

Equality & Human Rights Impact Assessment (EHRIA)

This Equality and Human Rights Impact Assessment (EHRIA) will enable you to assess the **new, proposed or significantly changed** policy/ practice/ procedure/ function/ service** for equality and human rights implications.

Undertaking this assessment will help you to identify whether or not this policy/ practice/ procedure/ function/ service** may have an adverse impact on a particular community or group of people. It will ultimately ensure that as an Authority we do not discriminate and we are able to promote equality, diversity and human rights.

Before completing this form please refer to the EHRIA [guidance](#), for further information about undertaking and completing the assessment. For further advice and guidance, please contact your [Departmental Equalities Group](#) or equality@leics.gov.uk

***Please note: The term 'policy' will be used throughout this assessment as shorthand for policy, practice, procedure, function or service.*

Key Details	
Name of policy being assessed:	Carer Support Services
Department and section:	Strategic Planning & Commissioning
Name of lead officer/ job title and others completing this assessment:	Amanda Price Jane Robins
Contact telephone numbers:	0116 3057364 / 0116 3057096
Name of officer/s responsible for implementing this policy:	Carer Project Officer Jane Robins Strategic Planning & Commissioning Team
Date EHRIA assessment started:	17 th July 2014
Date EHRIA assessment completed:	5 th August 2014

Section 1: Defining the policy

Section 1: Defining the policy

You should begin this assessment by defining and outlining the scope of this policy. You should consider the impact or likely impact of the policy in relation to all areas of equality, diversity and human rights, as outlined in Leicestershire County Council's Equality Strategy.

1	<p>What is new or changed in this policy? <i>What has changed and why?</i></p> <p><i>Background</i></p> <p>The Strategic Planning and Commissioning Team has led on a review of the Adults and Communities Department's carer support services, with assistance from the Department's Market Development and Compliance teams (henceforth known as 'the review team'). The review forms part of the wider review of a new approach to prevention services commissioned by the Department (as detailed in a report presented to Cabinet in June 2013). A total of eleven commissioned carer support services were included in the review, in addition to the Carer Support Fund (a one off annual financial payment made to some carers). All of the contracts for these services were extended up to a maximum of 30th September 2015 in order to allow sufficient time for the carer support review and to ensure an overarching 'prevention offer'. Delivery of this carer support model and the over-arching prevention model is also set against savings targets set in the Medium Term Financial Strategy (MTFS) 2014-2018. It is important to note that current carer support service provision under these contracts will cease in 2015 and be replaced by a new carer support offer (as described below).</p> <p>Details of the proposed carer support offer were submitted to Cabinet in April 2014 and permission granted by Cabinet to consult on future commissioning options. Accordingly, a formal public consultation exercise on this carer support offer was carried out 14th April – 13th July 2014. The findings of the consultation have been used to further inform the Department's proposed carer support offer. Consideration also needed to be given to ensure that the Department complies with new statutory duties for carers in the Care Act 2014. This EHRIA will deal with the impact on carers and will provide detail on the proposed changes to carer support service delivery. It will also explore the impacts of these changes in relation to the Human Rights Act and Equalities Act. The EHRIA will be published in conjunction with a further Cabinet report in September 2014 which will provide members with the findings of the carer review and public consultation and will make recommendations about the future of the carer support offer.</p> <p>A summary of the overall carer support offer will provide some context for the proposed changes to current service delivery for the Adults and Communities carer support as a whole and the changes to service delivery for carers. The development of a new carer support offer reflects a longer-term strategic vision, with an emphasis upon aligning services to need and a move towards a robust outcomes framework underlying all commissioning activity. It also</p>
---	--

reflects savings required against overall prevention services as set out in the MTFS, 2014-2018. Full details of the carer support offer can be found in the April Cabinet report –

<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=3989&Ver=4>

Proposed Changes

This EHRIA is concerned with commissioning proposals for a new carer support pathway in Leicestershire. The current carer support service provision that is currently commissioned is as follows:

- Home Based Carer Respite Services (provided by Age UK, Rethink, The Alzheimer's Society and East Midlands Crossroads)
- Emergency Carer Respite Service (provided by Housing & Care 21)
- Specialist Advice, Information and Support Services – including carers of Adults with Learning Disabilities Support Services (provided by Voluntary Action South Leicestershire and Mencap)
- GP Carer Health & Wellbeing Service (provided by the Carers Centre and Leicestershire Communities Projects Trust)
- Carers Education Training Programme (provided by Voluntary Action south Leicestershire)
- The Carer Support Fund (CSF currently administered by LCC and several Voluntary Partners)

As stated above, the contracts for all of these services have been extended up to a maximum of 30th September 2015 however, it is anticipated that these services will be ending by 31st March 2015 (normal notice periods apply).

Currently, adult carers who are providing or intend to provide a substantial amount of care on a regular basis and, the impact this is having on their health & wellbeing is significant, have a right to a carers' assessment. This can be done as part of a 'Community Care Assessment' of the person they are caring for or as a separate 'Carer's assessment'. The assessment will help to determine the impact caring has on the carers life and indicates what support solutions may be desirable to lessen the negative impact caring may involve. If a carer is not assessed as being eligible for a carers' assessment then they will be given information and signposted to local carer support services. There is a clear inequality in the current support for carers across both the different client groups and geographically. The range of carer support available focussed on:

- Advice and Information
- Respite provision (currently free to carers)
- Financial Support (the Carer Support Fund – CSF)
- Advocacy
- Engaging with and accessing specialist support

During the carer review it was found that these current support services raised several challenges including:

- A diverse range of services being reviewed that are tailored for different client groups, in order to meet a range of outcomes (for example, at present, the Department only commissions home based respite services for carers of people with dementia or mental ill health)

