

## 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)

<b>Name of Policy/Project/Decision</b>	Care at Home Re-Tender
<b>Lead Officer (SRO or Assistant Director/Director)</b>	Adrian Crook (Director of Adult Social Services and Community Commissioning)
<b>Department/Team</b>	Health and Care
<b>Proposed Implementation Date</b>	N/A
<b>Author of the EqlA</b>	Stephanie Boyd (Commissioning Manager for Older People and Ageing Well)
<b>Date of the EqlA</b>	17 December 2024

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

### Summary

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 service supports approximately 841 people each day and delivers 10,866 hours of home care each week.

The council currently spends approximately £10m a year on Care at Home and our contracts normally last 3, 4, or 5 years at a cost of up to £50m. For this reason, the process of designing the specification and identifying providers is in depth, comprehensive, and lengthy.

The current service was commissioned in October 2021 for a period of three years and extended for a further 12-months until October 2025.

It is now necessary to seek permission to start the process which will ultimately result in the procurement of a new Care at Home contract in Bury starting in October 2025.

### Recommendation(s)

1. Approval to commence the re-tender process for a new Care at Home service to start in October 2025.
2. Delegate the authority to approve the service specification to the Director of Adult Social Services and Community Commissioning.
3. Return to Cabinet in September 2025 to request approval to contract awards.

### Reasons for recommendation(s)

The Council has a legal duty to follow Procurement Law and fair purchasing processes.

## 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

Advice from Corporate Procurement and Legal colleagues is that the Council is complying with relevant rules and legislation.

Data from Equality Impact Assessment for Care at Home Service Review completed in May 2024:

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 (77.7%)</p>
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	<p>Asian, Asian British or Asian Welsh – 10.6%</p> <p>Black, Black British, Black Welsh, Caribbean or African – 1.9%</p> <p>Mixed or Multiple ethnic groups – 2.6%</p> <p>Other ethnic group – 1.9%</p> <p>White: English, Welsh, Scottish, Northern Irish or British – 78.2%</p> <p>White: Other – 3.5%</p>	<p>African – 3 (0.37%)</p> <p>Any other Asian background – 9 (1.1%)</p> <p>Any other black background – 1 (0.1%)</p> <p>Any other ethnic group – 4 (0.5%)</p> <p>Any other mixed background – 1 (0.1%)</p> <p>Any other white background – 19 (2.3%)</p> <p>Caribbean – 5 (0.6%)</p> <p>English / Welsh / Scottish / Northern Irish / British – 697 (85%)</p> <p>Irish – 8 (1%)</p> <p>Not known – 45 (5.5%)</p> <p>Not stated – 1 (0.1%)</p> <p>Pakistani – 23 (2.8%)</p> <p>White and Asian – 1 (0.1%)</p> <p>White and Black Caribbean – 3 (0.37%)</p>	
	Religion and Belief	<p>Buddhist - 0.3%</p> <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>Buddhist – 1 (0.1%)</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	The question on sexual orientation was new for Census 2021 and was voluntary only asked of those aged 16 years and over:	<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>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>	Other – 1 (0.1%)
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>

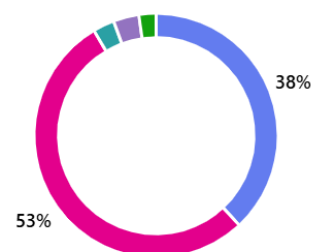
A 6-week public consultation ran from Monday 04 November to Sunday 15 December 2024.

Commissioners wrote to 841 Care at Home customers asking them, along with family and friends, to complete a survey and offered the opportunity to attend consultation sessions, both online and face-to-face.

The same survey was open to Providers, Social Workers, Health Colleagues, Bury VCFA, Healthwatch, and other partner agencies. They too were offered the opportunity to attend online and face-to-face consultation sessions.

176 survey responses were received in total with the majority of respondents (53%) being a family member or friend. Please see the chart below for a further breakdown:

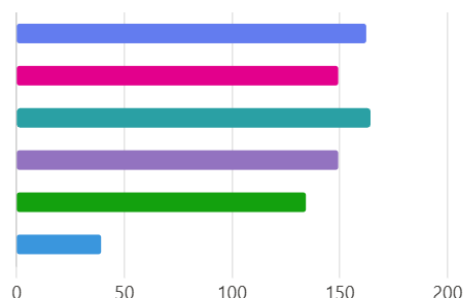
Customer (person who receives care)	67
Family member or friend	94
Paid care at home carer	5
Other paid professional	6
Other interested party	4



When thinking about care at home, the top two most important things for people included being treated with dignity and respect and having a small group of regular carers who understand the person's needs.

