



## Equality Impact Assessment

### What is an Equality Impact Assessment (EIA) and why does the County Council do them?

The [Public Sector Equality Duty](#) (PSED) is an obligation within the [Equality Act 2010](#) ("the Act"), which asks public authorities, like Hampshire County Council, to give 'due regard' to equality considerations, in particular to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

This includes assessing the impact of policies and practices on individuals and communities with a protected characteristic, as defined in the Act and some other specific groups. The County Council uses EIAs to ensure it has paid 'due regard' to equalities considerations when there are changes to a service or policy, a new project or certain decisions.

EIA author	Position & Department	Contact
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Title:	Care Homes framework and long-term residential and nursing care call off contract
Related EIAs:	None

EIA for Savings Programme:	No EIA - Adults Health & Care - SP25
Service affected	Residential and Nursing services procured by Hampshire County Council (HCC)
Description of the service/policy/project/project phase	<p>The Adult's Health and Care Directorate (AHC) at Hampshire County Council (HCC) currently source and purchase residential and nursing care for older adults (those aged 65 or over) on a case-by-case basis, utilising market intelligence held by our internal brokerage team. Each service procured is based on a negotiated rate, and although more than one service will be approached, often it is the same providers who will be utilised due to intelligence held. This has meant, over time, costs have escalated, however, this escalation has been steeper over the past two years with residential and nursing placements increasing by circa 15% Between April 21 and April 23</p>
New/changed service/policy/project	<p>AHC want to implement a new way of purchasing residential and nursing placements with external providers that are of a good standard, offer value for money and that deliver safe and effective services. We want to ensure we are transparent in our approach and that services meet the needs of the Local Authority, providers and the individuals in receipt of the service, through a streamlined and effective process. We want to do this through setting up a Care Home framework which providers who meet our eligibility criteria would sign up to. The framework will be open at all times for providers to join so should new residential and nursing homes open, or providers who were not previously eligible to join, become eligible to join; the opportunity will be there for the life of the framework. We will then run a number of individual tender exercises from the framework for the delivery of several different services which we would then contract with a variety of providers to deliver. These services may be for older adults, younger adults or both. The first tender exercise we will run is for the delivery of long-term residential and nursing care for older adults. Providers will be able to sign up to one or more 'needs profiles' outlining the level of care an individual may require which will have an associated cost. This EIA covers both the purchasing of care via the framework vehicle and also the first 'call-off' for long term residential and nursing care for older adults (65+). Through implementing a Care Home framework we will: - Provide safe and appropriate care home services for Hampshire residents when they require it - Move completely away</p>

from SPOT purchasing long-term residential and nursing care home placements (an unplanned purchase occurring when there is an immediate requirement and a purchase must be made) with associated unpredictable costs - Work with a preferred number of providers that can meet our individuals current and future needs - Work with providers at agreed, predictable rates for agreed service levels - Ensure we have a sufficient number of providers working with us in each area of the County and a defined framework boundary area - Implement a commercial arrangement that can grow and flex with our needs - Implement the Choice of Accommodation policy which sets out how AHC will source placements in future. Namely by offering a placement in one HCC Care home first. Only if there is no vacancy or the home is unable to meet someone's needs will an offer of a home in the wider market then be made. This aligns with the Care Act 2014 requirements - Have a specific care needs driven outcome focused approach to referrals and placements.

## Engagement

Engagement with Hampshire Care Association, Integrated Care Board commissioners, Health colleagues and other Local Authority commissioners has begun and is ongoing.

A series of area events have been undertaken to engage with providers and seek their input into the eventual design of the framework and service needs specifications to be utilised.

