

Equality Impact Analysis

This equality impact analysis establishes the likely effects both positive and negative and potential unintended consequences that decisions, policies, projects and practices can have on people at risk of discrimination, harassment and victimisation. The analysis considers documentary evidence, data and information from stakeholder engagement/consultation to manage risk and to understand the actual or potential effect of activity, including both positive and adverse impacts, on those affected by the activity being considered.

To support completion of this analysis tool, please refer to the equality impact analysis guidance.

Section 1 – Analysis Details (Page 5 of the guidance document)

Name of Policy/Project/Decision	Care at Home Review
Lead Officer (SRO or Assistant Director/Director)	Adrian Crook (Director of Adult Social Services and Community Commissioning)
Department/Team	Health and Care
Proposed Implementation Date	N/A
Author of the EqIA	Stephanie Boyd (Integrated Commissioning Officer for Older People and Ageing Well)
Date of the EqIA	29 April 2024

1.1 What is the main purpose of the proposed policy/project/decision and intended outcomes?

Following a service review process, the recommendations are:

- Approve a 12-month contract extension for all Lot 1 Care at Home providers (until 24 October 2025) due to evidence that contractual obligations are being met.
- Approve a 12-month contract extension for Lot 2 Care at Home providers that are meeting contractual obligations (until 24 October 2025).
- Delegate the decision regarding which Lot 2 provider contracts will be extended to the Strategic Leads for Integrated Commissioning.
- Delegate finalisation and sealing of the deeds of extension required to give effect to the contract extensions to the Director of Law and Democratic Services in consultation with the Executive Director of Health and Adult Care.

A 12-month extension will afford Commissioners the opportunity to complete comprehensive engagement with key stakeholders on a new model for Care at Home. We will research best practice in other local areas, we will run workshops with providers to understand what works well currently and whether there are opportunities to do things differently, and we will engage with residents, not only people who use the service, but also the Bury Older People’s Network.

Section 2 – Impact Assessment (Pages 6 to 10 of the guidance document)

2.1 Who could the proposed policy/project/decision likely have an impact on?

Employees: No. The recommendations relate to potential changes for care at home providers and customers.
 Community/Residents: Yes.
 Third parties such as suppliers, providers, and voluntary organisations: Yes.

If the answer to all three questions is ‘no’ there is no need to continue with this analysis.

2.2 Evidence to support the analysis. Include documentary evidence, data and stakeholder information/consultation

The Care at Home service supports the vulnerable people of Bury with their assessed needs under the Care Act 2014. This includes support with personal care, moving and handling, nutrition and hydration, and medication. The current service was commissioned in October 2021 for a period of three years with the option for a one or two year extension.

The table below demonstrates the high-level actions involved in the service review process:

DATE	ACTIONS
February and March 2024	Throughout the months of February and March Commissioners carried out desktop research using current provider performance data submitted to the Council.
26 February to 24 March 2024	Stakeholder engagement included: <ul style="list-style-type: none"> • A feedback form for provider owners and/or managers to complete. • Drop-in sessions for provider owners and/or managers. • A survey for customers (sample of customers randomly selected were contacted directly by Commissioners). • Other stakeholders (including family members, friends, professionals, and/or other interested parties) were welcome to complete the survey.
25 March to 31 March 2024	Analysis of stakeholder engagement.
01 April to 30 April 2024	Report writing and recommendations for Cabinet.
05 June 2024	Decision on next steps made by Cabinet.

Advice from legal services confirms that the Council is complying with Procurement rules and legislation.

Data:

Protected Characteristic	Bury Population Data (from the JSNA)	Care at Home Customer Data (from Liquid Logic)
Age	<p>Bury has 114,526 (59.1%) working age adults (18-64 years).</p> <p>There are 35,447 (18.3%) older adults in Bury (65 years and over).</p>	<p>Age 18 to 64 – 183 (22.3%)</p> <p>Age 65 to 74 – 119</p> <p>Age 75 to 84 – 224</p> <p>Age 85 and over – 294</p>

