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EQUALITY IMPACT ASSESSMENT (EQIA) FORM

Introduction to the EQIA process

A successful EQIA will look at 5 key areas:

1. Identify the Policy, Project, Service Reform or Budget Option to be assessed

A clear definition of what is being assessed and its aims

2. Gathering Evidence & Stakeholder Engagement

Collect data to evidence the type of barriers people face to accessing services (research, consultations, complaints and/or consult with equality groups)

3. Assessment & Differential Impacts

Reaching an informed decision on whether or not there is a differential impact on equality groups, and at what level

4. Outcomes, Action & Public Reporting

Develop an action plan to make changes where a negative impact has been assessed. Ensure that both the assessment outcomes and the actions taken to address negative impacts are publically reported

5. Monitoring, Evaluation & Review

Stating how you will monitor and evaluate the **Policy, Project, Service Reform or Budget Option** to ensure that you are continuing to achieve the expected outcomes for all groups.

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1. IDENTIFY THE POLICY, PROJECT, SERVICE REFORM OR BUDGET OPTION:

a) Name of the Policy, Project, Service Reform or Budget Option

Review of Access to Social Care Support

b) Reason for Change in Policy or Policy Development

This EQIA aligns with the IJB Financial Allocations and Budgets 2025-26 paper, being presented to IJB members in March 2025.

In [September 2024 the IJB approved the review of access to social care](#). The review did not propose any changes to existing relevant policies. It was to ensure that SDS resources are allocated to meet assessed need in a consistent way. It set out that the HSCP will update how we consistently apply our eligibility criteria; refresh our signposting to alternative supports within local communities; update our social work assessments to be strength-based and apply a more consistent allocation of resources where people's needs are equivalent.

As there is no change in policy an eqia is not required. However, this eqia has been undertaken on the implementation of the approach as good practice and to ensure equality impacts and opportunities for further mitigation are a core consideration throughout implementation.

c) List main outcome focus and supporting activities of the Policy, Project, Service Reform or Budget Option

Implementation Plan and Next Steps

Since approval of approach in September 2024, work has been underway to ensure appropriate tools and supports are available to support the implementation, including;

- Work is underway to redesign the Single Needs Assessment (SNA). The redesign will focus on a Trauma informed, strengths-based approach, with Carer support integrated throughout. The SNA is being considered as part of a suite of wider supporting documentation, with roll out planned for spring 2025.
- A Consultant has been commissioned for 9 months, to support the development and implementation plan. The consultant will support as part of the Maximising Independence transformation change programme the continued rollout of strength based practice and provide key evaluation and innovation to support the HSCP deliver on this programme.

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- Adjustments to the social work client information IT system.
- Adjustments to the HSCP's Resource Allocation Model (RAS). The RAS has been developed and is in line with client group and tailored to specific needs.
- Delivery of HSCP staff training. A programme board has been developed to support staff. This includes tiered training for all staff and plans are underway to begin roll out, with a rolling action plan.
- Transition guidelines have been developed, focussing on early interventions, to support transitions between care groups, in particular moving from children and families to adult services.
- SOP's will be updated by each client group, with support from a reference group, to ensure that staff and Team Leaders are supported during implementation and that consistent, fair and balanced application of resources are embedded throughout.

Together the above will enable following key aspects of implementation:

- A systematic comparison process based on the relevant amount designed to ensure that all things being equal two individuals with equivalent needs and circumstances will receive the same allocation of resources.
- These comparisons will principally be applied within rather than between care groups given the inherent differences between care group populations; for example, an adult with a mental health need may require different support to an adult with a learning disability or a frail older person.
- Any proposed allocation that represents an outlier to the comparative norm will be escalated for approval to a senior governance panel; e.g. in circumstances where the support budget recommended for a person is materially higher than the typical budget allocation for others with similar levels of presenting need.
- Crucially, no upper cap will be prescribed on the basis of this approach. The HSCP will continue to be bound by its statutory duty to provide the resources required to meet assessed need.
- If the service user does not agree with the assessment or allocated budget, concerns will be addressed on an individual basis, ensuring professional judgement is integral. Consideration of individual need and response to this is essential in ensuring that the correct guidance and services are available to meet a persons individual needs.
- All new referrals will be subject to this approach whilst all existing service users' annual reviews will take place in line with this approach.

An implementation plan continues to be under development and the EQIA will continue to be a key consideration and will be updated in line with the 6 monthly review process.

d) Name of officer completing assessment (signed and date)

Stephen Fitzpatrick, Jacqui McGoldrick, Karen Lockhart

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e) Assessment Verified by (signed and date)



11th March 2025

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2. GATHERING EVIDENCE & STAKEHOLDER ENGAGEMENT

The best approach to find out if a policy, etc is likely to impact positively or negatively on equality groups is to look at existing research, previous consultation recommendations, studies or consult with representatives of those groups. You should list below any data, consultations (previous relevant or future planned), or any relevant research or analysis that supports the Policy, Project, Service Reform or Budget Option being undertaken.

Please name any research, data, consultation or studies referred to for this assessment:	Please state if this reference refers to one or more of the protected characteristics:	Do you intend to set up your own consultation? If so, please list the main issues that you wish to address if the consultation is planned; or if consultation has been completed, please note the outcome(s) of consultation.
My Support, My Choice - Self Directed Support Scotland Self Directed Support Scotland (sdsscotland.org.uk)	Qualitative information on the experience of service users receiving Self Directed Support in Glasgow was gathered by Self Direct Support Scotland and The Alliance (September 2021 Report). While only a relatively small number of people were able to participate in this study (in the context of the c3500 people in Glasgow in receipt of SDS), it nonetheless identified areas for improvement. This included the timing, quality and accessibility of information received by some service users to inform choices and care planning decisions. Although there were areas for improvement identified, the engagement generally reported that SDS had improved their social care experience. My support my choice report	The My support my choice report identified specific actions relating to equality groups, including; • Support people with lived experience of mental health problems to access good quality information in a range of accessible and tailored formats about the different SDS options. • Blind and partially sighted people should be promptly provided with all information – in accessible formats – pertaining to their SDS, including Personal Outcome Plans, budget agreements, and decisions about their support package • work to dismantle communication barriers faced by older people. • To work to dismantle communication

