KENT COUNTY COUNCIL
EQUALITY ANALYSIS / IMPACT ASSESSMENT (EqIA)

This document is available in other formats, Please contact Sue.mcgilbbon@kent.gov.uk or telephone on 07834 417482

Directorate:
Disabled Children, Adults Learning Disability & Mental Health
Social Care, Health and Wellbeing

Name of policy, procedure, project or service

Short Breaks Service – Osborne Court, Faversham
Kent County Council (KCC) has a strategic vision which sets out the future for adult services. This vision describes how KCC will ensure the services we provide meet the needs and expectations of people who use those services. KCC is also in the midst of a transformation programme which includes proposals for changes to both children and adults short break services, services in particular to meet the needs of people between 16 and 25 years (transitioning between children and adult services).

The assessment phase identified that services have seen a significant change in the aspirations of people with disabilities and their families in their choice of the type of adult short breaks they are seeking. Evidence shows an increase in the use of shared Lives, Personal Budgets/Direct Payments and other privately provided services; therefore a decrease in use of the five more traditional adult accommodation based short break services. It also highlighted that some elements of our in-house building provision may no longer be needed and/or needs improvement. Therefore there is a need to publicly consult on the proposal to close the service at Osborne Court, including seeking views of what the current 58 services users would want from alternative Short Break accommodation services.

The detail of this information is included in the Consultation Pack.

What is being assessed?
- The impact of the closure of one of the adult accommodation based short break units on the 58 service users who currently access across a year, their families, carers and members of staff.
- The impact of the move to alternative short breaks services on all stakeholders involved.

Responsible Owner/ Senior Officer
Penny Southern –Director of Disabled Children, Adults Learning Disability & Mental Health

Date of Initial Screening: 9th November 2015

Date of Full EqIA:

<table>
<thead>
<tr>
<th>Version</th>
<th>Author</th>
<th>Date</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>V1</td>
<td>Sue McGibbon</td>
<td>9.11.16</td>
<td></td>
</tr>
<tr>
<td>V2 &amp; V3</td>
<td>Sue McGibbon</td>
<td>14.03.16</td>
<td></td>
</tr>
<tr>
<td>V3</td>
<td>Akua Agyepong</td>
<td>1.04.16</td>
<td>E &amp; D Team Comments</td>
</tr>
<tr>
<td>V4</td>
<td>Sue McGibbon</td>
<td>24.05.16</td>
<td>Final version for Initial Screening</td>
</tr>
<tr>
<td>Characteristic</td>
<td>Could this policy, procedure, project or service, or any proposed changes to it affect this group less favourably than others in Kent? YES/NO If yes how?</td>
<td>Assessment of potential impact HIGH/MEDIUM LOW/NONE UNKNOWN</td>
<td>Provide details: a) Is internal action required? If yes what? b) Is further assessment required? If yes, why?</td>
</tr>
<tr>
<td>----------------</td>
<td>---------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Age</td>
<td>No</td>
<td>Low None</td>
<td>a) Yes. b) No. Consultation for a 12 week period will take place. The following actions will be taken: Group and individual consultation meetings will be held where appropriate to discuss the proposals. Written information will reflect the needs of service users and will be available in a range of formats and via different media. This will take account of the communication needs of those for whom English is not their first language, and those who have a physical or learning disability or sensory impairment. Individuals will be supported through their care managers to secure alternative short breaks appropriate to their assessed need. They will receive information on the cost and quality of all alternatives in order for them to make informed decisions. Efforts to reduce the risk of anxiety for Service Users, relatives and carers will be taken by providing appropriate assurances and through involving them in joint planning.</td>
</tr>
</tbody>
</table>
| Disability | Yes | Medium | Low | a) Yes  b) No  
Support for individuals with disabilities will be provided by care managers to ensure that appropriate services are available to meet their specific needs. 
We recognise that these changes will create anxiety and uncertainty for many people with a learning disability, their families and carers. 
During the period of consultation, individuals will be have the opportunity to be supported by an independent advocacy service to ensure all their voices are heard. Their views will be included in a formal report produced in an accessible format. | YES  
Pending the outcome of the consultation we will involve our Access and Planning colleagues in any agreed development of short breaks services. 
All documentation will be produced in easy read as a standard. 
In moving to alternative services there is an opportunity to ensure all premises meet accessible standards for those with mobility impairments. |
|------------|-----|--------|-----|-----------------------------------------------------------------------------------|
| Gender     | No  | Low    | None| a) No  b) No  
|------------|-----|--------|-----|-----------------------------------------------------------------------------------|
| Gender identity | No | Low    | None| NO  
No local data collected for this category | YES  
Any future service will provide a personalised service, identifying individual outcomes through the development and implementation of existing PCPs |
| Race       | No  | Low    | None| NO  
|------------|-----|--------|-----|-----------------------------------------------------------------------------------|
| Religion or belief | No | Low    | None| NO  
The service will meet individual needs and wishes through their PCP, which will include supporting religious beliefs | YES  
Wider inclusion and integration will develop individual knowledge and understanding. |
<table>
<thead>
<tr>
<th><strong>Sexual orientation</strong></th>
<th>No</th>
<th>Low</th>
<th>None</th>
<th>NO</th>
<th>YES</th>
<th>The service will meet individual needs and wishes through their PCP. Staff have the Social Care, Health and Wellbeing support mechanisms.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pregnancy and maternity</strong></td>
<td>No</td>
<td>Low</td>
<td>None</td>
<td>NO</td>
<td>YES</td>
<td>The service will meet individual needs and wishes through their PCP. Reasonable adjustments will be made to support the health and wellbeing of all individuals.</td>
</tr>
<tr>
<td><strong>Marriage and Civil Partnerships</strong></td>
<td>No</td>
<td>Low</td>
<td>None</td>
<td>NO</td>
<td>YES</td>
<td>Cross district working will support people to make more connections and promote social and lifestyle choices which may appear hidden at present.</td>
</tr>
<tr>
<td><strong>Carer's responsibilities</strong></td>
<td>Yes</td>
<td>Medium</td>
<td>Low</td>
<td>YES</td>
<td>YES</td>
<td>All documentation will be produced in easy read as a standard. In transforming short break services there is the opportunity to improve the services offered that meet the needs of the individuals and family/carers</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>In moving to alternative services there is an opportunity to ensure all premises meet accessible standards for those with mobility impairments.</td>
</tr>
</tbody>
</table>
Part 1: INITIAL SCREENING

Proportionality - Based on the answers in the above screening grid what weighting would you ascribe to this function – see Risk Matrix

<table>
<thead>
<tr>
<th>Low</th>
<th>Medium</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low relevance or Insufficient information/evidence to make a judgement.</td>
<td>Medium relevance or Insufficient information/evidence to make a Judgement.</td>
<td>High relevance to equality, /likely to have adverse impact on protected groups</td>
</tr>
</tbody>
</table>

Medium

Context

This review will be carried out in line with the KCC Closure and Variation of Use policy.

In addition to the above, other policy drivers include:

- Increasing Opportunities, Improving Outcomes: Kent County Council’s Strategic Statement 2015 – 2020
- The Care Act 2014
- KCC Adult Social Care Transformation Programme
- Facing the Challenge: Delivering Better Outcomes

Aims and Objectives

- The Short Breaks Project is part of the Learning Disability Transformation Programme. An assessment and design phase has been completed, where detailed information and data was collected across the children and adults short break services. It was identified by the information and data collated throughout the assessment that the Design Phase needed to clearly focus on the future service model for adult accommodation based short breaks, the number of units required in the future and the need for the remaining buildings to be fit for purpose and fit for the future.

- The vision is to provide overnight and daytime accommodation based short breaks that meet the needs and aspirations of those service users aged 16 years and above with a disability and additional complex needs. The service will also support those carers in crisis and in need of an immediate break from caring.

