

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				
Equality Analysis title: Proposals for use of the Contain Outbreak Management Fund (COMF) to aid the Council's on-going response to Covid-19 and to support recovery in the borough from the impacts of the pandemic				
Date of Equality Analysis (EA): 14/7/21				
Directorate: Adult Care, Housing and Public Health	Service area: Public Health			
Lead Manager: Ben Anderson, Director of Public Health	Contact number: 07826 953015			
Is this a: Strategy / Policy X Service / Function Other				

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 **Organisation** Name Role (eg service user, managers, service specialist) Director of Public Health Ben Anderson RMBC Nathan Atkinson RMBC Covid-19 Lead Simon Dennis **RMBC** Corporate Improvement & Risk

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 16th August Cabinet report entitled Proposals for use of the Contain Outbreak Management Fund (COMF) to aid the Council's on-going response to Covid-19 and to support recovery in the borough from the impacts of the pandemic should have a positive benefit for Rotherham residents, with targeted investment proposals across areas pertaining to Children and Young People and Adults alongside more universal investment proposals.

Within the set of proposals there are a number that will specifically target certain groups based on specific needs arising through the pandemic and periods of local and national restrictions. Those particularly targeted include:

- Children and voung people
- Older and vulnerable adults
- Carers and young carers
- The homeless and those with insecure housing
- Those who are unemployed, have been furloughed or have lost income or incurred debts during the pandemic
- Those with Special Educational Needs and Disabilities or with Social and Emotional and Mental Health needs
- Adults who have had to shield or have become isolated during the pandemic or have mental health needs

Within these identified cohorts, there will inevitably be people with additional protected characteristics defined by the Equality Act 2010. However, at this juncture, these are high level investment proposals so it not possible to specifically identify the cohorts in detail and therefore this Equality Analysis will take a whole population approach, but will draw in specific data where this is known and available.

The COMF remains ring-fenced for public health purposes, with the 2021/22 COMF Guidance stating that it is "to continue to help reduce the spread of coronavirus and support public health activities". The specific public health activities that can be funded are "left to the judgement of

Local Authorities in conjunction with their Directors of Public Health". Consequently, investment proposals are related to either the immediate or emerging impacts arising from the Covid-19 pandemic across the borough. Investments are all positive interventions and therefore should not lead to any obvious adverse impacts on people with protected characteristics. Indeed, many of these cohorts may be able to benefit from the proposals either directly or indirectly.

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

The Covid-19 pandemic has had a significant impact upon Rotherham. Up to 21st June 2021 Rotherham had seen 22,030 positive Covid-19 cases recorded with 836 deaths occurring where Covid-19 was recorded on the death certificate (754 residents' deaths recorded within 28 days of a positive test). The Rotherham Foundation NHS Trust has treated 2592 patients with 579 Covid-19 deaths occurring to Rotherham residents in the hospital.

Whilst significant, it is not just the cases and deaths that have had an impact on Rotherham. During the height of the pandemic 18,128 residents (7% of the population) were identified as being Clinically Extremely Vulnerable and advised to shield. This population cohort had specific vulnerabilities that gave them a raised risk of poor outcomes should they contract Covid-19 and was predominantly made up of elderly residents. This group alongside the 1259 Older People and 445 people with Disabilities aged under 65 who are Care Home residents endured significant restrictions in their social contact and movements through much of the pandemic which itself impacted their mobility, conditioning and confidence. For those with dementia reduced stimulation may also have led to accelerated decline in memory and cognitive function.

It is not just the elderly and disabled who have been affected during the pandemic. For every case there have been contacts who have been required to isolate with resultant impacts on their dependents, carers, employers and schools. For the families and friends of those hospitalised and those who have died during the pandemic Covid-19 has further impacted their experience by limiting the contact they could have during any illness and the ability to grieve.