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	My Support My Choice: Peoples Experiences of SDS and Social Care in Scotland also created Thematic Reports specifically for: • Women's Experience • People with mental Health Problem's Experiences • People with Learning Disabilities' Experiences • Black and Minority Ethnic Peoples' Experiences • Blind and Partially Sighted Peoples' Experiences This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report will be taken into considerations when developing the options for reducing spend of the service. • The Social Care (Self-directed Support) (Scotland) Act 2013 and detailed Practitioner Guidance • Glasgow City HSCP Self-directed Support: Framework of Standards Self-Evaluation Report • Staff Engagement on Self-Directed Support (SDS) Processes and Practice	barriers faced by Black and minority ethnic people and older people. People in specific ethnic minority communities would benefit from targeted initiatives on information. • Targeted initiatives are required to ensure that Black and minority ethnic people have access to culturally appropriate SDS/ social care • Action to distinguishes between the experiences of women as users of SDS, and women who are unpaid carers for friends and family members who use SDS (as important but distinct experiences). • Professionals should ensure that all unpaid carers are offered carers' assessments and have their rights explained to them. • Ensuring non-discriminatory attitudes and behaviour and a lack of gender bias in the support offered and provided to disabled parents is essential to ensure parity of support. • ensure that SDS budget cuts & tightened eligibility criteria do not negatively affect the physical & mental health of people on low incomes who access or are applying for SDS/social care.
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Case Studies	Case Studies were undertaken across the following groups: • Older Person • Adult with a Learning Disability • Adult with Alcohol-related Brain Damage	The case studies can be accessed at the <u>IJB papers for 15th May 2024.</u> Case studies were utilised in the development of the approach and plans for implementation.
National Standard Eligibility Criteria – Guidance, September 2009.	This guidance sets out the expectation that councils publish their eligibility criteria for access to social work services. The criteria consider both (a) the severity of the risks and (b) the urgency for intervention to respond to the risks. It is for relevant social work staff to consider how each individual's needs match against the eligibility criteria in terms of severity of risk and urgency for intervention.	The eligibility criteria prioritise risks into 4 bands: Critical, Substantial, Moderate and Low. The bands are described below. Critical Risk: Indicates that there are major risks to an individual's independent living or health and well-being likely to call for the immediate or imminent provision of social care services (high priority). Substantial Risk: Indicates that there are significant risks to an individual's independence or health and wellbeing likely to call for the immediate or imminent provision of social care services (high priority). Moderate Risk: Indicates that there are some risks to an individual's independence or health and wellbeing. These may call for the provision of some social care services managed and prioritised on an ongoing basis or they may simply be manageable over the foreseeable future without service provision, with appropriate arrangements for review. Low Risk: Indicates that there may be some quality of life issues, but low risks to an individual's independence or health and

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		wellbeing with very limited, if any, requirement for the provision of social care services. There may be some need for alternative support or advice and appropriate arrangements for review over the foreseeable future or longer term.
A communications and engagement plan is in place to support the review. Communication and engagement activity took place during the course of the review and there will be further activity to support implementation. The aims are to; 1. raise awareness and understanding of the review 2. raise awareness and understanding of proposed changes 3. inform key stakeholders on proposed changes and seek their views to inform implementation 4. support implementation of approved changes. Ongoing engagement with service users will be informed by standards set out within the HSCP's <u>Communications Strategy and IJB's Consultation and Engagement Good Practice Guidelines</u> to ensure information is provided in an accessible way and format appropriate to individuals' needs.	Ongoing communication and engagement activity includes the following main audiences and stakeholders: • HSCP staff • Third and independent sector organisations • Third and independent sector providers of social care and support services • Service users • Carers. Communications and engagement activity uses a number of channels/methods: • Face-to-face meetings and briefings • Online meetings and briefings • Email briefings. Communication and engagement activity will be informed by standards set out within the HSCP's Communications Strategy and IJB's Consultation and Engagement Good Practice Guidelines. We will engage with carers and supported persons organisations to understand the wider impacts of reductions in service capacity will have on services users and	The feedback from the communication and engagement activity will be used to inform the implementation plan. The key responses emerging from this initial engagement have been understanding of the challenges the HSCP faces, gratitude for the openness with which the HSCP has been willing to engage, concern about the potential impacts on vulnerable people and a desire to maintain the dialogue as the full implications of this approach are experienced in practice. There is significant ongoing engagement with HSCP staff. This approach was presented to around 1,200 staff at Team Leader grade and above over three sessions in late April and early May. Further implementation-focused sessions are planned for later in May and in June, whilst the strengths-based training programme for frontline social work staff is being rolled out over summer and autumn. This EQIA is being published at the developmental stage for this project. This will be updated and re-published to reflect comments and observations gathered during the engagement phase.

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	their families. Individuals will also have the opportunity as part of the assessment process to work through what these changes may mean for them and to raise concerns about how they will impact on their own individual circumstances and needs. Since approval of approach in September 2024, engagement has been ongoing, including; • In person information staff sessions. • Regular all staff group emails. • Development of a staff reference group. To date, this has included feedback on the SNA, where staff provided specific feedback on the need to draw out more detail on mental health needs as part of the assessment. This has been incorporated into the refreshed SNA. • Staff focus groups	There will also be further communication and engagement activity as appropriate to support implementation.
<u>Self-directed Support (Scotland) Act 2013</u>	The <u>Self-directed Support (Scotland) Act 2013</u> makes legislative provisions relating to the arranging of care and support to provide a range of choices to people for how they are provided with support.	
<u>Social Work (Scotland) Act 1968</u>	Council's have a duty under the <u>Social Work (Scotland) Act 1968</u> to assess a person's social care support needs and decide if they need to arrange any services. Any assistance should be based on an assessment of the person's social care	

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	support needs and should take account of their preferences where possible	
<u>Carers Eligibility Criteria 2022-2025 Glasgow City Health and Social Care Partnership (hscp.scot)</u>	Support available for Carer's both adults and Children. An adult carer who wishes to access support and information can be offered or request a Carer Support Plan. This will involve an assessment to determine the impact of the caring role and what can be done to support the adult carer as an equal partner. A Young carer who wishes to access support and information can be offered or request a Young Carer Statement. This will involve an assessment to determine the impact of the caring role on the child or young person and what could be done to alleviate the caring role. Not all carers who complete a Carer Support Plan or Young Carer Statement will have eligible needs, or a right to support. However, it is likely that they will still have needs which can be addressed <u>through universal, preventative services.</u>	

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3. ASSESSMENT & DIFFERENTIAL IMPACTS

Use the table below to provide some **narrative** where you think the **Policy, Project, Service Reform or Budget Option** has either a positive impact (contributes to promoting equality or improving relations within an equality group) or a negative impact (could disadvantage them) and note the reason for the change in policy or the reason for policy development, based on the evidence you have collated.

