## **EQUALITY IMPACT ASSESSMENT TEMPLATE - TRAFFORD COUNCIL**

	A. Summary Details			
1	Title of EIA:	Supporting People		
2	Person responsible for the assessment:	Ian Peet		
3	Contact details:	01619125849 lan.peet@trafford.gov.uk		
4	Section & Directorate:	Adult Social Care Communities and Wellbeing		
5	Name and roles of other officers involved in the EIA, if applicable:	Linda Harper – Director of Commissioning Adult Social Care Andrea Glaspell – Interim Programme Manager Personalisation Adult Social Care Richard Roe – Housing Strategy Manager Richard Morris- Access to Housing Manager John Pearce – Director of Commissioning CYPS Elaina Quesada – Senior Commissioning Officer CYPS Debbie Nash – Strategic Manager – Public Health, Finance and Commissioning Satinderjit Bering – Strategic Commissioning Lead Primary Care Trust Chris Edwards – Assistant Chief Executive Greater Manchester Probation Trust Gaynor Burton – Equality and Diversity Manager		

	B. Policy or Function	
1	Is this EIA for a policy or function?	Policy o Function X
2	Is this EIA for a new or existing policy or function?	New o Existing X Change to an existing policy or function o

3	What is the main purpose of the policy/function?	Supporting People currently funds a range of housing related support services for disabled people, older people, young adults and other vulnerable adults to help support them in their homes, and to connect with their local community.
4	Is the policy/function associated with any other policies of the Authority?	The function is associated with policies regarding adult social care, CYPS, Strategic Housing and Safer Trafford.
5	Do any written procedures exist to enable delivery of this policy/function?	Contracts and service specifications are in place with all service providers. They have been let through standard tendering/ procurement practices. Individual providers have a range of policies linked to their provision. There is an agreed quality monitoring tool in place.
6	Are there elements of common practice not clearly defined within the written procedures? If yes, please state.	No
7	Who are the main stakeholders of the policy? How are they expected to benefit?	Service providers including 3 <sup>rd</sup> sector providers and Registered Social Landlords, vulnerable/ older/ disabled people, health and probation services, housing, Children and Young People's services.
8	How will the policy/function (or change/improvement), be implemented?	SP commissioning body in place which is multi-disciplinary and multi-agency. It has been strengthened with new members to undertake this project. This body will oversee implementation. A comprehensive consultation programme will be in place
9	What factors could contribute or detract from achieving these outcomes for service users?	Lack of agreement by providers. Consultation fails to identify best way forward. Will be helped by good partnership working. Also, some providers are keen to transform and diversify services.
10	Is the responsibility for the proposed	Housing, Safer Trafford, Health commissioning, Probation, CYPS

policy or function shared with another department or authority or organisation? If so, please state?

## C. Data Collection

What monitoring data do you have on the number of people (from different equality groups) who are using or are potentially impacted upon by your policy/ function?

The information below identifies the total number of people who could be using the service at any one time ie the capacity of the services funded.

Service User information	Number of Service Users
Older People	
Sheltered housing	1400
Cat 1 housing	2000
Extra care	80
LD services	-
Calderstones	46
IAS	11
paragon	6
ubu	15
network (in house)	30
Independent Options	2
Independent living service (In house)	11
Phy Disabilities	
Independent living service (in house)	27
Mental Health	
Mental Health accommodation and	
floating support	42
Kenwood Road project	3
The Firs accommodation project	11

		Social Inclusion		
		Womens refuge, floating support and advice and information	16	
		Offender housing project	32	
		GM Offender Project	0	
		Offender housing advocacy	50	
		Meadow lodge/Pomona Gardens		
		including drug alcohol support	40	
		Homeless families temp accom		
		support	40	
		Young people		
		Teenage parent scheme and floating		
		support	22	
		Greenbank Leighton rd	24	
		Trafford Aftercare Elstree Court	5	
		Trafford Aftercare Supported Lodgings	4	
		The table below identifies the BME bre	eakdown of new service users	entering
		services		
		BME breakdown of new servic		
			32%	
			.2%	
			0.6%	
			.4%	
			.4%	
		Mixed 3	.3%	
	Diagram and the second training at the second			
2	Please specify monitoring information			
	you have available and attach relevant			
	information*			

3	If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data?	A frame work for monitoring housing related services nationally is in development. The frame work will cover Client characteristics and demographics, including: Age, Gender, Race, Disability, Religion, Sexual orientation, Transgender, Economic status