	<ul style="list-style-type: none"> • A lack of clarity in outcomes achieved • Inequity in current service provision • A lack of equity due to geographical limitations of some services • Uncoordinated referral routes into services • Financially unsustainable levels of service provision for certain services, whilst other services are significantly underutilised. <p>Consequently, new commissioning options for carer support services have been considered and these options have been informed by the formal public consultation exercise.</p> <p>At the heart of the Carer Support commissioning proposals will be four clear elements of Carer Support:</p> <ul style="list-style-type: none"> • Universal and Preventative Support for Carers • Targeted, low level Support for Carers • Carer Support Fund • Carer Personal Budget <p>The following services will come to an end on 31st March 2015:</p> <ul style="list-style-type: none"> • The Carer Emergency Respite Service • The Carer mental Health Respite Service • The Carer Dementia Respite Service • The Carers of Adults with Learning Disability Service • The Carer Support for early onset Dementia Service <p>Respite will still be available through a Carers' Personal Budget following an assessment of carers' needs to determine eligibility and subsequent support planning. It should be noted that all Carer Personal Budgets will be subject to a financial assessment. Currently, all carer support services are delivered free of charge.</p> <p>The cost of the current contracts for carer support services, based on annual contract values for 2012/13 is £1,199,000. The cost of the proposed commissioning options will be £1,484,000 (including £450,000 set aside locally in the Better Care Fund 2015/16). This represents a saving of £165,000 in 2015/16 to the authority which will contribute to the reduction target for prevention services as detailed in the Medium Term Financial Strategy (MTFS).</p>
2	<p>Does this relate to any other policy within your department, the Council or with other partner organisations? <i>If yes, please reference the relevant policy or EHRIA. If unknown, further investigation may be required.</i></p> <p>The development of the Adults and Communities Carer Support offer forms part of a wider unified prevention offer for Leicestershire that has been developed as part of the Better Care Fund. The Better Care Fund (formerly the Integration Transformation Fund) is a single pooled budget to support health and social care services to work more closely together in local areas. It forms an important element of strategic planning in both health and social</p>

care. There is £135 million being set aside nationally to support the implementation of the Care Act. In Leicestershire for 2015/16 part of the Better Care Fund will be invested in the Carer Support Fund, Carer Respite and the countywide extension of the GP Health & Wellbeing Service, totalling £450,000. A further £275,000 has been set aside to meet the expected increase in demand for carers' assessments due to the Care Act. Commissioning options arising out of the carer support review have been developed to be aligned with and form part of the unified departmental prevention offer.

In 2012 Leicestershire County Council launched the *Supporting the Health and Wellbeing of Carers in Leicester, Leicestershire and Rutland Strategy and Delivery Action Plan 2012 -2015*. Each local authority has their own delivery plan through which to implement the strategy and the Leicestershire action plan focuses on:

- Identification & Recognition of Carers
- Realising and Releasing Carers Potential
- A life outside of Caring
- Supporting Carers to stay Healthy
- Early Intervention and Prevention, particularly high quality Information and Advice (especially at the beginning of the caring role)
- Ensuring Fair Access to marginalised groups

The strategic review of the carer support services formed part of the Delivery Action Plan as set out in the joint Carer's Strategy.

Throughout the review and public consultation process it has been recognised that the proposed changes to carer support services has the potential to impact on a range of services commissioned or offered by the department.

These impacts could be varied, including:

- If successful, the carer support offer could lead to a reduction in demand and future pressure on budgets and services such as residential and domiciliary care and carer's services.
- It has been identified that support services for carers need to be aligned with the care pathway as the carers currently accessing the services may be eligible for adult social care support from April 2015, with the introduction of the Care Act 2014.

The development of the proposed new carer support offer is also accepted to have implications for partners. Indeed, the contribution of partner agencies and organisations, either directly or indirectly through their own commissioning activity is considered essential to the success of the

	<p>Departmental and wider unified carer support offer. Discussions with partner organisations have therefore been important during the review process and public consultation and have enabled, as far as possible and practicable, a partnership approach to the development of commissioning options for the Departmental carer support offer.</p> <p>It should also be noted that these proposed changes may have financial implication for some current providers of carer support services due to the ending of current contracts and the re-commissioning of current services should other providers were successful in the tendering process.</p>										
3	<p>Who are the people/ groups (target groups) affected and what is the intended change or outcome for them?</p> <p>The carer support services review and commissioning options for the Departmental carer support offer have the potential to affect anybody living in Leicestershire aged 18 years or over (i.e. of adult age).</p> <p>As described above, the purpose of the review was to develop a Departmental carer support offer that is equitable to all carers, with an emphasis upon aligning services both to need and with other local services and for further joint investment with health.</p> <p>It should be noted that the proposed commissioning options for the carer support services review, have been developed using information derived from the carer support services review, public consultation and discussions with stakeholder/partner organisations. Full details of how the commissioning options have been developed are set out in a report which will go to Cabinet in September 2014.</p>										
4	<p>Will this policy meet the Equality Act 2010 requirements to have due regard to the need to meet any of the following aspects? (Please tick and explain how)</p> <table border="1"> <thead> <tr> <th></th><th>Yes</th><th>No</th><th>How?</th></tr> </thead> <tbody> <tr> <td>Eliminate unlawful discrimination, harassment and victimisation</td><td>X</td><td></td><td>The review process (including the strategic review of existing service provision, formal public consultation and discussions with stakeholders and partner organisations) has enabled a good overview of carer support services – in terms of determinants, services that support the continuation of caring and to establish what carer support service provision is most likely to benefit the people of Leicestershire in a way that is cost-effective to the department. It has also enabled identification of those groups of carers who are likely to benefit from the proposed commissioning intentions. Conversely, it has also allowed consideration of any groups or individual carers who might be adversely affected by the proposals and to establish what mitigating actions are required to enable them to access other carer support and</td></tr> </tbody> </table>				Yes	No	How?	Eliminate unlawful discrimination, harassment and victimisation	X		The review process (including the strategic review of existing service provision, formal public consultation and discussions with stakeholders and partner organisations) has enabled a good overview of carer support services – in terms of determinants, services that support the continuation of caring and to establish what carer support service provision is most likely to benefit the people of Leicestershire in a way that is cost-effective to the department. It has also enabled identification of those groups of carers who are likely to benefit from the proposed commissioning intentions. Conversely, it has also allowed consideration of any groups or individual carers who might be adversely affected by the proposals and to establish what mitigating actions are required to enable them to access other carer support and
	Yes	No	How?								
Eliminate unlawful discrimination, harassment and victimisation	X		The review process (including the strategic review of existing service provision, formal public consultation and discussions with stakeholders and partner organisations) has enabled a good overview of carer support services – in terms of determinants, services that support the continuation of caring and to establish what carer support service provision is most likely to benefit the people of Leicestershire in a way that is cost-effective to the department. It has also enabled identification of those groups of carers who are likely to benefit from the proposed commissioning intentions. Conversely, it has also allowed consideration of any groups or individual carers who might be adversely affected by the proposals and to establish what mitigating actions are required to enable them to access other carer support and								

				services.
	Advance equality of opportunity between different groups	X		As above.
	Foster good relations between different groups	X		As above – the review process has also sought to establish which support and priorities carers require to enable them to continue in their caring role and for the identification of groups of carers who have difficulty accessing the existing services alongside other community-based/universal services. This has the potential to encourage community cohesion and develop relations between different groups of carers.

