

**EQUALITY ANALYSIS**

This Equality Analysis considers the effect of Bury Council/ Bury CCG activity on different groups protected from discrimination under the Equality Act 2010. This is to consider if there are any unintended consequences for some groups from key changes made by a public body and their contractor partners organisations and to consider if the activity will be fully effective for all protected groups. It involves using equality information and the results of engagement with protected groups and others, to manage risk and to understand the actual or potential effect of activity, including any adverse impacts on those affected by the change under consideration.

**SECTION 1 – RESPONSIBILITY AND ACCOUNTABILITY**  
*Refer to Equality Analysis guidance page 4*

<b>1.1</b> Name of policy/ project/ decision	Proposal to utilise a Dynamic Purchasing System for disabled adaptations
<b>1.2</b> Lead for policy/ project/ decision	Adrian Crook, Director of Community Commissioning, Health & Social Care.
<b>1.3</b> Committee/Board signing off policy/ project/ decision	Bury Council- Cabinet
<b>1.4</b> Author of Equality Analysis	Name: Ahmed Ajmi Role: Integrated Commissioning Lead, Carers, Physical Disabilities & Prevention Contact details: <a href="mailto:A.Ajmi@bury.gov.uk">A.Ajmi@bury.gov.uk</a>
<b>1.5</b> Date EA completed	13 <sup>th</sup> December 2023

**SECTION 2 – AIMS AND OUTCOMES OF POLICY / PROJECT**  
*Refer to Equality Analysis guidance page 5*

<b>2.1</b> Detail of policy/ decision being sought	The Council is required, under the Equality Act 2010 and Care Act 2014, to make reasonable adjustments to meet identified needs of persons living in their homes. Additionally, the Council has a statutory duty to approve mandatory Disabled Facilities Grants (DFG's) for adaptations to the home environment to promote independence and keep people living in their own homes in safety and with dignity for longer.
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	<p>Adaptations can help to prevent or delay the need for care and support, both of which are central themes of the Care Act 2014. When adaptations cannot be progressed quickly, this can significantly impact upon resident outcomes and wellbeing. It is therefore vital that adaptations are provided quickly and efficiently to support residents to stay living in their homes, reducing unnecessary reliance on hospital beds and residential placements and the associated decline in independence and quality of life.</p> <p>To ensure that the Council meets its legal duties and strategic priorities in the most efficient and economically advantageous way, approval is sought to use a DPS for disabled adaptation works and services to both private and Council properties. This will support better service equity across the borough, ensuring that vulnerable residents will receive disabled adaptations in a timely way and to a high-quality standard irrespective of tenure.</p>
<p><b>2.2</b> What are the intended outcomes of this?</p>	<p>Adaptations can help to prevent or delay the need for care and support, both of which are central themes of the Care Act 2014</p> <p>If adaptations cannot be progressed quickly, this can significantly impact upon resident outcomes and wellbeing. It is therefore critical that adaptations are provided quickly and efficiently to support residents to stay living in their homes, reducing unnecessary reliance on hospital beds and residential placements and the associated decline in independence and quality of life.</p> <p>The Dynamic Purchasing System (DPS) provided by Independence CIC (INCIC) for disabled adaptation works will provide:</p> <ul style="list-style-type: none"> <li>• cost-efficient solution enabled by flexibility, economies of scale and increase competition amongst suppliers to drive down prices to offer savings.</li> <li>• expedite clearing the backlog of jobs which has accumulated throughout the pandemic</li> <li>• provide a more efficient and cost-effective means for new jobs to be completed</li> <li>• ensure that the Council meets its legal duties and strategic priorities in the most efficient and economically advantageous way</li> <li>• use of the DPS for disabled adaptation works and services to both private and Council properties will support better service equity across the borough, ensuring that vulnerable residents will receive disabled adaptations in a timely way and to a high-quality standard irrespective of tenure.</li> </ul>

## SECTION 3 – ESTABLISHING RELEVANCE TO EQUALITY & HUMAN RIGHTS

*Refer to Equality Analysis guidance pages 5-8 and 11*

Please outline the relevance of the activity/ policy to the Public Sector Equality Duty

