

Equalities Impact Assessment: Full Assessment

Before completing this form you should have completed an Equalities Screening Tool and had sign off from your Head of Service and the Fairness and Equality Team.

This Equality Impact Assessment should be completed where the Screening Tool identifies a potentially negative impact on one or more specific groups but it can also be used to highlight positive impacts.

Summary of proposal

Name of proposal	Home Care Services
Reference number (if applicable)	N/A
Service Area	Strategic Commissioning and Investment
Date assessment completed	3 May 2022

Before completing the EQIA please read the guidance and FAQs. For further help and advice please contact equalities@islington.gov.uk.

1. Please provide a summary of the proposal.

Please provide:

- Context on how the service currently operates (if relevant) and the scope of suggested changes
- The intended beneficiaries and outcomes of the proposal
- Reference to any savings or income generation

Home Care, also known as Domiciliary Care, covers a wide range of activities, including but not limited to, personal care; re-ablement; support with medication and household tasks to support people with long-term care needs in the community. Residents may require these services for a short period to recover from illness or injury for example, or for a longer period to allow them to remain safe, independent and living in their own home.

Home care is a key component of Islington's Adult Social Care vision to support residents to live healthy, fulfilling and independent lives; maximising independence and connecting them with their community, ensuring equality and fairness throughout.

Home care current operates a 'Time and Task' model, meaning care workers are given a list of prescriptive tasks/activities to complete at particular times of day to support the resident to live safely at home. The new model of home care aims to provide a more enabling approach with residents, which is focused on achieving personal objectives (or outcomes) based on wellbeing and independence rather than on care workers completing specific tasks.

Our ambitions for Home Care centre around four key benefit areas:

- Improving outcomes for residents through a personalised, strengths-based approach that maximises wellbeing and independence for all
- Ensuring capacity within high quality provision able to meet diverse needs and fluctuations in demand
- Driving a more inclusive economy through fair pay and good conditions for the care workforce; and community wealth building
- Delivering greater value for money by better managing demand, preventing or delaying escalation of need

2. What impact will this change have on different groups of people?

Please consider:

- Whether the impact will predominantly be external or internal, or both?
- Who will be impacted – residents, service users, local communities, staff, or others?
- Broadly what will the impact be – reduced access to facilities or disruptions to journeys for example?

Overall the impact will be positive. Recipients of services and their families/social network will receive a more personalised service in which they have greater choice and control.

Staff will also be impacted. Home care staff will be required use a new approach to supporting residents – training and supervision will be provided to support workers to make this change. The change gives them more agency and more flexibility to provide care in the best way for the person in question.

Home Care managers will also be expected to change how they work and they will be expected to develop partnerships with organisations and services based in their neighbourhood (i.e. voluntary and community organisation, community health providers etc.)

Social workers and some other community based practitioners will also experience changes to how they interact with home care services. They will be required to work closer and in a more joined-up way with home care services. Engagement work has started to manage this transition.

3. What impact will this change have on people with protected characteristics and/or from disadvantaged groups?

This section of the assessment looks in detail at the likely impacts of the proposed changes on different sections of our diverse community.

3A. What data have you used to assess impacts?

Please provide:

- Details of the evidence used to assess impacts on people with protected characteristics and from disadvantaged groups (see guidance for help)
- A breakdown of service user demographics where possible
- Brief interpretation of findings

Current demographic breakdown of Islington service users with a home care package was used to support assessment of impact on people with protected characteristics.

Key demographic information

Female	Male	Trans Gender	Unspecified
1062	746	1	1

Age range	SU	SU as %
18-24	13	0.72%
25-39	71	3.92%
40-49	99	5.47%
50-64	337	18.62%
65-79	518	28.62%
80-89	515	28.45%
90+	257	14.20%
Total	1810	100.00%

Ethnic Group	SU	SU as %
White	1094	60.44%
Asian	102	5.64%
Black	329	18.18%
Mixed	44	2.43%
Other Ethnicity	168	9.28%
Refused to state	23	1.27%
Unknown	50	2.76%
Total	1810	100.00%

Home Care is a service for residents with physical or mental impairments and is chiefly used by older people (71%), meaning most people using the service will be older or have a disability.

3B: Assess the impacts on people with protected characteristics and from disadvantaged groups in the table below.

Please first select whether the potential impact is positive, neutral, or negative and then provide details of the impacts and any mitigations or positive actions you will put in place.

Please use the following definitions as a guide:

Neutral – The proposal has no impact on people with the identified protected characteristics

Positive – The proposal has a beneficial and desirable impact on people with the identified protected characteristics

Negative – The proposal has a negative and undesirable impact on people with the identified protected characteristics

Characteristic or group	Positive/Neutral/Negative	What are the positive and/or negative impacts?	How will potential benefits be enhanced or negative impacts be eliminated or reduced?
Age	Positive	The new model will provide older people in receipt of the service more choice and control.	Older peoples' care will be personalised and focused on what they want to get out of the support.

