

## PART B – Equality Analysis Form

As a public authority we need to ensure that all our strategies, policies, service and functions, both current and proposed have given proper consideration to equality and diversity.

This form:

- Can be used to prompt discussions, ensure that due regard has been given and remove or minimise disadvantage for an individual or group with a protected characteristic
- Involves looking at what steps can be taken to advance and maximise equality as well as eliminate discrimination and negative consequences
- Should be completed before decisions are made, this will remove the need for remedial actions.

Note – An Initial Equality Screening Assessment (Part A) should be completed prior to this form.

When completing this form consider the Equality Act 2010 protected characteristics Age, Disability, Sex, Gender Reassignment, Race, Religion or Belief, Sexual Orientation, Civil Partnerships and Marriage, Pregnancy and Maternity and other socio-economic groups e.g. parents, single parents and guardians, carers, looked after children, unemployed and people on low incomes, ex-offenders, victims of domestic violence, homeless people etc. – see page 11 of Equality Screening and Analysis Guidance.

1. Title	
<b>Equality Analysis title:</b> Financial Support for Older Peoples Residential Care Homes during the Covid-19 Pandemic	
<b>Date of Equality Analysis (EA):</b> 27 <sup>th</sup> April 2020	
<b>Directorate:</b> Adult Care, Housing & Public Health	<b>Service area:</b> Strategic Commissioning
<b>Lead person:</b> Karen Smith Strategic Commissioning Manager	<b>Contact number:</b> 01709 254870
<b>Is this a:</b>	
<input type="checkbox"/> <b>Strategy / Policy</b>	<input checked="" type="checkbox"/> <b>Service / Function</b>
<input type="checkbox"/>	<input type="checkbox"/> <b>Other</b>

**If other, please specify**

**2. Names of those involved in the Equality Analysis (Should include minimum of three people) - see page 7 of Equality Screening and Analysis Guidance**

<b>Name</b>	<b>Organisation</b>	<b>Role (eg service user, managers, service specialist)</b>
Claire Smith	RCCG/RMBC	Joint Head of Adults Commissioning (Joint Commissioning RCCG/RMBC)
Karen Smith	RMBC/RMBC	Strategic Commissioning Manager

**3. What is already known? - see page 10 of Equality Screening and Analysis Guidance**

**Aim/Scope (who the Policy/Service affects and intended outcomes if known)**

This may include a group/s identified by a protected characteristic, others groups or stakeholder/s e.g. service users, employees, partners, members, suppliers etc.)

The aim of this Equality Analysis is to ensure that the residential care market providing care and support to older people receive the additional financial support in response to Covid-19, regardless of protected characteristics of residents. This will ensure that the care market will continue to be sustainable, financially viable and have the ability to deliver vital services to the most vulnerable residents, with the greatest and most complex needs.

Financial support will alleviate pressures in costs of increasing staffing through shielding sickness or self-isolation, greater use of agency staff, increased costs and usage of PPE equipment and other supplies.

The purpose of the Equality Analysis is to ensure that everyone's protected characteristics are considered.

A review of the Residential and Nursing Care Homes Independent Sector (Older People) carried out in 2019/20 shows that:

- 1,657 beds are provided by 33 independent sector care homes for older people
- 682 older people are currently being financially supported by Council which equates to 41% of the current bed base (Insight 27.4.20)
- 20% of residents are self-funders
- 14% Continuing Health Care (CHC) and out of borough placements
- 3% of beds are commissioned from the independent sector by the NHS for hospital discharge services
- 22% of beds are vacant (399 beds).
- NHS Capacity Tracker System (27.4.20) shows that there is a total of 399 vacant beds as follows:

Residential	167
Residential EMI	98
Nursing	82
Nursing EMI	52

The data above also shows that the care market is becoming less financially viable due to

the higher than average bed occupancy rate which stood at 237 bed vacancy rate (14.3%) on 18.3.20.

