

EQUALITY IMPACT ASSESSMENT

Commissioning plan for support services for adults with complex needs



STAGE I: WHAT IS BEING ASSESSED AND BY WHOM?

What is being assessed - including a brief description of aims and objectives?

Commissioning Plan for Support Services for adults with complex needs

The purpose of the Commissioning Plan is to set out Plymouth City Council's commissioning intentions for support services for adults with complex needs (homelessness, mental health, offending and substance misuse) for the period 2016-2023.

This commissioning plan reviews the current provision and systems for adults with complex needs and identifies a number of issues including:

- A growing number of people experiencing addiction, homelessness, offending and poor mental health as a result of changes in welfare reform, under-funding and increasing health inequalities.
- A broken system, with duplication, an inefficient use of resources, limited joined up working and poor access to mental health services and appropriate accommodation.
- Challenges in relation to increases in complexity, issues accessing sustainable accommodation, disjointed working, safer information sharing, managing risks and missed opportunities for timely interventions.

The recommendations within the commissioning plan seek to address these issues and improve value for money by:

- Creating a 'whole system' approach that meets the needs of clients with a singular support need whilst also providing an improved offer to clients with more complex needs.
- Developing a more efficient system through a collaborative model of support that reduces duplication and delivers an improved client experience with positive outcomes.
- Creating a contractual environment where suppliers share responsibility for achieving outcomes and are mutually supportive, making decisions based on the best outcome for the service user.
- Developing the workforce to 'up skill' generic support staff, enabling specialist services to be more targeted whilst improving service delivery and outcomes.
- Increasing capacity in the system through applications for grant funding and exploration of social

	capital investment programmes.
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Date of assessment	November 2017

STAGE 2: EVIDENCE AND IMPACT

Protected characteristics (Equality Act)	Evidence and information (eg data and feedback)	Any adverse impact See guidance on how to make judgement	Actions	Timescale and who is responsible
Age	Returns from all the existing support services for adults aged 16+ with complex needs in scope of the commissioning plan show the following for the year 2015/16: 19 and under 967 (15% of responses) 20-29 1492 (22.5%) 30-39 1547 (23%) 40-49 1471 (22%) 50-59 818 (12%) 60-69 230 (3%) 70+ 94 (1%)	No adverse age related impact has been identified as a consequence of the recommendations within the Plan, and interventions will continue to be targeted in an age appropriate way. There are a number of other services outside the scope of this Plan available for those aged under the age of 16 and those that specialise in supporting older people.		
	Rising house prices and changes to Housing Benefit can make it hard for young people to get on to the housing ladder or achieve independence.	These changes may have an adverse impact on young people, putting them at a disadvantage when trying to live independently in the community.	The housing services in scope of the commissioning plan will support people aged 16+ to enable them to move successfully into independent living. Providers and	Service providers and commissioners, for the duration of the new contract.

			commissioners will continue to respond to consultations regarding to supported accommodation and benefit changes.	
	In December 2016 it was estimated 480 young people in our city aged between 16 and 18 were Not in Education, Employment or Training (NEET). Young people highlight training and employment opportunities, particularly apprenticeships, as a key priority.	Young people with complex needs may experience adverse impact whilst trying to engage in employment and training opportunities, due to their multiple needs around homelessness, substance misuse, mental health and offending.	The future service will have a key interface with partner agencies in the city to increase inclusion of young people with complex needs in education and training. This will be detailed in the service specification.	Future providers for the life cycle of the contract.
	Older people identified as having multiple and complex needs may have higher support needs in relation to their physical health.	Older people with complex needs may require a higher level of support to access healthcare services, especially when homeless.	The interface with Primary Care and outreach support will be key to the future system and the offer will be co-designed as part of the procurement.	Providers and commissioners for the life cycle of the contract.
Disability	Returns from 10 of the 13 existing support services for adults aged 16+ with complex needs in scope of the commissioning plan show the following for the year 2015/16: 1420 Consider themselves to have a long term health condition or disability (48% of responses) 1519 Do not consider	Services will support all people as appropriate, especially those who have complex needs (which could be in relation to their health (mental and physical), their substance use or housing or offending status). Mental health interfaces will be key to the future system and the offer will be co-designed as part of the procurement.		