Characteristic or group	Positive/Neutral/Negative	What are the positive and/or negative impacts?	How will potential benefits be enhanced or negative impacts be eliminated or reduced?
Disability (include carers)	Positive	The new model will provide residents with a disability in receipt of the service more choice and control.	Residents with a disability's care will be personalised and focused on what they want to get out of the support.
Race or ethnicity	Positive	The new model will include specialist home care provision including culturally specific care. Residents will be able to access care in line with their individual needs i.e. support from a care worker who speaks the same first language as them.	Cultural needs will be discussed with residents as part of their strengths based social care assessment to ensure their package of care is set up with the right provider.

Characteristic or group	Positive/Neutral/Negative	What are the positive and/or negative impacts?	How will potential benefits be enhanced or negative impacts be eliminated or reduced?
Religion or belief (include no faith)	Positive	The new model will include specialist home care provision including culturally specific care. Residents will be able to access care in line with their individual needs i.e. a care worker who understands how their religion or beliefs influence how their support is provided.	Religious needs will be discussed with residents as part of their strengths based social care assessment to ensure their package of care is set up with the right provider.

Characteristic or group	Positive/Neutral/Negative	What are the positive and/or negative impacts?	How will potential benefits be enhanced or negative impacts be eliminated or reduced?
Gender and gender reassignment (male, female, or non-binary)	Positive	The new model will ensure care and support is personalised and service user led. The new model will include specialist home care provision including culturally specific care.	Staff will be encouraged to provide person focused care, looking at residents as individuals rather than any societal characteristic such as gender. Personal wishes around gender will be discussed with residents as part of their strengths based social care assessment.
Maternity or pregnancy	Neutral	No impact identified	N/A

Characteristic or group	Positive/Neutral/Negative	What are the positive and/or negative impacts?	How will potential benefits be enhanced or negative impacts be eliminated or reduced?
Sex and sexual orientation	Positive	The new model will ensure care and support is personalised and service user led. The new model will include specialist home care provision including culturally specific care.	Staff will be encouraged to provide person focused care, looking at residents as individuals. Personal wishes around sexual orientation will be discussed with residents as part of their strengths based social care assessment.
Marriage or civil partnership	Neutral	No impact identified	N/A

Characteristic or group	Positive/Neutral/Negative	What are the positive and/or negative impacts?	How will potential benefits be enhanced or negative impacts be eliminated or reduced?
<p>Other Age (e.g. elderly) (e.g. people living in poverty, looked after children, people who are homeless or refugees)</p>	<p>Choose an item.</p>	<p>N/A</p>	<p>N/A</p>

4. How do you plan to mitigate negative impacts?

Please provide:

- An outline of actions and the expected outcomes
- Any governance and funding which will support these actions if relevant

No negative impacts identified.

5. Please provide details of your consultation and/or engagement plans.

Please provide:

- Details of what steps you have taken or plan to take to consult or engage the whole community or specific groups affected by the proposal
- Who has been or will be consulted or engaged with
- Methods used or that will be used to engage or consult
- Key findings or feedback (if completed)

Resident engagement

A comms and engagement plan has been completed. A flyer to attract interested residents will be circulated across all relevant channels. Interested residents will be given a variety of options to engage such as

- Online sessions (zoom)
- One-to-one phone calls
- Surveys
- Ongoing working groups and meetings
- Face-to-face sessions in community and council services
- Helping us buy the right services

Feedback will be used to further shape the new model

Please provide:

- Details of what steps you have taken or plan to take to consult or engage the whole community or specific groups affected by the proposal
- Who has been or will be consulted or engaged with
- Methods used or that will be used to engage or consult
- Key findings or feedback (if completed)

The intention is to identify residents through this engagement to form a coproduction group that will support the writing of the service specification, tender questions and be involved in the evaluation process.

Engagement and coproduction will also be embedded in the commissioned services.

Market engagement

Commissioners have been working closely with key home care providers to develop the new model. Additionally, a series of market warming and engagement events are being held to test the model and ensure the market is prepared to bid for the tender. So far these have focused on introducing the ambitions for home care and best practice examples from other LAs who are already delivering services in line with our proposed new model. The next sessions will focus on strengths based care and support and tendering process for LA contracts.

6. Once the proposal has been implemented, how will impacts be monitored and reviewed?

Please provide details in the table below.

Action	Responsible team or officer	Deadline
Improved outcomes for residents will be monitored through support planning, care reviews and quality assurance via service user feedback.	All – social workers, home care providers and contract officers	Ongoing from contract go-live

Please send the completed EQIA to equalities@islington.gov.uk for quality checking by the Fairness and Equality Team. All Equality Impact Assessments must be attached with any report to a decision-making board and should be made publicly available on request.

This Equality Impact Assessment has been completed in accordance with the guidance and using appropriate evidence.

Member	Name	Signed	Date
Staff member completing this form	Ruby Pearce	R.Pearce	03/05/2022
Fairness and Equality Team	Hayley Sims	H. Sims	05/05/2002
Director or Head of Service			