**What equality information is available? (Include any engagement undertaken)**

The additional financial support to the care home market will have a positive impact to the future delivery of services during/after Covid-19 and to continue to provide support predominantly for older people with disabilities/long-term conditions as follows:

- Around 1,209 residents are living in older people's care homes in Rotherham.
- Around 682 residents are financially supported by the Council
- Around 242 residents are self-funders
- Around 285 residents are financially supported by Continuing Health Care or from another Local Authority

**Age:** New admission data in 2019/20 shows that 3% are aged between 65 to 69 years, 6% aged 70 to 74 years, 16% aged 75 to 79 years, 20% aged 80 to 84 years, 28% aged 85 to 89 years, 17% aged 90 to 94 years and 10% aged 95 years and over. The average age of customers entering care is 85 years of age (LAS data)

**Gender:** 73% are female and 27% are male residents living in older people's care homes which is mainly attributable to the higher life expectancy of females. These types of services are available to all who meet eligibility criteria regardless of their Gender

**Race:** Rotherham's population aged 18 years and over comprises of 93.04% from a White British background in comparison to 6.96% of customers who are from a BME background (Census, 2011). Around 1% of the local population living in older people's care homes are from minority ethnic backgrounds. Therefore, customers from BME groups appear to be under-represented in this cohort.

**Religion or Belief:** These services are available to all who meet eligibility criteria regardless of their Religion or Belief.

**Marital Status:** These services are available to all who meet eligibility criteria regardless of their Marital Status.

**Disability:** The majority of residents accessing the services are aged 65 years and over and have been identified as having a disability or life limiting long-term condition.

**Sexual Orientation:** These services are available to all who meet eligibility criteria regardless of their Sexual Orientation. LAS data shows that 6% of residents are heterosexual, 43% don't know and 51% not recorded. This demonstrates a gap in officers routinely capturing the data.

**Are there any gaps in the information that you are aware of?**

Equality data in relation to Pregnancy and Maternity is not applicable to this cohort, as this relates to older people aged 65 years and over.

Gender Reassignment is currently not reported and will be recorded in LAS in future.

Sexual orientation as indicated above is also not well captured in the LAS system.

**What monitoring arrangements have you made to monitor the impact of the policy or service on communities/groups according to their protected characteristics?**

Equality information on protected characteristics is routinely collected as part of the referral and assessment process for individuals accessing the service and recorded on LAS, which is the adult social case management system.

There are a range of mechanisms for capturing and monitoring the impact of residential and nursing care market for older people. The Council will be sending out a cost workbook to the independent sector residential and nursing care providers for older people to record any additional costs incurred as a result of Covid-19 from 1<sup>st</sup> April 2020. The cost workbook will illustrate the additional extraordinary costs incurred due to sick pay, agency staff, PPE, other costs and a total summary of costs. Any advance payments to providers should be reconciled against actual expenditure at a later date and any over provision be reimbursed to the Council.

**Engagement undertaken with customers. (date and group(s) consulted and key findings)**

Engagement has taken place with relatives of residents through telephone and enquiries by letter, surveys, contracting concerns, letters from Solicitors and provision of “A Guide to Residential and Nursing Care for Older People”.

**Engagement undertaken with staff (date and group(s) consulted and key findings)**

The Council’s/CCG joint commissioning team regularly engage with the care home market through planned and unplanned visits, commissioning newsletters, commissioning enquiries in box, formal tendering exercises, bi-monthly Residential and Nursing Care Forums and twice yearly meetings with owners/regional managers to discuss operational and strategic developments, emerging challenges, new legislation and uplift in fees.

**4. The Analysis - of the actual or likely effect of the Policy or Service (Identify by protected characteristics)**

**How does the Policy/Service meet the needs of different communities and groups? (Protected characteristics of Age, Disability, Sex, Gender Reassignment, Race, Religion or Belief, Sexual Orientation, Civil Partnerships and Marriage, Pregnancy and Maternity) - see glossary on page 14 of the Equality Screening and Analysis Guidance)**

These services are available to all older people living in care homes regardless of their Protected Characteristics listed above. The financial support provided to care homes will support all different communities and groups.

