SSA EQUALITY IMPACT AND NEEDS ANALYSIS

Directorate	Adult Social Care and Public Health
Service Area	Commissioning and Quality Standards
Service/policy/function being assessed	Direct Payment Support Service
Which borough (s) does the service/policy	Wandsworth
apply to	
Staff involved in developing this EINA	William Durant, Dawn Patrick
Date approved by Directorate Equality	
Group (if applicable)	
Date approved by Policy and Review	
Manager	
All EINAs must be signed off by the Policy	
and Review Manager	
Date submitted to Directors' Board	

1. Summary

Proposal

This EINA is for a single joint contract across Richmond and Wandsworth for the provision of a direct payment support service (DPSS). Currently there is a single contract with a provider in each borough which ends June 2023 and the new model proposed is a single contract across the SSA.

A Direct Payment is an amount of money that is given to service users to arrange and pay for their own care and support services. It acts as a means to maximise the choice and control service users have over their own care and is designed to enable people to maintain their independence.

The Care Act 2014 and associated guidance require all councils to ensure that all Direct Payment recipients are offered appropriate support to set up and maintain their Direct Payments as independently as possible. Direct Payment support services play a key role in helping people manage their Direct Payments by offering a range of support including employment information and advice, support to recruit a personal assistant, and payroll and managed account services.

Findings

Compared to the borough population, service users who receive direct payments contain a higher proportion of people who are:

- Female,
- Over-65,
- Have learning or physical disabilities,
- Asian/Asian British or black/black British,
- Widowed

Positive Impacts

In response to the EINA analysis and the HealthWatch research, the specification for the future contract will increase focus on the following:

- Clear information on support available and what service users can spend their monies on (including on-line access to information on status of funds).
- Offering enhanced and flexible methods of communication and peer support including on-line, or social media groups (e.g Facebook) for people to stay in touch, benefit from mutual support and share solutions.
- Development of the PA market and recruitment strategies to "widen the net of PAs" including those with specialist skills, and those out of borough as required through joint working with the Council and other partners to promote the role of PAs and offer support and training.
- Proactive support to encourage innovative and flexible use of direct payments, helping service users explore different ways to meet their outcomes.
- Development of local knowledge and connections to signpost and raise service users' awareness of community organisations and resources that can offer advice and support.

Negative Impacts

A potential change in provider of the service could mean disruption to arrangements to which service users have become accustomed, a change that could be difficult for over-65s, those with a learning disability or those who live alone.

To mitigate this, we will implement the following:

- Communicate to service users clearly about any changes to the provider, in different forms appropriate to the variety of needs among service users.
- As part of the transition process, any service users who need additional support to understand the implications of the changes will be identified and appropriately supported.
- There will be an extensive mobilisation period to ensure a smooth transition and continuity of support for the service users potentially impacted by a changed in provider.

Changing the delivery model to one single provider that spans both boroughs may mean the new provider may not initially have the necessary localised knowledge and connections to give comprehensive advice on what local services direct payments can be spent. We would mitigate this by ensuring the specification and tender evaluation includes a requirement that the provider develops local knowledge and connections.

2. Evidence gathering and engagement

a. What evidence has been used for this assessment? For example, national data, local data via DataRich or DataWand

Evidence Source

Online survey of 28 DPSS service users in	HealthWatch commissioned research.
Richmond and Wandsworth	
Telephone interviews with 15 DPSS service	HealthWatch commissioned research.
users in Richmond and Wandsworth	
Population projections for age, sex,	Greater London Authority 2021.
ethnicity	*Mosaic 2021.
Population projections for disability	Projecting Adult Needs and Service
	Information 2020.
	Mosaic 2021.
Population projections for marriage and	ONS Census 2011.
civil partnership, religion and belief	Mosaic 2021.
Population projections for sexual	ONS Sexual orientation by English and
orientation	Welsh local authorities, 2016-2018.
	Mosaic 2021.
Population projections and needs for carers	'People at the Heart of Care' – DHSC.
	Richmond JSNA 2021.
	'Caring behind closed doors: six months on'
	– Carers UK, 2020.