		(77.7%)
Disability	19% of the population report having a disability.	Data unavailable. However, everybody receiving this service has Care Act eligible needs.
Gender Reassignment	The question on gender identity was new for Census 2021. It was a voluntary question only asked of those aged 16 years and over. The question asked, "Is the gender you identify with the same as your sex registered at birth?" with 3 answer options of Yes, No or to write in their gender identity. 94.4% of the population aged 16 years and over in Bury answered Yes.	Data unavailable.
Race	Asian, Asian British or Asian Welsh – 10.6% Black, Black British, Black Welsh, Caribbean or African – 1.9% Mixed or Multiple ethnic groups – 2.6% Other ethnic group – 1.9% White: English, Welsh, Scottish, Northern Irish or British – 78.2% White: Other – 3.5%	African – 3 (0.37%) Any other Asian background – 9 (1.1%) Any other black background – 1 (0.1%) Any other ethnic group – 4 (0.5%) Any other mixed background – 1 (0.1%) Any other white background – 19 (2.3%) Caribbean – 5 (0.6%) English / Welsh / Scottish / Northern Irish / British – 697 (85%) Irish – 8 (1%) Not known – 45 (5.5%) Not stated – 1 (0.1%) Pakistani – 23 (2.8%) White and Asian – 1 (0.1%) White and Black Caribbean – 3 (0.37%)
Religion and Belief	Buddhist - 0.3%	Buddhist – 1 (0.1%)

	<p>Christian – 48.8%</p> <p>Hindu – 0.5%</p> <p>Jewish – 5.5%</p> <p>Muslim – 9.9%</p> <p>Sikh – 0.3%</p> <p>Other religion – 0.3%</p> <p>No religion – 29.4%</p> <p>Not answered – 4.9%</p>	<p>Christian – 381 (46.5%)</p> <p>Jewish – 33 (4%)</p> <p>Muslim – 25 (3%)</p> <p>None – 55 (6.7%)</p> <p>Other – 23 (2.8%)</p> <p>Sikh – 1 (0.1%)</p> <p>Unknown – 301 (36.7%)</p>
Sex	The population of Bury is 51% female and 49% male.	<p>Female – 511 (62.3%)</p> <p>Male – 309 (37.7%)</p>
Sexual Orientation	<p>The question on sexual orientation was new for Census 2021 and was voluntary only asked of those aged 16 years and over:</p> <p>Heterosexual/Straight – 90.6%</p> <p>Gay/Lesbian – 1.6%</p> <p>Bisexual – 1%</p> <p>All other sexual orientations – 0.3%</p> <p>Not answered – 6.5%</p>	<p>Don't know/refused – 66 (8%)</p> <p>Gay/Lesbian – 4 (0.5%)</p> <p>Heterosexual/Straight – 437 (53.3%)</p> <p>Missing – 312 (38%)</p> <p>Other – 1 (0.1%)</p>
Carers	The percentage of people providing unpaid care in Bury is 9.2%.	<p>Informal Carer (without an active carers support plan) – 331 (40.4%)</p> <p>Formal Carer (with an active carers support plan) – 119 (14.5%)</p>

Stakeholder information/consultation: As described in the action log above, a 4-week stakeholder engagement period took place to gain the views of providers, customers, and other stakeholders on the current care at home service.

Provider Feedback

Several providers engaged with the review process and there was a general feeling that we need to consolidate providers in Bury, develop partnership working, and improve communication. Key themes were apparent such as challenges around recruitment and retention and issues relating to processes. However, several providers are keen to work in partnership with the Council and are particularly eager to co-produce what a new model might look like.

Other Stakeholder Feedback

200 out of 820 Care at Home customers were randomly selected and contacted directly by Commissioners to respond to a short anonymous survey asking them to rate the quality of care they receive from their provider. Other stakeholders (including family members, friends, professionals, and/or other interested parties) were welcome to complete the survey. The average quality rating out of 5 stars was 4.22 across all providers and not one person rated their current provider less than 3 out of 5. However, it must be noted that we cannot apply this average rating to every provider as there were limitations to the survey and some providers did not receive any feedback.

Some of the feedback was very positive. However, some of the feedback highlighted long-term ongoing issues that the Community Commissioning Team continuously work to resolve with providers, for example, lack of continuity with staff and time of calls.

2.3 Consider the following questions in terms of who the policy/project/decision could potentially have an impact on. Detail these in the impact assessment table (2.4) and the potential impact this could have.

