

Equality Relevance Assessment

1. Details of proposal							
Policy title				Self-directed support transitional funding			
Lead officer				Jennifer Scott – Head of Social Policy			
Date relevance considered				18 September 2013			
2. Does the council have control over how this policy will be implemented?							
YES 🗸	NO						
3. Do you have evidence or reason to believe that this policy will, or may potentially:							
General Duties					Impact on equality (Yes or No)		
Reduce or increase discrimination, victimisation or harassment against people covered by the equality protected characteristics?					Yes		
Reduce or incre people who sha and those who o	re an equalit		Yes				
Provide opportunity to improve good relations between those who share an equality protected characteristic and those who do not?							
4. Equality impact assessment required? (Two Yes above = full assessment necessary)							
YES 🗸	NO			,			
5. Decision rationale							
A full Equality Impact Assessment will be required in this instance. The delivery and implementation of the service redesign will have potential implications for service users and pose further barriers to equality groups' access to services.							

Equality Impact Assessment

1. Details of proposal

Details of others involved	Jennifer Scott – Head of Social Policy		
	Kenny Selbie – Equality Officer		
	Hannah Gardner – Equalities Analyst		
Date assessment conducted	17/12/14		

2. Aims of the proposed change to council policy or resources

The proposed change meets the requirements of the Social Care (Self-directed Support) (Scotland) Act. The Act requires councils to offer people the choice of how they wish to direct their care from the options of direct payment; the person directs the available support; the local authority arranges the support or; a mix of the above.

The aim is to provide transitional funding allocation for the implementation of Self-Directed Support. This investment is to ensure that the full range of options available to service users through Self-Directed Support will be available and is intended to support independent living, in terms of care and support options for people with disabilities and older people.

By enabling a more individual approach to care needs in the community, there should be a reduction in the need for primary and acute care for these groups, thus realising savings in the long-term.

3. What equality data, research or other evidence has been used to inform this assessment?

Evidence was collected from Scottish Government research and from the Individual Budget Evaluation Network (IBSEN).

4. Details of consultation and involvement

The assessment has been subject to scrutiny by representatives of the equality community forums through a specific focus on Delivering Better Outcomes projects as agreed by the council's Corporate Working Group on Equality.

5. Issues identified and 'protected characteristics' impact

(Covering: age; disability; gender; gender identity; pregnancy and maternity; race; religion or belief and sexual orientation equality)

Providing high quality care and support for older people is a fundamental principle of social justice and is an important hallmark of a caring and compassionate society. Demographic changes coupled with a decade of difficult public finances means this is one pf the biggest challenges facing Scotland. The Self-Directed Support programme provides a long term and strategic approach to delivering that change so that we can achieve our vision for future care for older people in West Lothian. The goal is to optimise the independence and wellbeing of older people at home or in a homely setting. This will involve a substantial shift in focus of care from institutional settings to care at home – because it is what people want and provides better value for money.

Overall, the proposed aims of this project could have a positive impact on older people, people with disabilities and also those with caring responsibilities, who are predominately women.

In 2014, 82% of at home clients receiving some sort of Social Care (includes Home Care, Telecare / Community alarm, Housing Support, Direct Payments and Meals services) were aged 65 years or older (Social Care Survey / Care Home Census). However research indicates that most older people (89.5%) do not receive 'formal' care in NHS continuing care, a care home or a home care service organised by social care agencies. For many this is because they do not need any assistance, while for others assistance is provided by family and friends, or organised and purchased privately. Even though the proportion of older people receiving this type of formal care rises as people age, it is still well under half of those aged over 85 years.

An important concern for older people is the increasing likelihood of unplanned or emergency hospital admission. An emergency admission to hospital may be the right course of action for someone who has a potentially serious or life threatening health problem that needs urgent specialist investigation or treatment in hospital. However for some older people an admission to hospital can be followed by complications such as a serious loss of confidence and confusion that prolong their stay, compromising their independence and ability to return home quickly. The probability that someone will be admitted to hospital increases with age and the time spent in hospital after admission is also longer on average with increasing age. Many admissions are absolutely necessary and cannot be avoided. Some however can be avoided - if the right preventative action is taken, and ensure that good effective alternatives are available in the community.

When asked as part of the Scottish Government consultation on the subject, respondents said that given the option, people want to stay in their own homes for as long as possible. Of all the questions asked, this one received a near unanimous response, and was tempered with "for as long as people feel safe"; or "for as long as a person doesn't feel too cut off".

Older people also want to see a whole systems shift towards a greater degree of personalisation. There is a need for service users to be much more involved in planning their own care and therefore needed to be better informed about their options and choices. Anticipatory care planning could not work unless older people were far more involved in decisions about their own care.

However, there is evidence that any positive benefits could be out-weighed by a negative experience if service users don't have access to appropriate support. This could arise from dealing with the extra responsibilities of Self-Directed Support or the impact on mental well-being from changes to long-standing support arrangements (*IBSEN Evaluation of the Individual Budget Pilot Programme, 2008*).

The Scottish Government review of Self-Directed Support found that it enhances quality of life by giving people greater independence and by helping to increase their social participation; therefore, the proposed changes are likely to improve the health and well-being of older adults, and those with disabilities living within West Lothian.

6. What measures are in place to monitor the actual impact following implementation?

The Delivering Better Outcomes projects are being monitored by the Modernisation Board during implementation and equality impact assessment is identified as a key enabler for projects.

7. Recommendation

Implement proposal with no amendments

] Implement proposal taking account of mitigating actions (as outlined below)

Reject proposal due to disproportionate impact on equality

8. Mitigating actions and additional outputs

Whilst it is acknowledged that the mental strain of additional responsibility could out-weigh the positive aspects of Self-Directed Support, the purpose of the council's budget measure is to give people the choice of whether or not to manage their own care provision and they can choose to continue receiving their care without the added responsibility if they so wish. In addition, support planning is a key area covered by the Scottish Government's National Strategy for Self-Directed Support.

• Equality impact assessment completed