



Haringey Council

Equality Impact Assessment

Name of Project	Corporate Plan Priority 2 - Options appraisal of delivery model for Carers' assessments and reviews to inform Cabinet member decision	Cabinet meeting date if applicable	09/02/2016
Service area responsible	Adult Social Services		
Name of completing officer	Nasreen Nazir	Date EqIA created	Draft 22/01/2016
Approved by Director / Assistant Director	<i>B. F. Tacka</i>	Date of approval	03/02/2016

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'due regard' to:

- Eliminating discrimination, harassment and victimisation and any other conduct prohibited under the Act
- Advancing equality of opportunity between those with 'protected characteristics' and those without them
- Fostering good relations between those with 'protected characteristics' and those without them.

In addition the Council complies with the Marriage (same sex couples) Act 2013.

Haringey Council also has a 'Specific Duty' to publish information about people affected by our policies and practices.

All assessments must be published on the Haringey equalities web pages. All Cabinet papers MUST include a link to the web page where this assessment will be published.

This Equality Impact Assessment provides evidence for meeting the Council's commitment to equality and the responsibilities outlined above, for more information about the Councils commitment to equality; please visit the Council's website.

Stage 1 – Names of those involved in preparing the EqIA

1. Transformation Project Manager – Nasreen Nazir	5.
2. Policy & Equalities Officer – William Shanks	6.
3.	7.
4.	8.

Stage 2 - Description of proposal including the relevance of the proposal to the general equality duties and protected groups. Also carry out your preliminary screening (Use the questions in the Step by Step Guide (The screening process) and document your reasoning for deciding whether or not a full EqIA is required. If a full EqIA is required move on to Stage 3.

The recommendation:

- 1.1 The purpose of the report is to ask the Cabinet member for a mandate to consult on a new model for delivering carers' assessments, and for the delegated authority to commission the new model for the Carers' contract following the closing of the consultation, and due consideration of the consultation feedback. This model would:
 - 1.1.1 Support the identification of carers as well as providing information, advice and guidance to carers from an early stage across a whole range of areas including training, understanding of the condition (for example, dementia) of the person they care for, housing and accommodation and welfare benefits. The provision would facilitate peer support and signpost to opportunities for carers in the community. The new combined services would also deliver the assessment function, the provision of carers' support and the Carers' Register all of which are currently provided by the Council. The new service would be commissioned to meet the requirements to enable carers to have a life outside caring offered by the current payment system.
 - 1.1.2 Change the practice on carers' direct payments. Currently, carers may be given support in cash of between £100-£300 per year to support them, based on a self assessment of their needs through a form. This information inputted into this form is then used to calculate the level of support, with the higher level of funding given to people who fill in more needs. Support is then given in the form of this money, and the money was traditionally supposed to be used to help the carer to take a break. However the spending of the money is not tracked for how it is used, and there is no

evidence of it improving outcomes. Furthermore, it is not necessarily the case that a break for the carer would be the form of support that the carer most needs- for example, carers may wish for a different kind of support, and a direct payment would not necessarily help them to do this. The new model would provide a different kind of support which would be linked to meeting the outcomes that carers say they want to achieve.

1.1.3 Commission organisations in the voluntary and/or private sectors to carry out carers' assessments and support planning, Carers' assessments would no longer be carried out by the Council. This function would transfer to the new community based provider, who would be expected to build on a self-assessment model, which would take on board carer feedback and use it to plan support for carers to achieve the outcomes that are important to them.

Stage 3 – Scoping Exercise - Employee data used in this Equality Impact Assessment	
Identify the main sources of the evidence, both quantitative and qualitative, that supports your analysis. This could include for example, data on the Council's workforce, equalities profile of service users, recent surveys, research, results of recent relevant consultations, Haringey Borough Profile, Haringey Joint Strategic Needs Assessment and any other sources of relevant information, local, regional or national.	
Data Source (include link where published)	What does this data include?