General Public Sector Equality Duties	Relevance (Yes/No)	Rationale behind relevance decision
<p><b>3.1</b> To eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by Equality Act 2010</p>	<p>Yes</p>	<p>Under the Equality Act 2010 and Care Act 2014, to make reasonable adjustments to meet identified needs of persons living in their homes. The Care Act 2014, outlines a clear requirement for processing assessment of need.</p> <p>Additionally, the Council has a statutory duty to approve mandatory Disabled Facilities Grants (DFG's) for adaptations to the home environment to promote independence and keep people living in their own homes in safety and with dignity for longer.</p>
<p><b>3.2</b> To advance equality of opportunity between people who share a protected characteristic and those who do not.</p>	<p>Yes</p>	<p>The care act criteria promote equality despite a person's background, beliefs or any protected characteristic.</p> <p>Placements are based on a person's individual need and offers opportunities for people to live as independently a life as possible including in the wider community.</p>
<p><b>3.3</b> To foster good relations between people who share a protected characteristic and those who do not</p>	<p>Yes</p>	<p>Adaptations can support a range of people in various ways and this is irrespective of any protected characteristics.</p> <p>Adaptations can provide a mechanism to connect people who share a protected characteristic and those who do not, creating and adjusting home environments to foster and build good relations.</p>
<p><b>3.4</b> Please outline the considerations taken, including any mitigations, to ensure activity is not detrimental to the Human Rights of any individual affected by the decision being sought.</p>		
<p>The list of Human Rights has been explored and this proposal does not have a detrimental impact on any area specified.</p>		

## SECTION 4 – EQUALITIES DATA

Refer to Equality Analysis guidance page 8

Protected characteristic	Outcome sought	Base data	Data gaps (to include in Section 8 log)
4.1 Age	Yes	<ul style="list-style-type: none"> <li>• People in Bury are living longer; life expectancy for both men (79.1 years) and women (82.1 years) has been improving over time, but the rate of this increase has slowed and there is still a significant gap between the life expectancy in Bury and the England average.</li> <li>• There is also a social gradient to life expectancy in Bury, where men and women in the most deprived areas have a life expectancy of between 12.4 years (males) and 7.9 years (females) shorter than the least deprived areas.</li> <li>• It is also important to determine whether additional years of life are being spent in good health or prolonged poor health and dependency. Healthy life expectancy adds a quality-of-life dimension to life expectancy. Similar to Life Expectancy, there is inequality in healthy life expectancy between Bury and England. Male and female.</li> </ul> <p>There is also a social gradient to healthy life expectancy within Bury, where men and women in the most deprived areas have a life expectancy of between 14.8 years (males) and 13.4 years (females) shorter than the least deprived areas.</p>	
4.2 Disability	Yes	<p>The 2020 household survey shows that 10% of Bury residents have a long-standing illness or health condition, this equates to 19,069 people. It also suggests that 5.9% of the population have a physical or mobility impairment in Bury, which is around 11,425 people. Also, around 6.5% of the population will have either a visual or hearing impairment.</p> <p>Better procurement processes will certainly have a positive impact on how people with long standing illnesses and mobility problems will be able to live independently in the community.</p>	
4.3 Gender	Yes	All residents of all genders will be able to access adaptations who meet the criteria.	

<b>4.4</b> Pregnancy or Maternity	No – we do not believe this is currently being collated.	All residents of all genders will be able to access adaptations who meet the criteria.	We do not believe this is currently being collated.
<b>4.5</b> Race	Yes	<p>Across the Northwest, the percentage of people from the "Asian, Asian British or Asian Welsh" ethnic group increased from 6.2% to 8.4%, while across England the percentage increased from 7.8% to 9.6%.</p> <p>In 2021, 82.9% of people in Bury identified their ethnic group within the "White" category (compared with 89.2% in 2011), while 2.6% identified their ethnic group within the "Mixed or Multiple" category (compared with 1.8% the previous decade).</p> <p>People from BAME backgrounds have the same right as everyone else to access adaptations and adjustments to their homes.</p>	Limited information on smaller and emerging communities in Bury
<b>4.6</b> Religion and belief	Yes	Census 2021 Bury responses: Christian (48.8%), Buddhist (0.3%) Hindu (0.5%) Sikh (0.3) Muslim (9.9%) Jewish (5.5%) % Other (0.3%). 29.4% identified as having no religion	
<b>4.7</b> Sexual Orientation	No – we don't believe this is currently being collated	<p>Census 2021 was the first to collect information on the sexual orientation of residents aged 16 years and over in England and Wales. The census question was voluntary asked of those aged 16 years and over.</p> <ul style="list-style-type: none"> <li>• In total, 44.9 million people (92.5% of the population aged 16 years and over) answered the question.</li> <li>• Around 43.4 million people (89.4%) identified as straight or heterosexual.</li> <li>• Around 1.5 million people (3.2%) identified with an LGB+ orientation ("Gay or Lesbian", "Bisexual" or "Other sexual orientation").</li> <li>• The remaining 3.6 million people (7.5%) did not answer the question.</li> </ul> <p>This is almost certainly an underestimation of the actual national diversity of sexual orientation.</p> <p>Estimates provided by the LGBT Foundation and Stonewall state that between 5% and 7% of the population identify as Lesbian, Gay or Bisexual nationally.</p>	

