local adult care homes, to ensure the support people receive is suited to their needs and wants. People who currently live in a local care home and their family members and carers were invited to share their views completing an online survey on Citizen's Space. The survey ran from 10/05/23 to the 23/06/23. In site visits were made available in the first week in June 2023 where supported people were helped via low tech visual

communication tools (Talking Mats) to complete the survey. The links to the survey and updates about the survey were shared with colleagues at Forth Valley Advocacy and the Carers Centre.

Falkirk HSCP Communications officer advertised the consultation via Falkirk Council website and social media page and devised posters for each local care home to display and to promote the survey to supported people, carers and families.

- 8 people responded to the online survey (data was captured in terms of sex, age, sexual orientation, legal status, British citizenship or from another country, ethnicity, employment status, do you have unpaid responsibility for children as a parent, grandparent, guardian etc, In the past year, have you taken leave, do you have a physical or mental health condition or illness, or a learning disability, which you expect to last for 12 months or more, If yes, does your condition or illness reduce your ability to carry out day to-day activities?). A further 40 people completed the easy read surveys however data in terms of protected characteristics was not captured for this part of the project. This has been noted and will be fed into lessons learned to ensure it is captured moving forward. Responses to the online surveys (8 people) were as follows:-
- The support I receive within the care home helps me to manage my own health and wellbeing and enables me to make choices. 100% agreed.
- The support I receive within the care home helps me to feel respected. 100% agreed. 100% agreed.
- The support I receive within the care home helps me to meet my outcomes. 100% agreed.
- The support I receive within the care home allows me to engage in daily routines, such as setting up activities and mealtimes. 100% agreed.
- The support I receive within the care home gives me an opportunity to engage in education, learn, and work. 50 % Agreed, 12.5% disagreed, 37.50% stated they did not know.
- The support I receive within the care home helps me to have fun100% agreed.
- What do you like best about the service you receive within the care home 4 /8 responses which detailed as follows:

Bowling, going to the gym and swimming, shopping, visiting family, having coffee, walks. Residents reported that the following was good about the service: bowling, going to the gym and swimming, shopping, visiting family, having coffee, walks. Key themes that emerged about staff included supportive staff, encouraged by staff, feel listened to, like the staff, being supported to achieve goals, I have choice and control.

• What could be improved about the service you receive within the care home? 4 /8 responses which detailed as follows: -

One comment was made about staff - "staff should be more involved in understanding the residents on a deeper level (support workers), i.e., likes and dislikes - how to interact with us when in a bad mood and understand our case history and what we have been through." There have been multiple comments about food and diet. One person requested "bread rolls every day at breakfast would be nice." Other comments included: "The food can be repetitive", "menu planning", and "provide a healthy balanced diet, don't allow me to eat wrong foods as I'm putting on weight."

Out of the 8 responses the following was reported:

- Sex: 12.5% were female and 87.50% male.
- Age- 24-44 62.50%, 45-64 12.5%, > 65 25%.
- Sexual orientation -heterosexual 100%.
- Legal Status- single 75%, 25% widowed
- British Citizenship 87.5%, 12.5% not answered.
- Are you a national of another country? 12.5% EU National, 87.5% not answered.
- Ethnicity White Scottish 50%, White British 37.5%, Mixed or multiple ethnic groups 12.5%.
- What religion, religious denomination or body do you belong to? None 62.5%, church of Scotland 25%, roman catholic 12.5%.
- What is your employment status? Not employed and looking for work 12.5%, Not employed and not looking for work 62.5%, retired 25%.
- Do you have unpaid responsibility for children as a parent, grandparent, guardian etc.? not answered 100%.
- In the past year, have you taken leave 100% not answered.
- Do you have a physical or mental health condition or illness, or a learning disability, which you expect to last for 12 months or more? 100% answered Yes.
- If yes to above, does your condition or illness reduce your ability to carry out day to-day activities? 100% answered yes, a lot.