**Does your Policy/Service present any problems or barriers to communities or**

**Groups?**

The financial support provided to care homes for older people will ensure this will continue to promote choice, control and personalisation to the customer and enable them to remain in the care homes of their choice in greater comfort, security, safety and warm, regardless of any Protected Characteristics.

**Does the Service/Policy provide any positive impact/s including improvements or remove barriers?**

The additional financial support will provide a positive impact on the care home environment to ensure that adequate staffing levels and provision of PPE equipment and other supplies is available to provide a safe and effective service for vulnerable residents in care homes, regardless of their protected characteristics

**What affect will the Policy/Service have on community relations?** (may also need to consider activity which may be perceived as benefiting one group at the expense of another)

The proposal should have limited adverse impact on community relations as neighbouring authorities such as Barnsley have adopted a similar type of approach in providing financial support to care homes for older people.

Please list any **actions and targets** that need to be taken as a consequence of this assessment on the action plan below and ensure that they are added into your service plan for monitoring purposes – see page 12 of the Equality Screening and Analysis Guidance.

## **5. Summary of findings and Equality Analysis Action Plan**

If the analysis is done at the right time, i.e. early before decisions are made, changes should be built in before the policy or change is signed off. This will remove the need for remedial actions. Where this is achieved, the only action required will be to monitor the impact of the policy/service/change on communities or groups according to their protected characteristic - See page 11 of the Equality Screening and Analysis guidance

<b>Title of analysis: Financial Support for Care Homes for Older People during the Covid-19 Pandemic</b>
<b>Directorate and service area: Adult Care, Housing &amp; Public Health, Strategic Commissioning</b>
<b>Lead Manager: Karen Smith</b>
<b>Summary of findings:</b>
The Equality Analysis has been completed to ensure that the residential care market are able to continue to provide care and support to older people and receive the additional financial support in response to Covid-19, regardless of resident's protected characteristics.

Action/Target	State Protected Characteristics as listed below	Target date (MM/YY)
<b>Report and Equality Analysis to go to Virtual Cabinet</b>	<b>All</b>	<b>4.5.20</b>
<b>Letter to Care Homes with regard to financial support provided by Council, including request for completion of cost workbooks</b>	<b>All</b>	<b>5.5.20</b>
<b>Revenue and Payments to pay all care homes on a weekly basis for the duration of Covid-19, for a minimum of 3 months</b>	<b>All</b>	<b>1.5.20</b>
<b>Cost workbooks to be submitted from care home providers on a monthly basis during Covid-19</b>	<b>All</b>	<b>Ongoing</b>
<b>Analysis of cost workbooks to determine whether actual expenditure is higher than the advanced cash payment</b>	<b>All</b>	<b>Ongoing</b>

Decision to be reviewed at 3 months or sooner if Government issues new guidance	All	Ongoing
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\*A = Age, D= Disability, S = Sex, GR Gender Reassignment, RE= Race/ Ethnicity, RoB= Religion or Belief, SO= Sexual Orientation, PM= Pregnancy/Maternity, CPM = Civil Partnership or Marriage. C= Carers, O= other groups

6. Governance, ownership and approval		
Please state those that have approved the Equality Analysis. Approval should be obtained by the Director and approval sought from DLT and the relevant Cabinet Member.		
Name	Job title	Date
Nathan Atkinson	Assistant Director, Strategic Commissioning	27/04/20

7. Publishing	
The Equality Analysis will act as evidence that due regard to equality and diversity has been given. If this Equality Analysis relates to a <b>Cabinet, key delegated officer decision, Council, other committee or a significant operational decision</b> a copy of the completed document should be attached as an appendix and published alongside the relevant report. A copy should also be sent to <a href="mailto:equality@rotherham.gov.uk">equality@rotherham.gov.uk</a> For record keeping purposes it will be kept on file and also published on the Council's Equality and Diversity Internet page.	
<b>Date Equality Analysis completed</b>	27 <sup>th</sup> April 2020
<b>Report title and date</b>	<b>Financial Support for Care Homes for Older People during the Covid-19 Pandemic</b>
<b>Date report sent for publication</b>	4 May 2020