		<p>It is acknowledged that approximately 6-10% of any given population will be LGB. Source: MYE 2015 and Stonewall</p> <p>Access to the adaptations is open to all who fulfil the service criteria</p>	
<b>4.8</b> Marriage or Civil Partnership	Yes	<p>The Census 2021 published the details on adults' legal partnership status.</p> <ul style="list-style-type: none"> <li>• The proportion of adults who have never married or been in a civil partnership has increased every decade from 26.3% in 1991 to 37.9% in 2021, whereas the proportion of adults who are married or in a civil partnership (including separated) has fallen from 58.4% in 1991 to 46.9% in 2021.</li> <li>• The increase in adults who have never been married or in a civil partnership (since 2011), after standardising for age, is seen across all local authorities, religious groups and ethnic groups.</li> <li>• Between 2011 and 2021, the number of widowed adults (3.0 million) has decreased by 6.3%, women who are widowed decreased by 8.3%, but the number of men who are widowed increased by 0.6%.</li> <li>• The proportion of adults who are divorced is similar in 2021 (9.1%) and 2011 (9.0%); the proportion of younger adults who are divorced has decreased, whereas the proportion of older adults has increased.</li> <li>• Adults in same-sex marriages and civil partnerships are more likely to be younger, have no religion, and have higher-level qualifications than adults in opposite-sex marriages.</li> </ul>	
<b>4.9</b> Gender Reassignment	Yes	<p>The question on gender identity was new for the Census 2021. The question was voluntary and only asked of people aged 16 years and over.</p> <p>A total of 45.4 million (93.5%) answered "Yes", indicating that their gender identity was the same as their sex registered at birth.</p> <p>A total of 262,000 people (0.5%) answered "No", indicating that their gender identity was different from their sex registered at birth. Within this group:</p> <ul style="list-style-type: none"> <li>• 118,000 (0.24%) answered "No" but did not provide a write-in response</li> <li>• 48,000 (0.10%) identified as a trans man</li> <li>• 48,000 (0.10%) identified as a trans woman</li> <li>• 30,000 (0.06%) identified as non-binary</li> <li>• 18,000 (0.04%) wrote in a different gender identity</li> </ul>	

		<p>The remaining 2.9 million (6.0%) did not answer the question on gender identity.</p> <p>In Bury:</p> <p>94.37% of people aged 16 years and over in Bury have a gender identity the same as their sex registered at birth and is made up of approximately 51% females and 49% males.</p> <p>The GIRES (2009) report on Gender Variance in the UK estimated that around 20 in every 100,000 people had sought medical care for gender variance. Using 15+ ONBS data of current list size of 163,013 (ONS 2015-16) the Gender Reassignment figure for Bury would be approximately 33 Bury Residents.</p> <p>Access to adaptations is open to all who meet the criteria</p>	
<b>4.10</b> Carers	Yes	<p>There are specialist services available for unpaid carers. However, services will provide condition specific information and advice.</p> <p>Statistics in Bury:</p> <p>18,219 - Census 2021</p> <p>1042 carers registered with the Bury Carers Hub (qtr4 returns 22/23)</p>	
<b>4.11</b> Looked After Children and Care Leavers	No – we do not believe this is currently being collated	<p>The criteria will apply to anybody who meet the criteria for adaptations. However, the service will link in with Children Services with a willingness to support people who are transitioning from Children Services into Adult Services.</p>	We do not believe this is currently being collated
<b>4.12</b> Armed Forces personnel including veterans	No – we do not believe this is currently being collated.	<p>On Census Day 1.85 million people in England and Wales reported that they had previously served in the UK armed forces. This represents 3.8% (almost 1 in 25) of the total population aged 16 or over.</p> <p><b>Bury:</b></p> <p>The percentage of the population aged 16+ and over who had previously served in the UK armed forces 3.3%</p>	We do not believe this is currently being collated.

