

# Equality Impact

See the leaflet *How to Make an Equality Impact Assessment* for help to complete this form. You are also welcome to contact Delyth Williams, Policy and Equality Officer on ext. 32708 or [DelythGadlysWilliams@gwynedd.llyw.cymru](mailto:DelythGadlysWilliams@gwynedd.llyw.cymru), for further assistance.

The Council is required (under the Equality Act 2010) to consider the impact any changes in any policy or procedures (or the creation of a new policy or procedure) will have on people with protected equality characteristics. The Council also has additional general duties to ensure fairness and to foster good relationships. Therefore, a timely Equality Impact Assessment should be made before any decision is taken on any relevant change (i.e. that affects people with protected equality characteristics).

## 1 Details

### 1.1. What is the name of the policy / service in question?

Remodelling the Home Care Service in Gwynedd

### 1.2 What is the purpose of the policy / service that is being created or amended? What changes are being considered?

The Council and the Local Health Board want to assist and support the people of Gwynedd to live as independently as possible in their own homes.

Because it is difficult to meet the demand for care, and the bureaucratic system we work within, we have been working to change and develop the way that domiciliary care is provided in Gwynedd, with the aim of: *'Helping people live their life as they wish to live it'*.

We intend to do this by encouraging all the persons and institutions who are involved with supporting people - health care workers, social care workers, home care workers, families, communities and the individuals themselves - to work together more effectively at a more local level.

The Welsh Government recognises these problems, and the Social Services and Well-being Act (2014) encourages us to work with and assist people to live life how they wish, and remain independent for as long as possible.

Here in Gwynedd we propose a twofold solution to the challenge of improving services for older people:

- **Establishing local Community Resources Teams (CRTs)** - The teams will be based in five areas of Gwynedd to ensure that health and care services are much closer to the community. Workers in the social care and health sector will be able to collaborate closer for the benefit of the people of the area.

Home care providers will also be part of these teams, sharing information and contacts, and making sure they help people to live their lives the way they wish.

- **Providing Home Care at a more local level** - In the future we will commission more local home care providers. One company will provide a service per patch - there are approximately 16 patches in the county (3 to 4 to each CRT area). The internal provider service will offer a service in some patches, and external companies will provide a service in others. 50% of the care hours across the county will be offered by the Council and 50% by other companies. In order to ensure consistency and quality across the area each company will work within specific guidelines, terms and conditions. They will focus on what is important for each person, and will work flexibly in order to achieve this.

The change of model will involve a procurement process that is mainly based on quality rather than price, and will ensure that there are clear and specific requirements on every company in terms of quality and working terms.

A decision will be made regarding which patches will be served by the internal provider service, and then discussions will take place with other companies, private and third sector, to discuss their aspirations, and the terms for awarding contracts.

Every member of staff in the Council's internal provision will be able to continue to work for the Council, but their work area may change over time.

This may mean that some individuals who receive a service at present may need to change either provider or carers. This would not happen overnight, but over a sustained period of time, ensuring that the welfare of those persons who receive care is at the heart of the change.

The new system will stabilise the home care provision across the county, and consequently lead to a reduction in staff changes for individuals receiving care..

### **1.3 Who is responsible for this assessment?**

Meilys Smith  
Senior Transformation Manager  
Adults, Health and Well-being Department

#### **1.4 When did you commence the assessment? Which version is this?**

First version.  
July 8th, 2019

### **2) Action**

#### **2.1 Who are the partners it will be necessary to work with to undertake this assessment?**

Home Care Remodelling Project board - which includes representatives from:  
Betsi Cadwaladr University Health Board  
The Council's Internal Provider Unit  
Social Workers Team  
Community Nurses Team  
Business Department, Council's Adults, Health and Well-being Department

Betsi Cadwaladr University Health Board

#### **2.2. What steps have you taken to engage with people with protected characteristics?**

Two years ago when initial consideration was given to this project, the Council's Remodelling Home Care Team decided to get to grips with and understand the domiciliary care system in Gwynedd.

By working jointly with a third sector company providing home care in the Bethesda area, we went about identifying the real impact of the current home care system on service users.

By using the Vanguard method (Ffordd Gwynedd), detailed research was undertaken on the demand they dealt with as a care provider, and the system that they work within to provide care for individuals.

By spending time looking at individual cases, discussing with individual service users and staff members, it became evident that the agreed care package often did not address what really mattered to that individual. They often addressed the physical symptoms, but avoided dealing with the actual welfare problems that faced individuals.

As the care packages are provided on the basis of 'time and task' i.e. specific tasks and specific times, they tend to be inflexible and too specific. It is not possible to tailor the package for the specific needs of each individual, this is frustrating for home care staff, but also means that we tend to create more dependency rather than promote independence.

