# SSA EQUALITY IMPACT AND NEEDS ANALYSIS

Directorate:	Adult Social Care
Service Area:	Learning Disabilities
Service Assessment:	
Borough	Richmond
Staff:	Lead: Elizabeth Pepper Head of Commissioning for Learning Disabilities
Date approved by Directorate Equality Group (if applicable)	29 July 2021
Date approved by Policy and Review Manager:	20/08/21
Date submitted to Directors' Board	

#### **SUMMARY**

This EINA is for services in Richmond that will be recommissioned between June 2021 and April 2023 that includes:

Service	Providers	Number of Service Users	Annual Contract Value £000's	Contract Expiry Date
Home / Community Support	United Response	42	400	Expired
Short breaks (Respite)	United Response	20	309	June 2022
Supported Employment	Choice Support	12	304	December 2022
Shared Lives	Ceritude	11	875	November 2022
Supported Living/ Residential Care	Fitzroy Certitude Lifeways MTVS United Response	179	10,093	March 2023

Richmond Council has 12 block contracts in place with 6 providers for the community support and accommodation-based care services for people with a learning disability as set out above.

The purpose of recommissioning these services over the next two years are two-fold; to ensure that the local authority complies with procurement regulations and to ensure the services commissioned meet the needs of the local population and that service delivery models are reviewed and revised in response to demand.

The development and implementation of new service models, through the retendering exercises, will benefit people with a disability, specifically people with a learning disability,

by being clearer about the purpose of each service, by improving the way the contracts are managed and improve outcomes for people with a learning disability across a range of priority areas as identified by the local population.

The underpinning principles of the commissioning intentions are, that all services commissioned by Richmond Council to deliver adult social care support will keep residents at the centre of planning and decisions and provide:

- Prevention and early help to promote quality of life and reduce the impact of health and social inequalities.
- A strength-based approach that maximises people's independence and potential.
- Co designed and co-produced support and care that authentically involves residents.

The key negative impact is that the recommissioning could lead to changes in provider, staffing and service delivery that service users and their family carers find unsettling and/ or distressing. This will be mitigated by the involvement and coproduction of service users in each re tendering exercise, through regular communications to those affected and the people who support them, ensuring that the tender evaluation process leads to the selection of providers that are capable of providing a good quality service and by allowing up to a 6-month mobilisation period between the contract award and start dates.

#### 1. Background

Richmond upon Thames is committed to continuous improvement of our services for vulnerable people. The Council commissions block contracts for a variety of services that includes home and community support services and accommodation-based services that includes, respite, shared lives, supported living accommodation and residential care homes designed for people with a learning disability. These services enable people with a learning disability to live as independently as possible, whilst also ensuring they remain comfortable and safe.

The Council supports in the region of 400 people with a learning disability in Richmond through a variety of mechanisms that include the block contracted services within the scope of this EINA and also through Direct Payments and spot-purchased services.

The proposed recommissioning of learning disability services within the scope of this EINA will allow the opportunity for innovation and ensuring services respond to changing demand across this specific population and supporting the delivery of the Council's medium-term financial objectives. The re commissioning of the current contracts within the scope of this EINA also provides the opportunity for the co-production of services with service users and their families.

Please note, this EINA refers to service users in Richmond who primarily access the block contracted services.

#### 2. Analysis of Need and Impact

Protected Group	Findings
Age	The table below sets out the projections of people with a learning disability over the next ten years that shows that the greatest increase of people with a learning disability will be within the older age groups 65+.

