

**Function being assessed: Kingston at Home Programme – specific developments**

**Home care Service including Reablement service**

**Council Residential and Nursing Homes resources – Newent House Murray House, Hobkirk House and Amy Woodgate**

**Older People Day services - Newent House**

**Community Outreach and Adult Placement Service**

**Services for People with Learning Disabilities**

**Introduction**

As a key part of the Transformation of Adult Social Care, The Kingston at Home programme aims to enable people to live at home for longer, focusing on improving outcomes for service users and their carers whilst maximising value for money. Central to this has been the developmental work with Your Health Care, Age Concern and the Kingston Clinical Commissioning Group in co designing a new service model. Alongside this there has been an extensive series of engagement events with service users, carers and key stakeholders to communicate, discuss and gather views on potential service models.

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 22 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 last updated in October 2012 which focused on residential and nursing care services provided by the Council, re-ablement and older people's day services, Community Outreach and the Adult Placement Scheme/Shared lives
- 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 19<sup>th</sup> March to inform decisions being made at that time.

This Equality Impact Assessment should be read in conjunction with the:-

- EQIA Overarching Transforming Social Care November 2011
- EQIA Kingston at Home Council Resources Centres, Reablement Services, Older People's Day Services (Kingston at Home Programme v4 23<sup>rd</sup> October 2012.
- EQIA Transforming Service and Improving Outcomes March 2013

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

A Kingston at Home programme update report was taken to the People Services committee on the 29<sup>th</sup> January 2013 pending detailed proposals being submitted to the 19<sup>th</sup> March People Services committee.

There are key recommendations for decisions at the People Services Committee in March and these form the basis of this supplementary EQIA detailed below.

**Home care including Reablement and Intermediate Care**

The Council presently provides support to up to 300 people per year requiring reablement support.

A pilot integrated reablement and Intermediate Care Team service was launched in October 2012 which helped to inform the evaluation of options for future service delivery. On the 23<sup>rd</sup> October the People Services Committee agreed that transitional arrangements would be developed to allow the transfer of day to day responsibility to Your Health Care Community Interest Company whilst RBK retained the day to day management of the Commissioned services and that from April 2013 management arrangements would be formalised subject to statutory regulation and quality requirements being met. The measures in which Your Health Care will meet statutory regulation and quality requirements have now been drafted and therefore a recommendation regarding a decision about formal transfer is being submitted to the 19<sup>th</sup> March People Services Committee.

Home care including reablement and the ICT joint service will continue to be developed after April 2013 with the input of the Transforming Services and Improving Outcomes programme so that the best use is made of home care resources, achieving value for money for service users and the Council. There are key interdependencies between this programme and the Kingston at Home programme. The Transforming Services and Improving Service Outcomes programme will explore the development of commissioning domiciliary care in the private sector and this will feed into the future review of current functions of home care including reablement. Any future developments and changes will be subject of an equality analysis through the Transforming Services and Improving Outcomes EQIA and the Kingston at Home EQIA when identified.

**Council Residential and Nursing Home Resources Newent House , Murray House ,Hobkirk and Amy Woodgate**

The Council presently operate four Resource Centres (Amy Woodgate, Newent, Murray and Hobkirk House). Together these provide residential placements for up to 164 residents with a range of different requirements including long term residential and nursing care, residential support for older people with dementia care needs, rehabilitation and assessment and respite support.

Within the borough, the Council is not an exclusive provider of these services and in total there are 895 residential placements available in the borough in 30 different locations. A market analysis report has been undertaken which is informing the Council in the decisions it is making.

A decision was taken by the People Services Committee in March 2012 that long term residential care and nursing care placements in Murray House, Hobkirk House

and Newent would cease from 1 April 2012. This was in line with the Kingston at Home aims and objectives:

- to support people at home for longer,
- to avoid admissions to residential and nursing care directly from hospital and
- to assess how RBKs commissioning intentions for residential, nursing and dementia care could best be met in the future by conducting an options appraisal.