<sup>\*</sup>Your monitoring information should be compared to the current available census data to see whether a proportionate number of people are taking up your service

	D. Consultation & Involvement				
1	Are you using information from any previous consultations and/or local/national consultations, research or practical guidance that will assist you in completing this EIA?	The Future of Adult Social Care in Trafford - An Over view Supporting People Consultation Plan Proposed Changes to Supporting People funded services			
		Supporting People Market Review			
2	Please list any consultations planned, methods used and groups you plan to target. (If applicable)	Individual consultation meetings with providers Support to provider led service user consultation Service area provider consultation events Service area provider meetings Support from broker organisations Supporting People Commissioning Body			
3	**What barriers, if any, exist to effective consultation with these groups and how will you overcome them?	Consultation organised in groups and then on 1:1 basis. Service providers will be supported to involve service users in the consultation.			

\*\*It is important to consider all available information that could help determine whether the policy/ function could have any potential adverse impact. Please attach examples of available research and consultation reports

## E: The Impact – Identify the potential impact of the policy/function on different equality target groups

The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any of the target groups you will also need to assess whether that negative potential impact is high, medium or low

	Positiv e	Negative (please specify if High, Medium or Low)	Neutral	Reason
Gender – both men and women, and transgender;		Low overall but Medium in relation to Sheltered housing and Cat 1 accommodation		Gender groups cross a number of SP service areas and as such changes for one client group will impact on this group. Several services are particularly used by women. These include services for victims of domestic abuse, teenage parents, sheltered housing and cat 1 housing.  Planned changes to these services will focus on ensuring the continuation of appropriate support linked to community based developments and the use of new ways of working.  Consultation meetings to date have indicated that core services will continue to be provided to Sheltered and Cat 1 housing service users. Some providers have indicated that tenants

		may be charged for services previously subsidised by Supporting people payments.  Services to teenage parents will continue to be provided with support prioritised to meet greatest need again incorporating closer working with mainstream CYPS services allowing improvements in service provision to this group.
		The services supporting victims of domestic abuse will continue to be focussed on the refuge service. Community based support and advice and information will continue to be provided via a range of community based support such as the "Compass" service, Independent Domestic Violence Advocates, Victim Support services and MARAC. A council wide review of advice and information services is being carried out which will ensure improvement in the availability and quality of advice services in Trafford
Pregnant women & women on maternity leave	Low	SP funds specific services particularly aimed at teenage parents and victims of domestic abuse, this group may include pregnant women. Planned changes to these services will focus on safeguarding priority services.  Services to teenage parents will continue to be provided with support prioritised to meet greatest need again incorporating closer

			working with mainstream CYPS services The services supporting victims of domestic abuse will continue to be focussed on the refuge service. Community based support and advice and information will continue to be provided via a range of community based support such as the "Compass" service, Independent Domestic Violence Advocates, Victim Support services and MARAC. A council wide review of advice and information services is being carried out which will ensure improvement in the availability and quality of advice services in Trafford
Gender Reassignment		Neutral	The needs of these groups cross SP client groups. SP does not fund specific services for this group and no specific changes are planned which would impact as a result of gender reassignment.
Marriage & Civil Partnership		Neutral	The needs of these groups cross SP client groups. SP does not fund specific services for this group and no specific changes are planned which would impact as a result of marriage or civil partnership.
Race- include race, nationality & ethnicity (NB: the experiences may be different for different groups)	Low		SP does not fund specific services for BME groups, the needs of this group cross SP client groups, and improvements or changes introduced for one client group will also provide support to other client groups. Identified unmet

		needs will be addressed by increases in community based support, the utilisation of new technology and new ways of working linked to personalisation, and locality based services.  Access to SP services will be managed in a more focussed way to ensure that these services target those with the highest levels of need. BME communities are known to be over represented in Mental health and the criminal justice service. Consultation has indicated that proposals will have a low impact on these types of services and will allow for the focus of services to meet particular priorities such as Integrated offender management services. The development of the community based Compass support service will allow additional support to be provided. This will be prioritised based on a matrix of support needs and will allow a range of services to be developed to enhance the network of support available in local communities.
<b>Disability</b> – physical, sensory & mental impairments	Low	Disabled people are particularly represented in Sheltered and Cat 1 housing linked to age and disability. As identified below proposed changes will have low to medium impact related to some providers indicating that they may charge for services previously subsidised by Supporting people payments. (See below for further details)