3a Potential Impacts

The review of access to social care highlighted that due to the nature of services delivered there is the potential for impact on equality groups. Where specific impacts were identified for particular protected characteristics, this has been identified in section 3c below.

- This approach applies to all future potential service users newly entering the social work system.
- It applies to existing service users that use self-direct support, to be applied via scheduled annual reviews.
- The anticipated average reduction in support packages is 2.5%. However, it is anticipated that the majority of existing service users will not experience any significant reduction in their current support resources.
- The main anticipated impact of this approach would be on service users at the very lowest and highest current levels of support. Those at the very lowest levels of support may be re-directed to community resources.
- The HSCP's Maximising Independence programme's work on the development of community hubs is intended to buttress those community assets, albeit it is acknowledged there will not be significant additional financial investment from the HSCP.
- Work has been ongoing over the past year to strengthen systematic early engagement with service users and their families in preparation for these transitions.

3b Mitigations

The potential impacts identified have been taken into consideration and steps taken to mitigate impact identified during the implementation process. This will apply across everyone applying for social care support. Where specific mitigations have been identified for particular protected characteristics, this has been identified in section 3c below.

- A proportionate assessment will be completed by Health and Social Care Connect. This will help to determine if the individual meets eligibility criteria, as set out above and to identify social care needs that are not already being met through their existing supports, including family, friends and carers.
- Health and Social Care Connect will provide information, advice, guidance and signposting to support those people not assessed as having a substantial or critical need but within the moderate or low risk categories. This will include information about alternative sources of support and how to access this support. People in these lower categories and Carers may qualify for help from a range of other services including welfare benefits, health, housing, transport and leisure. Local voluntary, community services and 3rd sector may be more appropriate and able to assist.
- If a person is not eligible for support at this time, this does not mean that they can't get help in the future and reassessment will be available.

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- Where there is a substantial or critical need, a full assessment will be undertaken. This will be co-produced and a supportive process involving the person with the identified needs and an allocated worker, to identify the areas of a person's life that require support to maximise their independence.
- If the individual needs help to make their views known, then it may be helpful to think about also having an advocate or an interpreter in attendance
- The assessment will consider social, physical, emotional and health needs will be considered including any cultural or religious needs that they have.
- This assessment will also consider other support or benefits that are available to the service user and their family/carer.
- All carers who request one will receive an assessment and information, advice and support relative to need.
- The assessment will include discussion with the person being assessed to identify their outcomes they want to achieve, and what kind of support works best for them.
- If the service user does not agree with the assessment or allocated budget, concerns will be addressed on an individual basis, ensuring professional judgement is integral. Consideration of individual need and response to this is essential in ensuring that the correct guidance and services are available to meet a persons individual needs. If unresolved following this then they will have the right to complain using our complaints procedure.
- Ongoing annual review will be in place to continue to determine a person's need, suitability and requirement.
- A review will be also be undertaken if there is a significant change to a supported person's needs or a request for a further assessment.
- The HSCP will monitor the impact of the access to social care support approach at the individual service user level via reviews and at the system level via a planned professional social work audit and a formal evaluation.

Steps will be taken to mitigate the impact of this change through the allocation of resources policy;

- the Council will develop an allocation system that is proportionate in relation to need which is fairly and equitably applied across the service user groups The RAS will be developed by the client group, to ensure it is tailored to meet specific client group needs.
- SOP's will be updated by each client group, with support from a reference group, to ensure that staff and Team Leaders are supported during implementation and that consistent, fair and balanced application of resources are embedded throughout.
- service users will access support based on their need and the available resource to support their needs
- there will be the application of appropriate benchmarked packages of care for each of the service user groups to ensure equity in the allocation of the resource and according to need
- service users will be supported to transition across care groups and their needs will be reassessed based on the benchmarked supports that are available to that care group. Transition guidelines have been developed, focussing on early interventions, to support transitions between care groups, in particular moving from children and families to adult services.
- we recognise that some people with complex needs may not align with standard policy, these will be supported with the application of professional judgement and robust annual review to ensure an enablement approach is adopted in relation to the person's support needs

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Section 3 c

Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
SEX/	Women	Mitigations will be in line with the wider population as outlined at section 3b. In addition, it is recognised that a disproportionate number of carers are female, potentially on low incomes. All carers who request one will receive an assessment and information, advice and support relative to need. Opportunities will therefore be taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies. As part of implementation, Carer support has been integrated throughout.	Impact across service user groups is outlined at section 3a. Self Directed Support Personalisation - 43% Direct Payments – 40% The My support my choice report identified specific actions relating to sex, including; - Action to distinguish between the experiences of women as users of SDS, and women who are unpaid carers for friends and family members who use SDS (as important but distinct experiences). - Professionals should ensure that all unpaid carers are offered carers' assessments and have their rights explained to them. - Ensuring non-discriminatory attitudes and behaviour and a lack of gender bias in the support offered and provided to disabled	It is also recognised that a disproportionate number of carers are female, potentially on low incomes. It is also recognised that carers are likely to experience significant financial challenges that may have a negative impact on their health and wellbeing. Care assessments and reviews will continue to be based on meeting an individual's assessed needs. As part of implementation, Carer support has been integrated throughout. Opportunities are taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies. It therefore follows that any potential reduction to a care package budget may have a greater impact on people on lower incomes who are unable to supplement their support* by other financial means if they wished to do so. *Beyond the level to which the individual has been assessed as requiring.

