EQUALITIES IMPACT ASSESSMENT Final Version 13th June 2013 Function being assessed Council run Learning Disabilities provider services

Introduction

The national context for people with learning disabilities has been driven by 'Valuing People (2001), Valuing People Now (2008) and more recently Think Local Act Personal (2011) and the Health and Social Care Act 2012 which aims to deliver more personalised support for people who need adult social care. In addition to this, the Social Care White Paper Caring for our Future: Reforming Care and Support 2012 requires all Local Authorities to promote diversity and quality in the provision of services meeting care and support needs.

The vision for people with learning disabilities is set out in 'Making a Difference' Kingston Learning Disability Strategy 2012-2017). Its ambition is that by 2017 there will be significantly more real opportunities to work, learn and live in their own homes. This aims to ensure that people with learning disabilities are regarded as active citizens with valued roles to play in the communities in which they live

As a key part of the Transformation of Adult Social Care, the future development of learning disabilities provider services in Kingston aims to maximise independence and improve outcomes for service users providing more individual choice and control and supporting families and carers. At the same time, the Council is committed to ensuring that people with learning disabilities continue to be protected from harm. This takes on board the important learning from the CQC review of Winterbourne view.

https://www.gov.uk/government/publications/winterbourne-view-hospital-department-of-health-review-and-response

The One Kingston approach to commissioning is based on what works best for residents, identifying what support and services are needed, how these should be arranged and who is best placed to deliver these, making the most effective use of resources. This approach should also be seen within a national context of increasingly scarce resources, the potential reduction of government funding to adult social care over the next four to five years and the impact of social welfare reform changes.

This Equality Impact Assessment aims to:

- Supplement the overarching EQIA Framework for the Adult Social Care Change Programme which was developed on 11 November 2011. The overarching EQIA was produced to accompany the report submitted to the People's Services Committee on 22nd November 2011 setting out the key Adult Social Care Strategic Priorities for the next three years. At that time it was identified that EQIAs would be produced to support the change process.
- Supplement the previous EQIA Kingston at Home specific developments last updated in March 2013 and the EQIA Transforming Services and Improving Outcomes March 2013
- Set out clearly how the Council is giving due regard to its public equality duties on specific recommendations being made to the People Services Committee on the 25th June to inform decisions being made at that time.

Is this a new function or a review of an existing function?

This is a review of an existing function.

Since 2005, The Learning Disabilities service in Kingston has been at the forefront of personalisation and personal budgets in Kingston offering choice and control to people with learning disabilities eligible for adult social care support. The service is comprised of an assessment and brokerage function and a number of Council run provider services alongside a number of external partner providers.

A comprehensive review of the Learning Disabilities services in 2012 by Deloitte's recommended that there should be exploration of alternative ways to delivering its services. The People Services Committee in March 2013 made a decision that there should be further discussions with service users, carers, the Learning Disabilities Parliament, other key stakeholders and staff about potential options for Council run learning disabilities provider services with a Social Enterprise as the preferred option. The aim is to meet the One Kingston principle of maximising people's independence and achieving the best outcomes for adult social care users and their carers continuing to provide quality services and value for money.

An options appraisal has been undertaken and an internal working group has been set up. Information is being shared with the Learning Disabilities Partnership Board

Other engagement has taken place with:

- People with learning disabilities through their key worker
- > Three meetings with family members and staff

The recommendation to the People Services Committee on the 25th June 2013 is that a decision is made to agree that the preferred social enterprise model of a joint venture partner for provider services can be further progressed and a business case developed in accordance with a proportionate procurement process which will assist with evaluating vision and ethos, costs and value for money.

What are the aims/purpose of the function?

The Learning Disabilities Service provides a range of services including care management and support brokerage for people who have a learning disability and have critical and substantial needs. It also provides support services which includes Supporting Living Service, work activities and employment advice and Woodbury residential and respite services.

Over the past five years the Learning Disability service has been increasingly working with providers in the private and voluntary sector to deliver a range of services the majority of which are provided through personal budgets These include supported living services, outreach short breaks and support brokerage.

The specific aims of the functions within the scope of this Equality Impact Assessment are Council run provider support services. These are as follows:

Kingston Supported Living Service provided support to around ninety people with learning disabilities in their own homes or tenancies. The support provided ranges from packages of 1-2 hours a week to 24 hours a day 7 days a week.

