

Equality Impact Assessment For employees and/or communities

This EIA form will assist you to ensure we meet our duties under the Equality Act 2010 to take account of the needs and impacts of the proposal or function in relation to people with protected characteristics. Please note, this is an ongoing duty. This means you must keep this EIA under review and update it as necessary to ensure its continued effectiveness.

Section 1: Proposal details

Directorate / Service Area:		Person undertaking the assessment:	
People & Communities		Name:	Graeme Hodgson
Proposal being assessed:		Job Title:	Commissioning Manager, Adult Social Care
Individual Service Funds Tender		Contact details:	graeme.hodgson@cambridgeshire.gov.uk
Business Plan Proposal Number: (if relevant)	N/A	Date commenced:	10 th January 2022
		Date completed:	12 th January 2022
Key service delivery objectives:			
<p>This paper outlines the procurement approach to enable onboarding of Individual Service Fund providers through a Dynamic Purchasing System (ISF DPS), initially in East Cambs (under the Care Together programme) and in Peterborough. The same ISF DPS will be used when Care Together is expanded countywide. Approval is sought for a 5-year DPS (3+1+1) enabling providers and brokers of care to receive referrals to administer the personal budgets of ISF holders.</p>			
Key service outcomes:			
<p>For referrals to be made to organizations to hold the Personal Budget of individuals identified by practitioners as eligible and suitable for an Individual Service Fund, a group of trusted providers who have fully understood the proposal and what is expected in terms of personalised care and support planning with maximum choice, flexibility and control by the ISF holder must be onboarded following best procurement practices and current legislation.</p> <p>The maximum expenditure to be allocated through this DPS (in the form of personal budgets) is £17.7 million over the next 5 years, replacing a similar spend in Home Care/Physical Disability/Learning Disability budgets, with the same service user groups being supported using the new, more personalised option of ISFs in place of traditional commissioned care packages.</p>			
What is the proposal?			
<p>Following creation of the Direct Payment (DP) Board in October 2020, an analysis was undertaken of Cambridgeshire performance data on percentage of people with eligible care needs opting for DPs (23% vs. 26% regional average). Feedback from service users and social workers suggested that many people did not opt for a DP on account of the burden of financial and administrative responsibility for managing one and fears over continuity of care if they directly employ a Personal Assistant.</p>			

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The Adult Social Care Commissioning Team identified an opportunity to increase the proportion of people with eligible care needs accessing self-directed support by offering Individual Service Funds (ISFs). The Centre for Welfare Reform was subsequently invited to provide support and training to Cambridgeshire County Council staff in best practices associated with ISFs and a license for the software 247grid, for personalised care and support planning, was acquired.

On 23rd November 2021, Cambridgeshire & Peterborough Joint Commissioning Board approved a proposal for a Dynamic Purchasing System (DPS) tender process as the recommended procurement approach to onboarding Individual Service Fund providers.

Since the total maximum spend on Individual Service Funds during the proposed 5-year lifetime of the DPS could reach £17.7 million alongside a corresponding saving of the same amount on budgets relating to Home Care/Physical Disability/Learning Disability services, this is classified as a Key Decision and as such requires approval from Adults & Health Committee.

What information did you use to assess who would be affected by this proposal?

Since this proposal is for a procurement approach which is only open to providers who broker or deliver care (in two separate lots), the only parties affected are the providers themselves. The Dynamic Purchasing System itself has no impact on service users. However, ISFs are available for all age groups and service user groups, including those with protected characteristics under the Equality Act (2010). In order to ensure that personal choice of the service user is central, not only have people with lived experience been involved in the writing and scoring of evaluation questions, but if an individual wishes to be supported by a specific organisation not currently on the DPS, they can request for that provider to be included at any time. This avoids the creation of local monopolies or clients being forced to work with providers with a poor track record of catering for LGBT+ people or members of the BAME community.

Are there any gaps in the information you used to assess who would be affected by this proposal?

There is no proposed change in the profile of people with eligible care needs who would be affected by this proposal, that is, anyone with eligible care needs can receive a personal budget in the form of an ISF.

Who will be affected by this proposal?

This proposal positively affects everyone with eligible care needs in the local authority area (across Cambridgeshire and Peterborough). Including:

- Older Adults
- Learning Disability
- Physical Disability
- Carers
- Children with care needs

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Consultation evidence

State who was consulted and when (e.g. internal/external people and whether they included members of the affected groups). State which potentially affected groups were considered. Append consultation questions and responses or equivalent.

Healthwatch Carers Partnership Boards – Nov 2021
Healthwatch Physical Disability Partnership Boards – Nov 2021
Care Together Co-Creation Events in Ely, Soham, Littleport & Burwell – Oct 2021
Cambridgeshire County Council & Peterborough City Council Operational Staff (Social Workers) – Oct 2021
Peterborough Council for Voluntary Service (PCVS) – Oct 2021
People Plus (Direct Payment Support Service) – Oct 2021

Based on consultation evidence or similar, what positive impacts are anticipated from this proposal?

This includes impacts retained from any previous arrangements. Use the evidence you described above to support your answer.

The proposal for ISFs was extremely well-received by those with lived experience of eligible care needs, carers present at the partnership boards and especially social workers who are on the front line, working closely with people at risk. The increased degree of personalisation, choice and control that ISFs afford is welcomed and those with protected characteristics are the most likely to benefit from being given more of a say in how their personal budget is spent than is the case with traditional care packages. This is particularly true where a Personal Assistant is hired to support an individual in the way they direct them do work, with personal choice and preference being possible right from the recruitment and hiring phase, through to how day-to-day tasks are performed. In the past, framework providers have on occasion demonstrated intolerance of some people with protected characteristics such as members of LGBT+ and BAME communities as well as others covered by the Equality Act (2010) e.g. gender reassignment. The approach outlined above enables the individual service user to choose who they wish to be supported by and indeed recommend that trusted providers of their choice apply to join the DPS.