Section 2: Equality and Human Rights Impact Assessment (EHRIA) Screening

Section 2: Equality and Human Rights Impact Assessment Screening

The purpose of this section of the assessment is to help you decide if a full EHRIA is required.

If you have already identified that a full EHRIA is needed for this policy/ practice/ procedure/ function/ service, either via service planning processes or other means, then please go straight to [Section 3](#) on Page 7 of this document.

Section 2

A: Research and Consultation

5.	Have the target groups been consulted about the following?	Yes	No*
	a) their current needs and aspirations and what is important to them;	X	
	b) any potential impact of this change on them (positive and negative, intended and unintended);	X	
	c) potential barriers they may face	X	
6.	If the target groups have not been consulted directly, have representatives been consulted or research explored (e.g. Equality Mapping)?	A formal public consultation exercise was conducted (April to July 2014). The consultation documents (including information and questionnaire) were accessible to the target groups (including current customers), the general public, providers and stakeholders. Specific events were also held with carers, customers, providers and stakeholders as part of the review process and the consultation period. In addition, research into carer support services and the role of these services has been undertaken	

		throughout the review process to inform decision making and commissioning proposals.	
7.	Have other stakeholder groups/ secondary groups (e.g. carers of service users) been explored in terms of potential unintended impacts?	X	
8.	*If you answered 'no' to the question above, please use the space below to outline what consultation you are planning to undertake, or why you do not consider it to be necessary.		

Section 2

B: Monitoring Impact

8.	Are there systems set up to:	Yes	No
	a) monitor impact (positive and negative, intended and unintended) for different groups; b) enable open feedback and suggestions from different communities c)	Standard contact monitoring procedures (including annual and quarterly monitoring) are in place and will exist for any new service provision. It is (and will continue to be) a contractual obligation for services to receive complaints and commendations. In addition, the Department will seek to obtain feedback from existing and new carers as part of the ongoing monitoring of the impact of these proposals (see improvement plan, below).	

Note: If no to Question 8, you will need to ensure that monitoring systems are established to check for impact on the protected characteristics.

Section 2

C: Potential Impact

9.	Use the table below to specify if any individuals or community groups who identify with any of the ' protected characteristics ' may <u>potentially</u> be affected by this policy and describe any positive and negative impacts, including any barriers.			
		Yes	No	Comments
	Age		X	The proposed re-modelled carer support services will not impact on carers accessing services by age as there will be no upper age limit restricting access to these services. All carers within Leicestershire aged 18+ will be able to access both universal and targeted carer support services regardless of age. All eligible

				<p>carers aged 18+ will be able to access either the Carer Support Fund or a Carers Personal Budget. Any carer needing to access respite from April 2015 will do so using their own personal budget and there are no upper age limits for adult carers accessing personal budgets. This will ensure equitable access to carer support services for all carers.</p> <p>All current Carer Support Services are accessible to all age groups; as they are commissioned by the Adults and Communities department this means all adults aged 18 and above. The only stipulation for the carer accessing services is that they are aged 18 or over.</p> <p>However the existing Carer Dementia Respite service currently provided by Age UK is only available to people caring for those with dementia over 65 years and one carer respite service provided by The Alzheimer's Society is available for those caring for people with dementia who are under the age of 65.</p> <p>The most recently available monitoring data (from Quarter 1 2014/15) for all carer services show a range of ages of carers accessing services (from 18 to 85 and over). The Care Act 2014 outlines a statutory duty to assess Young Carers as they approach age 18 in order to ensure the support they receive continues seamlessly into adulthood. Work is ongoing with CYPS to ensure that robust arrangements and adequate service provision will be in place for this cohort of carers.</p> <p>Of interest to the proposed re-modelling of carer support services is the current data for the age of the cared for person shows significant increases in the age of the person being cared for over 75+.</p>
	Disability		X	<p>All carers including those with a disability, within Leicestershire will be able to access both universal and targeted carer support services in the proposed carer support commissioning model. All eligible carers including those with disabilities will be able to access either the Carer Support Fund or a Carers Personal Budget in order to receive identified support. This will ensure equitable access to carer support services for all carers regardless of disability and seek to improve carer outcomes. The current carer support services are accessible to all carers, regardless of disability. The existing services do not</p>

				<p>therefore discriminate against adults by disability, nor do the contracts include specific clauses to protect this protected characteristic. The most recently available client records for the services (from Quarter 3, 2013/14) show carers accessing services with a range of primary and secondary needs, some of which may include disability (though only broadly expressed), including: 'physical or sensory disability' and 'mental health problems'. All national and local research shows that carers are more prone to ill health due to the nature of their caring role. It is therefore possible that some carers accessing carer support services may have a disability themselves. However, the proposed re-modelling of carer support services will not impact on carers accessing the carer support services nor affect access to these services due to any disability.</p>
	Gender Reassignment		X	<p>During the carer support service review and subsequent service development process, attempts were made to determine whether there are any issues with accessing carer support services in respect of gender reassignment. The most recently available client records for the services (from Quarter 3, 2013/14) does not provide any evidence of gender reassignment amongst carers accessing current carer support services. Current contract monitoring data (collected as client records) for the services does not include detail about gender reassignment. However, it is accepted that there is the potential for some people accessing the carer support services to have been through gender reassignment and that a carer's decision to access the support services might be affected by their sexual orientation (such as social exclusion). However, the proposed re-modelling of carer support services will not impact on any groups of carers accessing the carer support services nor affect access to these services due to gender reassignment. All groups of carers within Leicestershire will be able to access both universal and targeted carer support services. All eligible carers including carers within this group will be able to access either the Carer Support Fund or a Carers Personal Budget in order to receive their identified support. This will ensure equitable access to carer support services for all carers. This is of interest to the review and service</p>