Work Activities and Transport Service currently runs Stud nursery, a horticultural project and two cafes. A sandwich business and gardening are under development The transport service provides transport to people accessing the work activities projects and also HFT day centre, a service run by the voluntary sector.

Residential and Respite care

Woodbury care home and Chamberlain Way provides residential for thirteen people and specialises in supporting people with profound and multiple learning disabilities and complex needs. Woodbury care home also provides one bed for planned and emergency respite provision in the Borough. Chamberlain Way provides two beds for planned and emergency respite and is managed by Woodbury care home.

Is the function designed to meet specific needs such as the needs of minority ethnic groups, older people, disabled people etc?

The functions within the scope of this EQIA are primarily targeted at people with learning disabilities (and potentially other disabilities) with critical or substantial levels of social care need within RBKs Fair Access to Care Services eligibility criteria.

This group may also fall within other protected characteristics: Age, Gender, Gender reassignment, Sexual orientation, Race, Religion or belief Pregnancy and maternity, Marriage and civil partnership

What information has been gathered on this function? (Indicate the type of information gathered e.g. statistics, consultation, and other monitoring information)? Attach a summary or refer to where the evidence can be found.

This EQIA has been informed by the national and local vision for people with learning disabilities.

National policies

Valuing People 2001

Valuing People Now 2008

Social care White Paper caring for our Future: Reforming Care and Support 2012 Winterbourne View

Local policies

The Kingston plan which sets out the vision for the Borough in 2020 and outlines how the Kingston Strategic Partnership will achieve this. There are ten key objectives on threekey themes of, A sustainable Kingston, Safe Health and Strong and Prosperous and Inclusive. Destination Kingston 2013-17 identifies the role of the Council in the delivery of the Kingston Plan, based on the One Kingston principles.

Adult Social care is part of the One Council Commissioning Framework set out in

Destination Kingston 2013-17 Commissioning is at the heart of the One Kingston programme to ensure that services are more effective and efficient. It is recognised that this might mean that we think differently and do not necessarily need to be the direct provider of services. It is envisaged that in the future the Council will primarily become a commissioner of services. The Council remains committed to supporting residents to access high quality and affordable care and support ensuring service users have choice and control over their lives with better outcomes.

'Making a Difference', Kingston's Learning Disabilities Service Strategy 2012-17 goes on to set out how the service aims to be fit for purpose in the years ahead to address the challenges of a changing population with a likely increased demand on adult social care.

<u>Demographic trends</u> The development work on Council run provider services set out in the report for the People Services committee on the 25th June 2013 has been informed by a number of key demographic data bases. Together they provide a comprehensive analysis of key demographic trends in Kingston.

Kingston has one of the lowest populations in London, excluding the City of London, but the population of the borough has been growing in recent years and it is expected to continue to increase for the foreseeable future.

Key Statistics

Subject	Kingston
Estimated Borough Population in 2013	162,167
Population Projection - Percentage increase 2011 to 2031	10.4%
Age group with the largest percentage change in population 2011 to 2031	65 and over (+39.7%)
Source: Greater London Authority (GLA) 2012-Round SHLAA Standard Fe Forecast	rtility Population Projecti

People supported by Kingston Supported Living Service, Work Activities and Transport service and Residential and Respite care.

There are 170 service users supported through these services.

Gender:

Male - 104 Female- 66

Age

18-64 yrs 154 64+ 16

Ethnicity:

White British and white other 150 people

Black and ethnic minority 20 people who have identified themselves as African, Asian, Indian, Pakistani, Arabic, Iraqi, Chinese, Sri Lankan and of mixed race heritage.

Does your analysis of the information show different outcomes for different groups (higher or lower uptake/failure to access/receive a poorer or inferior service)? If yes, indicate which groups and which aspects of the policy or function contribute to inequality?

The analysis indicates that the group who is most likely to be impacted are people with a learning disability. This group might also have other protected characteristics.

It is anticipated that any changes to the current Council run provider services should have a minimal impact on service users and carers as the changes will be in the management of the service rather than a change to the service itself and service delivery. As the Council aims to continue to take a holistic approach to the provisions of support and services for people with learning disabilities the focus will be on a single point of access.

The proposal to progress a joint venture social enterprise model for provider services for people with learning disabilities should have a positive impact on service users and their carers because it continues a clear public service ethos with its central aim to serve the community and encourage participation. There is also the potential for a positive impact if there is expertise outside the Council which could support the development of a social enterprise and offer innovative, creative and empowering ways to improve services. However it is also recognised that there is a limited market at this time for such providers.