At the time, market analysis suggested there was sufficient alternative provision of high quality long term nursing and residential care in Kingston to meet any anticipated levels of demand and that this accommodation was available at a lower cost.

From April to October 2012, there was a reduction of 22 beds in RBK residential care homes. The reduction in the number of beds did not appear to have had an impact on a sufficient supply of places within private residential provision. In fact there was an overall reduction in the number of residential placements being made by Adult Social Care Services for people eligible for social care support which was in keeping with the Services aims and priorities to support people at home for longer.

At the October 2012 People Services committee a decision was made that transitional arrangements would be implemented to allow for the transfer of day to day responsibilities to Your Health Care. RBK would retain formal registration pending statutory and quality requirements being met with a view to a decision being taken at the People Services committee in March 2013.

The recommendation to the People Services Committee in March 2013 is for the business transfer of Amy Woodgate and a collaborative agreement to be put in place for Murray and Hobkirk House. Newent House will close once all residents have been resettled into alternative provisions meeting their needs.

An options appraisal has now been completed on future commissioning intentions for residential, nursing and dementia care which has included: -

- Extensive engagement with service users, carers and key stakeholders over a period of eighteen months. Feedback from engagement exercises undertaken so far has been used to inform and shape the whole system redesign to ensure the service continues to meet the needs of service users and carers and any impact is considered and mitigated wherever possible. (Feedback from carers has fed directly into the Carers Strategy action plan which will be finalised at the Health and Wellbeing Board).
- Monitoring and evaluation of resident numbers at Newent House and Murray House
- A comprehensive building options appraisal of Council residential and nursing home resources.
- Evaluation of the future use of Hobkirk House towards increased use of

beds for flexible care and rehabilitation

- Analysis of key national, local demographic trends and market analysis of the increasing need for dementia care beds.
- Evaluation of the current function of Amy Woodgate for service users with low and high level dementia care needs to incorporate increasing demand into commissioning intentions

On the basis of this full evaluation the following recommendations are being made to the People Service Committee on the 19th March 2013:

- That Newent House is closed in June 2013 and that current residents are given a choice of moving to Murray House or to a similar private residential provision which will continue to meet their needs or identify a suitable provision if their needs have changed. This recommendation has been discussed with all current 26 residents and their families. Where residents have not been able to express their own views, discussions have taken place with their families.
- That there are no new permanent long term admissions to Hobkirk House so that its primary function becomes the provision of flexible and rehabilitation beds .
- As part of further development work regarding the supply and demand of dementia care that the Council and Kingston CCG work together in developing a joint commissioning specification for a set of pathways and model of care for older people living with dementia.

### **Staffing**

The Council currently employs approximately 300 staff in its residential and nursing home provision. Staffing will be the subject of a separate EQIA.

### **Older People Day Services –Newent House**

The Council presently provides older people's day services at Newent House (70 places) and at the Amy Woodgate Centre (30 places). Thirty five of these places are provided in partnership with the South West London and St Georges Mental Health Trust.

The Council is currently working with Your Health Care and Age Concern to explore options for day service provision if a decision is made to close Newent House in June. 2013. The new locations being considered are the Bradbury centre and Raleigh House. At this point in time, the Council is awaiting further detailed proposals about how the new provider will meet current service user needs, (including those with high physical care needs), actual costings and a potential start date. Any proposal will need to include plans to make the building accessible for current service users.

**Community Outreach and Adult Placement Service** provides support via one to one support to enable individuals to meet their goals in terms of person centred

support and support Carers to meet the needs of Adults in their own home. It is recommended to the People Service Committee in March that management responsibility is transferred over to Your Health Care.

### **Learning Disabilities Services.**

A Learning Disabilities review was completed in May 2012. Since that time, further work has been undertaken to explore different models to meet the needs and outcomes of service users and their carers which will meet the One Kingston principle of maximising people's independence and achieving the best outcomes for adult social care users and their carer's in the borough within the resources available. An update on progress will be submitted to the People Services Committee in March 2013. Once options are clear, these will be the subject to appropriate engagement and consultation. Recommendations will then be submitted to the People Services Committee meetings for decisions on any changes.