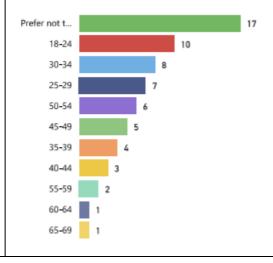
LD Moderate to Severe Age Group	2020	2025	2030	% Increase
18 – 24	322	346	383	14%
25 – 34	607	624	613	10%
35 - 44	816	80	806	-1%
45 - 54	733	745	733	1%
55 - 64	530	587	616	18%
65 - 74	344	347	399	33%
75 - 84	215	269	284	59%
85 +	101	115	143	101%

#### Estimated Number of People with a Learning Disability in Richmond

The table below shows a breakdown of residents supported by Adult Social Care as at the end of June. This shows that the highest proportion of service users are aged between 18-34 years. Based on the population projections the greatest impact on demand will be from new young adults transitioning from childhood into adulthood.

Age Group	Number of users	% of users
18-24	88	19.6%
25-34	107	23.8%
35-44	56	12.4%
45-54	58	12.9%
55-64	77	17.1%
65-74	40	8.9%
75-84	22	4.9%
85+	2	0.4%
Grand Total	450	100.0%

Number of people with a learning disability seeking support with employment (June 2021). The majority of those seeking employment are between 18-35.



An analysis of the local data shows that access of the services currently commissioned varies by age. For example:

- Approximately 1/3 of service users live alone or with family, and are predominantly aged 18-35 (68%)
- The majority of people in residential care are aged 45+ (48%)
- The majority of people in supported living are age 18-35 years (48%)
- Those requiring support to access employment and work-based skills or training are more likely to be aged 55 and under. Older service users are more likely to report they are not actively looking for employment opportunities.
- 90% (22) of those accessing 'Other Services' in the community are aged under 25 years.
- There is a small number of people accessing Day Services in the community, of which 77% (10) are aged over 50
- Those accessing Direct Payment services are more likely to be aged under 50. Over 90% of those accessing Direct Payments are aged under 50. However, this is partly due to when the requirement to promote Direct Payments was introduced.

#### **Life Expectancy and Average Age**

- The average life expectancy for the general population in Richmond is 86.4 years for females and 82.5 years for males (Source: Data Rich)
- The average life expectancy for women with a learning disability is 65 years and for a man with learning disabilities 66 years.

#### **Analysis**

- Overall, the analysis shows that a significant proportion of people with a learning disability will continue to have high levels of care and support for the rest of their life but that the type of support required may change over the life course.
- Due to shorter life expectancy among people with a learning disability, it would be reasonable to expect that the proportion of those aged 55 and over would be lower than the general population. Population based projections indicate this is the case for those aged 85 and over but not for those aged 55 to 84 which is somewhat higher than the general population.
- The highest proportion of the general population and estimated LD population are 65+. This is set to increase over the next 15 years.
- However, the age of admission into a residential placement for a person with a learning disability is significantly lower (under 65 years) than the average population.
- Therefore, it is essential that effective services are commissioned to enable people with a learning disability to remain at home as long as possible with their family and/or live as independently as possible.
- Accommodated based services also need to be commissioned that can manage age related illness or barriers that people with a learning disability may experience.
  - Population based projections indicate that the population age group between 35-45 years is estimated to decrease and the smallest proportion of the population is aged 18-35. This is estimated to increase slightly.

- Population based estimates also suggest that there will be fewer young adults (18-35) with moderate- severe needs but more with mild-moderate needs in the future.
- However, those currently receiving support from Adult Social Care are aged between 18-35 years. Therefore, the majority of services commissioned over the next ten years will predominantly need to support those who are of middle/ working age
- The proportion of people with a learning disability in paid employment is again significantly lower than the general population.
- The gap in the employment rate between those with a learning disability and the overall employment rate (persons aged 18-64) is 67% (PHOF 2016/17). However, the proportion of people with a Learning Disability in Richmond is significantly higher compared to statistical neighbours and the England average. Richmond is currently ranked as the fifth highest Local Authority for this indicator.
- A larger proportion of people with a Learning Disability seeking employment are aged 18-25 years.
- Consideration also needs to be given to not limiting access to services because of age. Age is not a reliable predictor of an individual's potential to acquire new skills and learn. For example, some national employment schemes restrict access to those under 25
- A wide variety of community-based services need to be available to support different stages of people's life journey to maximise their potential.
- The does not highlight the different expectations and cultural experiences of different age groups. For example, how some of our younger autistic service users prefer to define themselves as neurodiverse and it is important that their services commissioned reflect the social and culture needs of different generations.