Please see the chart below for a further breakdown:

To be treated with dignity and respect	162
To be treated in a professional manner	149
To have a small group of regular carers who understand my needs	164
To have consistent call times	149
To have a sufficient amount of time with carers	134
Other	39



In addition, respondents highlighted many other areas of importance, such as continuity of care, and suggestions were made for service improvement. It was clear throughout the feedback that customers and family members need a better understanding of what Care Workers can and cannot do, and for expectations to be managed from an early stage.

Please refer to Appendix 1 for a detailed summary of the anonymised consultation findings.

The bullet points below provide an overview of the subjects that were discussed during the online and face-to-face consultation sessions:

- The need for new and improved Key Performance Indicators (KPIs)
- The potential need for a Lot 3 for people who have complex needs
- The potential need for the Trusted Assessor Model
- Discussions regarding whether 30-minutes should be the minimum call time for personal care
- Opportunities to run various pilots related to technology enabled care (TEC) and blended roles
- The need for a Customer Welcome Letter

Please refer to Appendix 1 for a detailed summary of the discussions.

The analysed consultation findings along with desktop research will inform the updated service specification.

All key stakeholders, with the exception of providers due to market competition rules, were invited to join a 'co-production working group' which will meet weekly throughout January 2025 to update and co-produce the relevant documentation. The Community Commissioning Team will lead this work with input from Brokerage colleagues, Healthwatch colleagues, and the Chair of the Bury Older People's Network (BOPN).

**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 mitigations
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				<b>Positive, Neutral, Negative</b>
<b>Age</b>	<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>	As described in the data section above, a disproportionate cohort of older people are more likely to use care at home services.	<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.
<b>Disability</b>	All customers will still receive the same level of	Disproportionate cohort of people with disabilities are	Clear comms with all customers affected via a letter including e-mail address and phone number for any	Neutral.



	<p>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>	more likely to use care at home services.	<p>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>	
<b>Gender Reassignment</b>	All customers will still receive the same level of	Data unavailable.	Clear comms with all customers affected via a letter including e-mail address and phone number for any	Neutral.

	<p>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>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.	
<b>Marriage and Civil Partnership</b>	No evidence to suggest impact.	N/A	N/A	Neutral.
<b>Pregnancy and Maternity</b>	No evidence to suggest impact.	N/A	N/A	Neutral.
<b>Race</b>	<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.	
<b>Religion and Belief</b>	<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>	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>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.	
<b>Sex</b>	<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>	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>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.

			they have built up a relationship of trust with their provider.	
<b>Sexual Orientation</b>	<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>	Neutral.

			they have built up a relationship of trust with their carers, particularly around sexual orientation, they may wish to keep their current provider.	
<b>Carers</b>	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.
<b>Looked After Children and Care Leavers</b>	No evidence to suggest impact.	N/A	N/A	Neutral.

<b>Socio-economically vulnerable</b>	No evidence to suggest impact.	N/A	N/A	Neutral.
<b>Veterans</b>	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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<b>3.2 Level of risk identified</b>	Low risk
<b>3.3 Reasons for risk level calculation</b>	<p>A low risk level has been calculated for the following recommendations:</p> <ol style="list-style-type: none"> <li>1. Approval to commence the re-tender process for a new Care at Home service to start in October 2025.</li> <li>2. Delegate the authority to approve the service specification to the Director of Adult Social Services and Community Commissioning.</li> <li>3. Return to Cabinet in September 2025 to request approval to contract awards.</li> </ol> <p>The reasons for the low risk level are:</p> <ul style="list-style-type: none"> <li>• Advice from legal services confirms that the Council is complying with Procurement rules and legislation.</li> <li>• 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).</li> <li>• 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.</li> <li>• 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.</li> </ul>

**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.
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	17 Dec 2024	
Responsible Asst. Director/Director			
EDI	Lee Cawley	04/02/25	QA Complete. Potential negative impacts have been identified for a number of specific characteristics and circumstances however mitigations have been identified and will be put in place to remove or minimise the potential negative impacts therefore most likely impacts will be neutral

## EqIA Revision Log

5.2 Revision Date	Revision By	Revision Details
17 Dec 2024	S.Boyd	Previous EIA re the Care at Home Review was completed on 22 May 2024. The May document has been updated to reflect the Care at Home Re-Tender which is the next stage of the work. The considered impact on equality and protected characteristics has not changed.