^{*}Adult Social Care client information system.

b. Who have you engaged and consulted with as part of your assessment?

Individuals/Groups	Consultation/Engagement results	Date	What changed as a result of the consultation
Service users via Healthwatch – R & W	43 respondents in survey and oral feedback via telephone survey	July 2021	Specification changed
Learning disability partnership board – R & W	Discussion and oral feedback	March 2022	As above
Market engagement with providers	Oral and written feedback	February 2022	As above
Operational teams, social workers, finance officers	Oral and written feedback	February 2022	As above
Voluntary sector forum	Oral and written feedback	March 2022	As above
Wandsworth older people's forum	Oral and written feedback	March 2022	As above

3. Analysis of need

Potential impact on this group of residents and actions taken to mitigate impact and advance equality, diversity and inclusion

Protected	Findings	
group		
Age	Wandsworth population	
	Table showing the percentage of people in Wandsworth by age group.	

Age group	% of borough population*	% of service users receiving a direct payment**	% of service users receiving home care**
18-64	88%	59.47%	28.23%
65-74	7%	13.91%	18.55%
75-84	4%	12.28%	26.34%
85+	2%	14.35%	26.88%

*Source: GLA 2020

Analysis

- There are a greater proportion of people receiving direct payments in the older age groups. This reflects the social care needs in the borough.
- The majority of service users are still under 65, and much younger compared with the total numbers of people receiving commissioned home care.
- According to research run by HealthWatch, some service users emphasised the importance of continuity in the arrangements they had with the support service. Disruption to this continuity would impact more on older service users or their suitable person, who may find it more difficult to navigate new arrangements, communication and customer service.
- In the same research, some service users wanted an online platform and a log in to the system for managing accounts and processing paperwork (instead of using e-mails and phone). With a higher prevalence of digital literacy, this would be more likely help younger service users, but could also help family members of service users of any age.

Disability

Wandsworth population

Table showing the number and percentage of people in Wandsworth by disability type.

	% of people
Disability type	aged 18-64
Learning disability	2%
Physical disability (including impaired	
mobility, visual impairment, hearing loss)	12%
Common mental disorder	19%

Source: Projecting Adult Needs and Service Information 2020

Wandsworth service users who receive a direct payment

Table showing the percentage of service users in Wandsworth in each service user group.

^{**}Source: Mosaic, November 2021

SUG	% of service users aged 18-64 receiving a direct payment
ASSD Learning Disability Support	46%
ASSD Mental Health Support	17%
ASSD Physical Support	35%
ASSD Sensory Support	1%
ASSD Social Support	1%

Source: Mosaic, November 2021

Analysis

- All those in receipt of a direct payment will have a limiting long-term condition such as a learning disability or physical disability.
- Local Healthwatch research suggests that service users with learning disabilities and their families would like to use direct payments more flexibly beyond direct care, such as on activities or relationship services.
- According to research run by HealthWatch, some service users emphasised the importance of continuity in the arrangements they had with the support service. Disruption to this continuity would particularly impact service users with a learning disability or their suitable person, who may find it more difficult to navigate new arrangements, communication and customer service.
- The same research suggested that the support service's customer service was a barrier for disabled people.
- Some service users found it difficult to identify trained PAs, something that would particularly impact service users with learning disabilities or complex needs.

Sex Wandsworth population

Table showing the percentage of people in Wandsworth for each gender.

Gender	% of borough population*	% of service users with a direct payment**
Female	52%	62.81%
Male	48%	37.19%

*Source: GLA 2020

**Source: Mosaic, November 2021

Analysis

- Direct payment service users (63%) are more female than the borough population (52%).
- A majority of direct payment service users with a learning disability (54%) and direct payment service users who receive mental health support (57%) are male.

reassignment
Marriage and
civil
partnership

Gender

No data available, refer to section on data gaps.