Based on this research a small pilot scheme was commenced to trial a new way of working where the company would:

- Provide a dependable service designed around the person. A flexible service that could offer what people needed, providing more when more support was needed, and less when the need reduced. It would be a preventative service that considered the person's wider welfare needs, not just personal care. People would understand and feel they had more control over their service.
- Ensure that staff focus on developing a relationship with the individual, by listening to and understanding their personal situations, and then support them to do what matters to them. Staff would have the right to make decisions for the benefit of the individual. If staff couldn't help, they would bring in appropriate expertise, or seek suitable community resources to address the needs.

### 2.3 What was the outcome of the engagement?

The results of this pilot scheme were highly favourable, with positive outcomes and benefits to the health and welfare of the persons who were part of the pilot, as well as staff

These are some of the comments received from persons who were part of the pilot in Bethesda:

**Question: Did our staff undertake what was important to you/your relation?**

*"Yes. They were very willing and listened to what I wanted. They allowed me to set my own targets and try to achieve them, and only took over when I could not cope myself."*

*"Their flexibility and sensitivity was second to none at all times. The little, considerate things made the most difference."*

*"(They) made a big difference: set targets for me to achieve and to challenge myself. Pushing the boundaries of this disability that has taken away so much of my independence and the ability to do simple tasks."*

*"(I liked the) flexibility. The girls out of uniform. Their maturity. Their sincere concern."*

*"The freedom to be able to say what I needed, and not to be restricted by time, and usual home care rules."*

*"This service should be available to all. We are so grateful that it was there when we needed it"*

Based on the success of the scheme, pilot schemes were commissioned in four other areas in Gwynedd - Tywyn, Porthmadog, Caernarfon and Nefyn.

In these areas the care provider, be that Council internal providers, or an external company, work closely as part of the area's Community Resources Team, namely Social Care Workers, community nurses, occupational therapists, doctors etc.

As in the original pilot, the aim is to trial a new way of working that is flexible, preventative and focuses on the physical and mental welfare of the individual - concentrating on getting to know the persons, and address what matters to them in an integrated way ('co-production' – at it's best).

This means that we engage in the most effective way with service users by trying to understand and learn about the best way of developing the service in the future.

During this year we have conducted talks with staff of the Council's internal provider unit to present and discuss the new way of working, and these are continuing.

We are also in regular contact with the most obvious project stakeholders through different forums.

We will share information with persons who currently receive care once the proposals have been confirmed by the Council's Cabinet on the 23rd of July. Then a newsletter will be distributed to every individual who receives a service, to share information about the new way of working, and the new arrangements that will be implemented over time. We will give them an opportunity to offer observations and will share dates for information sessions that will be organised in locations across the county. These will be an opportunity for individuals, families, staff or the public in general to come and find out more about the changes and to discuss them on the basis of local areas. Home carers themselves, as well as social workers and health workers will be able to discuss with individuals, and to identify the most vulnerable people who will require the most support.

## **2.4 On the basis of what other evidence do you operate?**

According to the Gwynedd Well-being Assessment 2017, the number of people over the age of 80 has increased by 96.2% in 30 years. It also states that this increase in the older age group is expected to continue with people living longer and moving into the area. In 20 years, it is expected that there will be an additional 60% of over 80s living in Gwynedd.

These are some of assessment's conclusions:

*"We need to understand better how this change will affect the well-being of our communities and of the individuals living within them. The implications could be far reaching, and both positive as well as negative. For example, we know that older people are at a higher risk of loneliness, and as people live longer they will also need more care and support at home and in the community – this will need to be planned for. However, many older people may continue working and playing an important role in the community."*

*"Another factor which has been identified as having an impact on well-being is loneliness and isolation – with Gwynedd amongst one of the areas of highest risk in Wales. Whilst we recognised the healthy community spirit that exists in the area it is important that all residents feel a part of those communities, and that we work together to reduce the risk of loneliness. There are established networks and volunteer groups that are central to this and we must enable them to continue to thrive."*

The North Wales Population Assessment has looked at the care and support needs of residents across north Wales. The assessment underlines several matters that appear as themes at a regional level. They include an increase in cases of mental illness, especially young people; the need for better access to preventative services; tackling loneliness; more support to living at home; support for people with dementia; importance of providing a service in the individual's choice of language; and the need for more leisure and social activities for people with disabilities.

Recently a piece of work was undertaken by the data unit of the Adults, Health and Well-being Department that indicated a forecast of an increase in Domiciliary Care hours in the 65+ age range from 533,086 a year in 2015/16 to 645,301 a year in 2026/27. This is based on the growth forecast in population over the next 20 years.

The need to respond to this challenge is obvious, and the project to Remodel Domiciliary Care gets to grips with the nature of the demand, and the domiciliary care system that exists, as well as the numbers who receive and are likely to need care in the future.