				development process and attempts will be made to determine whether there are any issues with accessing preventative services in respect of gender reassignment. If such issues are identified then service modelling will aim to resolve these issues and ensure continued and (if required) more equitable access to these services. It should be noted that whilst the review and service development process will consider this group there is no intention to remove access to services from this group, rather it seeks to improve these services and outcomes for customers.
	Marriage and Civil Partnership		X	<p>All groups of carers within Leicestershire will be able to access both universal and targeted carer support services. All eligible carers including carers within this group will be able to access either the Carer Support Fund or a Carers Personal Budget in order to receive their identified support. This will ensure equitable access to carer support services for all carers and seek to improve carer outcomes. Current contract monitoring data (collected as client records) for the carer support services does not include detail about whether carers are married or in a civil partnership. However, it is accepted that the decision by some current carers to access the services may be might be affected by whether they are married or in a civil partnership (such as social exclusion or a feeling of being stigmatised).</p> <p>However, the proposed re-modelling of carer support services will not impact on any groups of carers accessing the carer support services nor affect access to these services due to being marriage or in a civil partnership.</p>

	Pregnancy and Maternity		X	<p>The proposed re-modelled carer support services will not impact on carers accessing services due to pregnancy and maternity. All groups of carers within Leicestershire will be able to access both universal and targeted carer support services. All eligible carers including carers within this group will be able to access either the Carer Support Fund or a Carers Personal Budget in order to receive their identified support. This will ensure equitable access to carer support services for all carers and seek to improve carer outcomes. Current contract monitoring data (collected as client records) for the services does not include detail about pregnancy and maternity. However, it is accepted that some carers accessing the carer support services may be pregnant or have recently had a baby and that a person's decision to access the service might be affected by whether they are pregnant or have recently had a baby (such as social exclusion or a feeling of being stigmatised). However, the proposed re-modelling of carer support services will not impact on any groups of carers accessing the carer support services nor affect access to these services due to being pregnant or having recently had a baby.</p>
	Race		X	<p>It is widely acknowledged that access to carer support services may be affected due to cultural reasons. All current carer support services are open to all carers, regardless of their race. The existing carer support services do not therefore discriminate against carers by race, nor do the contracts include specific clauses to protect this protected characteristic. This is confirmed by most recently available client records for the services (from Quarter 1, 2014/15) which shows a range of carers using carer support services from a range of racial backgrounds, including Asian/Asian British: Indian, Mixed: White & Black Caribbean to White: British and White: Irish. However, the proposed re-modelling of carer support services will not impact on any groups of carers accessing the carer support services nor affect access to these services due to their race. All groups of carers within Leicestershire will be able to access both universal and targeted carer support services. All eligible carers including carers within this group will</p>

				be able to access either the Carer Support Fund or a Carers Personal Budget in order to receive their identified support. This will ensure equitable access to carer support services for all carers and seek to improve carer outcomes.
	Religion or Belief		X	<p>Current contract monitoring data (collected as client records) for the services do not include detail about the religion or beliefs of service users. However, it is accepted that a person's decision to access the services might be affected by religion or beliefs (such as social exclusion or stigma within certain religious or cultural communities towards substance misusers).</p> <p>This is of interest to the review and service development process and attempts will be made to determine whether there are any issues with accessing carer support services in respect of religion or beliefs (i.e. some groups may be or feel less able to access services than others because of their religion or beliefs). If such issues are identified then service modelling will aim to resolve these issues and ensure continued and (if required) more equitable access to these services. It should be noted that whilst the review and service development process will consider this group there is no intention to remove access to services from this group, rather the proposed carer support service model and new service specifications for providers will seek to improve these services and outcomes for all groups of carers.</p>
	Sex	X		<p>The proposed remodelled carer support services will ensure that all carers within Leicestershire will be able to access both universal and targeted carer support services. All eligible carers will be able to access either the Carer Support Fund or a Carers Personal Budget in order to receive identified support. This will ensure equitable access to carer support services for all carers regardless of their sex and seek to improve carer outcomes.</p> <p>Currently all the carer support services are accessible to both sexes and none of the contracts include specific clauses to protect this protected characteristic. It is however, recognised that access to carer services may be affected by sex – for instance, evidence suggests women are more likely to identify themselves as a carer and consequently access carer services than</p>

				men. However, the proposed re-modelling of carer support services will not impact on carers accessing the carer support services nor affect access to these services due to their gender.
	Sexual Orientation		X	<p>The proposed re-modelling of carer support services will not impact on any groups of carers accessing the carer support services nor affect access to these services due to the carers' sexual orientation.</p> <p>All groups of carers within Leicestershire will be able to access both universal and targeted carer support services. All eligible carers including carers within this group will be able to access either the Carer Support Fund or a Carers Personal Budget in order to receive their identified support. This will ensure equitable access to carer support services for all carers.</p> <p>During the carer support service review, public consultation and subsequent service development process, attempts were made to determine whether there are any issues with accessing carer support services in respect of sexual orientation. The most recently available client records for the services (from Quarter 3, 2013/14) does not provide any evidence of sexual orientation amongst carers accessing current carer support services. Current contract monitoring data (collected as client records) for the services does not include detail about sexual orientation. However, it is accepted that a carer's decision to access the support services might be affected by their sexual orientation (such as social exclusion).</p>
	Other groups e.g. rural isolation, deprivation, health inequality, carers, asylum seeker and refugee communities, looked after children, deprived or disadvantaged communities		X	<p>The proposed re-modelling of carer support services will not impact on any of these groups of carers who seek to access future carer support services.</p> <p>All groups of carers within Leicestershire will be able to access both universal and targeted carer support services. All eligible carers including all carers within these groups will be able to access either the Carer Support Fund or a Carers Personal Budget in order to receive their identified support. This will ensure equitable access to carer support services for all carers.</p> <p>As part of the procurement process Market Development will be able to identify any gaps that need to be addressed within future carer support services. In addition,</p>