<b>4.13</b> Socio-economically vulnerable	No- we do not believe this is currently being collated.	<p>Bury has a higher-than-average proportion of claimants of Employment Support Allowance where the main condition stated was mental and behavioural disorders.</p> <ul style="list-style-type: none"> <li>• Bury is the 69 most deprived local authority in England</li> <li>• 10% of the local authority is within the 10% most deprived areas in the whole of England</li> <li>• 23% of children are living in low-income families, which is worse than average for England</li> </ul> <p>All people irrespective of being socioeconomically vulnerable will be able to access adaptations if they meet the relevant criteria. Support will be provided as part of their care package which they would be financially assessed for.</p>	We do not believe this is currently being collated.
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## SECTION 5 – STAKEHOLDERS AND ENGAGEMENT

*Refer to Equality Analysis guidance page 8 and 9*

	Internal Stakeholders	External Stakeholders
<b>5.1</b> Identify stakeholders	Social Care workforce INT workforce Corporate Core	Fairfield Hospital Carers and family of people being supported. Potential future users of the service Members of the community
<b>5.2</b> Engagement undertaken	Bury Council Community Commissioning Division Bury Council Procurement team Bury Council Business Growth and Infrastructure	
<b>5.3</b> Outcomes of engagement	The engagement has provided significant contribution to good practice in regard to the DPS and how best it would be deliver	The engagement has provided vital opinions from clinicians of the from good housing practice and statutory duty.

	adjustment/adaptations to the residents community.	
<b>5.4</b> Outstanding actions following engagement (include in Section 8 log)	As the Community Commissioning Division in conjunction with other departments in the Council we will identify people who will benefit from adaptations which will improve their quality of life.	

## SECTION 6 – CONCLUSION OF IMPACT

*Refer to Equality Analysis guidance page 9*

Please outline whether the activity/ policy has a positive or negative effect on any groups of people with protected inclusion characteristics

<b>Protected Characteristic</b>	<b>Positive/ Neutral Negative /</b>	<b>Impact (include reference to data/ engagement)</b>
<b>6.1</b> Age	Positive	The DPS itself is a mechanism by which adaptations jobs can be compliantly procured.  However, the use of the DPS for adaptations works will support residents of all ages to live independently and delay the need for long-term care. There is no age range, jobs relating to adaptations will be placed on the DPS and will apply to any resident, adult or child. Eligibility will be subject to the assessment of an OT.
<b>6.2</b> Disability	Positive	The use of the DPS will enable adaptations to be made to the home environment as quickly as possible to promote independence and keep people living in their own homes in safety and with dignity for longer. Adaptations can help to prevent or delay the need for care and support, both of which are central themes of the Care Act 2014; where adaptations cannot be progressed quickly, this can significantly impact upon resident outcomes and wellbeing. It is therefore critical that adaptations are provided quickly and efficiently to support residents to stay living in their homes, reducing unnecessary reliance on hospital beds and residential placements and the associated decline in independence and quality of life. The

		DPS will facilitate the quick and efficient procurement of contractors to undertake jobs.
<b>6.3 Gender</b>	Positive	The criteria for access to the service is the same for all protected characteristics who have adaptations needs.  It is unlikely there would be any disproportionate impact relating to gender.
<b>6.4 Pregnancy or Maternity</b>	Neutral	There are no perceived negative impacts on this protected characteristic.  A resident's pregnancy is not considered unless it is contributing to their disability.
<b>6.5 Race</b>	Positive	It is unlikely there would be any disproportionate impact relating to Race. It is expected that contractors will work with Bury Council and the community to consider how we can embed the need to reduce inequalities and identify barriers to accessing support for adaptations.
<b>6.6 Religion and belief</b>	Positive	It is unlikely there would be any disproportionate impact relating to religion and belief. It is expected that the service provides a personalised service to all the people it supports, so would take account of any support needs relating to religion or belief.
<b>6.7 Sexual Orientation</b>	Positive	It is unlikely there would be any disproportionate impact in relation to sexual orientation. It is expected the commissioned service provide a service to all of the people it supports and has due regard to an individual's sexual orientation.
<b>6.8 Marriage or Civil Partnership</b>	Neutral	It is unlikely there would be any disproportionate impact in relation to marriage or civil partnership.
<b>6.9 Gender Reassignment</b>	Positive	It is unlikely there would be any disproportionate impact relating to gender reassignment.
<b>6.10 Carers</b>	Neutral	There maybe tenants that are also providing care to relatives or others in the community. This does not exclude them from the scheme.
<b>6.11 Looked After Children and Care Leavers</b>	Neutral	The criteria will apply to anybody as long as they fulfil the rest of the service access criteria – anybody under the age of 18 will fall under the jurisdiction of Children's Directorate. However, the service has a willingness to link with Children Services and will support young people who are transitioning from Children Services into Adult Services.

