

Equality Impact Assessment

EIA Title: Learning Disability & Autism/ Physical Disabilities and/or Sensory Impairments, Mental Health Community Accommodation Dynamic Purchasing System

1. Explaining the matter being assessed

In September 2023, Adult Social Care (ASC) will be tendering a new Community

Equality Impact Assessment

Surrey Joint Strategic Needs Assessment.

Working Age Adults Sub Group

Commissioners within Surrey Heartlands NHS of support and care for people with learning disabilities, autism and/or mental health

Adult Leadership Team

Engagement with service users through the user forums for Learning Disabilities & Autism, physical disabilities and sensory impairments, and mental health.

Twelve separate Market Engagement events with providers focused on different themes and topics suggested by providers as being important to discuss in greater detail. These included the broad principles of the DPS, development of the specification, required outcomes for customers, contract monitoring framework, the pricing structure, and procurement approach.

Feedback was received from providers seeking improved working relationships with commissioners. This was achieved through the Market Engagement events and the small task and finish groups that arose from them, established-3(io2(k08871 0 595.32 841.92 reW3co)-3(u)-3(p)-3Av

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Individuals of all ages but particularly those who have been living in a family home and/or residential school (and their families) may experience uncertainty and anxiety with a move towards more independent living arrangements.

Mitigation:

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Commissioners and care providers will continue to co-design new services and listen to the voice of people with a disability and mental health needs in shaping services.

The DPS introduces greater clarity regarding level of need and the additional requirements that providers must demonstrate if they are to be contracted to support people who need complex packages of care.

The specification requires providers to demonstrate they are personalising care and support to recognise different needs.

It will create opportunities for people with a disability or mental health needs to explore alternative community-based solutions and different living arrangements.

Individuals with more complex needs will be able to access more bespoke support locally.

Disabled residents will have increased choice with more accommodation options available to meet their age and care needs.

Care packages can be better tailored to individual needs within independent living settings, with the provision of flexible personalised care and shared care. This will prevent the necessity for many individuals to move as they age.

Residents with a disability will be encouraged to have a more detailed discussion, exploring what care and support their family, friends and local community can provide to meet their needs, encouraging

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In the medium to long-term, we will use the data from the DPS to identify gaps in provision and develop solutions accordingly. We will continue to work with stakeholders in the development of new community accommodation.

There is no proposal stemming from the DPS to move individuals from their existing home to a new provider.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

None

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Elmbridge

Epsom and Ewell

Guildford

Mole Valley

Reigate and
Banstead

Runnymede

Spelthorne

Surrey Heath

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People open to adult social care in supported living age 16+

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Some residents request that care is provided by workers from a specific ethnic group. Social care teams and providers to advise individuals that care is provided by staff from a variety of ethnic and religious backgrounds and it is often not possible to choose care staff based on these factors.

ASC arranges

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Area name	Elmbridge	Epsom and Ewell	Guildford	Mole Valley	Reigate and Banstead	Runnymede	Spelthorne	Surrey Heath	Tandridge	Waverley	Woking
Straight or Heterosexual (percent)	91.37	90.90	88.82	91.50	91.00	88.55	90.57	91.89	91.37	90.89	90.89
Gay or Lesbian (percent)	1.06	1.07	1.40	1.05	1.16	1.40	1.31	1.05	1.05	1.04	1.18
Bisexual (percent)	0.77	0.88	1.67	0.83	0.91	1.70	0.84	0.80	0.79	1.18	1.01
Pansexual (percent)	0.14	0.15	0.24	0.12	0.16	0.24	0.15	0.15	0.14	0.15	0.21
Asexual (percent)	0.04	0.04	0.09	0.04	0.05	0.07	0.03	0.04	0.04	0.08	0.06
Queer (percent)	0.02	0.02	0.04	0.02	0.01	0.04	0.01	0.02	0.02	0.03	0.02
All other sexual orientations (percent)	0.01	0.01	0.01	0.02	0.01	0.03	0.01	0.01	0.01	0.01	0.04
Not answered (percent)	6.60	6.90									

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There are no negative impacts identified that cannot be mitigated.

Marriage/Civil Partnerships

This field in LAS is not mandatory the completeness or quality of the information may not be ideal, however the guidance for staff is that every record should have this recorded. The table below sets out the marital status of people with a disability living in supported living.

People open to adult social care in supported living aged 16+: by marital status

Marital Status & SL	Count of People	% of people in each category
Couple: unmarried or cohabiting	5	0.3%
Civil partnership	5	0.3%
Separated	10	0.6%
Widowed	10	0.6%
Divorced	15	0.9%
Couple: Married	20	1.2%
Unknown or information refused	255	14.9%
Single	1,390	81.3%
Grand Total	1,710	100.0%

People open to adult social care with a primary category in supported living aged 16+ with a primary category of Mental Health: by marital status

Marital Status & SL and MH	Count of People	% of people in each category
Civil Partnership	0	0.0%
Widowed	5	1.4%
Couple: Unmarried or cohabiting	5	1.4%
Separated	10	2.7%
Couple: Married	10	2.7%
Divorced	15	4.1%
Unknown or information refused	80	21.6%
Single	245	66.2%
Grand Total	370	100.0%

Positive Impacts:

Understanding an individual's personal background and history to inform the way that they are cared for is key.

People who are married or in partnerships together will be able to opt for shared accommodation in a Community Accommodation setting.

Negative Impacts:

We have no adequate data so we are making assumptions.

Mitigation:

Ensuring that all care staff operate with dignity and respect is a principle in the quality framework.

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What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

None.

Any negative impacts that cannot be mitigated?

There are no negative impacts identified that cannot be mitigated.

3. Staff

5. Action plan and monitoring arrangements