				<p>the eligibility criteria shall be determined / detailed within the contract specification for each of the procured services. The carer support services review and public consultation covered a number of differing services but none of them are specific to these groups of carers; for instance refugee communities, rural isolation, deprived or disadvantage communities.</p> <p>Current monitoring data for existing services does not provide any evidence for any of these groups of carers, however, carers often anecdotally comment that they cannot access carer services due to lack of transport.</p>
	Community Cohesion		X	<p>It is anticipated that the proposed carer support service model will result in a positive impact on community cohesion for all groups of carers. The new carer support services will engage with other voluntary sector and community partners and with the proposed Local Area Coordinator Teams. It is considered that the proposed model provides opportunities to work more closely within local communities and partner organisations and this will assist in better community cohesion for carers.</p>
10.	<p>Are the human rights of individuals <u>potentially</u> affected by this proposal? Could there be an impact on human rights for any of the protected characteristics? (Please tick)</p> <p>Explain why you consider that any particular article in the Human Rights Act may apply to your policy/ practice/ function or procedure and how the human rights of individuals are likely to be affected below: [NB. Include positive and negative impacts as well as barriers in benefiting from the above proposal]</p>			
		Yes	No	Comments
Part 1: The Convention- Rights and Freedoms				
	Article 2: Right to life	X		All services are expected to identify any risks to carers, service users and professionals and to have Health & Safety and safeguarding policies and procedures in place.
	Article 3: Right not to be tortured or treated in an inhuman or	X		This article is relevant to the carer support services as part of service delivery there is an expectation that the provider will report any safeguarding concerns and have suitable policies and procedures in

	degrading way			respect of safeguarding, whistle-blowing.
	Article 4: Right not to be subjected to slavery/ forced labour		X	n/a
	Article 5: Right to liberty and security		X	n/a
	Article 6: Right to a fair trial		X	n/a
	Article 7: No punishment without law		X	n/a
	Article 8: Right to respect for private and family life	X		This article is relevant to carers as through accessing caring services they are able to access information, advice and support to have a break from caring and the right to a family life outside of their caring responsibilities. Carer support services also provide care and support to both the carer and the cared for people with varying conditions such as mental ill health, that is expected to be delivered with due respect for their right to have their privacy adhered to. There is also an expectation that the service will check with a GP or other health professionals that the cared for person has an appropriate medical diagnosis and therefore the service will be handling personal information. Similarly, if a safeguarding issue arises there may need to be the disclosure of personal information by the service. The services will also be expected to undertake checks (such as enhance DBS's) and have references for staff and this will therefore also involve accessing, handling and disclosing (as appropriate) personal information.
	Article 9: Right to freedom of thought, conscience and religion	X		This article is relevant to the proposed carer support services because they offer care and support to both carers and the people they care for with varying conditions such as mental ill health. This care and support is expected to be delivered irrespective of an individual's religious beliefs. Furthermore, the carer support services

				are expected to ensure that a carer or a cared for person's cultural and religious needs are respected, understood and facilitated such as dietary requirements and the right to access support to attend appropriate religious worship.
	Article 10: Right to freedom of expression		X	n/a
	Article 11: Right to freedom of assembly and association		X	n/a
	Article 12: Right to marry		X	n/a
	Article 14: Right not to be discriminated against	X		This article is relevant to the proposed carer support services because they offer care and support to both carers and the people they care for with varying conditions such as mental ill health and this is expected to be delivered without discrimination of any kind to carers, the cared for person and staff. The review process identified some inequalities in respect of services relevant to Article 14, such as geographical provision. These inequalities have been addressed in the proposed redesign/modelling going forward to procurement of new services.
Part 2: The First Protocol				
	Article 1: Protection of property/peaceful enjoyment	X		Carer support services are designed to assist with this protection, as they aim to improve the quality of life in the home and support the carer more for a life outside of the caring role,
	Article 2: Right to education		X	Does not apply
	Article 3: Right to free elections		X	Does not apply
Section 2				
D: Decision				
11.	Is there evidence or any other reason to suggest that:	Yes	No	Unknown
	a) this policy could have a different affect or adverse impact on any		X	

	section of the community; b) any section of the community may face barriers in benefiting from the proposal		X	
12.	Based on the answers to the questions above, what is the likely impact of this policy?			
	No Impact <input type="checkbox"/>	Positive Impact <input type="checkbox"/>	Neutral Impact <input checked="" type="checkbox"/>	Negative Impact or Impact Unknown <input type="checkbox"/>
Note: If the decision is 'Negative Impact' or 'Impact Not Known' an EHRIA Report is required.				
13.	Is an EHRIA report required?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	

Section 2: Completion of EHRIA Screening

Upon completion of the screening section of this assessment, you should have identified whether an EHRIA Report is required for further investigation of the impacts of this policy.

Option 1: If you identified that an EHRIA Report is required, continue to [Section 3](#) on Page 7 of this document to complete.

Option 2: If there are no equality, diversity or human rights impacts identified and an EHRIA report is not required, continue to [Section 4](#) on Page 14 of this document to complete.

Section 3: Equality and Human Rights Impact Assessment (EHRIA) Report

Section 3: Equality and Human Rights Impact Assessment Report

This part of the assessment will help you to think thoroughly about the impact of this policy and to critically examine whether it is likely to have a positive or negative impact on different groups within our diverse community. It is also to identify any barriers that may detrimentally affect under-represented communities or groups, who may be disadvantaged by the way in which we carry out our business.

Using the information gathered either within the EHRIA Screening or independently of this process, this EHRIA Report should be used to consider the impact or likely impact of the policy in relation to all areas of equality, diversity and human rights as outlined in Leicestershire County Council's Equality Strategy.

Section 3

A: Research and Consultation

When considering the target groups it is important to think about whether new data needs to be collected or whether there is any existing research that can be utilised.

14. Based on the gaps identified either in the EHRIA Screening or independently of this process, how have you now explored the following and what does this information/data tell you about each of the diverse groups?

- a) current needs and aspirations and what is important to individuals and community groups (including human rights);
- b) likely impacts (positive and negative, intended and unintended) to individuals and community groups (including human rights);
- c) likely barriers that individuals and community groups may face (including human rights)

Throughout the strategic review process, contract monitoring data for the existing provision of carer support services (which included case studies and both carer and provider consultation) was examined in order to better understand the existing service provision. This was supplemented during the formal public consultation element of the review process with consultation with carers, service users, providers and stakeholders (including the Carer Champion Network, Healthwatch Carers Forum and Countywide Carers Forums). Carers were also invited to attend one of 3 public workshops across the County as part of the consultation process and invited to complete consultation questionnaires. There was also a separate workshop available for both current providers of carer support services and any interested future providers. During the recent Regional Local Authority Carers Leads meeting, different models of carer support was also discussed along with conducting research online to find published resources and evidence for successful models of carer support.