	<p>themselves as having a disability (51%)</p> <p>II Describe themselves as a Carer</p> <p>According to the 2011 Census, 10.0% of Plymouth residents reported having a long-term health problem or disability that limits their day-to-day activities a lot and has lasted, or is expected to last, at least 12 months.</p> <p>The Equality and Human Rights Commission says that the majority of people over 50 will have a long-term health condition by 2020.</p>	<p>As such, no adverse disability related impact has been identified as a consequence of the recommendations within the Plan.</p>		
<p>Faith/religion or belief</p>	<p>Returns from 10 of the 13 existing support services for adults and younger people with complex needs in scope of the commissioning plan show the following for the year 2015/16:</p> <p>Buddhist 19 Christian 628 (22% of responses) Hindu 2 Jewish 1 Muslim 52 (2%) Sikh 0 Other 78 (3%) None 1208 (42%)</p>	<p>The services affected by the Plan will work with all eligible adults irrespective of faith, religion or belief, therefore no adverse impact is anticipated.</p>		

	<p>Prefer not to say/religion unknown 881(31%)</p> <p>The 2011 census recorded that Christians were still the largest faith community, however our society is becoming more secular: more people than ever before identify with no religion.</p> <p>This is reflected in the monitoring data collated above, and in fact the number of people saying they have no religion has now overtaken the number identifying with any particular religion.</p>			
<p>Gender - including marriage, pregnancy and maternity</p>	<p>Returns from all the existing support services for adults and younger people with complex needs in scope of the commissioning plan show the following for the year 2015/16:</p> <p>Male 4445 (67% of responses)</p> <p>Female 2151 (33% of responses)</p> <p>Pregnancy/Maternity 5</p>	<p>No adverse impact has been identified as services in scope of the commissioning plan will be available to all men and all women with complex needs, including women who are pregnant, as although the number of people responding that they are pregnant is relatively low, the complex needs system will need to be able to support both the parent (or parents) and their child or children.</p> <p>Children’s Social Care</p>		

		interfaces will be key to the future system and the offer will be co-designed as part of the procurement.		
	Overall 50.6 per cent of the Plymouth population are women and 49.4 per cent are men: this reflects the national figure of 50.8 per cent women and 49.2 per cent men.	We recognise that women currently make up a smaller proportion of complex needs clients than we might anticipate, given the proportion of the population in Plymouth who are female (50.5).	The collaborative model commissioned as a result of the Plan will ensure service accessibility via the procurement process and subsequent contract management. Gender information is being collected by all providers in scope of the Plan and will continue to be collected once the new contract is in place.	Providers and commissioners for the life cycle of the contract.
	Pregnant women are at greater risk of domestic abuse, which often starts during pregnancy.		Interfaces with Domestic Abuse Services will be key to the future system, as will those with Children's Social Care, and the offer will be co-designed as part of the procurement.	Providers and commissioners for the life cycle of the contract.
Gender reassignment/identity	Returns from 8 of the 13 existing support services for adults and younger people with complex needs in scope of the commissioning plan show the following for the year 2015/16: Male 1989 (69% of responses) Female 856 (30%)	No gender reassignment related impact has been identified as a consequence of the recommendations within the plan. All services in scope of the commissioning plan will need to evidence – through data gathering for example - that they are able to meet the	Ensure that the future commissioned service is required to gather data on the needs of the trans-population with complex needs accessing their services.	Providers and commissioners for the life cycle of the contract.

	<p>Was gender identity different at birth 7 Prefer not to say 24</p> <p>There is no precise number of the trans population in Plymouth.</p>	<p>multiple and complex needs of all potential service users, including those who have undergone or are undergoing gender reassignment, those who identify as trans or whose gender identity is other than what it was at birth.</p> <p>A number of current providers in scope of the commissioning plan do not routinely gather data around the trans population in Plymouth, this will no longer be acceptable if they are going to be able to evidence that they have the required policies and procedures in place to ensure the fair and equal treatment of this cohort.</p>		
Race	<p>Returns from 12 of the 13 existing support services for adults aged 16+ with complex needs in scope of the commissioning plan show the following for the year 2015/16:</p> <p>Asian or Asian British – Indian 8 Asian or Asian British – Pakistani 3 Asian or Asian British – Bangladeshi 5 Any other Asian background 56</p>	<p>There is currently a lack of understanding about the health needs of our BME communities and how they prefer to access services.</p>	<p>As part of the commissioning process providers will be asked to demonstrate their understanding of Equality and Diversity and demonstrate that they have adequate policies, processes and procedures in place.</p>	<p>For the life of the contract.</p> <p>The Alliance, PCC and NEW Devon CCG Commissioners</p>

