



# Equality Impact Assessment Record Form 2012-16

This form is to be used for recording the Equality Impact Assessment (EIA) of Council activities. It should be used in conjunction with the guidance on carrying out EIA in **Annex 2** of the Equality Scheme. The activities that may be subject to EIA are set out in the guidance.

EIA is particularly important in supporting the Council to make fair decisions. The Public Sector Equality Duty requires the Council to have regard to the need to eliminate discrimination, harassment and victimisation, advance equality of opportunity and foster good relations.

Using this form will help Council officers to carry out EIA in an effective and transparent way and provide decision-makers with full information on the potential impact of their decisions. The purpose is to avoid inadvertent disadvantage or discrimination resulting from decisions.

EIA is not a fixed process – it will vary according to the scale and type of activity. The form and guidance are designed to cover all eventualities. Officers should not be discouraged by the form, but should use their discretion in using it flexibly according to the activity they are assessing.

EIA does not happen at a single point in time. It is an ongoing and integral part of the development of the activity or proposal. This EIA template should be kept open and live as a planning document, and updated as the activity or proposal progresses.

## Section 1 – Service Details and Summary of EIA Activity

<b>Title of activity:</b>	Tender for Carers Support Services for Young Carers, Parent Carers and Adults caring for Adults
<b>Lead Officer responsible for this EIA:</b>	Lisa Holdsworth
<b>Telephone:</b>	Ext 2210
<b>Service Group:</b>	Commissioning and Development
<b>Service or Team:</b>	People Commissioning
<b>Assistant Director accountable for this EIA</b>	Chris Sivers
<b>Who else will be involved in carrying out the EIA:</b>	Carers Support Services Tender Project Group – Anita Hamer, Warren Tweed, Ben Smith, Andrea Patterson, Alison Wolstenholme, <b>with advice from</b> Deena Wallace and Helen Watson, DBC Legal and the Corporate Equalities Group.

<b>What stage has the EIA reached?</b>		
This table provides a 'cover note' of progress to be maintained as the EIA is developed over time.		
Stage categories 1-3 listed below refer to the funnel model. Note the stage reached and any consultation or engagement carried out. Simple activities may not need all these stages. Provide details of population/individuals affected in Section 2		
Stage	Date	Summary of position
<b>Stage 1: Initial Officer Assessment. Whole Population likely to be affected identified</b>	25.10.12	<i>Whole population, e.g. whole borough, a neighbourhood, a whole demographic group such as older people</i> All groups of carers in DBC, both existing and those who may become carers in the future
<b>Stage 2: Further Assessment. Target Population likely to be affected identified</b>	25.10.12	<i>Target population, e.g. rural communities, community centre users in neighbourhood, older users of particular services</i> Carers currently registered with DAD Carers Support Service; carers receiving support from the Young Adult Carers Service and the YMCA Young Carers Project. Carers known to DBC Adult Social Care (may overlap with those registered with DAD). Parents of disabled children.
<b>Stage 3: Further Assessment. Individuals likely to be affected identified</b>	25.10. 12	<i>Individuals, e.g. disabled users of a particular rural bus service, mother and toddler group within community centre, older people who will lose service</i> Those most affected are potentially those who currently receive support from any of the Support Service providers. Newly identified carers may also be affected, plus people who

APPENDIX 3

		are carers but have not yet been identified/have not identified themselves as carers. Parents of disabled children.
<b>Stage 4: Analysis of Findings</b>		
<b>Stage 5: Sign-Off</b>		
<b>Stage 6: Reporting and Action Planning</b>		