The responses showed overall positive experiences of care homes with some negative views as noted above. Feedback from the service user consultation will inform the service specification moving forward.

Best Judgement:					
Has best judgement been used in place of data/research/evidence?	No				
Who provided the best judgement and what was this based on?	n/a				
What gaps in data / information were identified?	n/a				
Is further research necessary?	No				
If NO, please state why.	n/a				

Has the proposal / policy / project been subject to engagement or consultation with service users taking into account their protected characteristics and socio-economic status?	Yes		
If YES, please state who was engagement with.	Internal stakeholders Care Providers Carers / Service Users		
If NO engagement has been conducted, please state why.			
How was the engagement carried out?		What were the results from the engagement? Please list	
Focus Group	Yes	Early engagement to optimise opportunities for co-production. This exercise was all aimed at upholding values, delivering high standards and improving the quality and consistency of support for people who require residential care.	
Survey	Yes	Service user involvement in service review arrangements. This exercise was all aimed at upholding values, delivering high standards and improving the quality and consistency of support for people who require residential care.	
Display / Exhibitions	No		
User Panels	No		
Public Event	No		
Other: please specify		n the consultation will improve Governance and the project overall. The specification has been ensuring improved outcomes for all.	
Has the proposal / policy/ project been reviewed / changed as a result of the engagement?		No	
Have the results of the engagement been fed bac consultees?	ck to the	Yes	
Is further engagement recommended?		No	

SECTION FIVE: ASSESSING THE IMPACT

Equality Protected Characteristics:

What will the impact of implementing this proposal be on people who share characteristics protected by the Equality Act 2010 or are likely to be affected by the proposal / policy / project? This section allows you to consider other impacts, e.g. poverty, health inequalities, community justice, carers etc.

Protected Characteristic	Neutral Impact	Positive Impact	Negative Impact	Please provide evidence of the impact on this protected characteristic.
Age		~		This framework will ensure more visibility of care homes for people under 65 and over 65 (who require an adult care home placement) and promote choice and control, increasing life choices, and improving lifestyles for clients. People under and over 65 can make choices in terms of where they want to live and are supported to meet their outcomes regardless of their age. Data from the engagement exercise confirms that 100% of the people consulted with in local care homes felt supported to manage their wellbeing, make choices, feel respected, engage in daily activities, have fun and meet their outcomes. Out of the 100% 62.50% were aged 24-44, 12.5% were aged 45-64 and 25% were over 65. Overall, the data highlights the proposal will continue to have a positive impact on people regardless of their age.
Disability		~		This framework seeks to encourage innovative approaches to promoting choice and control, increasing life choices, and improving lifestyles for adults with varied disabilities e.g., LD/Autism, MH, Drugs & ARBI, PD and complex and challenging behaviour and supporting people to maintain or develop links with their preferred communities. People can make choices in terms of where they want to live and are supported to meet their outcomes regardless of their disabilities. Data from the engagement exercise confirms 100% of people surveyed confirmed they had a physical or mental health condition or illness, or a learning disability, which you expect to last for 12 months or more and that 100% of the people felt supported to manage their wellbeing, make choices, feel respected, engage in daily activities, have fun and meet their outcomes. The framework will promote choice and control, increasing life choices, and improving lifestyles for clients regardless of their disabilities.

Public Sector Equality Duty: Scottish Public Authorities must have 'due regard' to the need to eliminate unlawful discrimination, advance quality of opportunity and foster good relations. Scottish specific duties include:

		from the engagement exercise confirms that 100% of the people consulted with in local care homes felt supported to manage their wellbeing, make choices, feel respected, engage in daily activities, have fun and meet their outcomes. Out of the 100%, 12.5% were female and 87.50% were male. Overall, the data highlights the proposal will continue to have a positive impact and that people can make choices in terms of where they want to live and are supported to meet their outcomes regardless of their gender. The framework will not impact on people who do not identify as male or female; it applies to all genders.
Ethnicity		The framework will assist in identifying care homes that meet the needs of people's ethnicity in order to meet people's requirements and to ensure the best outcomes for them. Data from the engagement exercise confirms that 100% of the people consulted with in local care homes felt supported to manage their wellbeing, make choices, feel respected, engage in daily activities, have fun and meet their outcomes. Of the 100% surveyed; 50% were white Scottish, 37.5% White British and 12.5% from mixed or multiple ethnic groups. Overall, the framework will have a positive impact on people. People can make choices in terms of where they want to live and will be supported to meet their outcomes regardless of their ethnicity. The framework will apply to all ethnicities.
Religion / Belief / non-Belief		The framework will assist in identifying care homes that meet the needs of people's religion and beliefs/non beliefs in order to meet people's requirements and ensure the best outcomes for them. The breakdown of the 100% of people who were surveyed and who confirmed they were enabled to meet outcomes is as follows: 62.5% reported no religion, 25% church of Scotland and 12.5% roman catholic. This framework will assist people to make choices in terms of where they want to live and support them to meet their outcomes regardless of their religion, belief and non-belief.
Sexual Orientation	✓	The framework will assist in identifying care homes that meet the needs of people's sexual orientation in order to meet people's requirements and ensure the best outcomes for them. 100% of people surveyed, confirmed they were heterosexual. People can make choices in terms of where they want to live and are supported to meet their outcomes regardless of their sexual orientation.
Transgender	✓	Identified data gap. This is not captured as part of the contract management process. Will do so moving forward.

Pregnancy / Maternity	✓		Identified data gap. This is not captured as part of the contract management process. Will do so moving forward.	
Marriage / Civil Partnership	✓		Identified data gap. This is not captured as part of the contract management process. Will do so moving forward.	
Poverty		*	The framework aims to ensure improved outcomes for people. The Scottish Government new national performance framework takes into account the United Nations sustainable development goals and the following is relevant to the tender: no poverty. Data from the consultation exercise confirmed that 12.5% of people were not employed and looking for work, 62.5% not employed and not looking for work and 25% retired. This framework strives to assist people meet their outcomes (e.g. look for work if relevant) and both parties to the contract will work together to ensure peoples outcomes are met. Overall, it will have a positive impact on people and seeks to mitigate poverty.	
Care Experienced	~		Identified data gap. This is not captured as part of the contract management process. Will do so moving forward.	
Other, health, community justice, carers etc.		*	 Fair Working Practices/Ethical Commissioning are embedded into the contract evaluation and award process. With a well-motivated, well led and skilled workforce our care providers will be better placed to support people to live happily and safely in adult care homes. Improved contracts and service specifications = improved outcomes for people using the services Sustainability tests also ensure good health and wellbeing for people. This will be 	
			embedded into the framework and monitored via contract management.	
Risk (Identify other risks associated with this change)	All positi	ive to ensure better outcomes for people using the services.		
			Evidence of Due Regard	
Eliminate Unlawful Discrimination (harassment, victimisation and other prohibited conduct):		people had fun wellbeing and r supported peop	rted people reported that they felt respected via the service user consultation data. 100% of . 100% of people reported that the support helped them to manage their own health and make choices and meet their outcomes, including engaging in daily activities. Staff work with ole to ensure they do not experience harassment, victimization etc. Overall, this framework strives lawful discrimination.	

Advance Equality of Opportunity:	This framework will advance equality of opportunity for people using the services as evidenced by the service user consultation data. People are enabled to manage their own health and wellbeing and make choices, engage in daily activities, such as setting up activities and mealtimes. People reported they are enabled to meet their outcomes and that they felt respected. Overall, people feel empowered and overall, the framework aims to advance equality of opportunity for supported people.
Foster Good Relations (promoting understanding and reducing prejudice):	100% of supported people reported that they felt respected via the service user consultation data. 100% of people had fun. 100% of people reported that the support helped them to manage their own health and wellbeing and make choices and meet their outcomes, including engaging in daily activities. Given this, it appears the framework is an example of fostering good relations whereby staff work with supported people to support them and reduce prejudice.