- The new model of service will create greater opportunities for individuals to access a wider range of short breaks on offer. The model will also aim to hold a more robust position in the marketplace, being flexible, responsive and working closely with other internal and external services, such as Day Services, Shared Lives and the Kent Pathways Service.

- Due to the increased range of alternative short breaks services that individuals are choosing and the reducing occupancy in our adult KCC accommodation based short breaks it is clear that we need less buildings, however we need to invest in our
remaining adult accommodation based short break buildings to ensure they are fit for purpose. Therefore there is a need to publicly consult on the proposal to close the service at Osborne Court, including seeking views of what the current 58 services users would want from alternative Short Break accommodation services.

**Beneficiaries**

All Kent residents aged 16 and over who have a disability and are known to the Social Care Health and Wellbeing Directorate and the families and carers of those accessing services.

**Information and Data**

**Current Service User data:**

There are currently 58 service users accessing Osborne Court over a period of a year.

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Gender</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>White British</td>
<td>Male</td>
<td>18 - 25</td>
</tr>
<tr>
<td>British Caribbean</td>
<td>Female</td>
<td>26 - 35</td>
</tr>
<tr>
<td>Asian</td>
<td>&lt;10</td>
<td>36 - 55</td>
</tr>
<tr>
<td></td>
<td></td>
<td>56 - 64</td>
</tr>
<tr>
<td></td>
<td></td>
<td>65+</td>
</tr>
</tbody>
</table>

**Main sources:**
- Current care management collected data for people attending the service.
- Current HR data relevant to the employees within the service
- KCC, Strategic Business Development & Intelligence (updated 2016)
- Swale Borough Council, Swale in 2011 Key data for Swale

**Ethnic Profile for Swale 2011**

White 96.6%
Asian 1.2%
Black 1.0%
Mixed 1.2%

Swale had an estimated population of 133,400 which has increased by 9.7% since 2000 and has anticipated to increase. The percentage increase is almost double compared to the UK as a whole (5.7%).

Source: Swale Borough Council, Swale in 2011 Key data for Swale

The 2011 Census shows us that the White ethnic group is the largest group both within Kent and nationally. Just fewer than 1.4 million Kent’s residents are from the White ethnic group which accounts 93.7% of the total population. Swale demonstrates a larger ratio of
people from a white ethnic profile than the county as a whole. The Kent profile is a higher proportion than the national figure of 85.4% and the South East figure of 90.7%.

**Religion and beliefs**
Swale has the highest proportion of people (75.9%) who state their religion as Christianity compared to Kent as a whole.
17.8% of men have no religion as opposed to 13.1% of women
Source: Swale Borough Council – Our Four Year Equality Scheme 1 April 2011 – 31 March 2015

**Disability**
16.9% of residents in Swale have a limiting long term illness which is above the KCC average of 16.5% and below the national average of 17.6%
Source: Swale Borough Council – Our Four Year Equality Scheme 1 April 2011 – 31 March 2015

**Gender (including gender reassignment)**
Currently Swale District Council and KCC do not have data relating to gender reassignment/transgender or sexual orientation at a local level
Source: Swale Borough Council – Our Four Year Equality Scheme 1 April 2011 – 31 March 2015

**Marital Status**
43% of residents in Swale are single
35% of residents are in a first marriage
7% of Swale residents are divorced
7% considered themselves to have remarried
6% are widowed
2% are separated but still legally married
There is no clear data detailing Civil Partnerships in the Swale District
Source: Swale Borough Council – Our Four Year Equality Scheme 1 April 2011 – 31 March 2015

**Involvement and Engagement**

The following engagement activities are planned to take place during the Consultation Period:

- All generic consultation documentation, decision documentation, newsletters and information will be produced in easy read as a standard for this service
- It is proposed the engagement and involvement activities will take place during the consultation process and during the potential service transformation, to include a mix of group and individual meetings focussing on information adapted for the relevant audiences (Service Users, families, Staff, Council Members, other Stakeholders)
- A programme of group meetings and 1:1 meetings will be in place throughout the consultation period particularly to support those who access the service.
Potential Impact

There is likely to be considerable anxiety from people using the services, their families and the staff. Every effort will be made to provide a programme of support and to ensure that appropriate alternative services are signposted. Care Managers will support individuals and discuss future options with them at individual meetings.