### **What are the aims/purpose of the function?**

The specific aims of the functions within the scope of this Equality Impact Assessment are set out below:

#### **Home care including Reablement**

The function of the re-ablement service is to help people to develop the skills, support networks and level of independence in order to live safely and happily at home, with or without an on-going support package.

#### **Council Residential and Nursing Home Resources Newent House , Murray House ,Hobkirk and Amy Woodgate**

A number of specific functions are delivered within the Council's four resource centres

The primary function is to provide long term residential and nursing care for older people who are unable or do not wish to live independently at home.

At the Amy Woodgate Centre, the Council provides long term specialist residential support for people primarily with dementia.

At the Newent and Murray Resource Centres, the Council primarily provides long term residential care.

The Hobkirk House Resource Centre provides long term nursing care and NHS Continuing Health Care.

#### **Respite Care**

At all locations some element of respite or short term care service is also provided. This function has two specific aims:

- To provide a break or temporary respite for carers responsible for supporting older people with high levels of social care needs
- To provide intensive support for older people following a major change of life

circumstance while that individual is unable to live independently.

### **Rehabilitation and Assessment**

At Hobkirk House a rehabilitation and assessment service is also provided in partnership with Your Healthcare CIC, who are commissioned by NHS Kingston to provide an Intermediate Care Service. The aim of this service is to assist people to develop life skills, support networks and the level of health necessary in order that they may return home to live independently, with or without an on-going support package. Alternatively, if this is not successful arrangements can be made to facilitate a long term residential or nursing care placement.

### **Council Resource Centres - Older People's Day Services**

The services provided by the Council are targeted at older people with a high level of social need (substantial or critical). This may be because of physical or mental health disabilities. While there is some element of re-ablement and confidence building provided by the services, the primary functions of older people's day service is to provide social interaction and companionship for service users, some element of respite for their carers and to form part of a package of care which enables service users to continue to live independently at home.

**Community Outreach and Adult Placement Service** provides support via one to one support to enable individuals to meet their goals in terms of person centred support and support Carers to meet the needs of Adults in their own home

**Learning Disabilities Service.** This service provides a range of services including care management and support brokerage for people who have a learning disability and also 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.

### **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 disabled and older people with critical or substantial levels of social care need within RBKs Fair Access to Care Services eligibility criteria. This group of people will include those with cross cutting protected characteristics.

### **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.**

Demographic trends The proposals set out in the Kingston at Home Programme have 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 Fertility Population Projections

## GLA Population Estimates for 2013

The latest population projections from the GLA have estimated the population of the borough to be 162,167 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.

Age	Males	Females	Total
65-69	3,190	3,425	6,615
70-74	2,247	2,441	4,688
75-79	1,691	2,097	3,788
80-84	1,268	1,784	3,053
85-89	742	1,318	2,059
90+	378	922	1,300
<b>Total RBK population</b>	<b>79,701</b>	<b>82,466</b>	<b>162,167</b>

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%

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	20-39 year olds	40-59 year olds	60-79 year olds	80+ year olds
<b>Number of persons</b>	160,060	38,335	52,626	40,759	21,976	6,364
<b>Percentage of total</b>	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)

### 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 its 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 until the new statutory return in May 2013

### **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-	2570	370	245	3010



Thames Total				
--------------	--	--	--	--

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

	Community 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 (NASIS) 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		Male		Total
	Age 18 to 64	Age 65 and over	Age 18 to 64	Age 65 and over	
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	Substance Misuse	Other Vulnerable People	2011/12 Total

White	855	640	270	55	730	2550
Mixed	10	30	5	0	5	55
Asian or Asian British	70	65	20	0	30	190
Black or Black 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 (NASIS) All data is rounded to the nearest 5

While less than 25% of service users receiving community based services will be affected by the changes proposed to re-ablement and older people's day services, potentially the changes to residential and nursing care services could have an impact on all of service users supported by the Council to live in nursing or residential care, and also those people living in residential and nursing accommodation in the borough not supported by the Council.