The closing of certain sectors of the economy has meant furlough for 43,900 residents at various times during the pandemic, unemployment or loss of livelihood, all bringing with them reduced incomes and impacts on family budgets. For many those impacts will not yet be felt in full, with protections through furlough and until recently, the stay on evictions meaning the full impacts are still to come both for individuals and the wider economy.

The Rotherham Community Hub was established to provide support to residents who had in any way been impacted by the pandemic. Since March 2020, 444 residents have requested support with financial hardship caused by the Covid-19 outbreak. Although this is only around 7% of the total support requests received, it should be noted that a further 1,574 households have requested Emergency Food Parcels which may indicate underlying financial issues.

The Council's Housing Options Service has seen an increase in the complexity of demand for homelessness support during the pandemic, with families as well as couples and single people seeking support. During 2021/2022 to date the total number of new homelessness cases is 260. Of these, 100 presented as homeless due to family and friends not being able or willing to accommodate them. Of the 260 cases, 230 have been placed into temporary accommodation. In response to the increased demand and need for temporary accommodation solutions, the Council significantly increased its portfolio of temporary accommodation provision, which now stands at 114 properties. Despite this, due to level of demand and the lack of suitable permanent housing to move people on to, the Council has been reliant on the use of hotel accommodation.

There has also been a significant impact on children and young people with the closure of schools during the lockdowns. The first lockdown covered 60 school days during which schools were only

open for key worker and vulnerable children. Whilst many schools worked hard to adapt delivery it took time to put in place alternative teaching and to develop a remote learning offer. The second lockdown saw a further 35 days of face to face schooling lost, this time with a fuller remote learning option for those not attending as key worker or vulnerable children. Disruption to learning also occurred while schools were open with 83 Incident Management Teams being held for school outbreaks in Rotherham since September 2020. During the pandemic period over 24,000 instances of a pupil being required to isolate for 10 days occurred with some pupils being required to isolate multiple times. We know that the impact of school closures and isolation has exacerbated existing inequalities with children from poorer backgrounds being impacted more. Children in transition and exam years also saw a disproportionate impact.

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

There are no known data gaps at this juncture. The level of potential requirements for support driven by the pandemic and known impacts are articulated in the section above. Should the proposals be accepted by Cabinet and as the work progresses against each of the investment proposals, then there will be a greater understanding of the detailed cohorts to be supported and this in turn may identify gaps which were not previously highlighted.

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

All the investment proposals underpinned by a grant agreement or covered through existing contractual arrangements will be subject to regular monitoring against delivery of the anticipated outcomes. Monitoring will include details of the cohorts being supported and will specifically ask for and consider equalities data captured by the delivery organisation. This will also be the case for any Council services directly delivering services or interventions.

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

Given the nature of the proposals for use of the COMF and the need for political direction, the engagement taken thus far has primarily centred on Elected Members, Council officers and external partners who may potentially deliver services or interventions through either grant funding or be commissioned from existing contractual arrangements. The wide-reaching nature of the proposals and the time limit for committing expenditure has also prevented any more detailed formal consultation with the wider public from taking place.

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

Extensive senior officer engagement has taken place across the Council to develop the proposals, through several iterations of the Covid-19 Gold Recovery group governance since the Government funding announcement in April 2021. Senior officer engagement has been facilitated through the Council's Covid-19 Recovery Gold group and for the wider officer leadership group through respective Directorate Leadership Team (DLT) meetings. This approach has developed the detail behind the initial proposals to inform the Cabinet paper and has meant that a holistic view has been taken on the needs of the whole population.

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)

The proposed investments for the COMF take a whole population approach with specific targeted areas for investment relating to age, disability and carers. Given the broad nature of the potential services and interventions it is likely that there will also be positive benefits for people with other protected characteristics, though these have not been specifically targeted or identified.