## Equalities considerations - Impact Assessment

### Age

Impact on public	Positive
Impact on staff	Neutral
Rationale	The move to purchasing care through the Care Home framework will not disproportionately

	<p>impact those who are older and will have a neutral impact on both staff and individuals. The initial call off for long term residential and nursing placements for older adults, will positively impact those individuals predominantly aged 65 or over who require a placement within a residential or nursing home. Currently Hampshire County Council commission residential or nursing care services for 1.7% of the population aged 65 or over (based on 2021 Census population data). According to the 2018 Office for National statistics forecasts, the population of those aged 65 or over is due to increase by approximately 10% by 2028, meaning that should we continue to commission services at the same level, the number of individuals likely to receive services commissioned by Hampshire will increase to just under 6,000 per annum by 2028. Through this initial contract providers will be expected to ensure that services delivered are strengths- based (consideration of an individual's own strengths and capabilities, and what support might be available from their wider support network or within the community to help meet and support their care needs) and outcomes focused (working towards an individual's goals and aspirations). Providers will be working to ensure individuals living within their homes, reach their full potential and maximum personal level of independence. In addition, providers will be expected as part of their contractual obligations to ensure their residents are involved with their local community both through supporting access to the local area and through inviting the local community into the facility. There will be closer monitoring of providers through contract management, which is not currently in place, helping to ensure Hampshire are working with good quality providers and supporting their improvement where needed.</p>
Mitigation	

## Disability

Impact on public	Positive
Impact on staff	Neutral
Rationale	<p>The move to purchasing care through the Care Home framework will not disproportionately impact those individuals who have a disability and will have a neutral impact on both staff and individuals. The initial call off for long term residential and nursing placements for older adults will positively impact those individuals with a disability who require a placement within a residential or nursing home. Through the long-term contracts providers will be expected to ensure that services delivered are person centred and outcomes focused, working to ensure individuals living there reach their full potential and maximum personal level of independence. In addition, providers will be expected as part of their contractual obligations to ensure their residents are involved with their local community both through supporting access to the local area and through inviting the local community into the facility as previously outlined. There will be closer monitoring of providers through contract management which is not currently in place, helping to ensure Hampshire are working with good quality providers and supporting their improvement where needed.</p>

	<p>Needs specifications will be developed to ensure a consistency of approach across the residential and nursing care home market and allow for providers (HCC Care and independent providers) to make informed considerations of placement referrals. Improvements to the Pen Picture (a pseudonymised Care Needs summary that assists with placement referral decision making), will help to ensure equality of access to services for individuals with a disability. The 2021 Census data shows that the likelihood of someone declaring a disability increases with age, with around 50% of the Hampshire population aged 85 or over declaring a disability. Therefore, as these services are aimed at those over 65, it is likely more individuals receiving a service will have a disability. The call off for long term residential and nursing care from a care home framework will ensure equality of access to services for individuals, therefore having a positive impact on those with a disability.</p>
Mitigation	

## Gender Reassignment

Impact on public	Neutral
Impact on staff	Neutral
Rationale	No anticipated changes to current position expected through programme delivery.
Mitigation	

## Pregnancy and Maternity

Impact on public	Neutral
Impact on staff	Neutral
Rationale	No anticipated changes to current position expected through programme delivery.

Mitigation	

## Race

Impact on public	Positive
Impact on staff	Neutral
Rationale	<p>The move to purchasing care through the Care Home framework will not disproportionately impact individuals due to their Race. The contract for long-term residential and nursing care will have a positive impact, however as contractually providers will need to ensure that services delivered are person centred and outcomes focused, working to ensure individuals living within their residential or nursing home reach their full potential and maximum personal level of independence. In addition, providers will be expected as part of their contractual obligations to ensure their residents are involved with their local community both through supporting access to the local area and through inviting the local community into the facility. This may include but is not limited to ensuring individuals have access to local cultural events or gatherings as required. Providers of these services should also ensure they are delivering culturally appropriate care for individuals through person centered approaches. This may include consideration of food and drink, including in its preparation, handling and eating, their clothes and personal presentation, their religious or spiritual practices or the activities they participate in. This also applies to information about the service and what it offers, being made available in such a way that promotes equality of access. There will be closer monitoring of providers through contract management, which is not currently in place, helping to ensure Hampshire are working with good quality providers and supporting their improvement where needed. Case studies will be requested to provide assurances as to the person-centred care being delivered and outcomes being achieved for individuals.</p>
Mitigation	

