



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

Title of activity:	Carers' Strategy and Implementation Plan 2013-16 and Young Carers' Action Plan 2013 - 16
Lead Officer responsible for this EIA:	Lisa Holdsworth
Telephone:	Ext 2210
Service Group:	Commissioning and Development
Service or Team:	People Commissioning
Assistant Director accountable for this EIA	Chris Sivers
Who else will be involved in carrying out the EIA:	Members of the Carers' Strategy Steering Group and Young Carers' Development and Implementation Group, with advice from Helen Watson and the Corporate Equalities Group.

What stage has the EIA reached?		
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
Stage 1: Initial Officer Assessment. Whole Population likely to be affected identified	11.1.13	<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
Stage 2: Further Assessment. Target Population likely to be affected identified	11.1.13	<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. People who have recently become carers. People who don't recognise themselves as carers.
Stage 3: Further Assessment. Individuals likely to be affected identified	11.1.13	<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> No specific individuals identified

Stage 4: Analysis of Findings		
Stage 5: Sign-Off		
Stage 6: Reporting and Action Planning		

Section 2 – The Activity and Supporting Information

Details of the activity (including the main purpose and aims)
<p>The activity being considered is the Carers' Strategy and Implementation Plan (CSIP) 2013-16 and the Young Carers' Action Plan 2013 -16.</p> <p>The two Plans set out the actions to be taken by partners in Darlington to identify carers and to provide effective support to them in relation to the outcomes identified in the refreshed national carers strategy 'Recognised, valued and supported: Next Steps for the Carers Strategy' (November 2010).</p> <p>For the CSIP the outcomes are:</p> <ul style="list-style-type: none"> • All carers in Darlington are assisted to identify themselves as carers at an early stage • Carers have opportunities to be fully involved in designing and influencing local and national care provision and involvement in planning individual care packages • Carers will be enabled to fulfil their educational/ training/employment potential • Carers will receive personalised support, both for themselves and the person they care for, enabling them to have a family and community life • Carers will be supported to remain mentally and physically well <p>For the Young Carers' Action Plan the outcomes are:</p> <ul style="list-style-type: none"> • Raised awareness around young carers, their needs and the support available to them – for young carers, their families, professionals and the wider public • Early intervention and ongoing support will be provided to families where there is, or is likely to be, a young carer • Children and young people with caring responsibilities are able to access opportunities that are open to their peers • Effective consultation and participation with young carers and their families to identify their needs • Young Carers will be safe and will have improved physical, mental and emotional health and wellbeing • Improved transitions from young carers service to adult carers service
<p>Who will be affected by the activity?</p> <p>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.</p>
<p>Whole population</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</p>

would suggest that there are likely to be at least 712 young carers aged 15 and under.

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

Research undertaken by Carers UK in 2006 found that 65% of people with a caring responsibility did not identify themselves as carers in their first year of caring and that for just under a third (32%), it took five years before they recognised themselves as a carer. ('In the Know: The Importance of Information for Carers', Carers UK, 2006). It also found 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). Around 2 million people become carers each year.

In August 2012, there were 1115 carers were 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

No specific individuals identified

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

'Caring about Carers: A National Strategy for Carers' (HMSO, 1999)

'In the Know: The Importance of Information for Carers' (Carers UK, 2006)

'Carers at the heart of 21st – century families and communities. "A caring system on your side. A life of your own"' (HMSO, 2008)

'Supporting Carers: An action guide for general practitioners and their teams' (Princess Royal Trust for Carers & Royal College of General Practitioners, 2008, 2nd edition 2011)

'Recognised, valued and supported: Next Steps for the Carers Strategy' (HMSO, November 2010)

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
Age	P				M		<p>The Carers' Strategy and Implementation Plan applies to carers of all ages.</p> <p>The Young Carers' Action Plan applies to Young Carers.</p>
Race	P					L	<p>The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply to carers of all races. Data from the 2011 census indicates that the % of non white people in Darlington has increased from 2.1 to 3.8%.</p> <p>350 people identified themselves as gypsy or Irish traveller and there was an increase of 1277 in people of 'other white' ethnic origin.</p>
Sex	P					L	<p>The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to all groups of carers.</p>
Gender Reassignment	P					L	<p>The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to all groups of carers.</p>
Disability (summary of detail on next page)	P					L	<p>The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to carers with all impairments.</p>
Religion or belief	P					L	<p>The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to all groups of carers.</p>
Sexual Orientation	P					L	<p>The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to all groups of carers.</p>

Pregnancy or maternity	P					L	The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to all groups of carers.
Marriage/ Civil Partnership	P					L	The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to all groups of carers.

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.

Mobility Impairment	P					L		The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to carers with all impairments.
Visual impairment	P					L		The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to carers with all impairments.
Hearing impairment	P					L		The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to carers with all impairments.
Learning Disability	P					L		The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to carers with all impairments.
Mental Health	P					L		The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to carers with all impairments.
Long Term Limiting Illness	P					L		The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to carers with all impairments.
Multiple Impairments	P					L		The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to carers with all impairments.
Other – Specify Carers	P				H			The Carers' Strategy and Implementation Plan and Young Carers' Action Plan apply equally to carers with all impairments.