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

The nature of the proposed investments in services and interventions to mitigate the immediate and near future impacts of the Covid-19 pandemic are positive. There are no immediately identifiable barriers to communities or groups not being able to benefit from them. The Council will be directly delivering some of the services and interventions, but the vast majority will be delivered externally and predominately through the voluntary and community sector (VCS). The VCS in Rotherham has a good understanding of the local communities it supports and has the expertise to ensure that reach is as wide as possible and that the approaches are inclusive.

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

The services and interventions proposed are either new initiatives or build upon proven existing services or interventions. The aim is for the COMF to be used as extensively as possible to mitigate the immediate and near future impacts of the Covid-19 pandemic across the whole borough. This will have a positive impact and should improve the lives of residents who can benefit from the investments.

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 proposed use of the COMF combines universal as well as targeted investment in services or interventions to mitigate the immediate and near future impacts of the Covid-19 pandemic across the whole borough. Given that the pandemic has impacted on every resident of the borough in some way, this investment is not specifically for one cohort e.g. children and young people, area of the borough or solely for specific protected characteristics. Consequently, the investment proposals should have a positive impact and should not trigger any challenges with community relations.

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

Title of analysis: Proposals for use of the Contain Outbreak Management Fund (COMF) to aid the Council's on-going response to Covid-19 and to support recovery in the borough from the impacts of the pandemic

Cabinet 16th August 2021

Directorate and service area: Adult Care, Housing and Public Health

Lead Manager: Ben Anderson, Director of Public Health

Summary of findings:

The proposed use of the COMF combines universal as well as targeted investment in services or interventions across the whole borough. The services and interventions proposed are either new initiatives or build upon proven existing services or interventions. The aim is for the COMF to be used as extensively as possible to mitigate the immediate and near future impacts of the Covid-19 pandemic across the whole borough. This will have a positive impact and should improve the lives of residents who can benefit from the investments. Given the broad nature of the potential services and interventions it is likely that there will also be positive benefits for people with other protected characteristics than age, disability or carers, though these have not been specifically targeted or identified.

All the investment proposals underpinned by a grant agreement or covered through existing contractual arrangements will be subject to regular monitoring against delivery of the anticipated outcomes. Monitoring will include details of the cohorts being supported and will specifically ask for and consider equalities data captured by the delivery organisation. This will also be the case for any Council services directly delivering services or interventions.

State Protected

Action/Target	Characteristics as listed below	Target date (MM/YY)
Ensure that grant agreements and contract variations are in place to support externally provided services and that these agreements provide regular monitoring information including details of the cohorts supported and the relevant protected characteristics.	A,D & C – potential for S, GR, RE, RoB, SO, PM and CPM	October 2021
Monitor the attainment of required outcomes and identify any emerging barriers or issues which may disadvantage any individual or group of people with specific protected characteristics from benefiting from the investment proposals.	A,D & C – potential for S, GR, RE, RoB, SO, PM and CPM	December 2021
Act on any gaps identified and consider use of the proposed delegated authority to the Director of Public Health with agreement from the Section 151 Officer to commit the unallocated COMF funding, and any underspend from approved allocations, in line with grant conditions to mitigate them.	GR, RE, RoB, SO, PM	December 2021

*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
	Strategic Director, Adult Care, Housing and	
Anne Marie Lubanski	Public Health	
Cllr David Roche	Cabinet Member for Adult Social Care and	
	Health	

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 Cabinet, key delegated officer decision, Council, other committee or a significant

operational decision 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 equality@rotherham.gov.uk For record keeping purposes it will be kept on file and also published on the Council's Equality and Diversity Internet page.

Date Equality Analysis completed 14th July 2021

Report title and date Proposals for use of the Contain Outbreak Management Fund (COMF) to aid the Council's on-going response to Covid-19 and to support recovery in the borough from the impacts of the pandemic - Cabinet 16th August 2021

Date report sent for publication 2nd August 2021

Date Equality Analysis sent to Performance,

Intelligence and Improvement equality@rotherham.gov.uk