SECTION SIX: PARTNERS / OTHER STAKEHOLDERS				
Which sectors are likely to have an interest in or be affected by the proposal / policy / project?		Describe the interest / affect.		
Business	Yes	Private Sector Care Providers will be interested in participating in the Framework Agreement.		
Councils	Yes	Other Local Authorities will be interested in learning more about the approach we have taken. Some Local Authorities have already approached us to seek data.		
Education Sector	No			
Fire	No			
NHS	Yes	The NHS is represented in the IJB which is responsible for planning, resourcing and the operational oversight of a wide range of health and social care services.		
Integration Joint Board	Yes	The IJB has responsibility for budgets and services being delivered in accordance with the Falkirk Health & Social Care Partnership Strategic Plan.		
Police	No			
Third Sector	Yes	Third Sector Care Providers may be interested in participating in the Framework Agreement.		
Other(s): please list and describe the nature of the relationship / impact.				

SECTION SEVEN: ACTION PLANNING								
tak	If you have identified impacts on protected characteristic groups in Section 5 please summarise these in the table below detailing the actions you are taking to mitigate or support this impact. If you are not taking any action to support or mitigate the impact you should complete the No Mitigating Actions section below instead.							
Identified Impact	To Who	Action(s)	Lead Officer	Evaluation and Review Date	Strategic Reference to Corporate Plan / Service Plan / Quality Outcomes			
No Mitigating Actions								
Please explain why you de	o not need to take any a	ction to mitigate or support the impac	t of your proposals.					
		st; there is no potential for discrimination he tender documents are designed to c						
The rationale for this framework builds on local and national policy drivers all aimed at upholding values and delivering high standards and improving the quality and consistency of support for people who require residential care.								
Are actions being reporte	Are actions being reported to Members? Yes							
If yes when and how ?		17th October 2023 via a Prior Consideration Report						

SECTION EIGHT: ASSESSMENT OUTCOME

Only one of following statements best matches your assessment of this proposal / policy / project. Please select one and provide your reasons.					
No major change required	Yes	Overall, this framework is designed to benefit all protected characteristics and it is anticipated there will be neutral and positive impacts for the protected characteristics as listed above.			
The proposal has to be adjusted to reduce impact on protected characteristic groups	No				
Continue with the proposal but it is not possible to remove all the risk to protected characteristic groups	No				
Stop the proposal as it is potentially in breach of equality legislation	No				
SECTION NINE: LEAD OFFICER SIGN OFF					
Lead Officer:					

Signature:	Nicola Morrison	Date:	24/08/2023

OVERALL A	SSESSMENT OF	well as ownership and a	IA: Has the EPIA demonstrated the use of data, appropriate engagement, identified mitigating actions as well as ownership and appropriate review of actions to confidently demonstrate compliance with the general and public sector equality duties?			
ASSESSMENT FINDINGS If YES, use this box to highlight evidence in support of the assessment of the EPIA		The significant research and consultation which has been carried out indicates that there is a strong evidence base to support that this proposal does not negatively impact on any of the protected characteristics.				
If NO, use this box to highlight actions needed to improve the EPIA						
Where adverse impact on diverse communities has been identified and it is intended to continue with the proposal / policy / project, has justification for continuing <u>without</u> <u>making changes been made</u> ?		No	If YES, please describe:			
LEVEL OF IN	/IPACT: The EPI	A Task Group has agreed the follo	wing level of im	pact on the protected characteristic groups highlighted within th	e EPIA	
LEVEL	EVEL COMMENTS					
HIGH	No					
MEDIUM	No					
LOW	Yes	The proposal to develop this tender and implement a more flexible framework for those individuals with complex care needs will				

SECTION ELEVEN: CHIEF OFFICER SIGN OFF

groups discussed in this assessment.

Director / Head of Service:						
Signature:	Martin David Thom	Date:	28/08/2023			

improve outcomes and there is no reason to suggest that there will be any negative imp[act on any of the protected characteristic