The project's aim is to understand the demand for care, and to redesign a system that will respond to the demand more effectively by focusing on the person to ensure they can live their lives the way they wish to live.

## **2.5 Are there any gaps in the evidence that needs to be collected?**

There is robust evidence that the system we currently work within needs to change to ensure that we place the individual central to the services that we can offer.

We have trialled a new way of working in different areas of Gwynedd, and are convinced that sufficient evidence has been gathered to warrant extending the scheme throughout the county.

We will of course continue to regularly collect data and information, and are open to learn lessons along the way.

### 3) Identifying the Impact

**3.1 The Council must give due attention to the impact any changes will have on people with the following equality characteristics. What impact will the new policy/service or the changes in the policy or service have on people with equality characteristics? You are welcome to add other characteristics if you wish.**

<b>Characteristics</b>	<b>What type of impact? *</b>	<b>In what way? What is the evidence?</b>
<b>Race (including ethnicity)</b>	Positive	<p>The new system will consider what is important to each person, and consider their race, ethnicity and any associated characteristics, in order that they can live their life in the way they wish. Members of the Community Resources Team, and particularly the carers, will identify language or cultural opportunities that are relevant to the individual within their community, and will identify any gaps in community or professional provision.</p> <p>The challenge currently exists to ensure that carers across the provider companies realise the importance of being considerate of the race of every person who receives a service. In moving towards the new model, the training provided will focus on ensuring that staff understand the need to tailor the service to ensure we do what matters to each individual who receives that service.</p>
<b>The Welsh language</b>	Positive	<p>As 65% of Gwynedd residents can speak Welsh (according to 2011 Census) our aim by moving towards a new system will be to harmonise quality across companies that provide home care, inserting a clause in the agreement to ensure that users who wish to use the Welsh language receive a service in Welsh.</p> <p>However, it is a challenge to recruit carers in general in this field, and recruiting Welsh speaking carers is a particular challenge in some areas. We consider that a recruitment campaign will be required across Gwynedd, offering suitable training to try and ensure that we can satisfy language needs across the county.</p>
<b>Disability</b>	Positive	<p>The new system will consider what is important to each person, and any physical impairment or mental health, and how to ensure the best support for them to be able to live their lives in the way they wish.</p> <p>By working as one team within the Community Resources Teams (CRTs) in each area the carers will work closely with the most suitable professions within the team - Occupational Therapists, therapists, psychiatric nurses .... to ensure that the equipment, advice and the most suitable</p>

		<p>support is provided in a timely and consistent manner. We will also work with third sector organisations who offer suitable services.</p> <p>However, barriers currently exist, such as the system of ordering suitable equipment, especially with specialist equipment, the workload of occupational therapists, and the pressure on the county's mental health team.</p>
<b>Gender</b>	Positive	<p>The new system will consider what is important to each person, being considerate of the person's aspirations. For example, some men will be much more comfortable with another man assisting them to wash and dress, but only by talking and getting to know each person will such matters become clear. The aim is to ensure the best support for them to be able to live their lives as they wish, and by moving forward to the new model we will try to be as considerate as possible of this, and will try to recruit a variety of staff to address this matter.</p>
<b>Age</b>	Positive	<p>Although the majority of service users will be older persons, the new system will not discriminate on the grounds of age, and the service is also available for adults with physical disabilities who need support to live independently in their homes. Consideration will be given to each individual based on needs, bearing in mind that the needs of a young person with a physical disability might be quite different to the aspirations and needs of an older person. It is only by talking and getting to know each person that such things will become clear.</p>
<b>Sexual orientation</b>	Positive	<p>The new system will respect the way each individual lives, and will consider how to ensure the best support for them to be able to live their lives in the way they wish.</p> <p>Any training offered as part of the new system will need to reflect this, to ensure that all staff understand how important it is to respect the sexual orientation of any person who receives the service.</p>
<b>Religion or belief (or non-belief)</b>	Positive	<p>By getting to know the matters that are important to each individual who need the service the Community Resources Team will be able to identify opportunities within the community to satisfy those needs. For example, if a person was a keen chapel-goer, and due to illness could not attend, the Team and particularly the home carers, could make enquiries with links in the community to find support to satisfy this need.</p> <p>The aim is to get to know the individuals, and by so doing being able to find suitable community networks, and be considerate of a way of life that may be in keeping with religious beliefs.</p>
<b>Gender reassignment</b>	Positive	<p>It is likely that not many gender reassignment persons will reach the domiciliary care service in Gwynedd, however, it is important that all staff understand how to respond if an</p>

		individual was to reach the service. The training to be provided across the provider companies will reflect this.
<b>Pregnancy and maternity</b>	Not much/positive	It is unlikely that the service will deal with a pregnant person as it is older people who usually receive the service. However, a situation may arise if a young person has a physical impairment and is pregnant, and in such cases staff would be encouraged to support the individual's choice e.g. to breast feed, and they will be encouraged to work closely with the local health visitor.
<b>Marriage and civil partnership</b>	Positive	Whatever type of partnership the person who receives care is part of, carers will be encouraged to be considerate of any needs that may arise because of this. Again, getting to know the person is important and to respect needs, aspirations and every person's particular way of living, including the partner.