- Could the proposal prevent the promotion of equality of opportunity or good relations between different equality groups?
- Could the proposal create barriers to accessing a service or obtaining employment because of a protected characteristic?
- Could the proposal affect the usage or experience of a service because of a protected characteristic?
- Could a protected characteristic be disproportionately advantaged or disadvantaged by the proposal?
- Could the proposal make it more or less likely that a protected characteristic will be at risk of harassment or victimisation?
- Could the proposal affect public attitudes towards a protected characteristic (e.g. by increasing or reducing their presence in the community)?
- Could the proposal prevent or limit a protected characteristic contributing to the democratic running of the council?

2.4 Characteristic	Potential Impacts	Evidence (from 2.2) to demonstrate this impact	Mitigations to reduce negative impact	Impact level with
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				mitigations Positive, Neutral, Negative
Age	<p>All customers will still receive the same level of support, but for some it may be delivered by a different provider which will involve a transition (all customers will have a choice).</p> <p>Impact with older customers that a change/transition in care team may cause anxiety, confusion, and uncertainty.</p>	<p>As described in the data section above, a disproportionate cohort of older people are more likely to use care at home services.</p>	<p>Clear comms with all customers affected via a letter including e-mail address and phone number for any queries. This will be checked by the Council's Comms Team to ensure it is accessible. Providers will be asked to offer support to customers who need it.</p> <p>Commissioners will support a smooth transfer by ensuring consent by the customer and all relevant paperwork in place for the new provider, particularly the support plan as this will include specific individual requirements, such as reasonable adjustments to support a protected characteristic.</p> <p>Customers will also have the option for a personal budget to choose their provider or a personal assistant of choice, for example, if they have built up a relationship of trust with their provider.</p>	Neutral.
Disability	<p>All customers will still receive</p>	<p>Disproportionate cohort of people with disabilities are</p>	<p>Clear comms with all customers affected via a letter including e-mail</p>	Neutral.

	<p>the same level of support, but for some it may be delivered by a different provider which will involve a transition (all customers will have a choice).</p> <p>Potential impact in lost knowledge of the cared for person and reasonable adjustments in place during a transition to a new care team.</p> <p>Changes in care team may cause some disabled customers anxiety, confusion, and uncertainty.</p>	<p>more likely to use care at home services.</p>	<p>address and phone number for any queries. This will be checked by the Council's Comms Team to ensure it is accessible. Providers will be asked to offer support to customers who need it.</p> <p>Commissioners will support a smooth transfer by ensuring consent by the customer and all relevant paperwork in place for the new provider, particularly the support plan as this will include specific individual requirements, such as reasonable adjustments to support a protected characteristic.</p> <p>Customers will also have the option for a personal budget to choose their provider or a personal assistant of choice, for example, if they have built up a relationship of trust with their provider.</p>	
<p>Gender Reassignment</p>	<p>All customers will still receive</p>	<p>Data unavailable.</p>	<p>Clear comms with all customers affected via a letter including e-mail</p>	<p>Neutral.</p>

	<p>the same level of support, but for some it may be delivered by a different provider which will involve a transition (all customers will have a choice).</p> <p>Transgender customers may have built up a relationship of trust with current care team. There may be some anxiety and uncertainty in protecting trans history and/or disclosing trans history to new care provider teams.</p>		<p>address and phone number for any queries. This will be checked by the Council's Comms Team to ensure it is accessible. Providers will be asked to offer support to customers who need it.</p> <p>Commissioners will support a smooth transfer by ensuring consent by the customer and all relevant paperwork in place for the new provider, particularly the support plan as this will include specific individual requirements, such as reasonable adjustments to support a protected characteristic.</p> <p>Commissioners will work with customers and take a customer led approach to those who have a trans history to manage any transition (this would include or exclude trans history information depending on the persons choice).</p> <p>Customers will also have the option for a personal budget to choose their provider or a personal assistant of choice, for example, a transgender person may have built up a relationship of trust with their</p>	
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			carers and may wish to keep their current provider.	
Marriage and Civil Partnership	No evidence to suggest impact.	N/A	N/A	Neutral.
Pregnancy and Maternity	No evidence to suggest impact.	N/A	N/A	Neutral.
Race	<p>All customers will still receive the same level of support, but for some it may be delivered by a different provider which will involve a transition (all customers will have a choice).</p> <p>Potential Impact around language barriers during transition to new care team provider.</p> <p>Impact in maintaining any cultural arrangements that may be in place with</p>	<p>Whilst there are some variations between Bury population data and Care at Home Customer data there is nothing to suggest a significant disproportionate impact.</p>	<p>Clear comms with all customers affected via a letter including e-mail address and phone number for any queries. This will be checked by the Council's Comms Team to ensure it is accessible. Providers will be asked to offer support to customers who need it.</p> <p>Commissioners will support a smooth transfer by ensuring consent by the customer and all relevant paperwork in place for the new provider, particularly the support plan as this will include specific individual requirements, to support a protected characteristic (for example, female only carers for cultural reasons).</p> <p>Where required a translation service is accessible to both commissioners and customers to assist in the communication of any transition in care team.</p>	Neutral.