**Case for Change**

A detailed analysis of the drivers for change was been produced in March 2012 to inform the development of the Kingston at Home Programme. This contains a detailed analysis of demographic trends and key issues that relate to the Kingston at Home Programme.

### **Residential and Nursing Care Services**

In order to inform the proposed changes to the provision of Residential and Nursing Care Services the Council commissioned an independent review of these services within the borough. This was published in 2009 and included a full analysis of existing and prospective service users, demographic trends.

It concluded that there was a well developed market for residential and nursing care services within Kingston which was generally high quality and fit for purpose. It also identified the relatively high cost of Council provision and noted that while there was no likely shortage of long term residential and nursing care accommodation in the borough, there was a shortage of high level dementia car support, and that this shortage was likely to grow.

This analysis has subsequently been reviewed and revised by Your Healthcare as part of their preparatory work for the Kingston at Home Programme.

### **Day Services for Older People**

The Council has undertaken various reviews of day service activity in 2011 and as a result has reduced its direct provision – in particular the Crescent and Causeway Resource Centres have been decommissioned which provided services for people with physical and learning disabilities. A report and accompanying Equality Impact Assessment was produced for consideration by the People's Services Committee in July 2011 and is published on the Council website.

### **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 groups who are most likely to be impacted are those with disability and older people and any other cross cutting characteristic.

### **Home care including Reablement Service**

It is anticipated that an integrated approach to re-ablement and intermediate care which combines social and healthcare interventions will maximise the likelihood of independence being achieved. As a key part of maximising independence, the reablement service will be strengthened and access increased. There should be no impact on service users and carers as the changes relate to the management structure rather than on service delivery. However there could be an impact if the quality of service is not maintained. The quality of the service user experience should improve as individuals will be less likely to have a disjointed and fragmented service. However there is a potential impact on older and disabled people for example for those living with long term conditions such as dementia or cancer, if there is not equal access.

As the Transforming Services and Improving Outcomes programme progresses regarding the development of domiciliary care commissioning in the private sector, there is the potential for change in the current functions of home care and

reablement. This has a potential for impact on service users if there is a change of provider.

-

### **Council Residential and Nursing Care Services: Newent , Murray House Hobkirk and Amy Woodgate**

The focus on supporting people at home for longer and reducing direct admission to residential and nursing care from hospital should improve quality of life for those service users affected because they will be given more support to live independently and also more time to make long term decisions about their future.

These changes ought to also have a positive effect on carers as they will be provided with more support and time to enable service users and carers to develop long term arrangements to maintain independence and this is in accordance with the latest best practice guidance published by the Commission on Dignity in Care for Older People. However there could be an impact on carers if service users stay remain living at home as caring roles could continue for longer. Carers will inevitably be getting older themselves and may have their own health and social care needs. The Council will look carefully at how it can mitigate any impact on carers by assessing carer's needs and signposting, providing advice and support when needed.

The closure of Newent House and the resettlement of residents into either Murray House or, by choice another residential provision, is likely to have impacted residents by virtue of the change to their home. However in order to mitigate any impact, all service users and their families have been kept fully informed and engaged in discussions. Each service user will have their needs fully assessed so that an appropriate alternative provision can be sourced. There is a continued commitment to continue to provide a residential place for existing service users within one of the Council Resource Centres if at all possible. It is not the intention of the Council if possible to move any resident more than once.

There will be continued engagement with service users and their families will feed into further developments in the Kingston at Home Programme including the future of The Councils own resources, so that changes will consider any identified impact and where possible this will be mitigated

Reconfiguration of the Councils four residential and nursing home resources by a proposed change with a business transfer of Amy Woodgate and a collaborative agreement to be put in place for Murray and Hobkirk House to Your Health Care CIC should not have a direct impact on service users and their families as long as the Council sets out its commissioning standards clearly and monitors the contract appropriately. The Council has made it a condition of any future transfer that existing levels of quality are maintained and arrangements will be put in place to ensure that this is achieved. However careful consideration will be given to the potential impact of a change of management structure on service users and ways in which any impact can be minimised. Integral to the development of proposed changes has been extensive engagement with residents carers, their families and staff since October 2011.

