

Equality & Poverty Impact Assessment 00912 (Version 1)

SECTION ONE: ESSENTIAL INFORMATION

Service & Division:	Social Work Adult Services Community Care	Lead Officer Name:	Hazel Webb
		Team:	Central Locality
		Tel:	07802926899
		Email:	hazel.webb@falkirk.gov.uk
Proposal:	<p>The proposal is that all care is outsourced to external care providers in one Housing with care unit. External commissioning would be in line with the partnerships care and support at home framework.</p> <p>Housing with care has 4 units and currently provides all care at home to residents who are tenants. There is currently improvement work in progress, this includes completing assessments for all tenants receiving care at home. To date, only 1 unit has had all tenants assessed (Unit A), proposed savings are based on these assessments.</p> <p>Unit A has several individual tenants/tenancies. Twenty seven of those tenants are currently receiving a care at home service. An average of 27.36 of hours per day is provided across all service users.</p> <p>Based on this figure the total number of care at home hours for Unit A that would need to be sourced and provided externally is 9986 per annum. At an average cost of £25 per hour, this gives an annual spend of £249,660.</p> <p>The predicted spend for Unit A for 2024/2025 is £385,170 (over budget by £20,000 approximately). Part of this overspend is used on overtime staffing hours and agency hours. The service is also being supported by Internal care at home; however, this level of support cannot be quantified and is very changeable. This data is currently being gathered for the purposes of this proposal.</p> <p>If all care provision for Unit A was out sourced, the predicted saving is approximately £135,510 per annum.</p>	Reference No:	

it should be considered that this saving could potentially be applied across other housing with care sites, with an indicative saving of £542,000. Care at home is supporting all housing with care complexities, therefore we could anticipate a slight increase to savings over time (as well as projected/anticipated agency savings).

There are cultural and practice challenges within this area of the Partnership, which is resource intensive. Any changes to this could/may contribute to savings.

There would be no change in costs for individual service users

What is the Proposal?	Budget & Other Financial Decision	Policy (New or Change)	HR Policy & Practice	Change to Service Delivery / Service Design
	Yes	No	No	Yes
Who does the Proposal affect?	Service Users	Members of the Public	Employees	Job Applicants
	Yes	No	Yes	No
Other, please specify:				

Identify the main aims and projected outcome of this proposal (please add date of each update):	
27/11/2024	Outsource all care at home provision in one Housing with care unit to an external care provider.

SECTION TWO: FINANCIAL INFORMATION

For budget changes ONLY please include information below:			Benchmark, e.g. Scottish Average
Current spend on this service (£'0000s)	Total:	£385,170	
Reduction to this service budget (£'0000s)	Per Annum:	£135,510	
Increase to this service budget (£'000s)	Per Annum:		
If this is a change to a charge or concession please complete.	Current Annual Income Total:		
	Expected Annual Income Total:		
If this is a budget decision, when will the saving be achieved?	Start Date:	01/07/2025	
	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.

Housing with care has 4 units and currently provide all care at home to residents who are tenants. Currently there is improvement work ongoing, this includes: completing assessments for all tenants receiving care at home. To date, only 1 unit has had all tenants assessed Unit A

The proposal is that all Housing with care services that are currently provided in one unit are outsourced to external care providers.

Individual service users would continue to have regular reviews of their care needs as happens in all care settings.

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

Feedback has been sought via **Participate plus** on the partnerships budgets proposals. 257 responses were received.

A number of **engagement sessions** have also been held in a variety of venues

Carers Voice Group (27/01)-34 people.

Larbert Library drop-in session (28/01)-20 people

ADP Authentic Voices Group (03/02) -8 people

Grangemouth Library drop-in session (07/02) -12 people

Falkirk High Flats Tenants Association (10/02) -15 people

Happy Mondays Bonnybridge Group (10/02)-40-50 people

Review of Housing with care.

Consider the options for delivering this service more efficiently

227 participants responded to the question ' What impact would this proposal would have?'

73 (32%) of respondents feel changes would have a significant impact

78 (34%) of respondents feel changes would have some impact

76 (24%) of respondents feel there would be no impact/don't know

Please provide more detail about this impact. (49 responses)

Respondents frequently emphasised the importance of maintaining and potentially expanding Housing with Care services, highlighting their role in supporting independence and reducing the need for care home placements. Concerns were raised about the potential negative impacts of reducing these services, such as increased pressure on families, care homes, and hospitals. There is a call for more sheltered housing options, particularly for those with learning disabilities, autism, and complex medical needs.

Several respondents expressed uncertainty or confusion about the proposed changes and their implications. Some highlighted the need for clear eligibility criteria and regular reviews to ensure best value for money.

Concerns about low wages and staffing levels were also mentioned. The potential impact on social isolation and mental health if care packages are reduced was noted. Some respondents suggested that transferring services to the third sector or private care could be a solution. Overall, there is a strong sentiment that these services are crucial and should be preserved or enhanced to meet the needs of an ageing population.

How might we reduce any negative impact? (31 responses)

Respondents frequently emphasised the need for increased support and resources in housing with care, suggesting that more facilities and better funding could help maintain independence and prevent the need for full-time residential care.

Many highlighted the importance of involving staff and service users in decision-making processes to ensure transparency and effective communication. There was a call for better assessment of individual needs to tailor services appropriately.