	current care team.		Customers will also have the option for a personal budget to choose their provider or a personal assistant of choice, for example, if they have the same language or cultural needs as their carers, they may wish to keep their current provider.	
Religion and Belief	<p>All customers will still receive the same level of support, but for some it may be delivered by a different provider which will involve a transition (all customers will have a choice).</p> <p>Impact in maintaining any cultural and religious arrangements that may be in place with current care team.</p>	<p>Whilst there are some variations between Bury population data and Care at Home Customer data there is nothing to suggest a significant disproportionate impact.</p>	<p>Clear comms with all customers affected via a letter including e-mail address and phone number for any queries. This will be checked by the Council's Comms Team to ensure it is accessible. Providers will be asked to offer support to customers who need it.</p> <p>Commissioners will support a smooth transfer by ensuring consent by the customer and all relevant paperwork in place for the new provider, particularly the support plan as this will include specific individual requirements, such as reasonable adjustments to support a protected characteristic (for example, female only carers for religious reasons or protected times of day/week for worship/praying).</p>	Neutral.

			Customers will also have the option for a personal budget to choose their provider or a personal assistant of choice, for example, if they have built up a relationship of trust with their provider.	
Sex	<p>All customers will still receive the same level of support, but for some it may be delivered by a different provider which will involve a transition (all customers will have a choice).</p> <p>Potential impact in maintaining gender appropriate care when changing care teams.</p>	<p>Whilst there is a variation between Bury population data and Care at Home Customer data there is nothing to suggest a significant disproportionate impact.</p>	<p>Clear comms with all customers affected via a letter including e-mail address and phone number for any queries. This will be checked by the Council's Comms Team to ensure it is accessible. Providers will be asked to offer support to customers who need it.</p> <p>Commissioners will support a smooth transfer by ensuring consent by the customer and all relevant paperwork in place for the new provider, particularly the support plan as this will include specific individual requirements, such as reasonable adjustments to support a protected characteristic (for example gender appropriate carers where possible).</p> <p>Customers will also have the option for a personal budget to choose their provider or a personal assistant of choice, for example, if</p>	Neutral.

			<p>they have built up a relationship of trust with their provider.</p>	
<p>Sexual Orientation</p>	<p>All customers will still receive the same level of support, but for some it may be delivered by a different provider which will involve a transition (all customers will have a choice).</p> <p>Customers may have built a relationship of trust with their care team around sexual orientation. A change in care team may cause some anxiety or uncertainty around 'coming out' and building trust with a new team.</p>	<p>Whilst there are some variations between Bury population data and Care at Home Customer data there is nothing to suggest a significant disproportionate impact.</p>	<p>Clear comms with all customers affected via a letter including e-mail address and phone number for any queries. This will be checked by the Council's Comms Team to ensure it is accessible. Providers will be asked to offer support to customers who need it.</p> <p>Commissioners will support a smooth transfer by ensuring consent by the customer and all relevant paperwork in place for the new provider, particularly the support plan as this will include specific individual requirements, such as reasonable adjustments to support a protected characteristic.</p> <p>Commissioners will work with customers and take a customer led approach to manage disclosure or non-disclosure of sexual orientation depending on the persons choice.</p> <p>Customers will also have the option for a personal budget to choose their provider or a personal assistant of choice, for example, if</p>	<p>Neutral.</p>

			they have built up a relationship of trust with their carers, particularly around sexual orientation, they may wish to keep their current provider.	
Carers	All customers will still receive the same level of support, but for some it may be delivered by a different provider which will involve a transition (all customers will have a choice).	Disproportionate impact is expected due to the cohort of people who use care at home services.	<p>Clear comms with all customers/carers affected via a letter including e-mail address and phone number for any queries. This will be checked by the Council's Comms Team to ensure it is accessible. Providers will be asked to offer support to customers who need it.</p> <p>Commissioners will support a smooth transfer by ensuring consent by the customer and all relevant paperwork in place for the new provider, particularly the support plan as this will include specific individual requirements, such as reasonable adjustments to support a protected characteristic. Customers will also have the option for a personal budget to choose their provider or a personal assistant of choice, for example, if they have built up a relationship of trust with their provider.</p>	Neutral.
Looked After Children and Care Leavers	No evidence to suggest impact.	N/A	N/A	Neutral.

