

EQUALITY IMPACT ASSESSMENT - TRAFFORD COUNCIL

A. Summary Details		
1	Title of EIA:	Person Centred Approach in Adult Social Care
2	Person responsible for the assessment:	Jennifer McErlain and Asma Ibrahim
3	Contact details:	Jennifer.mcerlain@trafford.gov.uk asma.ibrahim@trafford.gov.uk
4	Section & Directorate:	Health and Social Care Sustainability Team, Transformation and Resources
5	Name and roles of other officers involved in the EIA, if applicable:	Karen Ahmed and Emma Brown

B. Policy or Function		
1	Is this EIA for a policy or function?	Policy <input type="checkbox"/> Function <input checked="" type="checkbox"/>
2	Is this EIA for a new or existing policy or function?	New <input type="checkbox"/> Existing <input type="checkbox"/> Change to an existing policy or function <input checked="" type="checkbox"/>
3	What is the main purpose of the policy / function?	To deliver our statutory duty of performing Adult Social Care assessment and reassessment, through an asset-based, person centred approach. Adult Social Care supports people who live in Trafford and are aged over 18. We support:

- People with mental health associated needs
- People who have a physical disability
- People who have a health condition
- Older people
- People with a learning disability
- People who care for someone

Over the last ten years, Central Government funding for Adult Social Care has steadily decreased. In the same time, the number of people requiring support from Adult Social Care has consistently increased.

In order to continue to deliver our statutory duties safely in a manner which is sustainable, Trafford Council faces;

- The need to ensure systems and processes put people first
- Increased pressure on funds and drive to make every £ count
- Challenge of recruiting, retaining and motivating staff

To achieve this, person-centred ways of working for Adult Social Care have been developed. We have freed up our staff to spend more time with people. We have developed a new culture of support in our workforce, placing people at the heart of decision-making about their own care and their own lives. We no longer mainly focus on what people cannot do. We think about what people can do, and how we can support them in continuing to do those things to live the life they want.

There are several strands to delivering a successful person centred approach. In Trafford, these consist of;

		<ul style="list-style-type: none"> • Let's Talk- Adult Social Care's strengths-based approach to assessment and reassessment. We explore and utilise a person's strengths including; their family, friends and local community in addition to 'traditional' commissioned support. This helps us to ensure that people remain in control of their own care, and their own lives. • Right Care for You- Supports people to retain their independence by utilising equipment more effectively. Historically there was only one solution which was typically multiple carers. Advancements in technology and equipment have allowed us to ensure dignity and independence is maintained and residents have more control of their care. <p>The residents of Trafford can be confident that when they talk to us, Trafford will be asking the right questions. What matters to you? What do you want to achieve? And how can we support you to achieve this through the people, places and public services around you?</p> <p>Cllr Joanne Harding, Executive Member for Adult Social Care, said:</p> <p>"We are passionate about engaging with our residents and putting them first in the decision-making process - while shaping the future of Adult Social Care and delivering the best outcomes possible for the people of Trafford."</p>
4	Is the policy/function associated with any other policies of the Authority?	<p>The Care Act 2014 and associated statutory guidance</p> <p>The Mental Capacity Act 2005</p>

		<p>The Human Rights Act 1998</p> <p>Adult Social Care policies and procedures (APPP)</p> <p>Manual Handling Policy</p> <p>Manchester Foundation Trust and Trafford Clinical Commissioning Group Policies</p> <p>Older Person's Housing Strategy</p> <p>Ageing Well</p>
5	Do any written procedures exist to enable the delivery of this policy/function?	No. The processes under the person centred approach are delivered according to relevant legislation principally the Human Rights Act 1998 and the Care Act 2014.
6	Are there elements of common practice not clearly defined within the written procedures? If yes, please state.	<p>Yes, Adult Social Care processes introduced under;</p> <p>Let's Talk;</p> <ul style="list-style-type: none"> • Let's Talk Assessment Forms 1 and 2 • Community Link Officer referrals • Duty/Desk worker rota • Planned/unplanned trays in LAS (Liquidlogic Adults' Social Care System) • Self-allocation of cases • Self-authorisation of assessments • Let's Talk emergency payment cards <p>Right Care (RCFY) for You;</p> <ul style="list-style-type: none"> • RCFY Assessment Forms