Concerns were raised about the potential negative impacts of reducing services or increasing costs without corresponding improvements in care quality. Additionally, respondents stressed the importance of social interaction and community support to enhance mental and physical wellbeing among the elderly.

Has best judgement been used in place of data/research/evidence?	No
Who provided the best judgement and what was this based on?	
What gaps in data / information were identified?	
Is further research necessary?	No
If NO, please state why.	No. The equality impact of health and social care services is relatively well researched, even if local data can be difficult to ascertain. Research relating to Scotland or the UK as a whole can be used to fill gaps in local data.

SECTION FOUR: ENGAGEMENT

Engagement with individuals or organisations affected by the policy or proposal must take place

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.	<p>Feedback has been sought via Participate plus on the partnerships budgets proposals. 257 responses were received.</p> <p>A number of engagement sessions have also been held in a variety of venues</p> <p>Carers Voice Group (27/01)-34 people.</p> <p>Larbert Library drop-in session (28/01)-20 people</p> <p>ADP Authentic Voices Group (03/02) -8 people</p> <p>Grangemouth Library drop-in session (07/02) -12 people</p> <p>Falkirk High Flats Tenants Association (10/02) -15 people</p> <p>Happy Mondays Bonnybridge Group (10/02)-40-50 people</p>	
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	No	
Survey	Yes	Results from the survey have been included in section 3. A total of 227 participants responded to questions about Housing with Care
Display / Exhibitions	No	
User Panels	No	

Public Event	No	
Other: please specify		
Has the proposal / policy/ project been reviewed / changed as a result of the engagement?	No	
Have the results of the engagement been fed back to the consultees?	No	
Is further engagement recommended?	Yes	

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	✓			Older people are the highest users of health and social care services. Overall, the proposal will have a neutral impact on older people as care will continue as planned with only the provider of care changing.
Disability	✓			People will continue to receive an equivalent service from an alternative provider. There will be a continued focus on developing person centred care which will result in continued choice and control for people with a disability.
Sex	✓			There is insufficient evidence to measure the impact on this protected characteristic, therefore the impact is assessed as neutral.
Ethnicity	✓			There is insufficient evidence to measure the impact on this protected characteristic, therefore the impact is assessed as neutral.
Religion / Belief / non-Belief	✓			There is insufficient evidence to measure the impact on this protected characteristic, therefore the impact is assessed as neutral.
Sexual Orientation	✓			There is insufficient evidence to measure the impact on this protected characteristic, therefore the impact is assessed as neutral.
Transgender	✓			There is insufficient evidence to measure the impact on this protected characteristic, therefore the impact is assessed as neutral.
Pregnancy / Maternity	✓			There is insufficient evidence to measure the impact on this protected characteristic, therefore the impact is assessed as neutral.
Marriage / Civil Partnership	✓			There is insufficient evidence to measure the impact on this protected characteristic, therefore the impact is assessed as neutral.
Poverty	✓			There is insufficient evidence to measure the impact on this protected characteristic, therefore the impact is assessed as neutral.

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:

Other, health, community justice, carers etc.	✓			There is insufficient evidence to measure the impact on this protected characteristic, therefore the impact is assessed as neutral.
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Risk (Identify other risks associated with this change)				
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	Evidence of Due Regard
Eliminate Unlawful Discrimination (harassment, victimisation and other prohibited conduct):	People who use the service will be supported to access the service as they do with current care at home services.
Advance Equality of Opportunity:	
Foster Good Relations (promoting understanding and reducing 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-external providers are commissioned by HSCP to provide a service. There will be more availability of care hours for these providers.
Councils	No	
Education Sector	No	
Fire	No	
NHS	No	
Integration Joint Board	Yes	Private sector-external providers are commissioned by HSCP to provide a service. There will be more availability of care hours for these providers.
Police	No	
Third Sector	No	
Other(s): please list and describe the nature of the relationship / impact.		

SECTION SEVEN: ACTION PLANNING

Mitigating Actions: 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 do not need to take any action to mitigate or support the impact of your proposals.

There is no negative impact on protected characteristics from this proposal

Are actions being reported to Members?	No
If yes when and how ?	

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	No negative impacts on protected characteristics are anticipated
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:	<i>Hazel Webb</i>	Date:	28/11/2024
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SECTION TEN: EPIA TASK GROUP ONLY

OVERALL ASSESSMENT OF EPIA:	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?	Yes
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ASSESSMENT FINDINGS If YES, use this box to highlight evidence in support of the assessment of the EPIA If NO, use this box to highlight actions needed to improve the EPIA	Question on this proposal was included in the public consultation on the business case.	
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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 making changes been made</u>?	No	If YES, please describe: No adverse impact identified.
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LEVEL OF IMPACT: The EPIA Task Group has agreed the following level of impact on the protected characteristic groups highlighted within the EPIA

LEVEL		COMMENTS
HIGH	Yes / No	
MEDIUM	Yes / No	
LOW	Yes	Impact against protected characteristics has been assessed as neutral.

SECTION ELEVEN: CHIEF OFFICER SIGN OFF

Director / Head of Service:		
Signature:	<i>Caroline Doherty</i>	Date: 14/03/2025