Socio-economically vulnerable	No evidence to suggest impact.	N/A	N/A	Neutral.
Veterans	No evidence to suggest impact.	N/A	N/A	Neutral.

Actions required to mitigate/reduce/eliminate negative impacts or to complete the analysis

2.5 Characteristics	Action	Action Owner	Completion Date
	No actions identified at this stage.		

Section 3 - Impact Risk

Establish the level of risk to people and organisations arising from identified impacts, with additional actions completed to mitigate/reduce/eliminate negative impacts.

3.1 Identifying risk level (Pages 10 - 12 of the guidance document)

Impact x Likelihood = Score			Likelihood			
			1	2	3	4
			Unlikely	Possible	Likely	Very likely
Impact	4	Very High	4	8	12	16
	3	High	3	6	9	12
	2	Medium	2	4	6	8
	1	Low	1	2	3	4

0	Positive / No impact	0	0	0	0
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Risk Level	No Risk = 0	Low Risk = 1 - 4	Medium Risk = 5 – 7	High Risk = 8 - 16
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3.2 Level of risk identified	Low risk
3.3 Reasons for risk level calculation	<p>A low risk level has been calculated for the following recommendations:</p> <ul style="list-style-type: none"> • Approve a 12-month contract extension for all Lot 1 Care at Home providers (until 24 October 2025) due to evidence that contractual obligations are being met. • Approve a 12-month contract extension for Lot 2 Care at Home providers that are meeting contractual obligations (until 24 October 2025). • Delegate the decision regarding which Lot 2 provider contracts will be extended to the Strategic Leads for Integrated Commissioning. • Delegate finalisation and sealing of the deeds of extension required to give effect to the contract extensions to the Director of Law and Democratic Services in consultation with the Executive Director of Health and Adult Care. <p>The reasons for the low risk level are:</p> <ul style="list-style-type: none"> • Advice from legal services confirms that the Council is complying with Procurement rules and legislation. • All customers will still receive the same level of support, but for some it may be delivered by a different provider which will involve a transition (all customers will have a choice). • Clear comms with all customers/carers affected via a letter including e-mail address and phone number for any queries. This will be checked by the Council’s Comms Team to ensure it is accessible. Providers will be asked to offer support to customers who need it. • Commissioners will support a smooth transfer by ensuring consent by the customer and all relevant paperwork in place for the new provider, particularly the support plan as this will include specific individual requirements, such as reasonable adjustments to support a protected characteristic. Customers will also have the option for a personal budget to


	<p>choose their provider or a personal assistant of choice, for example, if they have built up a relationship of trust with their provider.</p> <ul style="list-style-type: none"> • A 12-month extension will afford Commissioners the opportunity to complete comprehensive engagement with key stakeholders on a new model for Care at Home.
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Section 4 - Analysis Decision (Page 11 of the guidance document)

4.1 Analysis Decision	X	Reasons for This Decision
There is no negative impact therefore the activity will proceed		
There are low impacts or risks identified which can be mitigated or managed to reduce the risks and activity will proceed	x	Bury Council must follow procurement rules and legislation. All customers will still receive the same level of support, but for some it may be delivered by a different provider. All customers will have a choice and reasonable adjustments will be made to support protected characteristics managed in a sensitive manner. A 12-month extension will afford Commissioners the opportunity to complete comprehensive engagement with key stakeholders on a new model for Care at Home.
There are medium to high risks identified which cannot be mitigated following careful and thorough consideration. The activity will proceed with caution and this risk recorded on the risk register, ensuring continual review		

Section 5 – Sign Off and Revisions (Page 11 of the guidance document)

5.1 Sign Off	Name	Date	Comments
Lead Officer/SRO/Project Manager	S.Boyd	22/05/2024	

Responsible Asst. Director/Director		22/05/2024	
EDI	L. Cawley	22/05/2024	

EqIA Revision Log

5.2 Revision Date	Revision By	Revision Details