Wandsworth population

Table showing the percentage of people in Wandsworth by marital status.

Marital status	% of borough population
Divorced or formerly in a same-sex civil	
partnership which is now legally dissolved	6.5%
In a registered same-sex civil partnership	0.6%
Married	32.6%
Separated	2.5%
Single	54.2%
Widowed or surviving partner from a same-sex	
civil partnership	3.7%

Source: ONS Census 2011

Wandsworth service users who receive a direct payment

Table showing the percentage of service users in Wandsworth in each marital status group.

Marital status	% of service users receiving a direct payment	
Single	28%	
Unknown	42%	
Divorced	4%	
Separated	2%	
Married	14%	
Widowed	11%	

Source: Mosaic, November 2021

Analysis

- The data for service users contains a significant proportion of unknowns, therefore it is not clear whether there is less representation of single and married individuals among this cohort compared to the borough population.
- Despite the unknowns, there is a higher rate of individuals who are widowed or surviving a partner among direct payment service users compared to the borough population.
- Research run by HealthWatch suggested that service users who had support from their family rated their experiences with the support service more positively, likely due to the additional help that their family members provided them with both in terms of managing their direct payments and accessing the support service.

On the other hand, service users who were more isolated or lived alone reported to have more difficulties with using the support service and generally asked for more information and support.

Pregnancy and maternity

Race/ethnicit

Y

Wandsworth population

Table showing the percentage of people in Wandsworth in each ethnic group. Service users receiving the DPSS are identified as those with a direct payment and on a managed account.

% of service users receiving

		% of service users receiving
	% of borough	a direct
Ethnic group	population*	payment**
Asian/Asian British	11%	21.04%
Black/black British	11%	32.59%
Mixed/multiple		
ethnic groups	6%	2.37%
Other ethnic groups	2%	6.37%
White/white British	70%	36.00%
Not stated	N/A	1.63%

^{*}Source: GLA 2020

Analysis

- Asian/Asian British, black/black British and other ethnic groups have higher representation among direct payment service users than in the borough population.
- Representation of white/white British ethnic groups among direct payment service users is almost half that of the borough population.
- People from mixed/multiple ethnic groups are not as represented among direct payment service users compared to the borough population.

Religion and belief, including non belief

Wandsworth population

Table showing the percentage of people in Wandsworth for each religion..

		% of service users receiving	
	% of borough	a direct	
Religion	population*	payment**	
Buddhist	0.8%	0%	
Christian	53%	23.7%	
Hindu	2.1%	2.1%	
Jewish	0.5%	0%	
Muslim	8.1%	19.9%	
Sikh	0.3%	0.3%	

^{**}Source: Mosaic, November 2021

Other		0.9%
religion	0.4%	
No religion	27%	3.4%
Not stated /		49.5%
unknown	N/A	

Source: ONS Census 2011

Analysis

- The data for service users contains many unknowns for religion, so it
 is not clear whether there is a lower representation of Christians or
 those with no religion among direct payment service users.
- Muslims are potentially more represented among direct payment service users compared to the borough population.

Sexual orientation

Wandsworth population

Table showing the percentage of people in Wandsworth by sexual orientation.

Sexual orientation	%
Heterosexual or straight	92.3
Gay or lesbian	2.5
Bisexual	0.7
Other	0.3
Don't know or refuse	4.2

Source: ONS Sexual orientation by English and Welsh local authorities, 2016-2018

Wandsworth service users who receive a direct payment

Table showing the percentage of people with a direct payment in Richmond by sexual orientation. Service users receiving the DPSS are identified as those with a direct payment and on a managed account.

Sexual orientation	% of service users receiving a direct payment	
Unknown	80.1%	
Prefer not to say	1.3%	
Straight / Heterosexual	18.3%	
Lesbian or Gay	0.3%	

Source: Mosaic, November 2021

Analysis

- Because of the high number of unknowns, it is not possible to compare direct payment service users with the borough population.
- 0.3% of direct payment service users identify as lesbian or gay. None identify as bisexual.
- 79% of direct payment service users either prefer not to say or their sexual orientation is unknown. This may be because some people may lack capacity to understand or identify with the terms. Some

may also be afraid to declare their sexuality as they are worried about stigma and prejudice.