Stage 4 – Scoping Exercise - Service data used in this Equality Impact Assessment	
This section to be completed where there is a change to the service provided	
Data Source (include link where published)	What does this data include?
EqIA Profile on Harinet (2011 Key statistics and facts sheet) http://www.haringey.gov.uk/council-and-democracy/about-council/facts-and-figures/statistics/haringey-census-statistics	Sex, Age, Ethnicity, Disability information, Race & Ethnicity, Religion/Belief, Marriage and Civil Partnership – for the Borough of Haringey
Mosaic	Service Users
Data on Carers' direct payments and the Carers's register	
Stage 5a – Considering the above information, what impact will this proposal have on the following groups in terms of impact on residents and service delivery: Positive and negative impacts identified will need to form part of your action plan.	
Positive	Negative
	Details
	None – why?

Sex:	All Haringey	%	Carers getting a Direct payment
All people	254,926		764
Males	126,224	49.5%	172
Females	128,702	50.5%	583
Unknown			9
			2.2%

X

X

The change to the pathway and Direct payments will affect more female carers than male carers.

There is likely to be a positive impact from the proposed changes to the Pathway (one single point of contact for carers) as this will make it easier for carers to know where to get an assessment, who to follow up with, and put them in touch with a carers' information and advice services even if they do not formally qualify for assessment and support planning.

There may be some positive impact from the proposed changes to support planning, as this is currently provided to carers in the form of a direct payment. Some carers may find support planning for the outcomes they want to achieve more helpful than a cash lump sum.

There may be a negative impact to some carers from the proposed changes to Direct payments, as carers who may use the cash amount to purchase the support they need might find reduced support.

This could however be alleviated via a variety of support services that will instead be offered to carers.

The consultation following the report for the Cabinet member will collect data on protected characteristics, where the participant chooses to disclose it. If there are impacts arising for the protected characteristics during the consultation, and they will be considered and analysed again following the consultation.

There is insufficient data to allow an analysis

Gender Reassignment

				<p>of the impact of the recommendations on staff in consideration of their Gender reassignment status as Haringey Council does not keep this information for carers and it does not affect the service they would get.</p> <p>There will be an opportunity for carers and members of the public to raise any impacts arising for this characteristic during the consultation. The consultation will also ask for this information from participants, should they wish to disclose it.</p>
Age	The change to the pathway and Direct payments will disproportionately affect carers who are in the 40-64 age bracket, followed by those in the 65-79 age bracket.	X	X	

Age:			%	Carers getting a direct payment
Total	263,386			764
0-17				
18-24	82,058	31%	7	0.9%
25-39	82,130	31%	50	6.5%
40-64	75,392	28.6%	444	58.1%
65-79	18,109	6.8%	172	22.5%
80+	5,697	2.1%	52	6.8%
Unknown			39	

Disability

There is likely to be a positive impact from the proposed changes to the Pathway (one single point of contact for carers) as this will make it easier for carers to know where to get an assessment, who to follow up with, and put them in touch with a carers' information and advice services even if they do not formally qualify for assessment and support planning.

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The office of National Statistics does not collect detailed information on the

Disability:	Carers issued a direct payment	Carers known to the Council
All people	764	
N/A or no record	748	97.9%
Learning disability	5	0.6%
Long term health condition	9	1.1%
Mental health condition	2	0.2%

The Office of National Statistics does not collect detailed information on type of disabilities.

Religion or Belief (or No Belief)

Religion or Belief (or No Belief):	All Haringey	%
All people	254,926	
Christian	114,659	45.0%

type of disabilities, so it is not possible to know if any group of carers will be disproportionately affected by the proposed changes to the Carers' service.

There will be an opportunity for carers and members of the public to raise any impacts arising for this characteristic during the consultation. The consultation will also ask for this information from participants, should they wish to disclose it.