		<ul style="list-style-type: none"> • Changes to existing equipment utilisation • Awareness Training for the RCFY approach
7	<p>Who are the main stakeholders of the policy? How are they expected to benefit?</p>	<p>The residents of Trafford, Carers, friends and family, Adult Social Care staff and care providers.</p> <p>Trafford's person centred approach puts the heart back into statutory social care practice and empowers our staff. They are given the time, responsibility and freedom to really listen to what people want, rather than constraining them through prescriptive approaches and lengthy paperwork.</p> <p>People are now truly at the centre of everything we do, and their wishes, thoughts and feelings shape the path their care and support takes. People are empowered to remain their independence and in control of their own lives and care. This ensures that we provide the right level of support at the right time, in the right place.</p> <p>This can also create benefits for our Care Providers, ensuring their time and capacity is allocated to the people who need it most.</p> <p>The approach can also offer financial benefit for those people who pay for their own care. For example, previously a service user would have had two carers visiting twice a day to manoeuvre them in/out of bed. Under the new approach the service user would be offered the latest equipment to retain their independence and remain living well at home for as long as possible. This is a less costly option for the person.</p> <p>Trafford's person centred approach is truly strengths-based. It recognises that the person is the expert in their own lives with</p>

		collaborative risk assessments, co-produced Support Planning, and a thorough exploration of need.
8	How will the policy/function (or change/improvement), be implemented?	<p>Adult Social Care Teams have adopted the person centred approach gradually.</p> <p>Let's Talk is progressively rolling out across Health and Social Care teams one at a time. As part of this, we have introduced;</p> <ul style="list-style-type: none"> • New social care assessment forms that are less lengthy and offer more opportunity for the person to discuss and identify what they want • Social care staff have been empowered with knowledge of local community to provide targeted and local support to people • Duty/Desk worker rota to ensure a member of staff is always on hand to receive incoming work • Recruitment of Community Link Officers to ensure we have a comprehensive knowledge of the vibrant and valuable resources in our community to support people • Provision of Let's Talk payment cards to enable our social care staff to make immediate purchases of goods and solutions. This will stabilise and improve in the event of an emergency situation. <p>Under Right Care For You, we are rolling out on a provider basis; training is being provided for care agency staff and all social care colleagues. Assessments are aligned to each provider and a new process has been implemented to transfer cases between health and social care. This means there is a more joined up approach to assessment between agencies.</p>

		<p>Need Assessment and reassessment of a person continues to be completed under the person centred approach. This ensures we continue to meet eligible need, and discharge our statutory duty under the Care Act (2014).</p>
9	<p>What factors could contribute or detract from achieving these outcomes for service users?</p>	<p>The lack of reasonable alternative solutions to meet need through differential means to traditional funded care.</p> <ul style="list-style-type: none"> • Escalation in care costs • Increasing need for Adult Social Care support • Staff retention/sickness • Buy-in from service users, friends and family • Winter Pressures • Provider engagement • Saturated provider market • Community based resources not available
10	<p>Is the responsibility for the proposed policy or function shared with another department or authority or organisation? If so, please state?</p>	<ul style="list-style-type: none"> • Trafford Local Care Organisation (TLCO) • Manchester University NHS Foundation Trust (MFT) • Occupational Health

	<ul style="list-style-type: none"> • Commissioning • Providers
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C. Data Collection