Across groups i.e older LGBT service users or Black, Asian & Minority Ethnic young men.

Carers

The Government's white paper 'People at the Heart of Care' aims to further emphasise "recognition and support for unpaid carers." The subsequent Health and Care Bill will add a new duty for CQC to review and assess the performance of local authorities in delivering their adult social care functions, as set out under part one of the Care Act 2014. This includes the ability of local authorities to meet the needs of unpaid carers.

In 2020-2021, there were 94 carers in the borough who received direct payment to meet their needs as carers, either weekly or as a one-off payment.

The needs of people who provide care are diverse and varied:

- Rates of depression are higher among those who provide care for people with dementia than among caregivers of people with other chronic illnesses.
- There is also an observed lack of self-identification as an unpaid carer among people from ethnic minorities.
- Source: 'People at the Heart of Care'

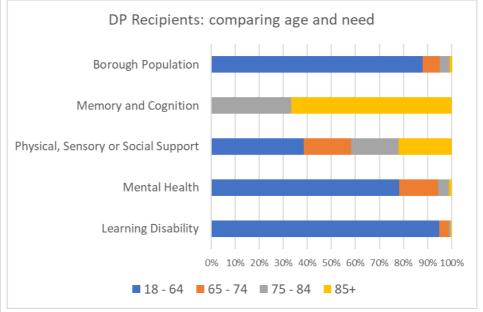
These diverse needs could be met by the flexibility and choice provided by direct payments. Carers would stand to benefit also from the specification which will require the new provider, in partnership with social workers, to identify and advise carers who could benefit from a direct payment.

Projections in the Wandsworth JSNA (2021) show a predicted increase in the number of people in Richmond living with long-term limiting conditions of 54% between 2020 and 2050, which may mean a significant increase in the number of people providing unpaid care. This increase would be above the expected age-related population increase and may result in an increase in the proportion of the population who are unpaid carers

The pandemic has already impacted the national carer numbers (Caring behind closed doors: six months on, Carers UK, 2020). Prior to the pandemic an estimated 9.1million people nationwide were unpaid carers, during the pandemic it is estimated that an additional 4.5 million people have had to take on caring responsibilities. In addition, the research showed that 81% existing carers were providing more hours of care during the pandemic than previously. We have no specific Richmond figures at this time.

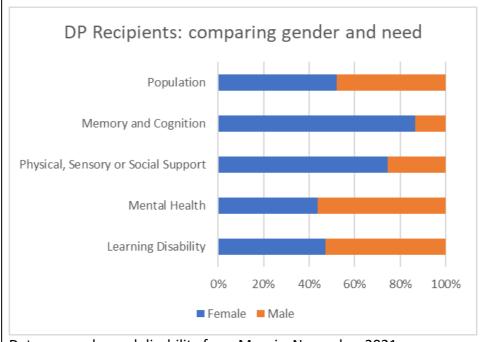
People with more than one protected characteristic

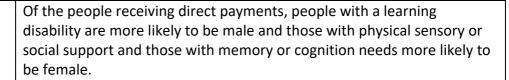
All people accessing the direct payment support service will have a limiting long-term condition or disability so all percentages in the tables above include an aspect of more than one protected characteristic.

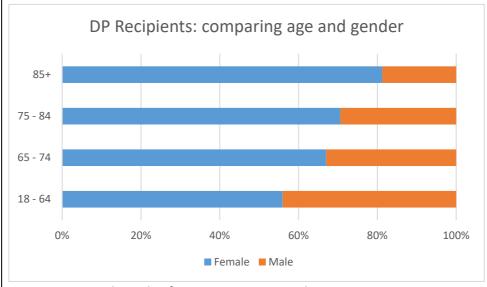


Data on age and disability from Mosaic, November 2021.