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			parents is essential to ensure parity of support. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report will be taken into considerations when developing the options for reducing spend of the service.	
	Men	Mitigations will be in line with the wider population as outlined at section 3b.	Impact across service user groups is outlined at section 3a. Self Directed Support Personalisation - 56% Direct Payments – 55% The My support my choice report identified specific actions relating to sex, including; - Professionals should ensure that all unpaid carers are offered carers' assessments and have their rights explained to them. - Ensuring non-discriminatory attitudes and behaviour and a lack	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			of gender bias in the support offered and provided to disabled parents is essential to ensure parity of support. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report will be taken into considerations when developing the options for reducing spend of the service.	
	Transgender	This policy applies equally across all service users. No disproportionate impact have been identified for Trans people at this stage. Mitigations will be in line with the wider population as outlined at section 3b.	Impact across service user groups is outlined at section 3a. There may be wider considerations for trans people in accessing care packages given a higher risk of social isolation and lack familial care support combined with possible apprehension of moving into care settings.	
RACE*	White	Mitigations will be in line with the wider population as outlined at section 3b.	Impact across service user groups is outlined at section 3a. The policy applies equally to persons	Opportunities are taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies.

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			of different race. Representation within the service is broadly in line with the 2011 census. Self Directed Support <u>Personalisation</u> White Scottish - 85.49% White Irish - 0.54% White Other British - 2.55% Any Other White Background - 1.01% <u>Direct Payments</u> White Scottish - 68.95% White Irish - 0.38% White Other British - 1.77% Any Other White Background - 1.01%	The My support my choice report identified an action to ensure that SDS budget cuts & tightened eligibility criteria do not negatively affect the physical & mental health of people on low incomes who access or are applying for SDS/social care. It therefore follows that any potential reduction to a care package budget may have a greater impact on people on lower incomes who are unable to supplement their support* by other financial means if they wished to do so. *Beyond the level to which the individual has been assessed as requiring.
<i>Further information on the breakdown below each of these headings, as per census, is available here.</i> <i>For example Asian includes Chinese, Pakistani and Indian</i>	Mixed or Multiple Ethnic Groups	Mitigations will be in line with the wider population as outlined at section 3b. In addition, it is acknowledged that within this protected characteristic, there may be individuals whose first language is not English and who require additional communication support Interpreter support and access to translated materials is available on request to support	Impact across service user groups is outlined at section 3a. The policy applies equally to persons of different race. However, it is recognised that Minority ethnic communities are more likely to be living in poverty compared to white people. Full details of mitigations and exceptions are as outlined above. Mixed or Multiple Ethnic Groups are not identified as being at higher risk above any other non-white groups. Self Directed Support <u>Personalisation</u>	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
etc		understanding and participation in the process.	Any Mixed Background - 0.57% <u>Direct Payments</u> Any Mixed Background -1.52% No disproportionate impact envisaged due to the proportion of service users, however, The My support my choice report identified specific actions relating to race, including; • To work to dismantle communication barriers faced by Black and minority ethnic people and older people. People in specific ethnic minority communities would benefit from targeted initiatives on information. • Targeted initiatives are required to ensure that Black and minority ethnic people have access to culturally appropriate SDS/ social care This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			will be taken into considerations when developing the options for reducing spend of the service.	
	Asian	Mitigations will be in line with the wider population as outlined at section 3b. In addition, it is acknowledged that within this protected characteristic, there may be individuals whose first language is not English and who require additional communication support Interpreter support and access to translated materials is available on request to support understanding and participation in the process.	Impact across service user groups is outlined at section 3a. The policy applies equally to persons of different race. However, it is recognised that Minority ethnic communities are more likely to be living in poverty compared to white people. Full details of mitigations and exceptions are as outlined above. Asian race groups are not identified as being at higher risk above any other non-white groups. Self Directed Support <u>Personalisation</u> Indian - 0.61% Pakistani - 2.76% Chinese - 0.57% Any Other Asian Background - 0.50% <u>Direct Payments</u> Indian - 0.25% Pakistani - 7.35% Chinese - 0.63% Any Other Asian Background - 0.89% No disproportionate impact envisaged due to the proportion of service users, however, The My support my choice	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			report identified specific actions relating to race, including; - To work to dismantle communication barriers faced by Black and minority ethnic people and older people. People in specific ethnic minority communities would benefit from targeted initiatives on information. - Targeted initiatives are required to ensure that Black and minority ethnic people have access to culturally appropriate SDS/ social care This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report will be taken into considerations when developing the options for reducing spend of the service.	
	African	Mitigations will be in line with the wider population as outlined at section 3b. In addition, it is	Impact across service user groups is outlined at section 3a. The policy applies equally to persons of different race. However, it is	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
		acknowledged that within this protected characteristic, there may be individuals whose first language is not English and who require additional communication support Interpreter support and access to translated materials is available on request to support understanding and participation in the process.	recognised that Minority ethnic communities are more likely to be living in poverty compared to white people. Full details of mitigations and exceptions are as outlined above. African race groups are not identified as being at higher risk above any other non-white groups. Self Directed Support <u>Personalisation</u> Black African - 0.97% <u>Direct Payments</u> Black African - 2.41% No disproportionate impact envisaged due to the proportion of service users, however, The My support my choice report identified specific actions relating to race, including; • To work to dismantle communication barriers faced by Black and minority ethnic people and older people. People in specific ethnic minority communities would benefit from targeted initiatives on information. • Targeted initiatives are required to ensure that Black and minority ethnic people have access to	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			culturally appropriate SDS/ social care This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report will be taken into considerations when developing the options for reducing spend of the service.	
	Caribbean or Black	Mitigations will be in line with the wider population as outlined at section 3b. In addition, it is acknowledged that within this protected characteristic, there may be individuals whose first language is not English and who require additional communication support Interpreter support and access to translated materials is available on request to support understanding and	Impact across service user groups is outlined at section 3a. The policy applies equally to persons of different race. However, it is recognised that Minority ethnic communities are more likely to be living in poverty compared to white people. Full details of mitigations and exceptions are as outlined above. Caribbean or Black race groups are not identified as being at higher risk above any other non-white groups. Self Directed Support <u>Personalisation</u>	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
		participation in the process.	Black Caribbean - 0.04% <u>Direct Payments</u> Black Caribbean - 0.13% No disproportionate impact envisaged due to the proportion of service users, however, The My support my choice report identified specific actions relating to race, including; • To work to dismantle communication barriers faced by Black and minority ethnic people and older people. People in specific ethnic minority communities would benefit from targeted initiatives on information. • Targeted initiatives are required to ensure that Black and minority ethnic people have access to culturally appropriate SDS/ social care This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report	