However any changes to the current arrangements has the potential to impact service users and their carers if the service is not provided in the same way or the quality of the service is not maintained. In addition to this, if the locations of provider services change this could have a possible impact on people with learning disabilities as people with learning disabilities are generally more comfortable with routine and familiar surroundings In particular any changes could impact carers if their ongoing needs for support to carry on their caring role is not carefully considered in any proposed changes.

Impact to staffing should be minimal as they will be subject to TUPE arrangements. However any changes to current staffing arrangements will be the subject of careful planning through appropriate HR processes and any required TUPE regulations with any equality analysis carefully considered.

Are these differences justified (e.g. are there legislative or other constraints)? If they are, explain in what way.

- The proposed changes, if they are agreed, has the potential to impact people with learning disabilities who are currently using the services.
 However any impact will be carefully considered and mitigated wherever possible.
- The Council has a responsibility to ensure the delivery of value for money services and the measures set out should assist with this.
- The Council will continue to meet its statutory duties to assess and meet eligible social care needs and outcomes for people with learning disabilities focusing on maximising independence and offering choice and control about how support is arranged. The Council continues to have due regard to its

equality duties under section 149 of the Equality Act 2010 to eliminate discrimination, advance equality of opportunity and foster good relations between people from different groups when discharging its functions.

What action needs to be taken as a result of this Equality Impact Assessment to address any detrimental impacts or meet previously unidentified need? Include here any reasonable adjustments for access by disabled people. Include dates by which action will be taken. Attach an action plan if necessary.

- ➤ The Council will engage, communicate and inform service users, carers, their families, representatives from the Learning Disabilities Parliament and other key stakeholders openly and transparently using appropriate formats. Taking into account feedback from engagement with people with learning disabilities so far, it will be important to ensure that messages about potential changes are repeated regularly so that information is shared in an accessible way and any concerns can be raised. There will be careful consideration of independent advocacy where it is felt this would support individual service users. A communication plan has been developed.
- A comprehensive series of engagements has been arranged with service users, families and carers, the Members from the Learning Disabilities Parliament and other key stakeholders. The feedback from engagement so far has been collated and a summary report produced. Any emerging issues regarding equality impact on protected characteristics will be carefully considered. A further series of engagement meetings is planned.
- ➤ A Council working group has been set up and information is currently being shared with the Learning Disabilities Partnership Board which includes representatives from the Learning Disabilities Parliament. An action group is now being set up with representatives from the Parliament, MENCAP and other key stake holders. This group will be key in the development of a joint venture social enterprise and help to identify any emerging potential impact on service users and carers.
- The Council will ensure that any proposed transition to a joint venture social enterprise meets the relevant Public Contracting Regulations 2006 and the Councils Contract Standing Orders so that the competition principles of the EU treaty and best value to the Council can be demonstrated. The Council remains committed to involving service users, families, carers and staff and key organisations and this will form an integral part of the evaluation of third party providers. The Council will look at the most appropriate ways of involving people with learning disabilities, their carers and families.
- ➤ The Council will ensure that any potential provider of services within the scope of this EQIA adheres to its equality duties and a contractual undertaking to fulfil all legal obligations. This will be incorporated in any relevant contract documentation. It will set clear quality standards to any services its commissions and monitor the quality of the service, ensuring that service users continue to be safeguarded.

Assessment completed by:

NAME Simon Pearce Executive Head of Adult Social Care

SERVICE Adult Services. DATE: 31st May 2013, revised 5th June 2013 revised 7th June 2013 revised 11th June 2013, revised 13th June 2013

Appendix 1

Key demographic data

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	2013	2018	2023	2028
Totals	162,167	166,842	171,177	175,019
0 – 19 year olds	39,196	40,725	42,022	42,075
20 – 64 year olds	101,468	103,145	104,546	105,940
65+	21 503	22 972	24 608	27 004

Number of births per year rose by 28% between 2001 and 2011 to 2,289. Current projections maintain this level of births in the coming years. [Source: ©ONS 2011]

Greater London Authority Population Estimates

The latest population projections from the GLA have estimated the population of the borough to be 162,200 in 2013. A breakdown of the population by age and gender is shown in the table below. Note that these figures are not counts but estimates rolled forward from the 2011 Census, based on assumptions about the number of births and deaths, migration and housing capacity in the borough. All figures are rounded to the nearest 100, and individual figures may not add up to the totals because of this.