## Religion or Belief

Impact on public	Positive

Impact on staff	Neutral
Rationale	<p>The move to purchasing care through the Care Home framework will not disproportionately impact individuals due to their Religion. However, the call-off contract for long-term residential and nursing care will have a positive impact. Contractually providers will need to ensure that services delivered are person centred and outcomes focused, working to ensure individuals living within their residential or nursing home reach their full potential and maximum personal level of independence. Providers will be expected as part of their contractual obligations to ensure their residents are involved with their local community both through supporting access to the local area and through inviting the local community into the facility. This may include but is not limited to ensuring individuals have access to be able to worship in a way of their choosing as appropriate. Or facilitating access to religious events/ occasions in line with an individual's wishes. There may need to be considerations in relation to someone's nutritional intake or clothes/ presentation, due to their beliefs. This also includes access to information about the service and what it offers, being made available in such a way that promotes equality of access. There will be closer monitoring of providers through contract management, which is not currently in place, helping to ensure Hampshire are working with good quality providers and supporting their improvement where needed. Case studies will be requested to provide assurances as to the person-centred care being delivered and outcomes being achieved for individuals.</p>
Mitigation	

## Sex

Impact on public	Neutral
Impact on staff	Neutral
Rationale	No anticipated changes to current position expected through programme delivery.
Mitigation	

## Sexual Orientation

Impact on public	Neutral
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Impact on staff	Neutral
Rationale	No anticipated changes to current position expected through programme delivery.
Mitigation	

## Marriage and Civil Partnership

Impact on public	Neutral
Impact on staff	Neutral
Rationale	No anticipated changes to current position expected through programme delivery.
Mitigation	

## Poverty

Impact on public	Neutral
Impact on staff	Neutral
Rationale	The move to purchasing care through the Care Home framework will not disproportionately impact individuals due to Poverty. The initial call-off for long-term residential and nursing services will see the implementation of the Choice of Accommodation policy for the sourcing of older adult's long-term placements. This policy will mean that Hampshire County Council will offer an equitable service for all residents, but most particularly those that require Local Authority financial support for their placement. In addition, new information resources will be made available to everyone regarding those homes signed up to the framework. This will be available to self-funders as well as those who require Local



	<p>Authority financial support to encourage engagement with homes signed up to deliver long-term care to ensure best value for money secured for the service user where possible. The Joint Strategic Needs Assessment Demography data shows 9% of residents aged 60 or over experience income deprivation. The Income Deprivation Affecting Older People Index (IDAOPI) ranks 14 areas in Hampshire in the most deprived decile nationally, 12 of these are in Rushmoor where over 23% of the population are from non-white British ethnic groups. However, due to access to services being through business-as-usual routes following a care act assessment and subsequent financial assessment, the recording of such impact and data related to how many individuals accessing services are living in poverty is not specifically part of the framework programme.</p>
Mitigation	

## Rurality

Impact on public	Neutral
Impact on staff	Neutral
Rationale	<p>The move to purchasing care through the Care Home framework will not disproportionately impact individuals due to living rurally. However, through the implementation of the Choice of Accommodation policy as part of the long-term residential and nursing care call-off, individuals will be given access to a wider geographical choice of homes dependent on their needs, for long term care provision. This means that those living rurally will have equal access to homes in both rural and urban areas based on their assessed needs and personal preferences.</p>
Mitigation	

Geographical Impact:All Hampshire

## Equality Statement

Additional information:

None

## Overview Statement:

A summary assessment to show that due regard to the Public Sector Equality Duty has been paid, which is undertaken when a full EIA is not needed:

EIA reference number: 00364

Date of production of EIA for publication: 02/11/2023