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			will be taken into considerations when developing the options for reducing spend of the service.	
	Other Ethnic Group	Mitigations will be in line with the wider population as outlined at section 3b. In addition, it is acknowledged that within this protected characteristic, there may be individuals whose first language is not English and who require additional communication support Interpreter support and access to translated materials is available on request to support understanding and participation in the process.	The policy applies equally to persons of different race. However, it is recognised that Minority ethnic communities are more likely to be living in poverty compared to white people. Full details of mitigations and exceptions are as outlined above. Other Ethnic Groups are not identified as being at higher risk above any other non-white groups. Self Directed Support <u>Personalisation</u> Any Other Ethnic Background - 0.83% <u>Direct Payments</u> Any Other Ethnic Background - 1.39% No disproportionate impact envisaged due to the proportion of service users, however, The My support my choice report identified specific actions relating to race, including; To work to dismantle communication barriers faced by Black and minority ethnic people and older people. People in specific ethnic minority communities would benefit from targeted initiatives on information.	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			Targeted initiatives are required to ensure that Black and minority ethnic people have access to culturally appropriate SDS/ social care This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report will be taken into considerations when developing the options for reducing spend of the service.	
DISABILITY	Physical disability	Mitigations will be in line with the wider population as outlined at section 3b. In addition, individual's assessment of need will continue to take into account any measures necessary to improve the physical accessibility of services.	Impact across service user groups is outlined at section 3a. It is recognised that due to the nature of the services provided, the review of access to Social Care Services is more likely to impact on Disabled People compared to nondisabled service users. It was highlighted in the review of access to social care that Disabled People are more likely to be impacted as the service is directly targeted at	Where there is a preference to remain at home, the Council will aim to support this utilising cost-effective measures. However, where a care package to remain at home would substantially exceed the affordability of building based long term care, the Council will need to consider other cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. We will continue to meet our statutory duty of care by ensuring service users are safe from harm There is a commitment to a Maximising Independence programme focused on

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			people who have been assessed as having a critical or substantial need for support. There is a commitment to a Maximising Independence programme focused on prevention, early intervention and redirection based on a risk-enabling, strengths and reablement-based system of assessment and support planning, which was deemed the appropriate strategic response and best route to maintaining a sustainable community health and social care system in the city. Service users will be encouraged and supported to shape their own care while mitigating risk by being provided with a range of choices for how they are provided with support. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. Self Directed Support 22% of Personalisation Service users are older people with a physical disability and 12% are under 65% with a physical disability. 12% of Direct Payment Service users	prevention, early intervention and redirection based on a risk-enabling, strengths and reablement-based system of assessment and support planning, which was deemed the appropriate strategic response and best route to maintaining a sustainable community health and social care system in the city. Service users will be encouraged and supported to shape their own care while mitigating risk by being provided with a range of choices for how they are provided with support. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. There is a direct correlation between disability and low income or reliance on state benefits. Accordingly there is a higher proportion of people with a disability living in areas of deprivation. Opportunities are taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies. The My support my choice report identified an action to ensure that SDS budget cuts & tightened eligibility criteria do not negatively affect the physical & mental health of people on low incomes who access or are applying for SDS/social care.