Cumulative Impacts	
<p>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 section of the EIA.</p>	
Change activities	Potential cumulative impacts
Carers Support Service and Young Carers tender. EIA completed.	May result in changed services/reduced service level.
FACs changes & other changes within Adult Social Care (charging etc)	All of which potentially affect carers, either financially or through the need to provide increased levels of support to the people they care for
Welfare benefit reforms locally and nationally Eg Social Fund, changes to DLA etc	All of which potentially affect carers
Re-procurement of domiciliary care	Will potentially affect carers
Extra care consultation re potential changes to care and support	Will potentially affect carers

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: 178px;"></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

Has the assessment shown that the activity will treat any groups of people with Protected Characteristics differently from other people? Yes/No
<p>If yes, please state which groups and how</p> <p>The activity will treat carers differently, as the CSIP and Young Carers' Action Plan are intended to improve the identification of all groups of carers and the provision of effective support to them.</p> <p>The activity won't treat groups of people with protected characteristics differently. However, carers will include people with 1 or more of the protected characteristics.</p>
Will the differential treatment advance equality for people with Protected Characteristics? Yes
<p>If yes, please state which groups and how</p> <p>The CSIP and Young Carers' Action Plan will advance equality for carers and the people they care for.</p>
Will the differential treatment cause or increase disadvantage for people with Protected Characteristics? No
<p>If yes, please state which groups and how</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.

Involvement and Engagement Plan			
Which organisations, groups and individuals do you need to involve or engage and how?			
Date of plan entry	Organisation, Group or Individuals	Date of event or activity	Type of activity – venue, channels, method and staffing
11.1.13	Members of Carers' Strategy Steering Group (CSSG) and those who receive minutes (staff and carers)	22.1.13 5.3.12	Discussion at CSSG meeting on 22.1.13 and information sent to all members of CSSG and those who receive minutes. Further discussion at CSSG meeting on 5.3.13.
11.1.13	Carers known to DAD Carers Support Service	4.2.13 4.2.13 4.2.13 28.2.13 4.2.13	Information posted on DAD website. Staff requested to discuss with carers with whom they are in contact. LH has offered to attend meetings if requested. Information to be included in the newsletter to sent out at the end of February. Information sent directly to those carers for whom the Carers Support Service has email addresses.
11.1.13	Carers known to Darlington Parent Carer Forum facilitated by DAD	4.2.13	Information posted on DAD website
11.1.13	Young Carers and Young Adult Carers	24.1.13 4.2.13 4.2.13	Discussion at Young Carers' Development and Implementation Group on 24.1.13 and information sent to all group members. Staff requested to discuss with Young Carers/Young Adult Carers with whom they are in contact. LH has offered to attend meetings if requested.
11.1.13	Whole population – unknown and potential carers	1.2.13	Information posted on DBC website

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

Section 6: Engagement Findings

- Discussed at CSSG meetings on 22.1.13 and 5.3.13 and at the Young Carers' Development and Implementation Group on 24.1.13.
- No responses were received from the emails, mailouts or website information referred to in Section 5 above.
- However, many responses were received in relation to the recent EIA in respect of the Carers Support Service and Young Carers tender. These are also relevant to this EIA.
- The responses were not collected or collated by protected characteristics. However the age profile of carers involved in the meetings is 50+ and the people they care for have a number of the protected characteristics.
- The impacts identified were primarily positive – examples are given in the table below.
- 2 potential negative impacts were also identified

Date/summary of engagement carried out	Summary of impacts identified
	Positive Impacts
22.1.13 – 14.3.13	(Carers) would be likely to get help much sooner than if they weren't identified.
	If identified early on and get the right intervention, help physically, mentally, wellbeing. Otherwise on your knees.
	Reduces the sense of isolation.
	About the carer's needs. Keeping us an individual/own identity.
	Carers centres focus on the carer – help them to feel better. Big step to admit they're a carer – don't know what they want. Once you're in the loop, get all sorts of things. Personalised support enables this, through peers.
	(In respect of young carers) Professionals know how better to support
	(In respect of young carers) Peer support from mixing with each other
	(In respect of young carers) Don't really know about the condition of the person they care for – afraid to ask. Info about the illness, what to expect, how it will develop. Understanding makes it easier to cope. Not just knowing what is available but that it is OK. Information makes it easier to cope – know what <u>might</u> happen.
	Negative Impacts
22.1.13 – 14.3.13	Negative about identifying themselves as carers – impact on self esteem. Feel that people may treat them negatively.
	High expectations as to what will be delivered – concerned that people will be let down if these aren't fulfilled.

Section 6: Engagement Findings – Continued

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.

<p>a) How will the proposal help to eliminate discrimination, harassment and victimisation?</p>
<p>Delivery of the Carers' Strategy and Implementation Plan and Young Carers' Action Plan will support both carers and cared for people with protected characteristics.</p>
<p>b) How will the proposal help to advance equality of opportunity?</p>
<p>Delivery of the Carers' Strategy and Implementation Plan and Young Carers' Action Plan will advance equality of opportunity for carers and the people they care for.</p>
<p>c) How will the proposal help to foster good relations?</p>
<p>Delivery of the Carers' Strategy and Implementation Plan and Young Carers' Action Plan will help foster good relations with both carers and the people they care for.</p>
<p>During the engagement process were there any suggestions on how to avoid, minimise or mitigate any negative impacts? If so, please give details.</p>
<p></p>

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?	