The purpose of all this work was to enable an understanding of the needs and priorities of carers who currently access carer support services. The review process also enabled us to measure current carer support services against the new statutory duties for carers within the Care Act 2014. The overwhelming finding from carers was the need to access relevant advice and information early on in the caring role and the ability to access a choice of reliable and good quality home based services including respite breaks. The majority of carers also reported that they contacted their GP at the start of their caring role to find out what help and support was available.

This review work also allowed risks associated with decommissioning some of the current carer support services to be considered and an understanding of whether carers, the public and key stakeholders agree with the proposed commissioning model for carer support services.

Furthermore, the outcome of the formal consultation exercise which highlighted that 63% of carers who responded supported Option One of the proposed commissioning model. This model will ensure that carer support services:

- meet demand
- offer equitable access (both demographically and geographically)
- focus on positive outcomes for carers and customers
- give value for money
- ensure that the Department is compliant with the Care Act 2014.

Customers, Stakeholders (including the provider of the Departments current carer support provision) and Social Care Professionals also contributed to the public consultation and indicated the need to provide information and advice to carers early on in their caring role to enable carers to make informed choices about what support is need to help them continue to care.

Using the findings from the strategic review and formal consultation exercise potential impacts upon the Protected Characteristics under the Equality Act 2010 and Human Rights articles have been identified (see above, Section 2). Of note, it has been recognised that in respect of the protected characteristics, there is the potential for all carers (regardless of which protected characteristic they fall under) to experience an impact arising out of these proposals because carers can be included in any of the protected characteristics. Carers currently accessing respite services are not charged for this. Within the preferred Option One of the proposed carer support model, carers accessing the Carer Support Fund (a one off annual payment of up to £250) can choose to use these funds to pay towards the cost of respite care. For those carers who are currently accessing regular respite, this fund may not be sufficient to meet their identified need for respite and so either accessing a full carers personal budget or putting the need for carer respite into the person the budget of the person they care for may be a more appropriate method of paying for respite care. Consideration needs to be given to ensure that these carers continue to be appropriately supported by suitably qualified assessment officers within the operational teams in the event of carers choosing to have their own separate community care assessment, support planning and financial assessment.

15.	Is any further research, data collection or evidence required to fill any gaps in your understanding of the potential or known affects of the policy on target groups?
------------	--

Throughout the strategic review process and formal consultation exercise research, data collection and evidence gathering has taken place from a variety of sources:

- Online and other published resources
- Contract monitoring data
- Information received from carers, providers, and stakeholders
- Benchmarking information from other local authorities and commissioning organisations
- Results from consultation exercise (including responses from carers, providers, stakeholders, and the general public)

As described above, this research and data gathering has allowed a relatively comprehensive assessment of risks and impacts and those specific to the Equality Act

and Human Rights have been described above (see Section 2).

As service specifications are developed, further information will be sought from these sources. Particular work will take place with stakeholders to ensure that the correct referral routes for the service are identified and that appropriate signposting to specialist and alternative service provision are embedded in the service design. Within the proposed carer support model referrals for support from Social Care will all be directed to the Customer Service Centre in the first instance. Further work will be undertaken in order to identify other risks or impacts and how these may be resolved.

When considering who is affected by this proposed model of carer support, it is important to think about consulting with and involving a range of carers, service users, staff or other stakeholders who may be affected as part of the proposal.

16.	Based on the gaps identified either in the EHRIA Screening or independently of this process, <u>how</u> have you further consulted with those affected on the likely impact and <u>what</u> does this consultation tell you about each of the diverse groups?
------------	---

The formal consultation exercise for the carer services review was undertaken in order to engage as fully as possible with carers, providers and stakeholders and the general public in order to both understand people's views regarding existing and proposed service revisions and risks and impacts associated with the proposed changes.

The formal consultation exercise ran from 14th April until 13th July 2014. As part of the consultation exercise, the following were undertaken:

- Series of provider workshops (including providers running existing services for carers)
- Meetings with stakeholders (including the Carers Project Board, the Carers Champion Network, the Healthwatch Carers Forum, the Children & Families Department, LCC Scrutiny Committee and District and Borough Councils).
- Series of workshops for carers held across the County at different times during the day and evening
- Online and hard-copy questionnaires and consultation information sheets available for all
- Support from providers to assist carers to have their say on the consultation – either through completing questionnaires or events held by providers with their carers to gather comments

In response, 232 completed questionnaires were received (148 hard-copy responses – of which 27 were Easy Read hard-copies, and 84 online responses – of which 18 were Easy Read).

The consultation responses have shown that 62.7% of respondents supported Option One of the consultation as their favoured option and the main issues raised were:

- 63 % of people who responded emphasised the importance of accessing the Carer Support Fund to enable them to have a break themselves
- 66% of carers who responded expressed high levels of customer satisfaction with being able to exercise real choice in their use of the Carer Support Fund and appreciated how quick and easy it is to access this.
- Access to specific carer support groups and forums was highlighted as being an important element of support for carers with 45% of respondents indicating that they

currently access these groups and forums.

- There is concern - 28% in total of carers who responded - that the loss of the specialist carer support services, particularly the Mencap service; supporting carers of adults with learning disabilities and the Housing and Care 21 service; the carer emergency response service would directly impact on the support they currently receive. Plans to mitigate against the loss of this support are highlighted in this EHRIA.

17. Is any further consultation required to fill any gaps in your understanding of the potential or known effects of the policy on target groups?

No – the consultation undertaken already is considered appropriate. As specified above (Section 3.15), some further engagement will occur with carers, providers and stakeholders in the development of new carer support service specifications.