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			are older people with a physical disability and 12% are under 20% with a physical disability. A significant proportion of service users have identified themselves as having 1 or more disability or long term condition.	It therefore follows that any potential reduction to a care package budget may have a greater impact on people on lower incomes who are unable to supplement their support* by other financial means if they wished to do so. *Beyond the level to which the individual has been assessed as requiring.
<i>A definition of disability under the Equality Act 2010 is available here.</i>	Sensory Impairment (sight, hearing,)	Mitigations will be in line with the wider population as outlined at section 3b. In addition, language and format supports are available on request to support understanding and participation in the process.	Impact across service user groups is outlined at section 3a. It is recognised that due to the nature of the services provided, the review of access to Social Care Services is more likely to impact on Disabled People compared to nondisabled service users. it was highlighted in the review of access to social care that Disabled People are more likely to be impacted as the service is directly targeted at people who have been assessed as having a critical or substantial need for support There is a commitment to a Maximising Independence programme focused on prevention, early intervention and redirection based on a risk-enabling, strengths and reablement-based system of assessment and support planning, which was deemed the appropriate strategic response and best route to maintaining a sustainable community	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			health and social care system in the city. Service users will be encouraged and supported to shape their own care while mitigating risk by being provided with a range of choices for how they are provided with support. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. A significant proportion of service users have identified themselves as having 1 or more disability or long term condition. The My support my choice report identified specific actions relating to disability, including; • Blind and partially sighted people should be promptly provided with all information – in accessible formats – pertaining to their SDS, including Personal Outcome Plans, budget agreements, and decisions about their support package This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report will be taken into considerations when developing the options for reducing spend of the service.	
	Mental Health	Mitigations will be in line with the wider population as outlined at section 3b. Following feedback from the staff reference group, further mental health considerations have been included within the refreshed SNA.	Impact across service user groups is outlined at section 3a. It is recognised that due to the nature of the services provided, the review of access to Social Care Services is more likely to impact on Disabled People compared to nondisabled service users. This includes people accessing support due to a significant mental health condition. it was highlighted in the review of access to social care that Disabled People are more likely to be impacted as the service is directly targeted at people who have been assessed as having a critical or substantial need for support There is a commitment to a Maximising Independence programme focused on prevention, early intervention and redirection based on a risk-enabling, strengths and reablement-based system of assessment and support planning,	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			which was deemed the appropriate strategic response and best route to maintaining a sustainable community health and social care system in the city. Service users will be encouraged and supported to shape their own care while mitigating risk by being provided with a range of choices for how they are provided with support. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. Self Directed Support 15% of Personalisation Service users have identified Mental Health Needs. 3% of Direct Payment Service users have identified Mental Health Needs. A significant proportion of service users have identified themselves as having 1 or more disability or long term condition. The My support my choice report identified specific actions relating to disability, including; • Support people with lived	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			experience of mental health problems to access good quality information in a range of accessible and tailored formats about the different SDS options. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report will be taken into considerations when developing the options for reducing spend of the service.	
	Learning Disability	Mitigations will be in line with the wider population as outlined at section 3b. In addition, language and format supports are available on request to support understanding and participation in the process. At an individual basis Legal Guardians and Carers will be fully involved and it may be	Impact across service user groups is outlined at section 3a. It is recognised that due to the nature of the services provided, the review of access to Social Care Services is more likely to impact on Disabled People compared to nondisabled service users. it was highlighted in the review of access to social care that Disabled People are more likely to be impacted as the service is directly targeted at people who have been assessed as having a	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
		necessary to bring in Independent Advocacy Services to support understanding and participation, particularly those with a learning disability.	critical or substantial need for support There is a commitment to a Maximising Independence programme focused on prevention, early intervention and redirection based on a risk-enabling, strengths and reablement-based system of assessment and support planning, which was deemed the appropriate strategic response and best route to maintaining a sustainable community health and social care system in the city. Service users will be encouraged and supported to shape their own care while mitigating risk by being provided with a range of choices for how they are provided with support. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. Self Directed Support 47% of Personalisation Service users have learning disabilities. 31% of Direct Payment Service users have learning disabilities.	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			As people with learning disabilities make up the largest proportion of those accessing support services (47% and 31%), they are therefore more likely to be impacted by any efficiencies. A significant proportion of service users have identified themselves as having 1 or more disability or long term condition.	
LGBT	Lesbians	Mitigations will be in line with the wider population as outlined at section 3b. Self Directed Support No disproportionate impact envisaged due to the proportion of service users, however, The My support my choice report identified an action to undertake targeted work to ensure that LGBT+ people and people with lived experience of homelessness do not experience discrimination or inequality when accessing SDS.	Impact across service user groups is outlined at section 3a. There may be wider considerations for LGBTI+ people in accessing care packages given a higher risk of social isolation and lack familial care support combined with possible apprehension of moving into care settings.	Opportunities are taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies. The My support my choice report identified an action to ensure that SDS budget cuts & tightened eligibility criteria do not negatively affect the physical & mental health of people on low incomes who access or are applying for SDS/social care. It therefore follows that any potential reduction to a care package budget may have a greater impact on people on lower incomes who are unable to supplement their support* by other financial means if they wished to do so. *Beyond the level to which the individual has been assessed as requiring.
	Gay Men	Mitigations will be in line with the wider population	Impact across service user groups is outlined at section 3a.	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
		as outlined at section 3b. Self Directed Support No disproportionate impact envisaged due to the proportion of service users, however, The My support my choice report identified an action to undertake targeted work to ensure that LGBT+ people and people with lived experience of homelessness do not experience discrimination or inequality when accessing SDS.	There may be wider considerations for LGBTI+ people in accessing care packages given a higher risk of social isolation and lack familial care support combined with possible apprehension of moving into care settings.	
	Bisexual	Mitigations will be in line with the wider population as outlined at section 3b. Self Directed Support No disproportionate impact envisaged due to the proportion of service users, however, The My support my choice report identified an action to undertake targeted work to ensure that LGBT+ people and people with	Impact across service user groups is outlined at section 3a. There may be wider considerations for LGBTI+ people in accessing care packages given a higher risk of social isolation and lack familial care support combined with possible apprehension of moving into care settings.	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
		lived experience of homelessness do not experience discrimination or inequality when accessing SDS.		
AGE	Older People (60 +)	Mitigations will be in line with the wider population as outlined at section 3b. Eligibility criteria will apply to all adults and older people. Transition guidelines have been developed, focussing on early interventions, to support transitions between care groups.	Impact across service user groups is outlined at section 3a. Self Directed Support 26% of Personalisation Service users are aged 65+ 13% of Direct Payment Service users are aged 65+ The Service is delivered across all age groups and would be impacted by introducing a reduced provision. A waiting list for those with substantial need would directly impact on vulnerable service users and their ability to live well at home. The My support my choice report identified specific actions relating to age, including; work to dismantle communication barriers faced by older people. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-	Opportunities are taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies. The My support my choice report identified an action to ensure that SDS budget cuts & tightened eligibility criteria do not negatively affect the physical & mental health of people on low incomes who access or are applying for SDS/social care. It therefore follows that any potential reduction to a care package budget may have a greater impact on people on lower incomes who are unable to supplement their support* by other financial means if they wished to do so. *Beyond the level to which the individual has been assessed as requiring. Young people will also have access to advocacy support, in line with business as usual.