<b>6.12</b> Armed Forces personnel including veterans	Positive	It is unlikely there would be any disproportionate impact in relation to Armed Forces personnel including veterans.
<b>6.13</b> Socio-economically vulnerable	Positive	It is unlikely there would be any disproportionate impact in relation to Socio-economically vulnerable.
<b>6.14 Overall impact -</b> What will the likely overall effect of your activity be on equality, including consideration on intersectionality?	Positive – no negative or high risks have been identified. It has therefore been concluded that a full EIA is not relevant for this procurement.	<p>There is a higher risk to the Council if the DPS is not implemented which could impact upon the number, speed, efficiency and quality of adaptations that can be procured and installed for disabled people.</p> <p>The DPS itself is a mechanism by which adaptations jobs can be compliantly procured.</p> <p>However, the use of the DPS for adaptations works will support residents of all ages to live independently and delay the need for long-term care. There is no age range, and adaptations can be installed for an adult or a child, subject to an OT assessment.</p> <p>Eligibility will be subject to the resident’s disability and needs. The focus of using the DPS is to ensure that adaptations works can be installed quickly and efficiently for disabled residents using quality contractors, thereby enabling residents to continue living independently at home.</p> <p>There are no perceived negative impacts, only positive impacts, to the protected characteristics of the Equality Act 2010 and to the socioeconomically disadvantaged of using the DPS for adaptations works.</p> <p>Feedback will be sought from residents to ensure continuous service improvement through comprehensive feedback of the adaptation that was installed and the contractors procured via the DPS.</p> <p>The DPS will be reviewed to ensure it is working well. Data will be stored regarding the adaptations jobs and the ages, tenure and ethnicity of applicants. This data can then be used to review the success of the policy and review who are benefiting from it the most and to ensure service equity</p>

<b>SECTION 7 – ACTION LOG</b>			
<i>Refer to Equality Analysis guidance page 10</i>			
Action Identified	Lead	Due Date	Comments and Sign off (when complete)
<b>8.1</b> Actions to address gaps identified in section 4			

None that will have an impact on this programme of work.  The intended outcome for this contract is to comply with statutory legislation whilst working to increase take up and the opportunity to tap into unmet need.			Ongoing engagement to continually monitor quality and identify opportunity of areas of development for the people of Bury.  Analysis on demographics of customers will be part of the contract monitoring. Data and residents who are members of the forum group will be used to identify barriers and put forward suggestions on how barriers can be overcome.
<b>8.2</b> Actions to address gaps identified in section 5			
The intended outcome for this contract is to comply with statutory legislation whilst working to increase take up and the opportunity to tap into unmet need.			Ongoing engagement to continually monitor quality and identify opportunity of areas of development for the people of Bury.  Analysis on demographics of customers will be part of the contract monitoring.
<b>8.3</b> Mitigations to address negative impacts identified in section 6			
N/A			N/A
<b>8.4</b> Opportunities to further inclusion (equality, diversity and human rights ) including to advance opportunities and engagements across protected characteristics			
EA to be shared with the provider for comment and opportunity to contribute to the analysis	Ahmed Ajmi	December 2024	

<b>SECTION 8 - REVIEW</b>			
<i>Refer to Equality Analysis guidance page 10</i>			
Review Milestone	Lead	Due Date	Comments (and sign off when complete)
Ongoing	Michelle Stott  Ahmed Ajmi		By working with the Provider, Community Commissioning Division, BGI department and tenants to shape service delivery. It is anticipated the council can continue to meet its obligation in relation to the Care Act 2014, along with

			achieving the outcomes for the people the service supports.
Review EIA at 12 months	Ahmed Ajmi	December 2024	