Section 3

B: Recognised Impact

18.	Based on any evidence and findings, use the table below to specify if any individuals or community groups who identify with any 'protected characteristics' are <u>likely</u> be affected by this policy. Describe any positive and negative impacts, including what barriers these individuals or groups may face.	
		Comments
	Age	There will be no impact on age as the carer support services will be accessible for those aged 18 years and older (no upper age limit). Work is currently being undertaken jointly with the Children & Families Department to ensure a smooth transition of young carers into adult carer support services from the age of 17 as per the guidance within the Care Act 2014.
	Disability	There will be no impact relating to disability. The specialist services for those carers caring for people with mental ill health and dementia will continue to be accessed through the use of either a separate carers' personal budget or through the budge of the person they are caring for. The current service supporting carers of adults with learning disabilities provided by Mencap will be re-provided through the re-commissioning of the Carer Support Service. The Service Specification for the support for carers

		will be revised completely to ensure that support is available for all groups of carers, including those carers of adults with learning disabilities.
	Gender Reassignment	There will be no impact relating to gender reassignment.
	Marriage and Civil Partnership	There will be no impact relating to marriage or civil partnership. However, should a carer be assessed as needing regular respite and they chose to access this through a full carers personal budget, this budget will be subject to a community care financial assessment. The Department's Community Care Financial Assessment Policy needs to ensure that single people and couples are treated similarly and fairly for any charging purposes.
	Pregnancy and Maternity	There will be no impact relating to marriage or civil partnership.
	Race	There will be no impact relating to race. During the consultation period, several of the carer forums that were attended had representation from BME Communities who had the opportunity to voice their feedback. The equality data from the results of the consultation show that 95% of respondents were white British, consequently 5% of respondents were from the BME community. All Carer Support Services will be equitable to all groups of carers including BME groups.
	Religion or Belief	There will be no impact relating to religion or belief.
	Sex	There will be a superficial impact relating to sex. The equality data from the results of the consultation show that 70% of respondents were female and 30% male. This is slightly higher than national statistics ('2014 State of Caring' Brief by Carers UK and 2011 Census data) which show that 58% of carers are female and 42% of carers are male. Over 12 carers groups and forums were visited during the consultation period and approximately 80% of these people attending groups are

		women.
	Sexual Orientation	There will be no impact relating to sexual orientation.
	Other groups e.g. rural isolation, deprivation, health inequality, carers, asylum seeker and refugee communities, looked after children, deprived or disadvantaged communities	There will be no impact relating to other groups. However, currently some carer support services are only available to carers within certain localities of the County – such as the GP Carer Health & Wellbeing Service. This will be redressed within the proposed new model of carer support services and all services will be available countywide. All respite currently accessed by carers is available free of charge. The Care Act is clear in that all carers' personal budgets can be subject to a financial assessment and potential fairer charge. Therefore, no carer will be required to pay more than they can afford. It should be noted that the Carer Support Fund will continue to be subject to an eligibility check but will continue to be available to carers free of charge.
	Community Cohesion	There will be no impact relating to community cohesion. Within the proposed model of carer support services one of the outcomes is to ensure equity to all groups of carers across all geographical localities.

19.	Based on any evidence and findings, use the table below to specify if any particular Articles in the Human Rights Act are <u>likely</u> apply to your policy. Are the human rights of any individuals or community groups affected by this proposal? Is there an impact on human rights for any of the protected characteristics?	
		Comments
	Part 1: The Convention- Rights and Freedoms	
	Article 2: Right to life	Risks to carers and suitable policies relating to Health and Safety and safeguarding adults will be a requirement of new services commissioned under these proposals.

Article 3: Right not to be tortured or treated in an inhuman or degrading way	New providers will be expected to have policies concerning safeguarding and whistleblowing, for example, and this will be a requirement of new services commissioned under these proposals. There is also a requirement under the Care Act for safeguarding to be put on a statutory footing and this will include carers.
Article 4: Right not to be subjected to slavery/ forced labour	
Article 5: Right to liberty and security	
Article 6: Right to a fair trial	This article is relevant to carers as people accessing Community Care Services including carers and Providers of Carer Support services are made aware of the Corporate Complaints procedures.
Article 7: No punishment without law	
Article 8: Right to respect for private and family life	This article is relevant to carers as through accessing caring services they are able to access information, advice and support to have a break from caring and the right to a family life outside of their caring responsibilities. Carer support services also provide care and support to both the carer and the cared for people with varying conditions such as mental ill health, that is expected to be delivered with due respect for their right to have their privacy adhered to. There is also an expectation that the service will check with a GP or other health professionals that the cared for person has an appropriate medical diagnosis and therefore the service will be handling personal information. Similarly, if a safeguarding issue arises there may need to be the disclosure of personal information by the service. The services will also be expected to undertake checks (such as enhance CRB's) and have references for staff and this will therefore also involve accessing, handling and disclosing (as appropriate) personal information.
Article 9: Right to freedom of thought, conscience and religion	This article is relevant to the proposed carer support services because they offer care and support to both carers and the people they care for with varying

		<p>conditions such as mental ill health. This care and support is expected to be delivered irrespective of an individual's religious beliefs.</p> <p>Furthermore, the carer support services are expected to ensure that a carer or a cared for person's cultural and religious needs are respected, understood and facilitated such as dietary requirements and the right to access support to attend appropriate religious worship.</p>
	Article 10: Right to freedom of expression	
	Article 11: Right to freedom of assembly and association	
	Article 12: Right to marry	
	Article 14: Right not to be discriminated against	<p>This article is relevant to the proposed carer support services because they offer care and support to both carers and the people they care for with varying conditions such as mental ill health and this is expected to be delivered without discrimination of any kind to carers, the cared for person and staff. The review process identified some inequalities in respect of services relevant to Article 14, such as geographical provision. These inequalities have been addressed in the proposed redesign/modelling going forward to procurement of new services.</p>
	Part 2: The First Protocol	
	Article 1: Protection of property/peaceful enjoyment	<p>Carer support services are designed to assist with this protection, as they aim to improve the quality of life in the home and support the carer more for a life outside of the caring role.</p>
	Article 2: Right to education	
	Article 3: Right to free elections	
Section 3		
C: Mitigating and Assessing the Impact		
<p>Taking into account the research, data, consultation and information you have reviewed and/or carried out as part of this EHRIA, it is now essential to assess the impact of the policy.</p>		
20.	<p>If you consider there to be actual or potential adverse impact or discrimination, please outline this below. State whether it is justifiable or legitimate and give</p>	