A change in operational or management arrangements could have a significant impact on staff. A programme of consultation and communication will be undertaken with staff and unions to facilitate consideration of these issues. This is the subject of a separate equality analysis.

Further developmental work on exploring an increased provision of flexible care and rehabilitation placements should have a positive effect on all new service users because it will increase the likelihood of people being able to continue to live at home following a hospital visit or change in life circumstance. In addition, if people are unable to live independently then this provision should ensure that individuals have more time to make long term decisions. However there is a potential impact if this impacts sufficient supply of respite placements with the change of use of current beds at Hobkirk House.

An increased provision of specialist, high level support placements for people with dementia should have a positive impact on service users because currently there is a shortfall of high quality specialist support placements for people with dementia in the borough. This measure will increase choice and capacity.

### **Older People's Day Services**

Changes in operational or management arrangements for older people's day services are not anticipated to have any material effect on existing or new service users as the Council has made it a condition of any future transfer that existing levels of quality are maintained. Arrangements will be put in place to ensure that following any future transfer the quality of service is maintained and monitored.

However when options are clearly identified, careful consideration will be given to the potential impact of a change of management structure on service users and ways in which any impact can be minimised

A change in operational or management arrangements could have a significant impact on staff. A programme of consultation and communication will be undertaken with staff to facilitate consideration of these issues.

### **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, will have an impact on older people and disabled people who are currently using the services. However work is underway to minimise any detrimental effects.

The Council has a responsibility to ensure the delivery of value for money services and the measures set out as part of this change programme should assist with this.

If the Council makes fundamental changes to the operation or management of its services then these should be subject to adequate communication and engagement and that the council complies with any legal requirements..

The Council has undertaken a review of specific legal and procurement requirements associated with this Programme and these will be presented to the

**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.**

### **Communication**

- The Council will continue to engage, communicate and inform service users, carers and their families and other key stakeholders openly and in a comprehensive manner before any fundamental decisions are taken about changes in the access and delivery of adult social care services. In addition the outcome of this consultation and communication should be published and due regard taken of this by decision makers before any decision is taken
- Continued engagement with service users and their families will feed into further developments in the Kingston at Home Programme so that services continue to focus on choice independence and control and any unidentified impact of changes carefully considered and mitigated wherever possible
- So far the Council has undertaken a number of cycles of engagement with service users, carers and staff, engaging with around 180 stakeholders during each cycle.
- The Council will continue with this process and it will be informed by the Kingston at Home Communication Plan and the Adult Social Care Communication and Engagement Strategy.
- The changes could have an impact on service users, carers and families. In any of these changes the individual's carers and families need to be supported to ensure that any impact is minimised. Appropriate support and communication with service users will continue to be provided and will form a key element of the Programme Delivery Plan

### **Commissioning**

- The Council will ensure that any potential provider of services within the scope of this programme adheres to its equality duties and a contractual undertaking to fulfil all legal obligations. This will be incorporated in any relevant contract documentation. The Council will set clear quality standards to any services its commissions.

As part of further development regarding commissioning services, the Transforming Services and Improving Outcomes programme have undertaken residential market analysis to inform the future planning of the Council.

### **Homecare including Reablement**

Data collection will form an important element in the development of reablement services so that:

- Service users accessing reablement are monitored to ensure that people with long term conditions such as dementia or cancer and those with particular sensory or cultural needs are given the same opportunity to maximise their independence wherever possible.

- Outcomes for service users are monitored so that any difference in relation to protected characteristics are analysed and impacts mitigated wherever possible.
- As part of the commissioning strategy, any impact on the quality of service for protected groups will be monitored including any complaints. Service contracts will continue to detail the standards of service delivery expected to be met.
- As the Transforming Service and Improving Outcomes programme workstream progresses on the development of commissioning domiciliary care in the private sector, there will be careful consideration of the impact to any changes to the current home care including reablement service and this will be the subject of an equality analysis.