1	Do you have monitoring data on the number of people (from different equality groups) who are using or are potentially impacted upon by your policy/ function?	Data is available for people in receipt of Adult Social Care funded services by; age, gender, ethnicity, disability and primary client type.																
2	Please specify monitoring information you have available and attach relevant information*	<p>Monitoring data below is extracted from Trafford’s Case File Recording System: Liquid Logic Adults (LAS)</p> <table border="1"> <thead> <tr> <th>Gender</th> <th>Number of Clients</th> </tr> </thead> <tbody> <tr> <td>Female</td> <td>1463</td> </tr> <tr> <td>Male</td> <td>1029</td> </tr> <tr> <th>Age</th> <th>Number of Clients</th> </tr> <tr> <td>18-64</td> <td>926</td> </tr> <tr> <td>65-75</td> <td>327</td> </tr> <tr> <td>75-84</td> <td>523</td> </tr> <tr> <td>85+</td> <td>716</td> </tr> </tbody> </table>	Gender	Number of Clients	Female	1463	Male	1029	Age	Number of Clients	18-64	926	65-75	327	75-84	523	85+	716
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Primary Support Reason	Number of Clients
Learning Disability Support	492
Mental Health Support	337
Physical Support – Access and Mobility Only	147
Physical Support – Personal Care Support	1301
Sensory Support for dual, hearing and visual impairment	52
Social Support – for Substance & Social Isolation /Other	83
Support with Memory and Cognition	83
Blank	12
Ethnicity	Number of Clients
Asian Background including Chinese	100
Black African and African Caribbean Background	104

	Any Other Ethnic Group	17
	Mixed Background	42
	White - British	2084
	White - Irish	56
	Any Other White Background	34
	Arab	<5
	Gypsy / Roma & Traveller of Irish Heritage	5
	Information Not Yet Obtained	447
	Refused	<5
	Disability Type	Number of Clients
	Multiple	118
	Mental/Cognitive	360
	Physical Disability	187
	Sensory	146
	Blank	1681

3	If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data?	n/a
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*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?	<p>A consultation process ran as part of the Reshaping Adult Social Care proposal from 21/10/14 to 20/12/14. The most consistent comment in this was in relation to affordability. However, this would apply to all service users within the Protected Characteristic groups and the proposal is about alternative provision. Some of the alternative provision may prove to be more cost effective for the person.</p> <p>Prior to piloting the approach, extensive benchmarking took place with other Local Authorities who have adopted similar person centred approaches. We have best practice examples from these that have shaped our implementation of the approach.</p> <p>Positive feedback on Let's Talk has been received from social care staff using the approach. They commented that they feel they have more time to spend with the people they work with, and the ability to support them appropriately.</p> <p>Positive feedback has also been received from residents, who have commented that they felt their interaction with Adult Social Care was positive. They felt listened to and were happy with the outcome.</p>

2	Please list any consultations planned, methods used and groups you plan to target. (If applicable)	N/A – not applicable
3	**What barriers, if any, exist to effective consultation with these groups and how will you overcome them?	N/A

***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

	Positive	Negative (please specify if High, Medium or Low)	Neutral	Impact
Gender – both men and women, and transgender;		<input checked="" type="checkbox"/>		Support and services are delivered to more women than men due to the demographics of Trafford. Therefore, more women than men are likely to be impacted by being assessed in a different way.
Pregnant women & women on maternity leave		<input checked="" type="checkbox"/>		Pregnant women and women on maternity leave are perhaps less likely to benefit from the linking to the local community that person centred approaches aims to do. This may be due to physical discomfort and risk in

				pregnancy or time constraints with a new-born baby on maternity leave.
Gender Reassignment			<input checked="" type="checkbox"/>	No particular impact identified other than that of other service user groups.
Marriage & Civil Partnership	<input checked="" type="checkbox"/>			Person centred approaches draw on the strengths and assets around a person when meeting needs - often these include family and friends. Those who are married or in a civil partnership may have this support more readily available than those who are not.
Race- include race, nationality & ethnicity (NB: the experiences may be different for different groups)			<input checked="" type="checkbox"/>	No particular impact identified, however, other than that of other service user groups
Disability – physical, sensory & mental impairments		<input checked="" type="checkbox"/>		The approach may impact those with a disability, as the way by which people are assessed has changed to be more proportionate. There is an emphasis on thinking creatively to source alternative solutions to 'traditional' care. For example, clients who have an existing care package where we are commissioning two carers to provide care (double handling), may be revised upon reassessment. The revised care could be provided by one carer (single handling) plus equipment utilisation, or even no carer with appropriate equipment employed. Reducing dependence can give control back to