#### **Disability**

#### **Service User Groups**

- In Richmond Council, service users are recorded within service user groups of 'Physical Disability', 'Mental Health', 'Learning Disability' and 'Older People'.
- While all the service users in this recommissioning project fall into the 'Learning Disability' group, many also fall into the other groups, particularly 'Older People' and 'Physical Disability'. This highlights the need for recording all the groups a service user falls into rather than one
- For accuracy, this section will focus on the 'Learning Disability' group only.

#### Number of People with a Learning Disability in Richmond

	2020	2030	2040	2050	%
					increase
18-64 (All LD)	3,007	3,107	3,152	3,171	4%
65+ (All LD)	663	734	830	921	65%
18-64 (Severe or	692	714	725	729	4%
Moderate)					
65+ (Severe or	89	97	109	121	56%
Moderate)					

Source: GLA Estimates and Emmerson & Hatton 2008

#### **Analysis**

- Richmond has a slightly higher rate per 1,000 (3.09) of adults with a learning disability receiving long term support from Local Authorities than compared to the London rate of 3.01
- All the people directly affected by the recommissioning of the community support and accommodation-based care services have a disability
- The level of complexity and disability impacting on the service user's life will vary. It is expected those within an older age group will have a additional needs due to other factors such as age related illness or deterioration.
- The level of complexity that some users experience may limit their opportunities to access the community independently and opportunities such as paid employment. It is essential that services are commissioned that enable all service users regardless of the complexity of their needs to participate and make a positive contribution to their local community.
- It is estimated that 65% of people with a Learning Disability or severe mental health condition want to work. The proportion of people with a Learning Disability in employment in Richmond is higher than the national average, however, we do not know how many people with a Learning Disability not supported by social care are in employment.

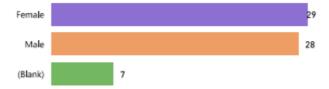
#### Gender (sex)

Richmond LD Services by Gender (June 2021)

Sex	Total Population	ASC LD Service Users
All Male	49%	61%
All Female	51%	39%

The table above shows a breakdown of residents supported by Adult Social Care as at the end of June by gender. This shows that the highest proportion of service users are male. When compared to the gender profile of the general population this could suggest there is an unmet or unidentified need for female residents.

## Number of people with a learning disability seeking support with employment (June 2021)



#### **Analysis**

- In the general population of Richmond, there is a balance of males and females across the life course.
- There are significantly more males living in accommodationbased learning disabilities services in Richmond. This is line with the national research that learning disabilities are more common in males in the ration varying between 3:1 and 1.9:1.

- Learning disabilities are more common in boys due to a specific genetic change in the X chromosomes.

  (Source: https://inpp.hmi.com/content/74/cuppl\_4/i30)
  - (Source: <a href="https://jnnp.bmj.com/content/74/suppl\_1/i30">https://jnnp.bmj.com/content/74/suppl\_1/i30</a>)
- Two-thirds as a percentage is 66%, so the gender balance in Richmond follows the national ratio balance.
- A higher proportion of males live in a Shared Lives scheme than compared to females. Whilst there are generally more males with a learning disability supported by social care it will be important to ensure the recruitment and profile of Shared Lives Carers promotes access for female service users.
- Fewer men as a proportion of service users by gender are accessing support to seek Employment. This analysis could be used to evidence the business case for services that cater for a specific gender.

### Gender Reassignment

Richmond Council now collects this data as of October 2017. However, there has been no data recorded for gender reassignment for this client group.