## Section 2 – The Activity and Supporting Information

<b>Details of the activity (including the main purpose and aims)</b>
<p>The activity being considered is the tender for Carers Support Services in Darlington.</p> <p>Darlington Borough Council currently commissions 2 Carers Support Services jointly with Darlington Primary Care Trust. The Carers Support Service is for adults caring for adults (with approximately 1100 on the Carers Register) and the Young Carers Project supports approx 66 young carers up to the age of 16.</p> <p>In addition, a specialist service for Young Adult Carers aged 16-25 (supporting approx 61) has been funded on a non recurrent basis with funding from the shadow Clinical Commissioning Group (CCG). This funding was only available to 31.3.13 and will cease on this date. The CCG also funded on a non recurrent basis an additional 18 ½ hours from the Carers Support Service, plus additional activities for Young Carers. Funding for each of these additional service elements was also only available to 31.3.13 and will cease on this date.</p> <p>The Council and the PCT are currently reviewing the specifications and funding for the Carers Support Service and the Young Carers Project in order to be able to go out to tender in January 2013 and to re-provide them from 1.4.13. It is anticipated that the revised specifications will include a requirement for both services to support Young Adult Carers. We are also considering changing the remit of the Carers Support Service to include a requirement to support parents of disabled children under the age of 18.</p> <p>It is possible that as well as including these additional requirements that the overall levels of funding for these services may decrease.</p> <p>This may mean that:</p> <ul style="list-style-type: none"> <li>• the number of hours of support provided is reduced</li> <li>• existing staff roles could be changed or removed</li> <li>• the amount of support provided could be reduced or stopped</li> <li>• the services will cover a wider remit with more groups of carers able to receive support</li> </ul> <p>Different groups of carers may experience these effects differently.</p>
<p><b>Who will be affected by the activity?</b></p> <p><b>See the guidance on carrying out equality impact assessment within the Equality Scheme 2012-16. Provide details of the groups and numbers of people affected below, updating the table as the EIA develops and the understanding of who will be affected emerges in more detail.</b></p>
<p><b>Whole population</b></p>
<p>The 2001 census identified 10,064 carers aged 16+ in Darlington, 2330 of whom were providing 50+ hours care per week; 178 young carers aged 15 and under were also identified.</p> <p>In 2011, the number of carers aged 16+ had increased to 11,048, 2758 of whom were providing care for 50 or more hours per week. Census data in respect of young carers is not currently available.</p> <p>Research published by the BBC in November 2010 estimates more than four times as many young people act as carers compared with the previous official estimate of 175,000 in the 2001 census. The National Young Carers' Coalition, which represents such organisations as The Children's Society, Barnardo's and the Disabled Parents Network, stated that the figure of 700,000 was probably an underestimate of actual numbers of young carers. If applied to the 2001 Darlington census figures, this would suggest that there are likely to be at least 712 young carers aged 15 and under.</p>

The Single Needs Assessment 2010-11 indicates that there are 700 disabled children aged 0-19 in Darlington, 300 of whom have impairments which significantly impact on their lives, 50 – 90 with severe impairments which restrict both the children and their family's opportunity to live an ordinary life.

### **Target population**

In August 2012, there were 1115 carers on the carers register held by DAD Carers Support Service and 204 new carers had come onto the register between 1.4.11 and 31.3.12.

61 carers were known to the Young Adult Carers Service and 66 young carers were receiving support from the Young Carers Project.

A total of 117 young carers had been supported by the YMCA Young Carers Project from 1.4.11 to August 2012.

In November 2012 there were 170 carers on the Parent Carers Forum mailing list held by DAD.

### **Individuals**

Those carers currently known to the 3 Support Services.

### **What data, research and other evidence or information is available which is relevant to the EIA?**

Research undertaken by Carers UK in December 2006 indicates that 65% of people with a caring responsibility did not identify themselves as a carer in the first year of caring and that every year, 37% of the population will have started caring that year and a similar proportion ceased (Based on the number of carers in Darlington at that time, this was 3724 carers).

This means that there is a constant need to identify and support new carers.

**Check: before proceeding to the officer assessment, have you obtained all the data and information that is currently available?**

## Section 3: Officer Assessment

Use this table to record your views on potential impact on Protected Characteristics. As the activity and the assessment develop your views may change – record them here.  
It is important to be searching and honest about this – many Council activities are planned to be of positive benefit to identified target groups but can often have the potential for inadvertent effects on other groups.