	reasons.
<p>N.B.</p> <p>i) If you have identified adverse impact or discrimination that is <u>illegal</u>, you are required to take action to remedy this immediately.</p> <p>ii) If you have identified adverse impact or discrimination that is <u>justifiable or legitimate</u>, you will need to consider what actions can be taken to mitigate its effect on those groups of people.</p>	
21.	<p>Where there are potential barriers, negative impacts identified and/or barriers or impacts are unknown, please outline how you propose to minimise all negative impact or discrimination.</p> <ul style="list-style-type: none"> a) include any relevant research and consultations findings which highlight the best way in which to minimise negative impact or discrimination b) consider what barriers you can remove, whether reasonable adjustments may be necessary, and how any unmet needs that you have identified can be addressed c) if you are not addressing any negative impacts (including human rights) or potential barriers identified for a particular group, please explain why
<p>Section 3</p> <p>D: Making a decision</p>	
22.	<p>Summarise your findings and give an overview as to whether the policy will meet Leicestershire County Council's responsibilities in relation to equality, diversity, community cohesion and human rights.</p>
<p>It is considered that the Council will still meet its responsibilities in relation to equality, diversity, community cohesion and human rights for all groups of carers. The level of savings to be made against all prevention services, including support for domestic abuse, means that there is likely to be reduction in service provision across the County.</p>	

--

Section 3

E: Monitoring, evaluation & review of your policy

23.	<p>Are there processes in place to review the findings of this EHRIA and make appropriate changes? In particular, how will you monitor potential barriers and any positive/ negative impact?</p> <p>All new services will be subject to the Department's standard contract monitoring procedures (undertaken by the Department's non-regulated compliance team. In addition, after the first six months of service delivery, a review of the service will be undertaken in order to establish effectiveness and requirements for improvements. As part of that review, monitoring data will be considered and any equalities issues addressed with new providers. If required, an up-date will be provided to the Departmental Equality Group (DEG) after this review.</p>
23.	<p>How will the recommendations of this assessment be built into wider planning and review processes? <i>e.g. policy reviews, annual plans and use of performance management systems</i></p> <p>One of the key issues facing the review of existing service provision is a lack of robust monitoring data. In particular, existing data does not capture a lot of data in respect of equalities and human rights (for instance, information on many of the protected characteristics is not currently collected). As part of new service design and delivery, more robust monitoring will be introduced.</p> <p>As stated above, as part of on-going service delivery, new service provision will be subject to standard contract monitoring procedures (carried out by the Department's non-regulated compliance team). In addition, after the first six months of service delivery, a review of the service will be undertaken in order to establish effectiveness and requirements for improvements. As part of that review, monitoring data will be considered and any equalities issues addressed with new providers. If required, an up-date will be provided to the Departmental Equality Group (DEG) after this review.</p>

Section 3:
F: Equality and human rights improvement plan

Please list all the equality objectives, actions and targets that result from the Equality and Human Rights Impact Assessment (EHRIA) (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer Responsible	By when
Ensure that new services are able to meet the needs of carers who previously received specialist support.	1) Current service specifications will be re-designed to ensure that all groups of carers across all localities will be able to access appropriate support. 2) Carers must be appropriately supported by suitably qualified assessment officers within the operational teams.	1) Maintain good levels of independence for cared for people with complex conditions. Sustain carers who have challenging complex caring responsibilities due to their personal circumstances and those who they care for. 2) Consequently minimise the need for more costly services that may not meet the strategic aim of personalisation.	Anne Walsh Care Pathway Review Teams	October 2015
Ensure that new services have appropriate geographical spread.	All carer support services commissioned will be available to all groups of carers countywide.	Maintain availability of support for carers regardless of location in the County.	Care Pathway Review Teams	October 2015

Ensure that new charges do not deter low income carers from accessing services	<ol style="list-style-type: none"> 1) Ensure that newly chargeable services are covered by CCF Fairer Charging policy. 2) Carer Support can still be made available through the personal budget of the person they are caring for. 3) Ensure that transition for those carers whose preferred option is a carers personal budget is timely, efficient and does not result in any carer having to wait for receipt of their personal budget in order to access their assessed need for respite services. 	<ol style="list-style-type: none"> 1) Service provision is not compromised by the carers personal financial circumstances. 2) Ensure Community Care Finance efficiency. 	Head of Community Care Finance	
Ensure smooth and efficient transition from	Agreements need to be in place between the Children & Families and	No deterioration of support for carer during the transition phase.	Anne Walsh Care pathway Review Team	December 2015

Child to Adult Services.	Adult & Communities Departments to ensure this is timely and efficient. The Carer Policy currently being developed will be adopted by both departments and kept effectively under review.			
Ensure that the new provision for respite services is adequate to meet the known demand.	Continue to closely monitor how many carers are accessing the Carer Support Fund and whether this fund is sufficient to meet the carers assessed needs. Also continue to monitor how many carers are continuing to access their support through the personal budget of their cared for person.	Respite services continue to have an effective and active role in providing carer support and reducing undue stress on carer thus preventing breakdown of care arrangements.	Review Process Performance Team	December 2015
Ensure that Emergency Replacement Carer Support continues to be available.	Monitor the use of the Crisis Response Service when accessed due to a carer emergency and how many emergencies are dealt with outside the hours of the Crisis Response Service by the Emergency Duty Team.	Respite services continue to have an effective and active role in providing carer support and reducing undue stress on carer thus preventing breakdown of care arrangements.	Review Process Crisis Response Team Performance Team	December 2015

Section 4: Sign off and scrutiny

Upon completion, the Lead Officer completing this assessment is required to sign the document in the section below.

It is required that this Equality and Human Rights Impact Assessment (EHRIA) is scrutinised by your [Departmental Equalities Group](#) and signed off by the Chair of the Group.

Once scrutiny and sign off has taken place, a depersonalised version of this EHRIA should be published on Leicestershire County Council's website.

Section 4

A: Sign Off and Scrutiny

Confirm, as appropriate, which elements of the EHRIA have been completed and are required for sign off and scrutiny.

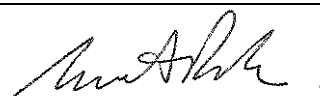
Equality and Human Rights Assessment Screening ☒

Equality and Human Rights Assessment Report ☒

1st Authorised Signature (EHRIA Lead Officer):

Date:

2nd Authorised Signature (DEG Chair):



Heather Pick

Date: ...26 September 2014