# Marriage and Civil Partner-ship

# Richmond population and Service Users by Marital and Civil Partnership Status

Status of Service Users	% of Population in Richmond	Count of Service users in Richmond	%
Single	36.7	314	35.1
Cohabiting		2	0.2
Married	47.3	18	2.0
Civil Partnership	0.4		
Divorced	7.9		
Separated	2.2	5	0.6
Windowed	5.4	2	0.2
Unknown		553	61.9

Source: Census 2011 and Mosaic 2021

#### **Analysis**

- Amongst service users, a higher proportion are single compared to the general population in Richmond. Some service users may not have the opportunity to meet potential romantic partners or may struggle to understand the concept of marriage.
- It is important to note, that many service users may be actively dating or in long term relationships even if they are not formally committed in marriages or civil partnerships.
- Enabling opportunities to develop relationships and friendships is a typical requirement of current contracts that has not been monitored

# Pregnancy and maternity

There is no data available regarding the number of people with this protected characteristic who are in receipt of care and support in learning disability accommodation services within this commissioning exercise.

#### **Ethnicity**

**Ethnicity Breakdown in Richmond** 

Ethnicity	% of Population	% of services users
Asian/Asian British	7%	2.9%
Black/African/Caribbean/Black British	2%	1.8%
Mixed/Multiple Ethnic Groups	2%	5.6%
Other Ethnic Groups	2%	2.2%
White	87%	83.8%

Source: ONS Census 2011

The table above shows the ethnicity of residents supported by Adult Social Care as at the end of June.

#### **Analysis**

- The 2011 Census shows that the population is predominantly White, followed by 7% Asian or Asian British.
- There is a similar percentage of White service users at 87%.
- The proportion of White British Service Users reflects the age of service users, who fall into older age groups. It will be expected that over the next ten years the proportion of Asian or Asian British Service Users will gradually increase.
- There is only 1 service user from a Black ethnicity, demonstrating an underrepresentation of this group within the service.
- National evidence suggests that the prevalence of learning disabilities in BAME groups is the same as White populations.
- The high proportion of people in Mixed/ Multiple Ethnic Groups living in the services compared to the general population may warrant further investigation.
- A lower proportion of service users from non White British backgrounds access Shared Lives Services. scheme than compared to females. Whilst there are generally more males with a Learning disability supported by social care it will be important to ensure the recruitment and profile of Shared Lives Carers promotes access for service users from a wide range of ethnic groups.
- It is important to acknowledge that BAME groups may face barriers to obtaining diagnosis and support. The delivery of services must address this inequality.

#### Religion and belief, including nonbelief

Religion	% of Population	% of service users
Buddhist	0.8%	
Christian	55.3%	18%
Hindu	1.6%	
Jewish	0.8%	0.5%
Muslim	3.3%	0.5%
Sikh	0.8%	
Other Religion	0.5%	
No Religion	28.4%	1.6%
Unknown		79.1%

Source: ONS Census 2011

#### **Analysis**

• The religious belief of 79% service users is unknown.

- As with the general population, Christianity (across all denominations) is the most widespread belief.
- However, it is difficult to discern the accuracy of these figures as they
  may reflect the beliefs of the service users' parents.
- Anecdotal evidence also suggests that some service users are supported to attend regular worship.

## Sexual Orientation

#### **Sexual Orientation in the General Population**

The Office for National Statistics estimates that of the population in Richmond, 93.2% are Heterosexual, 1.8% are Lesbian, Gay or Bisexual and 5% Prefer not to say, do not know or other (Source: ONS Sexual Identity by Local Authority).

In London, 2.8% of Londoners over the age of 16 identify as lesbian, gay, or bisexual (Source: ONS March 2020).