People with a learning disability who receive a direct payment are almost exclusively under 65. However, there is an increase in the older age groups for those needing physical, sensory or social support and those with memory and cognition needs.







Data on age and gender from Mosaic, November 2021.

Older direct payment recipients are more likely to be female.

Data gaps

Data gap(s)	How will this be addressed?	
Marriage and Civil Partnership, Maternity	The new service provider will be asked to	
and pregnancy. Religion and belief,	evidence in the tender how they will	
including non-belief Sexual orientation	record, collect and code patient	
There are a large number of "unknowns" or	demographic information accurately,	
unrecorded data in relation to the data	including minimising instances of	
which is collected locally.	'unknowns'.	
Gender reassignment		
There are no reliable or definitive figures	Data collection on protected characterises	
available locally regarding this data	for service users on the council's database	
Carers	is under review, with a view to make	
The ability to report on the number of one-	collection mandatory at appropriate stages.	
off payments to carers is not currently in		
place.		

4. Impact

Protected group	Positive	Negative
Age	The increased focus on flexible	A change in provider of the
	and creative use of funds in the	service could mean disruption to
	specification will help ensure	arrangements that older service

users or a service user's suitable more person centred and tailored support to meet all needs. person may find difficult to adjust The specification will also increase focus on the development of the To mitigate this, we will make PA market and recruitment sure to communicate clearly strategies to "widen the net of about any changes to the PAs" including those with provider, in different forms specialist skills, and those out of appropriate to the variety of borough as required through joint needs among service users. working with the Council and other partners to promote the Another potential negative role of PAs and offer support and impact from changing provider training. could be that the new provider may not initially have the It will also increase a focus on onnecessary localised knowledge line access to information on and connections. This knowledge status of funds. is important for the ability of the DPSS to give comprehensive advice on what local services direct payments can spent on to meet the diversity of needs among service users. We would mitigate this by ensuring the specification and tender evaluation includes a requirement that the provider develops local knowledge and connections. Disability As above. As above. There will also be training for social workers to support expertise on direct payments, particularly on how they can be used. Enhanced and flexible methods of communication and peer support will be offered, including on-line, or social media groups (e.g. Facebook) for people to stay in touch, benefit from mutual support and share solutions. As above. Sex As above.

Gender	As above.	As above.
reassignment		
Marriage and	As above.	As above.
civil partnership		
Pregnancy and	As above.	As above.
maternity		
Race/ethnicity	As above.	As above.
Religion and	As above.	As above.
belief, including		
non belief		
Sexual	As above.	As above.
orientation		

5. Actions to advance equality, diversity and inclusion

All actions form part of the overall project plan and will be monitored and reported on to the project group.

All EINA actions will be reported as part of the standard quarterly EINA reporting from the Commissioning Division carried out by the Programmes and Business Intelligence Team.

Action	Lead Officer	Deadline
Ensure the project plan has time for an extensive mobilisation period.	Dawn Patrick	Completed
Include within tender evaluations an assessment of potential providers capability to support the Council to deliver against its equalities' duties.	Dawn Patrick	December 2022
 Involve service user views by: Meeting with organisations/charities who represent service user views, to get their input on the service specification. Identifying and including service users in the evaluation of tenders. 	Dawn Patrick	March 2022 December 2022
Include within the service specification requirements to support the Council to deliver against its equalities' duties	Dawn Patrick	June 2022
Include as part of the contracts monitoring and performance framework a requirement to routinely report on the protected characteristics of its services users. Include within contract monitoring meeting a standard agenda item on equalities.	Dawn Patrick	September 2023
Develop and deliver communications for service users to support adjustment to provider transition. To include:	Dawn Patrick	June 2023

•	Clear communication about any changes to the provider, in different forms appropriate to the variety	
	of needs among service users.	
•	Any service users who need additional support to	
	understand the implications of the changes will be	
	identified and appropriately supported.	

6. Further Consultation (optional section – complete as appropriate)

Consultation planned	Date of consultation