By definition, those with protected characteristics relating to disability or older age are positively impacted through greater choice, flexibility and control over how their care needs are met.

In addition, care workers (on low incomes) can be positively impacted as this model enables payment of self-employed care workers (sole traders) who form micro-enterprises, resulting in potential increase in earnings despite lower cost to the individual/Council funding care.

Based on consultation evidence or similar, what negative impacts are anticipated from this proposal?

This includes impacts retained from any previous arrangements. Use the evidence you described above to support your answer.

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There are a small number of areas where potential risk of negative impact lies:

- Possible migration of small numbers of home care agency staff (earning minimum wage, for example) to a model where they operate as sole traders (where they can earn slightly more, despite charging less than a home care agency would charge to deliver the same service). However, mitigation is in place in the form of central government funding for recruitment and retention and a clear directive from the Council for the Community Catalyst supporting development of care micro-enterprises who would be paid via ISF to avoid recruiting existing care workers, so as not to destabilise the market.
- Continuity of care can be a concern for those who currently directly employ a Personal Assistant (PA). When the PA goes on annual leave or statutory sick pay, it is not always easy to find a replacement. Mitigation includes working closely with PAs and sole traders to promote partnership working and collaborative cooperation so one can cover another's absences. In the ISF model, the responsibility for finding cover falls to the ISF provider, rather than to the individual.
- Safeguarding, Health & Safety, Infection Prevention & Control and other policies and practices are often more established in larger, CQC-regulated providers, rather than some of the sole traders or micro-enterprises entering the care market. For this reason, special training and support is given by the Council-commissioned Community Catalysts to ensure best practices are adhered to and guidance is also given for obtaining of CQC-regulated status if personal care is being delivered. Furthermore, in Lot 2 of the ISF DPS, established, larger providers, such as home care agencies, are able to act as ISF providers and would therefore already be CQC-regulated.

How will the process of change be managed?

Poorly managed change processes can cause stress / distress, even when the outcome is expected to be an improvement. How will you involve people with protected characteristics / at risk of poverty/isolation in the change process to ensure distress / stress is kept to a minimum? This is particularly important where they may need different or extra support, accessible information etc.

This model of procurement of ISF Providers is a new service to be offered to people with eligible care needs alongside the existing option of a Direct Payment or a commissioned care package and as such is creating more choice and opportunities for personalisation. Practitioners will present clients with the alternatives, as well as pros and cons, allowing the individual to make the final decision as to how they wish to be supported. In this way, people with eligible care needs will be given full choice and control and are free to opt for any one of the three forms of support presented to them, switching back to a Direct Payment from an ISF if they so wish, or even to an arranged provision with a framework provider. If they choose to do down the ISF route, a call will go out from Brokerage to the ISF providers who have previously been onboarded via the tender proposed in this EqIA and details of all those who respond positively (regarding their capacity to assist) will then be sent to the client

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for a final decision to be made regarding which ISF provider they wish to enter into an agreement with. Once again, clients are free to revert to another form of care and support if they decide an ISF is not for them at any time.

How will the impacts during the change process be monitored and improvements made (where required)?

How will you confirm that the process of change is not leading to excessive stress/distress to people with protected characteristics / at risk of isolation/poverty, compared to other people impacted by the change? What will you do if it is discovered such groups are being less well supported than others?

Since this is a new service, there will be no loss or change to current service. Rather, service users will be offered an additional option in how they receive care and support (and pay for it). As such, there is no negative impact or stress/distress to people with protected characteristics. In fact, since the ISF offer will initially be rolled out in East Cambs (in addition to Peterborough), it could be argued that this is an example of positive action for those living in rural isolation/poverty.

Uptake of this option will be closely monitored, including outcomes for individuals, so any trends can be assessed and reasons for high or low uptake evaluated. It is important to note that ISFs will only ever be set up for those clients who opt for them and practitioners are under no pressure to reach specific targets of ISF uptake.

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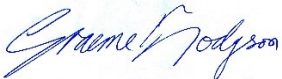
Section 4: Equality Impact Assessment - Action plan

See notes at the end of this form for advice on completing this table.

Details of disproportionate negative impact (e.g. worse treatment / outcomes)	Group(s) affected	Severity of impact (L/M/H)	Action to mitigate impact with reasons / evidence to support this or Justification for retaining negative impact	Who by	When by	Date completed
ISF Provider failure to cater for needs of those with protected characteristics	People with protected characteristics	Low	If such an impact is reported or suspected, training will be made available to providers in best practices relating to Equality, Diversity and Inclusion, even though such policies and practices are already required for successful application to join the DPS.	Contracts & Commissioning	After 6 months from launch of ISFs	

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Section 5: Approval

Name of person who completed this EIA:	Graeme Hodgson	Name of person who approves this EIA:	Jenni Bartlett
Signature:		Signature:	
Job title:	Adult Social Care Commissioning Manager & Programme Lead, Care Together, CCC.	Job title: <i>Must be Head of Service (or equivalent) or higher, and at least one level higher than officer completing EIA.</i>	Equality, Diversity and Inclusion Advisor
Date:	17 th January 2022	Date:	31 st January 2022