There is insufficient data to allow an analysis of the impact of the recommendations on staff in consideration of their religious

Buddhist	2,829	1.1%
Hindu	4,539	1.8%
Jewish	7,643	3.0%
Muslim	36,130	14.2%
Sikh	808	0.3%
Other Religion	1,303	0.5%
No Religion	64,202	25.2%
Not Stated	22,813	8.9%

<p>status as Haringey Council does not keep this information for carers, as it does not affect the service they would get.</p> <p>There will be an opportunity for carers and members of the public to raise any impacts arising for this characteristic during the consultation. The consultation will also ask for this information from participants, should they wish to disclose it.</p>				<p>Race & Ethnicity</p> <table border="1"> <thead> <tr> <th>Race & Ethnicity:</th> <th>All Haringey</th> <th>%</th> <th>Carers with direct payment</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>All people</td> <td>254,926</td> <td></td> <td>764</td> <td></td> </tr> <tr> <td>White</td> <td>154,343</td> <td>60.5%</td> <td>333</td> <td>43.5%</td> </tr> <tr> <td>Mixed</td> <td>16,548</td> <td>6.5%</td> <td>16</td> <td>2%</td> </tr> </tbody> </table>	Race & Ethnicity:	All Haringey	%	Carers with direct payment	%	All people	254,926		764		White	154,343	60.5%	333	43.5%	Mixed	16,548	6.5%	16	2%
Race & Ethnicity:	All Haringey	%	Carers with direct payment	%																				
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Mixed	16,548	6.5%	16	2%																				
			<p>X</p>	<p>There appears to be disproportionately more Black carers getting a direct payment than expected from the general Haringey population, and fewer White carers (where "disproportionate" is taken to mean +/- 5% difference from the rest of the population). There is not sufficient evidence to say why this might be the case.</p> <p>There is likely to be a positive impact from the proposed changes to the Pathway (one single point of contact for carers) as this will make it easier for carers to know where to get an assessment, who to follow up with, and</p>																				
			<p>X</p>																					

Asian	24,150	9.5%	67	8.7%
Black	47,830	18.8%	230	30%
Other ethnic group	12,055	4.7%	29	3.8%
Unknown			52	6.8%

put them in touch with a carers' information and advice services even if they do not formally qualify for assessment and support planning.

There may be some positive impact from the proposed changes to support planning, as this is currently provided to carers in the form of a direct payment. Some carers may find support planning for the outcomes they want to achieve more helpful than a cash lump sum.

There may be a negative impact to some carers from the proposed changes to Direct payments, as carers who may use the cash amount to purchase the support they need might find reduced support.

This could however be alleviated via a variety of support services that will instead be offered to carers.

The consultation following the report for the Cabinet member will collect data on protected characteristics, where the participant chooses to disclose it. If there are impacts arising for the protected characteristics during the consultation, and they will be considered and analysed again following the consultation.

There is insufficient data to allow an analysis of the impact of the recommendations on staff in consideration of their Sexual orientation status

Sexual Orientation

<p>as Haringey Council does not keep this information for carers as it does not affect the service they would get.</p> <p>There will be an opportunity for carers and members of the public to raise any impacts arising for this characteristic during the consultation. The consultation will also ask for this information from participants, should they wish to disclose it.</p>				
<p>There is insufficient data to allow an analysis of the impact of the recommendations on staff in consideration of their Pregnancy and Maternity status as Haringey</p>				<p>Pregnancy & Maternity</p>

<p>Council does not keep this information for carers, as it does not affect the service they would get.</p> <p>There will be an opportunity for carers and members of the public to raise any impacts arising for this characteristic during the consultation. The consultation will also ask for this information from participants, should they wish to disclose it.</p>	<p>There is insufficient data to allow an analysis of the impact of the recommendations on staff in consideration of their Marriage and Civil Partnership status as Haringey Council does not</p>
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Marriage and Civil Partnership

Marriage and Civil Partnership:	All Haringey	%
All people over 16 years old	202,856	
Single	101,526	50.0%
Married	67,559	33.3%
Separated	8,066	4.0%

Divorced	16,646	8.2%
Widowed	7,868	3.9%
Same-sex civil partnership	1,191	0.6%
Not Stated	0	0%

keep this information for carers and it does not affect the service they would get.