Protected Characteristics	Potential Impact Positive/Negative/ Not Applicable			Potential level of impact				Summary of Impact
	P	N						
<b>Age</b>	P	N			M			<p>The services will be available to carers of all ages but the level of support available and the scale of the potential impacts will depend on the funding decisions made by the CCG.</p> <p>The inclusion of parent carers in the new specification will potentially increase the number of carers supported in younger age groups. This should have a positive impact on these carers but may have a negative impact on older carers, who are currently the majority of those supported.</p> <p>If a specific young adult carers service is not funded, this is likely to have a negative impact on young adult carers.</p> <p>If young adult carers are included in the service to support adults caring for adults and the parents of disabled children, this will further increase the number of carers to be supported and lower the age profile of the service further.</p> <p>Young adult carers aged 16 &amp; 17 will need to receive support from the young carers service, which will potentially reduce the support available to young carers.</p>
<b>Race</b>	P					L		<p>The services will be available to carers of all races. However, carers from BME communities are an under-represented group. The spec includes a requirement that the service is responsive to the needs of under-represented groups and this will be monitored on an ongoing basis.</p>
<b>Sex</b>	P					L		<p>The services will be equally available.</p>

<b>Gender Reassignment</b>	P					L		The services will be equally available. The spec includes a requirement that the service is responsive to the needs of under-represented groups and this will be monitored on an ongoing basis.
<b>Disability (summary of detail on next page)</b>	P					L		The services will be equally available to carers with all impairments.
<b>Religion or belief</b>	P					L		The services will be equally available.
<b>Sexual Orientation</b>	P					L		The services will be equally available. The spec includes a requirement that the service is responsive to the needs of under-represented groups and this will be monitored on an ongoing basis.
<b>Pregnancy or maternity</b>	P					L		The services will be equally available.
<b>Marriage/ Civil Partnership</b>	P					L		The services will be equally available. The spec includes a requirement that the service is responsive to the needs of under-represented groups.

## Section 3: Officer Assessment - continued

The Council must have due regard to disabled people's impairments when making decisions about 'activities'. This list is provided only as a starting point to assist officers with the assessment process. It is important to remember that people with similar impairments may in reality experience completely different impacts. Consider the potential impacts and summarise in the Disability section on the previous page. Officers should consider how the 'activity' may affect a disabled person.

<b>Mobility Impairment</b>	P					L		The services will be equally available to carers with all impairments.
<b>Visual impairment</b>	P					L		The services will be equally available to carers with all impairments.
<b>Hearing impairment</b>	P					L		The services will be equally available to carers with all impairments.
<b>Learning Disability</b>	P					L		The services will be equally available to carers with all impairments.
<b>Mental Health</b>	P					L		The services will be equally available to carers with all impairments.
<b>Long Term Limiting Illness</b>	P					L		The services will be equally available to carers with all impairments.
<b>Multiple Impairments</b>	P					L		The services will be equally available to carers with all impairments.
<b>Other – Specify Carers</b>	P				M			The services will be equally available to carers with all impairments.  However there may be differential impacts for different groups of carers depending on the funding decisions made.

### Cumulative Impacts

The officer responsible for this EIA should seek input from the Corporate Equalities Group on the potential for this activity to combine with other recent, current or proposed activities, both Council and in the external environment, to result in more severe impacts on people with Protected Characteristics through their cumulative effects. The Corporate Equalities Group will advise on the content for this



<b>section of the EIA.</b>	
<b>Change activities</b>	<b>Potential cumulative impacts</b>
<p>Previous changes to the Young Carers Project – from 1.4.11 An EIA was completed at this time.</p>	<p>These were a funding reduction from DBC and a change in specification to refocus the service. Additional funding for activities was obtained from the PCT. This may no longer be available.</p>
<p>Previous funding reduction of £50,000 for carers support services. A service review and EIA were completed at this time.</p>	<p>This involved the redundancy of 1 full time DBC employed Carers Support Worker Mental Health and a 30 hour Carers Support Worker Learning Disabilities from 1.9.12, plus a £5000 funding reduction for the Carers Support Service from 2013/14. The Carers Support Service are required to support all adult carers caring for adults.</p>
<p>FACs changes &amp; other changes within Adult Social Care (charging etc)</p>	<p>All of which potentially affect carers, either financially or through the need to provide increased levels of support to the people they care for.</p>
<p>Welfare benefit reforms Eg Social Fund, changes to DLA etc</p>	<p>All of which potentially affect carers.</p>

## Section 4: Engagement Decision

The decision about who to engage with, and how and when to engage, is the key to effective EIA. Please see Annex 2 of the Equality Scheme for guidance on the engagement decision.