**Council Residential and Nursing Care Services Newent , Murray House Hobkirk and Amy Woodgate**

- Residents moving from Newent House will be offered choice wherever possible to move to Murray House or a similar private residential provision.
- Where individual service users needs have changed, the Council will work with residents and families to identify a suitable alternative home.
- A transition plan will be completed for each resident moving from Newent House to Murray House or alternative provision to ensure they are supported as much as possible through any changes
- Wherever possible staff will transfer with existing service users and friendship groups will be maintained to minimise the impact of change
- There will be careful consideration of advice and support for carers and families in any changes, including that of location of service users in their new home
- There will be continued engagement with service users and their families. This will feed into further developments in the Kingston at Home Programme including the future of The Councils own resources. so that changes will consider any identified impact and where possible this will be mitigated.
- There will be continued meaningful engagement and consultation with staff on proposed changes to the service it provides.

**Older people day services – Newent House**

- As part of the development of alternative day services for older people should Newent House closure be agreed by the People Services Committee in March, the Council will work with You Health Care CIC and Age Concern Kingston to develop a similar level of service in an alternative location.
- Any service users currently attending the day service at Newent House will continue to have the same choice to attend an alternative day service provision. In order to ensure that current day service users, some of whom have higher physical needs can continue to access this, the Council will require YHC and Age Concern to adapt building space to accommodate individual service user needs and to put forward detailed proposals as to how this requirement will be met.

**Community Outreach Service and Adult Placement Service**

- The change in management structure should not have an impact in current

service users but it will be important to monitor any impact on access to these service or in service delivery. Your Health Care CIC will be required to keep data so that any differential impact can be monitored and addressed where possible.

### **Learning Disabilities Services**

- There will be continued engagement with service users carers, families and the Learning Disabilities Parliament to explore service models
- A separate EQIA will be developed

Assessment completed by:

**NAME Simon Pearce                      Executive Head of Adult Social Care**

**SERVICE Adult Services.      DATE: 25-2-2013    revised 4-3-2013**

**revised 5-03 -2013    revised 6<sup>th</sup> March 2013**



## **Appendix 1**

### **National research**

The Council's approach to Transforming Social Care has been informed by a number of national studies. In particular in 2005 the Department of Health undertook two consultative exercises: "Our Health, Our Care, Our Say" and "Independence, Well Being and Choice". 143,000 people contributed their views on Health and Social Care issues.

A Vision for Adult Social Care Capable Communities and Active Citizens 2010 DH  
[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_121508](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_121508)

Making Safeguarding Personal (April 2011) Local Government Association.

Transforming Adult Social Care: access to information advice and advocacy. Report Idea 2009 Putting People First  
<http://www.idea.gov.uk/idk/aio/9454528>

Research Works: Home care reablement services: investigating the longer term impacts Social Policy Research 2010  
<http://www.york.ac.uk/inst/spru/pubs/rworks/2011-01Jan.pdf>

Personal Budgets- checking the results 2010 Putting People First  
[http://www.puttingpeoplefirst.org.uk/library/PPF/NCAS/personal\\_budgets\\_checking\\_the\\_results\\_final\\_29\\_October\\_2010.pdf](http://www.puttingpeoplefirst.org.uk/library/PPF/NCAS/personal_budgets_checking_the_results_final_29_October_2010.pdf)

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

Think Local Act Personal 2011 Putting People First.  
[http://www.puttingpeoplefirst.org.uk/library/PPF/NCAS/Partnership\\_Agreement\\_final\\_29\\_October\\_2010.pdf](http://www.puttingpeoplefirst.org.uk/library/PPF/NCAS/Partnership_Agreement_final_29_October_2010.pdf)

National Budget Survey June 2011(<http://www.in-control.org.uk/media/92851/national%20personal%20budget%20survey%20report.pdf>)

Delivering Dignity consultation  
<http://www.nhsconfed.org/priorities/Quality/Partnership-on-dignity/Pages/Commission-on-dignity.aspx>