There will be an opportunity for carers and members of the public to raise any impacts arising for this characteristic during the consultation. The consultation will also ask for this information from participants, should they wish to disclose it.

Stage 5b – For your employees and considering the above information, what impact will this proposal have on the following groups: Positive and negative impacts identified will need to form part of your action plan.

	Positive	Negative	Details	None – why?
Sex				<p>There should not be any impact on staff from the proposed new model of providing carers' assessments. No members of staff spend a significant proportion of their time carrying out carers' assessments; indeed a part of the reason for the new model is that there is a lack of a clear 'carers social worker/team' to carry out assessments who carers can follow up with when there are delays in assessments, or when circumstances change. Staff will not lose or gain jobs as a result of this, and some staff may continue to do joint assessments of the carer and the cared-for-service-user if requested to do so.</p> <p>There is insufficient data to allow an analysis of the impact of the recommendations on staff and their protected characteristics. There will be an opportunity for staff to raise any impacts arising for the protected characteristics during the consultation.</p>
Age				
Gender Reassignment				
Disability				
Race & Ethnicity				
Sexual Orientation				
Religion or Belief (or No Belief)				
Pregnancy & Maternity				
Marriage and Civil Partnership (note this only applies in relation to eliminating unlawful discrimination (limb 1))				

Stage 6 - Initial Impact analysis

Women, and older carers, and carers who identify their ethnicity as Black, are disproportionately represented amongst the carers population, relative to the general Haringey population.

There are likely to be positive impacts for carers from the proposed changes to pathways via the creation of one single point for registering as a carer, getting assessed and getting support planning.

There may be a negative impact to some carers from the proposed changes to Direct payments, as carers who may use the cash amount to purchase the support they need might find reduced support. However, this is to be mitigated by providing alternative forms of support planning that could tangibly support a carer to meet their own wellbeing outcomes. Additionally, it is possible that support planning for carers via a carers' service, who might be better trained to support carers to remain resilient, will be a more beneficial form of support to carers by ensuring that their outcomes are being achieved. For example, under the new model, carers with direct payments don't simply remain untracked and potentially isolated and deteriorating in health trying to manager their needs through cash payments alone, but may instead get other forms of support planning.

Consultation with carers will more fully indicate the impact of this new model.

Actions to mitigate, advance equality or fill gaps in information

There may be a negative impact to some carers from the proposed changes to Direct payments, as carers who may use the cash amount to purchase the support they need might find reduced support. However, this is to be mitigated by providing support planning that could tangibly support a carer to meet their own wellbeing outcomes. Additionally, it is possible that support planning for carers via a carers' service, who might be better trained to support carers to remain resilient, will be a more beneficial form of support to carers by ensuring that their outcomes are being achieved. For example, under the new model, carers with direct payments don't simply remain untracked and potentially isolated and deteriorating in health trying to manager their needs through cash payments alone, but may instead get other forms of support planning. This kind of issue could however be alleviated via a variety of support services that will instead be offered to carers.

A 30 day consultation will be carried out following the report for the Cabinet member. During the consultation, data on protected characteristics will be collected, where the participant chooses to disclose it. There will be an opportunity for staff to raise any impacts arising for the protected characteristics during the consultation, and they will be considered and analysed again following the consultation.

Feedback from the consultation will be considered and used to shape future services. The provider of the carers' service will be required to report on outcomes as part of a performance monitoring regime. This will include monitoring of the impact on the protected characteristics, with the provider required to collect information about the characteristics of service users. Monitoring of this information will allow the Council to uncover any potential adverse impacts on the protected characteristics during the life of the contract, and action will be taken where possible to mitigate these impacts.

Stage 7 - Consultation and follow up data from actions set above

Data Source (include link where published)

Consultation data- consultation yet to be carried out

What does this data include?

Stage 8 - Final impact analysis

Stage 9 - Equality Impact Assessment Review Log

Review approved by Director / Assistant Director

B. F. Tucker

Date of review

Review approved by Director / Assistant Director

Date of review

Stage 10 - Publication

Ensure the completed EqIA is published in accordance with the Council's policy.