Is engagement with affected people with Protected Characteristics required, now or during the further development of the activity?	Yes
<p>If YES, proceed to the next section.</p> <p>If NO, briefly summarise below the reasons why you have reached this conclusion.</p>	
<div style="border: 1px solid black; height: 179px;"></div>	

If you have come to the conclusion that engagement is not required, seek ratification from the Corporate Equalities Group through your service Equalities Co-ordinator.

If engagement is not required but the officer assessment has identified changes that should be made to the activity, please complete Sections 7 and 8. If not the assessment can be signed-off at Section 9.

Any reports to decision-makers during the development of the activity, for example feasibility or options appraisal reports, should include content on the latest thinking and findings of the EIA even though, like the activity, further development of the EIA may be required before final reporting.

The findings of the officer assessment should be included in any reports to decision-makers. These may be feasibility or options appraisal reports where the activity is at an early stage of development, but it is essential that any equality findings are taken into account in formal decisions at all stages of development of the activity.

## Section 5 – Involvement and Engagement Planning

<b>Has the assessment shown that the activity will treat any groups of people with Protected Characteristics differently from other people? Yes/No</b>
<p><b>If yes, please state which groups and how</b></p> <p>The activity will treat carers differently, as the services are specialist carers support services. The activity won't treat groups of people with protected characteristics differently.</p>
<b>Will the differential treatment advance equality for people with Protected Characteristics? Yes/No</b>
<p><b>If yes, please state which groups and how</b></p> <p>The services will advance equality for carers and the people they care for.</p>
<b>Will the differential treatment cause or increase disadvantage for people with Protected Characteristics? Yes/No</b>
<p><b>If yes, please state which groups and how</b></p> <p>No.</p>

**From the above, prepare a simple plan using the template overleaf for involving and engaging with the organisations, groups and individuals likely to be affected by the activity.**

**There may be several stages of involvement and engagement, particularly for more complex activities. Initially it may be possible to identify and engage only with stakeholder and representative organisations for the people with Protected Characteristics who may be affected. Further development of the activity may be required before the individuals who will be affected can be identified.**

**The Involvement and Engagement Plan should evolve accordingly, with new engagement proposals added as they are identified.**

<b>Involvement and Engagement Plan</b>			
Which organisations, groups and individuals do you need to involve or engage and how?			
<b>Date of plan entry</b>	<b>Organisation, Group or Individuals</b>	<b>Date of event or activity</b>	<b>Type of activity – venue, channels, method and staffing</b>
14.11.12	Carers known to DAD Carers Support Service:  Random sample of carers on the Carers Register held by DAD, <b>plus</b> all carers attending groups, <b>plus</b> all carers currently receiving 1:1 support	26.11.12	Letter to be sent out to individual carers enclosing EIA questionnaire and offering meeting dates (11.12.12 and 14.12.12)  Information posted on DAD website  Staff requested to discuss with carers with whom they are in contact  Information sent out to all carers for whom DAD has an email address
14.11.12	Young Carers and Young Adult Carers	26.11.12  5.12.12	Letter enclosing EIA questionnaire and offering meeting dates (11.12.12 and 14.12.12) sent out to a sample of young carers and young adult carers  Information posted on YMCA website/social media  Attended Young Adult Carers Group meeting
14.11.12	Carers known to Darlington Parent Carer Forum facilitated by DAD	26.11.12  10.12.12	Letter enclosing EIA questionnaire and offering meeting dates (11.12.12 and 14.12.12) sent out to a sample of parent carers  Attended Parent Carer Forum meeting
14.11.12	Whole population – unknown and potential carers		Information posted on the DBC website
14.11.12	Members of Carers Strategy Steering Group and those who receive minutes (staff and carers)	11.12.12	Discussion at Carers' Strategy Steering Group meeting on 11.12.12