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
			effective alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report will be taken into considerations when developing the options for reducing spend of the service.	
	Younger People (16-25)	Mitigations will be in line with the wider population as outlined at section 3b. Eligibility criteria will apply to all adults and older people. In addition, it is recognised that a number of carers may be children and young people, potentially living in poverty. A Young carer who wishes to access support and information can be offered or request a Young Carer Statement. This will involve an assessment to determine the impact of the caring role on the child or young person and what could be done to alleviate the	Impact across service user groups is outlined at section 3a. Self Directed Support 70% of Personalisation Service users are aged 19 – 64 years 53% of Direct Payment Service users are aged 19 – 64 years The Service is delivered across all age groups and would be impacted by introducing a reduced provision. A waiting list for those with substantial need would directly impact on vulnerable service users and their ability to live well at home. The My support my choice report identified specific actions relating to age. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
		caring role. As part of implementation, Carer support has been integrated throughout. Young people will also have access to advocacy support, in line with business as usual. Transition guidelines have been developed, focussing on early interventions, to support transitions between care groups, in particular moving from children and families to adult services.	consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. The recommendations and priorities from the My Support My Choice report will be taken into considerations when developing the options for reducing spend of the service.	
	Children (0-16)	Mitigations will be in line with the wider population as outlined at section 3b. It is recognised that a number of carers may be children and young people, potentially living in poverty. A Young carer who wishes to access support and information can be offered or request a Young Carer Statement. This will involve an assessment to determine	Impact across service user groups is outlined at section 3a. It is also noted that 34% of service users are children and families. The My support my choice report identified specific actions relating to age. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources.	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
		the impact of the caring role on the child or young person and what could be done to alleviate the caring role. As part of implementation, Carer support has been integrated throughout. Young people will also have access to advocacy support, in line with business as usual. Transition guidelines have been developed, focussing on early interventions, to support transitions between care groups, in particular moving from children and families to adult services.	The recommendations and priorities from the My Support My Choice report will be taken into considerations when developing the options for reducing spend of the service.	
MARRIAGE & CIVIL PARTNERSHIP	Women	This policy applies equally across all service users. No disproportionate impact have been identified for Women, related to marriage and civil partnership at this stage. Mitigations will be in line with the wider population	Impact across service user groups is outlined at section 3a. This policy applies equally across all service users. No disproportionate impact have been identified for Women, related to marriage and civil partnership at this stage.	Opportunities are taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies. The My support my choice report identified an action to ensure that SDS budget cuts & tightened eligibility criteria do not negatively affect the physical & mental health of people on low incomes who access or are applying for SDS/social care.

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
		as outlined at section 3b.		It therefore follows that any potential reduction to a care package budget may have a greater impact on people on lower incomes who are unable to supplement their support* by other financial means if they wished to do so. *Beyond the level to which the individual has been assessed as requiring.
	Men	This policy applies equally across all service users. No disproportionate impact have been identified for Men, related to marriage and civil partnership at this stage. Mitigations will be in line with the wider population as outlined at section 3b.	Impact across service user groups is outlined at section 3a. This policy applies equally across all service users. No disproportionate impact have been identified for Men, related to marriage and civil partnership. at this stage.	
	Lesbians	This policy applies equally across all service users. No disproportionate impact have been identified for Lesbians, related to marriage and civil partnership, At this stage. Mitigations will be in line with the wider population as outlined at section 3b.	Impact across service user groups is outlined at section 3a. This policy applies equally across all service users. No disproportionate impact have been identified for Lesbians, related to marriage and civil partnership, at this stage.	
	Gay Men	This policy applies equally across all service users. No disproportionate impact have been identified for Gay Men, related to marriage and civil partnership, at this stage.	Impact across service user groups is outlined at section 3a. This policy applies equally across all service users. No disproportionate impact have been identified for Gay Men, related to marriage and civil partnership, at this stage.	

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
		Mitigations will be in line with the wider population as outlined at section 3b.		
PREGNANCY & MATERNITY	Women	This policy applies equally across all service users. No disproportionate impact have been identified for pregnancy and maternity at this stage. Mitigations will be in line with the wider population as outlined at section 3b.	Impact across service user groups is outlined at section 3a. This policy applies equally across all service users. No disproportionate impact have been identified for pregnancy and maternity at this stage.	Opportunities are taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies. The My support my choice report identified an action to ensure that SDS budget cuts & tightened eligibility criteria do not negatively affect the physical & mental health of people on low incomes who access or are applying for SDS/social care. It therefore follows that any potential reduction to a care package budget may have a greater impact on people on lower incomes who are unable to supplement their support* by other financial means if they wished to do so. *Beyond the level to which the individual has been assessed as requiring.
RELIGION & BELIEF** A list of religions used in the census is available here .	See note	This policy applies equally across all service users. No disproportionate impact have been identified for religious people at this stage. Mitigations will be in line with the wider population	Impact across service user groups is outlined at section 3a. This policy applies equally across all service users. No disproportionate impact have been identified for religious people at this stage.	Opportunities are taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies. The My support my choice report identified an action to ensure that SDS budget cuts & tightened eligibility criteria do not negatively affect the physical & mental health of people on low incomes who access or are applying for SDS/social care.

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Protected Characteristic	Specific Characteristics	Positive Impact (it could benefit an equality group)	Negative Impact – (it could disadvantage an equality group)	Socio Economic / Human Rights Impacts
		as outlined at section 3b.		It therefore follows that any potential reduction to a care package budget may have a greater impact on people on lower incomes who are unable to supplement their support* by other financial means if they wished to do so. *Beyond the level to which the individual has been assessed as requiring.

* For reasons of brevity race is not an exhaustive list, and therefore please feel free to augment the list above where appropriate; to reflect the complexity of other racial identities.

** There are too many faith groups to provide a list, therefore, please input the faith group e.g. Muslims, Buddhists, Jews, Christians, Hindus, etc. Consider the different faith groups individually when considering positive or negative impacts. A list of religions used in the census is available [here](#).

Summary of Protected Characteristics Most Impacted

The review of access to social care highlighted that due to the nature of services delivered there is the potential for impact on equality groups. Where specific impacts were identified for particular protected characteristics, this has been identified in section 3c below.

- This approach would apply to all future potential service users newly entering the social work system.
- It applies to existing service users that use self-direct support, to be applied via scheduled annual reviews.
- The anticipated average reduction in support packages is 2.5%. However, it is anticipated that the majority of existing service users will not experience any significant reduction in their current support resources.
- The main anticipated impact of this approach would be on service users at the very lowest and highest current levels of support. Those at the very lowest levels of support may be re-directed to community resources.
- The HSCP's Maximising Independence programme's work on the development of community hubs is intended to buttress those community assets, albeit it is acknowledged there will not be significant additional financial investment from the

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HSCP.

- Work has been ongoing over the past year to strengthen systematic early engagement with service users and their families in preparation for these transitions.

Steps will be taken to mitigate the impact of this change through the assessment process. This will apply across everyone applying for social care support. This is detailed at section 3c.