Adverse Impact

People who use the service at Osborne Court may no longer be able to. They will be supported to access alternative short breaks services. Support to find alternative short break services will be planned with the service users, their families and carers. Care Managers will lead on this. Service users will be able to visit to see what other services are available in the area in which they live and will be able to make an informed choice about their future short break service.

Positive Impact

Service users will benefit from moving to accommodation which will offer a modern environment that will better meet the needs and expectations of those with additional complex needs and those 16+.

JUDGEMENT

Given the focus on disability services offered in short breaks there will be a greater impact on people with a disability and their families.

Option 3 – Full Impact Assessment Yes

Following this initial screening the judgement is that a full impact assessment is required.

Justification:
The consultation period (June to August 2016) and decision may generate outcomes which affect the initial screening.

Action Plan
The Action Plan to mitigate the risk and impact for people using this service will be monitored carefully and every effort will be made to ensure service continuation plans are developed with individuals, their families and carers to minimise any disruption and to offer a choice of options.

The Project Group allocated to this project will regularly review this EqIA and put in place further actions as required.

Monitoring and Review
DCALDMH Transformation DivMT - 30.06.16, 18.08.16, 29.09.16, 27.10.16
Social Care, Health & Wellbeing Cabinet Committee – 11.10.16
Implementation Review – 31.03.17
Sign Off

I have noted the content of the equality impact assessment and agree the actions to mitigate the adverse impact(s) that have been identified.

Senior Officer

Signed: [Signature Redacted] Name: Mark Walker

Job Title: Assistant Director for Disabled Children, In-house Short Breaks and Adults LD Day Services

Date: 24.5.16

DMT Member

Signed: [Signature Redacted] Name: Penny Southern

Job Title: Director of Disabled Children, Adults Learning Disability & Mental Health

Date: 24.5.16
<table>
<thead>
<tr>
<th>Protected Characteristic</th>
<th>Issues identified</th>
<th>Action to be taken</th>
<th>Expected outcomes</th>
<th>Owner</th>
<th>Timescale</th>
<th>Cost implications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>The current service users at either the younger or older end of the age range may require additional support through the process of change</td>
<td>A service continuation plan will be developed for all service users impacted. Additional work is underway to develop a pilot for ages 16 to 25 between adult &amp; children’s short break services to streamline the offer and support the transition on level of individual need and not just age. Communication will be provided in a range of texts, formats suitable for people with disabilities.</td>
<td>Work towards minimising disruption to service users. Service users will be informed and have the opportunity to influence changes that affect them.</td>
<td>Director DCALDMH</td>
<td>TBC</td>
<td>Resource and staff costs, yet to be quantified. Care Management time.</td>
</tr>
<tr>
<td>Disability</td>
<td>The current 58 service users may see a change to their service which may cause anxiety and disruption</td>
<td>A service continuation plan will be developed for service users affected. Communication will be provided in a range of texts, formats suitable for people with learning disability, sensory impairments &amp; other complex needs.</td>
<td>Work towards minimising disruption to service users. Service users will be informed and have the opportunity to influence changes that affect them.</td>
<td>Director DCALDMH</td>
<td>TBC</td>
<td>Resource and staff costs, yet to be quantified. Care Management time.</td>
</tr>
<tr>
<td>Carers Responsibilities</td>
<td>Carers may see a change to their family members service which may cause anxiety and disruption</td>
<td>Continue to review and assess the needs of carers</td>
<td>Work towards minimising disruption to service users &amp; their parent/carers. Parent/Carers will be informed and have the opportunity to influence changes that affect them.</td>
<td>Director DCALDMH</td>
<td>TBC</td>
<td>Resource and staff costs, yet to be quantified. Care Management time.</td>
</tr>
</tbody>
</table>