	Supporting people payments.  Services for younger people include teenage parent service and services for young people leaving care or in housing need. The services will be much more closely aligned to CYPS commissioning priorities this will enable available funding to be better targeted at the correct services meeting needs identified through commissioning led reviews.
Sexual Orientation – Heterosexual, Lesbian, Gay Men, Bisexual people	Neutral  The needs of these groups cross SP client groups. So funds no specific services for this group and no specific changes are planned which would impact as a result of sexual orientation.
Religious/Faith groups (specify)	Neutral  The needs of these groups cross SP client groups. SP does not fund specific services for this group and no specific changes are planned which would impact as a result of religion or faith.

As a result of completing the above what is the potential negative impact of your policy?

High Medium x Low

F. Could you minimise or remove any negative potential impact? If yes, explain how.				
Race:	We anticipate a low negative impact on BME groups from the remodelling of SP services. Although monitoring information shows that BME groups make up 16% of new			

	service users to SP services we do not anticipate that changes will have any specific negative impact on this percentage. In order to minimise any impact the Commissioning Body will continue to work with providers and other stakeholders to closely monitor services and understand any unforeseen negative impact and act to mitigate these.
Gender, including pregnancy & maternity, gender reassignment, marriage & civil partnership	We anticipate overall a low /medium negative impact on these groups resulting from the remodelling of SP services. SP funds services that are used by a greater proportion of women, linked to child care responsibilities, domestic abuse and the fact that they tend to live longer. In order to minimise further impact the Commissioning Body will continue to work with providers and other stakeholders to closely monitor services and understand any unforeseen negative impact and act to mitigate these.
Disability:	We anticipate a low negative impact on these groups resulting from the remodelling of SP services. SP funds make a small contribution to services jointly commissioned with adult social care that are specific to the needs of these groups. In order to minimise any impact the Commissioning Body will continue to work with providers and other stakeholders to closely monitor services and understand any unforeseen negative impact and act to mitigate these. In addition, where we have identified a risk of increased demand on adult social care

		budgets as a result of the proposals, we have factored this in to ensure people are not at risk of reduced service.			
Age	e:	We anticipate a low /medium negative impact on these groups resulting from the remodelling of SP services. SP funds services that specifically meet the needs of these groups. In order to minimise any impact the Commissioning Body will continue to work with providers and other stakeholders to closely monitor services and understand any unforeseen negative impact and act to mitigate these			
Sex	xual Orientation:	We anticipate a neutral impact on these groups			
Religious/Faith groups:		We anticipate a neutral impact on these groups			
Als	o consider the following:				
1	If there is an adverse impact, can it be justified on the grounds of promoting equality of opportunity for a particular equality group or for another legitimate reason?	We will minimise any negative impact on some groups by embracing the vision for a reformed care and support system laid out in the white paper "Caring for our future: reforming care and support". The new system will:			
		<ul> <li>focus on people's wellbeing and support them to stay independent for as long as possible</li> <li>introduce greater consistency in access to care and support</li> <li>provide better information to help people make choices about their care and give people more control over their</li> </ul>			

		<ul> <li>care</li> <li>improve support for carers</li> <li>improve the quality of care and support</li> <li>improve integration of different services</li> </ul> Available funding will be used to focus support to those people in the highest need often related to age and disability.
2	Could the policy have an adverse impact on relations between different groups?	No
3	If there is no evidence that the policy <i>promotes</i> equal opportunity, could it be adapted so that it does? If yes, how?	

## G. EIA Action Plan

Recommendation	Key activity	When	Officer Responsible	Links to other Plans eg; Sustainable Community Strategy, Corporate Plan, Business Plan,	Progress milestones	Progress
Supporting People Commissioning Body to continue to	To oversee transformation of services and	Quarterly	Ian Peet		Quarterly minutes and papers	

meet	monitor impact				
Service providers to meet regularly	Provider forums held feedback from providers obtained	Quarterly	Ian Peet	Quarterly minutes and papers	
Planned remodelling of services to focus on meeting the needs of the most vulnerable and to provide community and locality based solutions.	Commissioning activity and specification development.		Ian Peet	New services commissioned	
As appropriate Supporting People funding to be transferred to other budgets headings as required to remove commissioning duplication	Funding transferred to appropriate budgets		Ian Peet Jeremy Kay	Budget monitoring	

Signed Lead Officer Date Signed Service Head Date