\* Delete as required

**3.2 The Council has a duty under the Equalities Act 2010 to contribute positively to a fairer society through advancing equality and good relations in its activities in the fields of age, gender, sexual orientation, religion, race, transgender, disability and pregnancy and maternity. The Council must give due attention to the way any change affects these duties.**

<b>General Duties of the Equality Act</b>	<b>Does it have an impact?</b>	<b>In what way? What is the evidence?</b>
<b>Abolishing illegal discrimination, harassment and victimisation</b>	Yes	Due to the nature of the current system the service offered is limited, based on a menu of specific tasks to be achieved within a specific time. It could be said that this may lead to discrimination due to the inflexibility of the current system as it does not treat everyone according to their need. The new system's aim is to identify what is important to each individual and to ensure that we tailor the service according to need to ensure that individuals can live their lives as they wish, and work towards being as independent as possible.
<b>Promoting equal opportunities</b>	Yes	Certainly the new system will promote equal opportunities by giving an opportunity to tailor the service to be what is important to each individual, rather than present a menu of tasks and expect individuals to be satisfied with whatever choice is available.

<b>Encouraging good relationships</b>	Yes	<p>Often, due to physical or mental ill health, older people will lose confidence and will withdraw from their community, losing social networks they used to be part of.</p> <p>The essence of this new model is to ensure that we get to understand what is important to individuals and find ways for them to continue or to return to be part of the community. This can raise the individual's spirit and confidence, reduce their requirements in the end, and assist them to be as independent as possible.</p>
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\* Delete as required

#### 4) Analysing the results

##### 4.1 Is the policy therefore likely to have a significant, positive impact on any of the equality characteristics or the General Duty? What is the reason for this?

The plan will have a significant impact on the lives of those people who receive home care in Gwynedd, usually vulnerable adults (but not always) over 65 years old.

Through the remodelling they will be able to receive support that will be tailored for them as individuals, focusing on their strengths, their family and community, to ensure that they can live life as they wish.

The aim is to promote independence, by raising confidence and focusing on what is important to the individual. Professionals in the local area will work together to assist the individual to achieve their wishes, drawing on family and community networks, and identifying any gaps in order to do this.

##### 4.2 Is the policy therefore likely to have a significant, negative impact on any of the equality characteristics or the General Duty? What is the reason for this?

In the short term, there may be some negative impact through remodelling.

It is proposed to move to a system where one home care provider operates per patch in the county.

At present, there are around 5 or 6 companies that provide in any given patch.

In the new model there would be 18 patches throughout the county, with the Council's internal provider service offering a service in half of these areas. We will contract the other half to external companies.

This may mean a change of provider or carers to some individuals within the patch. There will be no change until at least April 2020, and the change would be very gradual as we work through a transition period over time.

The aim over time is to ensure consistency in terms of care, terms and training, with more assurance and less staff changes.

#### 4.3 What should be done?

Choose one of the following:

Continue with the policy / service since it is robust	✓
Amend the policy to remove any barriers	
Suspend and delete the policy as the detrimental impacts are too great	
Continue with the policy as any detrimental impact can be justified	

#### 4.4 If you continue with the plan, what steps will you take to reduce or mitigate any negative impacts?

We will ensure that support will be provided to those individuals who may be affected during the transition period, through the social workers and health workers in each area.

Each case will be considered individually, and any changes will be introduced gradually, over time, giving an opportunity to shadow and discuss, and try to retain current carers as much as possible. For the most vulnerable cases every effort will be made to ensure stability in the care provided.

Those individuals who receive care through the Council's internal provision will remain within the service as long as possible to reduce the impact on service users.

#### 4.5 If you are not taking any further action to delete or reduce the negative impacts, explain why here.

Not relevant - see 4.4 above.

## **5) Monitoring**

### **5.1 What steps will you take to monitor the impact and effectiveness of the policy or service (action plan)?**

New measures are currently being developed to monitor the impact and efficiency of the service. The individual's experience will be central to these measures, and although some measures are required to satisfy national requirements, we will ensure that delivering what is important to each individual will be at the heart of the local measures.

As all home care companies will be part of the Community Resources Team locally, providing a very local overview and accountability for the home care work.