Age	Males	Females	Total
0-4	5,700	5,500	11,200
5-9	5,000	4,800	9,800
10-14	4,200	4,200	8,400
15-19	4,900	4,900	9,800
20-24	6,800	6,900	13,700
25-29	6,100	6,100	12,200
30-34	6,600	6,700	13,200
35-39	6,500	6,500	13,000
40-44	6,200	6,200	12,500
45-49	5,600	5,800	11,400
50-54	5,000	5,000	10,000
55-59	4,000	4,100	8,100
60-64	3,600	3,800	7,400
65-69	3,200	3,400	6,600
70-74	2,200	2,400	4,700
75-79	1,700	2,100	3,800
80-84	1,300	1,800	3,100
85-89	700	1,300	2,100
90+	400	900	1,300
Total	79,700	82,500	162,200

Source: GLA 2012-Round SHLAA Standard Fertility Population Projections

GLA Population Projections 2001 to 2031

Kingston's population is expected to increase by 10.4% between 2011 and 2031, with the largest increases in population amongst those aged 65 and over. The GLA predicts the number of 20-39 year olds, currently the largest age group in the borough, will stay about the same.

Age Group Projected percentage change in population 2011 to 2031

65 and over +39.7%

Source: GLA 2012-Round SHLAA Standard Fertility Population Projections

Age

The table below shows the population broken down into five age bands, taken from the 2011 Census.

Like the rest of London, Kingston has a relatively young population and fewer older people compared to the rest of the country. Most of the population is aged between 20 and 39, with a particularly high number of 20-24 year olds due to the large student population attending Kingston University. Over 65's make up a relatively small proportion of the population (20,358 people or 12.7% of the population), compared to 16.4% in England and 11.1% in London.

	Persons All Ages	0-19 year olds				80+ year olds
Number of persons	160,060	38,335	52,626	40,759	21,976	6,364
Percentage of total	100%	24%	33%	25%	14%	4%

Source: ONS 2011 Census, Key Statistics Table P04

Ethnicity

Between 2001 and 2011, the proportion of Kingston's population that came from Black, Asian and Minority Ethnic (BAME) groups rose from 15.5% to 25.5%. The Greater London Authority (GLA) expects this proportion to rise to 28% by 2023. The younger population is even more ethnically diverse: the GLA estimate that 33% of 0-19 year olds came from BAME groups in 2011. The 2011 Census also gave us information on the main languages spoken in the borough: the top five are English (83.6%), Tamil (1.7%), Korean (1.7%), Polish (1.3%) and Arabic (1%).

The table below shows the numbers and percentages of people belonging to different ethnic groups in Kingston in 2011.

	Persons All Ages	Persons All Ages %
All Ethnicities	160,060	100%
White	119,219	74.5%
Mixed	6,269	3.9%
Black African	2,616	1.6%
Black Caribbean	1,027	0.6%
Black Other	378	0.2%
Indian	6,325	4%
Pakistani	3,009	1.9%
Bangladeshi	892	0.6%
Chinese	2,883	1.8%
Other Asian	13,043	8.1%
Arab	2,439	1.5%
Any other ethnic group	1,960	1.2%
Black, Asian & Minority Ethnic (BAME)	37,516	25.5%

Source: ONS 2011 Census, Key Statistics Tables KS201 (Ethnic group)

It is clear that the population of Kingston is likely to continue to grow. The birth rate is expected to remain at a higher level with an increasing number of those aged 65 and over as people are living longer and a likely increased demand on adult social care. This includes an increase in young people moving from Children services to Adult service through transition. Across the country there is an overall increase in the number of young people coming through transition with a significant proportion of these with profound and multiple learning disabilities, complex health needs and people on the Autistic spectrum.

Service Users in Adult Social Care

As part of its on-going business the Adult Social Care Service maintains an up to date profile of it is service users.

The table below provides an overview of the number of service users receiving services or financial support from Adult Social Care Services in 2011-12 by service and gender. This is the latest information to date.