	<p>Black or Black British – African 38</p> <p>Black or Black British – Caribbean 19</p> <p>Any other Black background 13</p> <p>Chinese 0</p> <p>Mixed – White and Asian 10</p> <p>Mixed – White and Black African 9</p> <p>Mixed – White and Black Caribbean 20</p> <p>Any other mixed background 31</p> <p>White – British 5620 (90% of responses)</p> <p>White – Gypsy or Traveller 5</p> <p>White – Irish 40</p> <p>Any other White background 159 (2.5%)</p> <p>Any other ethnic background 48</p> <p>Prefer not to say/Not stated 159 (2.5%)</p> <p>According to the 2011 Census 92.9% of Plymouth’s population considered themselves White British, 7.1% considered themselves Black and Minority Ethnic (BME) with White Other (2.7%), Chinese (0.5%) and Other Asian (0.5%) the most</p>			
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	<p>common ethnic groups.</p> <p>Despite the small numbers Plymouth has a rapidly rising BME population which has more than doubled since the 2001 census.</p> <p>Our Black and Minority Ethnic (BME) communities are very diverse. The Polish, Chinese and Kurdish communities are amongst the largest.</p>			
	<p>The census records that there are at least 43 main languages spoken in the city, and nearly 100 different languages are spoken in our schools.</p>	<p>Some service users may experience a language barrier and have difficulty reading publications.</p>	<p>Services in scope of the Plan will need to make their literature, websites and digital communications available in languages other than English, as required.</p> <p>Translation services should also be made available the need arises.</p>	<p>Providers and commissioners for the life cycle of the contract.</p>
<p>Sexual orientation - including civil partnership</p>	<p>Returns from 8 of the 13 existing support services for adults aged 16+ with complex needs in scope of the commissioning plan show the following for the year 2015/16:</p> <p>Bisexual 52 Gay Man 29 Heterosexual 2857 (75% of responses) Lesbian 26</p>	<p>No adverse impact related to sexual orientation including civil partnership has been identified as a consequence of the recommendations within the Plan.</p> <p>However, we need to ensure that the future service supports people who report feeling disadvantaged as a result of their sexual orientation.</p>	<p>All Providers in scope of the Plan will be asked to record all equality and diversity data and this information will be used to identify any unmet needs or barriers to accessing services.</p> <p>Interfaces with Domestic Abuse Services and mental health services will be key to the future system and</p>	<p>For the life of the contract.</p> <p>The Alliance, PCC and NEW Devon CCG Commissioners</p>

	<p>Other 22 Prefer not to say/Not Stated 803 (21%)</p> <p>Consultation feedback tells us that LGB young people often face further disadvantage through employment, health and mental health in particular.</p> <p>Gay men are 3 times as likely as heterosexual men to be the victims of domestic abuse.</p> <p>Hate and Mate crime continue to be concerns for the lesbian, gay and bisexual community.</p>		those offers will be co-designed as part of the procurement.	
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STAGE 3: ARE THERE ANY IMPLICATIONS FOR THE FOLLOWING? IF SO, PLEASE RECORD ACTIONS TO BE TAKEN

Local priorities	Implications	Timescale and who is responsible
Reduce the gap in average hourly pay between men and women by 2020.	Services in scope of the commissioning plan must ensure they do not discriminate as an employer as well as in the services they deliver. As part of this commissioning plan we will work to encourage our partners, stakeholders and contractors to adopt a shared approach towards equality and diversity, including addressing the gender pay gap. This will be evaluated through the procurement process.	By April 2019, Sophie Slater, Commissioning Officer
Increase the number of hate crime incidents reported and maintain good satisfaction rates in dealing with racist, disablist,	We will support our providers to be clear about their roles and responsibilities under equality legislation and together will work to tackle unfair discrimination on the grounds of all the above protected characteristics. This will be evaluated through the procurement process.	By April 2019, Sophie Slater, Commissioning Officer

homophobic, transphobic and faith, religion and belief incidents by 2020.		
Reduce the inequality gap, particularly in health between communities.	<p>The commissioning plan will reduce the inequality gap; clients accessing this service are likely to be vulnerable and at risk of homelessness or homeless and the service will enable them to access good quality accommodation, which will break down isolation and promote social inclusion.</p> <p>Freedom from drug and alcohol dependency not only means better physical and mental health and wellbeing for the individual, but for all those around them and the plan will look to support 'every individual to live a life free from drugs or alcohol, fulfil their potential and enjoy a brighter future for themselves and their families', regardless of the complexity of their presentation.</p>	By April 2019, Sophie Slater, Commissioning Officer
Good relations between different communities (community cohesion)	No adverse impact on community cohesion has been identified, as support from the recommended services will enable vulnerable people with multiple and complex needs to access good quality supported accommodation, helping them to achieve and maintain independent living and become positive members of their community. This will help to break down barriers and help build community cohesion.	
Human rights Please refer to guidance	<p>It is important that all Plymouth Citizens feel they are treated fairly, their views are taken into account and their human rights respected.</p> <p>Providers will be expected to attend Plymouth City Council's training on safeguarding vulnerable adults and follow PCC's policies and procedures, therefore no adverse impact on human rights is expected or has been identified.</p>	

STAGE 4: PUBLICATION

S. Slater

Responsible Officer

Date 20th December 2018

C. Arce

Director

20th December 2018