In addition, there are further mitigations for specific groups, where a need has been identified. Including;

- It is recognised that a disproportionate number of carers are female, potentially on low incomes. All carers who request one will receive an assessment and information, advice and support relative to need. Opportunities will therefore be taken to explore if people may be entitled to other benefits or income, with referrals made to

appropriate agencies. As part of implementation, Carer support has been integrated throughout.

~~The review of access to social care has highlighted that individuals for whom the language is not English face a higher potential reduction to a care package and support may have a greater impact on people on lower incomes who are unable to supplement support through understanding and participation in the process so. *Beyond the level to which the individual has been assessed as requiring support to format supports are available on request to support understanding and participation in the process.~~

- Legal Guardians and Carers will be fully involved and it may be necessary to bring in Independent Advocacy Opportunities are taken to explore if people may be entitled to other benefits or income, with referrals made to appropriate agencies
- Individuals assessment of need will continue to take into account any measures necessary to improve the physical accessibility of services.

- It is recognised that a number of carers may be children and young people, potentially living in poverty. A Young carer who wishes to access support and information can be offered or request a Young Carer Statement. This will involve an assessment to determine the impact of the caring role on the child or young person and what could be done to alleviate the caring role. As part of implementation, Carer support has been integrated throughout.
- Young people will also have access to advocacy support, in line with business as usual.
- Following feedback from the staff reference group, further mental health considerations have been included within the refreshed SNA.
- Transition guidelines have been developed, focussing on early interventions, to support transitions between care groups, in particular moving from children and families to adult services.

Where there is a preference to remain at home, the Council will aim to support this utilising cost-effective measures.

~~However, where a care package to remain at home would substantially exceed the affordability of building based long term care, the Council will need to consider other cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources. We will continue to meet our statutory duty of care by ensuring service users are safe from harm~~

Summary of
Socio
Economic
Impacts

Summary of
Human
Rights
Impacts

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There is a commitment to a Maximising Independence programme focused on prevention, early intervention and redirection based on a risk-enabling, strengths and reablement-based system of assessment and support planning, which was deemed the appropriate strategic response and best route to maintaining a sustainable community health and social care system in the city. Service users will be encouraged and supported to shape their own care while mitigating risk by being provided with a range of choices for how they are provided with support. This approach will consider and support the equity principles of this policy the HSCP will be duty bound to consider other, more cost-effective alternatives to ensure we deliver best value through fair and equitable use of resources.

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4. OUTCOMES, ACTION & PUBLIC REPORTING

EQIA Outcome	Yes /No Or / Not At This Stage
Was a significant level of negative impact arising from the project, policy or strategy identified?	Since approval of approach in September 2024, work has been underway to ensure appropriate tools and supports are available to support the implementation, including identifying any further opportunities for mitigating action.
Does the project, policy or strategy require to be amended to have a positive impact?	Since approval of approach in September 2024, work has been underway to ensure appropriate tools and supports are available to support the implementation, including identifying any further opportunities for mitigating action.
Does a Full Impact Assessment need to be undertaken?	The assessment will continue to be reviewed and updated in line with

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	the development of the implementation plan. An updated eqia will be published in line with this process.
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Actions: Next Steps (i.e. is there a strategic group that can monitor any future actions)		
Further Action Required/ Action To Be Undertaken	Lead Officer and/or Lead Strategic Group	Timescale for Resolution of Negative Impact (s) / Delivery of Positive Impact (s)
A working group has been established with chair and attendees agreed, to progress the implementation. Planned activity includes; • TL support, including 2 days asset strength based training • TL session • Roll out of the new SNA/RAS	Working Group	4th and 18th March 25th March Mid to end April

Public Reporting

All completed EQIA's are required to be publically available on the [Council EQIA Webpage](#) once they have been signed off by the relevant manager, and/or Strategic, Policy, or Operational Group. (See [EQIA Guidance](#): Pgs. 11-12)

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5. MONITORING OUTCOMES, EVALUATION & REVIEW

The Equalities Impact Assessment (EQIA) is not an end in itself but the start of a continuous monitoring and review process. The relevant Strategic, Policy, or Operational Group responsible for the delivery of the Policy, Project, Service Reform or Budget Option, is also responsible for monitoring and reviewing the EQIA and any actions that may have been take to mitigate impacts.

Individual services are responsible for conducting the impact assessment for their area, staff from **Corporate Strategic Policy and Planning** will be available to provide support and guidance.

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Legislation

Equality Act (2010) - the Equality Act 2010 (Specific Duties) Scotland Regulations 2012

The 2010 Act consolidated previous equalities legislation to protect people from discrimination on grounds of:

- race
- sex
- being a transsexual person (transsexuality is where someone has changed, is changing or has proposed changing their sex – called ‘gender reassignment’ in law)
- sexual orientation (whether being lesbian, gay, bisexual or heterosexual)
- disability (or because of something connected with their disability)
- religion or belief
- having just had a baby or being pregnant
- being married or in a civil partnership, and
- age.

Further information: [Equality Act Guidance](#)

As noted the Equality Act 2010 simplifies the current laws and puts them all together in one piece of legislation. In addition the **Specific Duties (Scotland Regulations 2012)** require local authorities to do the following to enable better performance of the general equality duty:

- report progress on mainstreaming the general equality duty
- publish equality outcomes and report progress in meeting those
- impact assess new or revised policies and practices as well as making arrangements to review existing policies and practices
- gather, use and publish employee information
- publish gender pay gap information and an equal pay statement
- consider adding equality award criteria and contract conditions in public procurement exercises.

Further information: [Understanding Scottish Specific Public Sector Equality Duties](#)

Fairer Scotland Duty

Authorities should also consider Socio-Economic Impacts where appropriate. Further information: [Fairer Scotland Duty Interim Guidance](#)

Enforcement

Judicial review of an authority can be taken by any person, including the Equality and Human Rights Commission (EHRC) or a group of people, with an interest, in respect of alleged failure to comply with the general equality duty. Only the EHRC can enforce the specific duties. A failure to comply with the specific duties may however be used as evidence of a failure to comply with the general duty.

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