Number of service users receiving services during 2011/12

by type of service

	Community Based Services	Residential Care	Nursing Care	Total
Kingston-upon-				
Thames Total	2570	370	245	3010

Number of service users receiving services during 2011/12 by type of service and service user group

	Community Based Services	Residential Care	Nursing Care	Total
Physical Disability	810	110	110	975
Mental Health	790	60	25	845
Learning Disability	250	105	5	310
Substance Misuse	55	0	0	60
Other Vulnerable				
People	665	90	100	825
Kingston-upon-				
Thames Total	2570	370	245	3010

Number of service users receiving services during 2011/12 by type of service, service user group and age

	Community B	Based Services	Residential Care		
	Age 18 to 64 Age 65 and over		Age 18 to 64	Age 65 and over	
Physical Disability	135	680	15	95	
Mental Health	540	250	25	35	
Learning Disability	220	25	90	15	
Substance Misuse	50	5	0	0	
Other Vulnerable					
People	120	545	5	85	
Kingston-upon-					
Thames Total	1070	1505	135	235	

Source : National Adult Social Care Intelligence Service (NASCIS) All data is rounded to the nearest 5

The Total column is the total number of service users. Service users could have had both community and residential services during the year

Number of service users receiving services during 2011/12 by type of service, age and gender

	Female		Ma		
	Age 18 to 64	Age 65 and over	Age 18 to 64	Age 65 and over	Total
Community Based					
Services	525	995	545	510	2570
Residential Care	50	155	85	75	370
Nursing Care	10	160	5	65	245
Kingston-upon-					
Thames Total	560	1240	600	610	3010

Number of service users receiving services during 2011/12 by client group and ethnicity

	Physical Disability	Mental Health	Learning Disability	Substanc e Misuse	Other Vulnerabl e People	2011/12 Total
White	855	640	270	55	730	2550
Mixed	10	30	5	0	5	55
Asian or Asian British Black or Black	70	65	20	0	30	190
British	15	35	5	0	15	70
Chinese or Other	15	20	10	0	10	60
Not Stated	10	55	0	0	30	95
Kingston-upon- Thames Total	975	845	310	60	825	3010

Number of service users receiving services during 2011/12 by client group, ethnicity and age

	Physical Disability		Mental Health		Learning Disability	
	Age 18 to 64	Age 65 and over	Age 18 to 64	Age 65 and over	Age 18 to 64	Age 65 and over
White	115	740	385	255	235	35
Mixed	5	5	25	5	5	0
Asian or Asian British	20	50	50	15	20	0
Black or Black British	5	5	30	5	5	0
Chinese or Other	5	15	15	5	10	0
Not Stated	0	10	50	5	0	0
Kingston-upon- Thames Total	155	825	560	285	270	35

Source : National Adult Social Care Intelligence Service (NASCIS) All data is rounded to the nearest 5

Number of People with Learning Disabilities in Kingston

The following data is based on People with Learning Disabilities known to Kingston Community Learning Disability team (as of August 2012) and they include people who do not access any of the services.

Known to the Council 451
Care managed by Kingston 408
Care managed by other Local Authorities 43

Age

Working Age (18 – 64 years) 370 Aged 65 and over 38

Where People Live

Living in their own homes or with tenancies 183 Living in Residential Care 116 (Of which, live out of Borough) (72) Living with family/ other 109

Ethnicity

White British 257
Other White 33
Any other Asian 10
Any other Ethnic Group 10
Indian 8
Other 18

Employment

In paid employment between 0-4 hrs 8 In paid employment between 4-16 hrs 10 In paid employment between 16-30 hrs 14 In paid employment between 30+ hrs 5 Total 37

Appendix 2

National research

The Council's approach has been informed by a number of national policies, studies and research

Valuing People

http://prp.dh.gov.uk/tag/valuing-people/

Valuing People Now http://base-uk.org/sites/base-uk.org/files/[user-raw]/11-06/valuing_people_now_strategy_.pdf

Think Local Act Personal 2011 Putting People First.

http://www.puttingpeoplefirst.org.uk/_library/PPF/NCAS/Partnership_Agreement_fin_al_29_October_2010.pdf

Making Safeguarding Personal (April 2011) Local Government Association.

Practical Approaches to market and provider development 2010 Putting People First.

http://www.vsnw.org.uk/files/Practical%20approaches%20to%20market%20and%20provider%20development_12%20November%202010_v3_ACC.pdf

Market Position Statement for Learning Disability Service Requirements and Provision in London NHS London Procurement Programme Purchased Healthcare Team 2013

Winterbourne View Hospital: Department of Health review and response https://www.gov.uk/government/publications/winterbourne-view-hospital-department-of-health-review-and-response

'Making a Difference' Kingston Learning Disability Strategy 2012-2017

Destination Kingston 2013-17