### **Engagement to identify impacts works best in face-to-face and small group settings**

## Section 6: Engagement Findings

- Responses were received from both individual carers and through the Group discussions.
- The responses were not collected or collated by protected characteristics.
- The majority of responses were from carers aged under 65. This included parents of disabled children, young carers and young adult carers.
- Positive impacts were identified from continuation of Carers Support Services and negative impacts from ceasing or reducing the support available. Examples of each are given in the table below.
- A formal response was also received from DAD noting that the impact assessment letter sent out stated that 'overall levels of funding for these services may decrease'. However a Town Crier article stated that 'We are not planning to make any significant changes to our budget for 2013-14 that will have a direct impact on the public...'. The DAD letter went on to state 'Carers reading this article may understand from this that carers services will not be cut or diluted in 2013-14, and this in turn may prevent them from reflecting on potential impacts a service reduction would have on their lives.' It also states that 'Recent changes mean that more disabled/older people going through the assessment and review procedures are being told they no longer meet the eligibility criteria for services. This has a negative impact on carers. Providing carers services can mitigate against this; however if carers services are reduced or diluted the negative impacts cumulate'.

Date/summary of engagement carried out	Summary of impacts identified
	<b>Positive Impacts from current Carers Support Services</b>
26.11.12 – 11.1.13	Its good to know that there is support if you need it and a listening ear.
	Support groups are very important to us carers.
	It is important for us to meet with other carers who are going through the same.
	Bringing parent carers under the remit of the carer support service makes sense. It will allow us the same level of service provided to adult carers. But how can this possibly be provided to any sort of adequate level with no increase in resources. I see no positives if the already limited funding available is further reduced.
	(Re Young Adult Carers Service) Learned about other things eg National Citizens Service and have been offered a job that wouldn't have been offered.
	(Re Young Adult Carers Service) Had no support until turned 18. Got to know people I would never have associated with caring. Get support that you wouldn't get if not coming here. Helps with a lot of things.
	(Re Young Adult Carers Service) Helps to choose what you want to do in life.
	<b>Negative Impacts</b>
26.11.12 – 11.1.13	Bringing parent carers under the remit of the carer support service makes sense. It will allow us the same level of service provided to adult carers. But how can this possibly be provided to any sort of adequate level with no increase in resources. I see no positives if the already limited funding available is further reduced.
	If the service is stopped or reduced it will have a dramatic effect on carers like myself. As carers can often feel very isolated with no family support, so we need as much support as we can get.
	Potentially longer wait from referral to being contacted by the service. Many people first make the contact when in crisis or at breaking point.
	Service will be too diluted if expectation is to pick up wider remit with less

	resource.
	Unsure. If hours are reduced or support is reduced or stopped, I believe it would be detrimental to me.
	Carers Support Service will potentially not be able to find the sort of support I have received up to now (eg timely access to staff for specific issues)
	Number of carers and pressure on carers is increasing. How will reducing hours of support have anything but a negative effect?
	(Re Young Adult Carers Service) Without this group it wouldn't be the same. Seeing each other and talking about problems. We grow close and you separate us.
	(Re Young Adult Carers Service) Staff at the adult carers support service don't connect with young people. Risk losing the current focus. Would there be a dedicated young person support worker?