				a person and support them to become more resilient in the long term.
Age Group - specify e.g.; older, younger etc)			<input checked="" type="checkbox"/>	Older people are likely to have high level need due to age, particularly in physical support and support with memory and cognition. Older people are less likely to feel the full benefit of a person centred approach that aims to connect people to people and people to place - due to restrictions in place for their safety.
Sexual Orientation – Heterosexual, Lesbian, Gay Men, Bisexual people			<input checked="" type="checkbox"/>	No particular impact identified, however, other than that of other service user groups
Religious/Faith groups (specify)			<input checked="" type="checkbox"/>	No particular impact identified, however, other than that of other service user groups

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

High

Medium

Low

Neutral

F. Could you minimise or remove any negative potential impact? If yes, explain how.	
Race:	Trafford's person centred approach is delivered based on the assessment/reassessment of need and has a potential impact for all service user groups.
Gender, including pregnancy & maternity, gender reassignment, marriage & civil partnership	

Disability:	<p>Assessment/reassessment seeks to provide alternative, more person-centred support as opposed to typically 'traditional' funded care. For those people who are identified to have care needs eligible under the Care Act (2014), a statutory assessment of need based on eligibility criteria will be undertaken. This will encompass financial assessment for services. In addition, assessment by Occupation Therapists can take place to assess requirements for people with a physical or mobility issue.</p> <p>Generally because of demographics, services are provided to a larger number of older women than men. However, service provision will continue to be based on the meeting of care and support needs – either appropriate alternatives to funded care or through traditional services. Therefore there should be no disproportionate impact. Trafford offers the right assessment, at the right time, putting the right care in place. Decisions made are led by the person or under the appropriate legal frameworks as the assessment is based on the person's presenting needs.</p> <p>The impact may be considered medium in terms of potential changes in provision, and people may view this negatively. However, the approach promotes more creative, person centred solutions which in turn leads to reduced reliance on funded support and maximised independence and resilience.</p> <p>By way of mitigation;</p> <ol style="list-style-type: none"> 1. Trafford will meet people's needs with a person-centred, strengths based approach. This ensures we offer the right support at the right level, under Care Act eligibility criteria for funded services (in most cases). No person will be left without the support they have been 	
Age:		
Sexual Orientation:		
Religious/Faith groups:		

	<p>assessed as requiring. Their views and wishes are kept at the centre of all care planning at all times.</p> <ol style="list-style-type: none"> 2. The approach ensures all benefits or assets are utilised before an offer of support is made. These include financial, material and in a person's existing support networks of family, friends, neighbours and community. - People with the highest level of need may be those in receipt of the highest levels of benefit or assets. Once again, the person's own decisions and thoughts are of utmost importance, as they are experts in their own lives. 3. The Council is proposing to maximise community and personal abilities and resources which wouldn't need to be funded through the Council.
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Also 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?	Trafford's asset- based approach is Care Act (2014) compliant and ensures equal opportunity is in place.
2	Could the policy have an adverse impact on relations between different groups?	
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	Progress milestones
Person Centred EIA to be a live document - Trafford's Person Centred approach is an ever evolving piece of work and will grow to encompass more groups over time.	Briefing Paper for upcoming rollout areas of the Person Centred approach. This is available upon request.	Ongoing	Jennifer McErlain and Asma Ibrahim	Review of EIA and Briefing Paper on six-monthly basis.

Please ensure that all actions identified are included in the attached action plan and in your service plan.

Signed

Lead Officers

Jennifer McErlain
and Asma Ibrahim

Date

20/4/21

Signed

Service Head



Date 20/4/2021

If this EIA is to accompany a budget proposal please include sign off from a member of CLT:

Signed



CLT Member

Date 13/05/21