**Drawing on the engagement findings and your understanding of the effects of the activity, indicate how it will contribute, if at all, to the three strands of the Public Sector Equality Duty.**

<b>a) How will the proposal help to eliminate discrimination, harassment and victimisation?</b>
<p>Continuing to provide Carers Support Services will support both carers and cared for people with protected characteristics.</p> <p>Extending the provision of Carers Support Services to parent carers will cease discrimination against this group of carers.</p> <p>Reducing the overall level of funding for the Services is likely to reduce the positive impacts identified.</p>
<b>b) How will the proposal help to advance equality of opportunity?</b>
<p>Continuing to provide Carers Support Services and extending their provision to parent carers will advance equality of opportunity for carers and the people they care for.</p> <p>Reducing the overall level of funding for the Services is likely to reduce the positive impacts identified.</p>
<b>c) How will the proposal help to foster good relations?</b>
<p>Continuing to provide Carers Support Services and extending their provision to parent carers will help to foster good relations with both carers and the people they care for.</p> <p>Reducing the overall level of funding for the Services is likely to reduce the positive impacts identified.</p>

**During the engagement process were there any suggestions on how to avoid, minimise or mitigate any negative impacts? If so, please give details.**

Avoiding the negative impacts could be achieved by not reducing the overall funding levels.

Mitigating the negative impacts has been achieved by match funding of Carers Support Services by the Council and Darlington Clinical Commissioning Group, thereby increasing previous core funding levels.

Mitigation of negative impacts in respect of Young Adult Carers can be achieved by extending the remit of the Young Carers Service to support Young Carers up to age of 25. This would enable the retention of a Service with a specific focus on young people. The specification for the Young Carers Service has been amended accordingly

Discussion also took place regarding what are the most important elements of the Carers Support Service to retain. It was noted that different people use different parts of the Service and that it may be necessary to prioritise which carers to support. It was also noted that it was very important to go out and find carers before a crisis and to ensure that health professionals were aware of carers and their needs. This led to a decision to retain all required elements in the new specifications, so as to retain flexibility to focus the Services on the areas of greatest need at any specific point in time.

**This completes the assessment, but there will be further work to do to contribute to the reporting and implementation stages of the activity. First though, it is important to draw a line under the assessment to maintain a separation between assessment of impacts and any proposals to manage those impacts. The assessment should therefore be signed-off at this stage.**

### Section 7 - Sign-off when assessment is completed

Officer Completing the Form:		
Signed	Name:	
	Date:	
	Job Title:	
Assistant Director:		
Signed	Name:	
	Date:	
	Service:	

## Section 8 – Reporting of Findings and Recommendations to Decision Makers

The findings of the EIA may be reported to decision-makers at several stages during the development of an activity. For example, the initial officer assessment findings may be included in a feasibility report or options appraisal to be considered by the Transformation Board or Chief Officers' Executive.

Any report for formal decisions by Cabinet or Council should include the latest findings of the EIA, even if these are at a relatively early stage. The report recommending final approval of the activity should await and include the findings of the completed EIA. The report should present clearly the impacts that have been identified through the engagement process, including potential cumulative impacts.

The report may include recommendations based on the findings of the EIA, but these should be separate from the reporting of impacts. Recommendations will be developed separately from the EIA and arise from considering equalities impacts combined with other aspects of the activity such as finance, the benefits of the activity, and so on.

Based on the EIA findings, the report may consider the options in the table below, but the report must contain a clear statement of the impacts so that decision-makers can understand the effects of the decision that is being recommended.

What does the review of the information show?	
a)	No negative impact on people because of their Protected Characteristics - continue with the activity and monitor progress on implementation
b)	Negative impact identified – recommend continuing with the activity; clearly specify the people affected and the impacts, and providing reasons and supporting evidence for the decision to continue
c)	Negative impact identified - adjust the activity in light of the identified impact to avoid, minimise or mitigate the impact
d)	Negative impact identified - stop activity and provide an explanation why



## Section 9 – Action Plan and Performance Management

The report to decision-makers, and the decision made may require actions to be taken to avoid, minimise or mitigate the negative impacts of the activity. Option C in the table in Section 8, combined with mitigation measures that may have been highlighted during engagement and listed in Section 6 (if adopted) will require action planning to implement them.

Any actions to address equalities impacts should be listed below, with performance management review proposals, to complete the full EIA.

What is the negative impact?	Actions required to reduce/eliminate the negative impact (if applicable)	Who will lead on action	Target completion date

Performance Management	
Date of the next review of the EIA	
How often will the EIA action plan be reviewed?	
Who will carry out this review?	