#### Sexual Orientation of Service Users in Richmond

Sexual Orientation	Count	%
Bisexual	2	1%
Heterosexual	59	32%
Prefer not to say	23	13%
Unknown	95	52%
Lesbian or Gay	3	2%

Source: Mosaic Case Recording System (accessed February 2021)

#### **Analysis**

- There is a growing body of research about sexuality and people with a learning disability. This indicates a desire by many to be able to have a relationship and the benefits of a relationship just like anyone else. This <u>link</u> to Royal Mencap sums up the latest research and good practice.
- 3% of learning disability service users identify as lesbian, gay or bisexual in Richmond.
- 65% of service users either prefer not to say or their sexual orientation is unknown. This is because some people with a learning disability may lack capacity to understand or identify with the terms.
   Some may also be afraid to declare their sexuality as they are worried about stigma and prejudice.

#### Across groups i.e older LGBT service users or bme young men

#### Age and Religion

 23% of service users who are Christian are also aged 65 years and over.

#### Age and Ethnicity

- All service users who are aged 65 years and over (45) are White.
- 45% of those from a Mixed background are aged 35 years or under.
   Service users from an Asian or Asian British and Black or Black
   British background are all aged between 18 and 44 years.

#### Age and Sexuality

 Of the small numbers of known LGBT service users there is an equal distribution across the age groups, with the youngest LGBT service

user in the age group 25 - 35 years and the oldest in the 75 – 84	
years age group.	

## Data gaps.

Data gap(s)	How will this be addressed?
Age Clearer information is needed regarding the numbers of young people in Children's Services and Transitions who are likely to be eligible for adult social care over the next years, including the type of support that they are likely to need.	Further conversations will take place between Children's Services and Adult Social Care. This includes clear data around children and young people likely to need Adult Social Care over the next 10 years (in line with the strengths based approach).
Disability Work needs to be further developed to define how many services need to be commissioned over the next 10 years and how many units at each.  Clearer information is needed regarding the number of people accessing individual day opportunities in Richmond.	Analysis of the emerging data will be further developed between housing, operational services and commissioning regarding need for housing. This work should build on the Learning Disability Demand Forecasting for Accommodation findings.  A day services review is needed in order to improve market intelligence and to produce
Gender reassignment There are no reliable or definitive figures available locally regarding this data	demand mapping.  Work needs to be carried out to ensure local data is collected for all service users.
Marriage and Civil Partnership Maternity and pregnancy Religion and belief, including non-belief Sexual orientation There are a large number of "unknowns" or unrecorded data in relation to the data which is collected locally.	Work needs to be carried out to ensure local data is collected for all service users.

## 3. Impact

Protected group	Positive	Negative
Age	The recommissioning of services for people with a Learning Disability will include proposals for different service models, including service models that meet the needs and expectations of different age groups.  This should in part also contribute to opportunities to make friendship groups and facilitate the development of new services that better meet the needs and expectations of younger service users who are currently at greater risk of being placed out of borough and older service users who may have age related additional needs	As the service users are across all age groups, there is a concern that the services will become a 'one size fits all' if the contract and referrals are not well managed. To ensure services are tailored to differing needs, service users will be engaged in the co design and monitoring of services

#### Disability

These services are designed for people with eligible needs regarding their learning disability. However, many service users also have a physical disability, a significant proportion are autistic, and a significant proportion have experienced mental ill health. The commissioning programme presents the opportunity to ensure that the care and support provided is aligned to the Council's strengths-based approach to social work. Also, it will enable the accommodation to meet the needs of people with a variety of physical disabilities, such as wheelchair accessibility, and to ensure that the services are capable of supporting those who are also autistic and/ or have mental ill health.

All services should demonstrate and help service users to challenge universal services and employers to make reasonable adjustments. They should also help service users to challenge and deal with the consequences of harassment and victimisation related to their disability.

The recommissioning may lead to a change of service provider, changes in staffing and changes in the way that services are delivered. Some people who use the services may find the changes cause distress and for some that may manifest in behaviours that others find challenging. In mitigation there will be a range of coproduction and communication activities in the runup to any change, the tender evaluation will check prospective providers' capability to manage this kind of change, and each commissioning exercise will have an extensive mobilisation period to ensure a smooth transition and continuity of support for the service users potentially impacted by a changed in provider.

In some cases, a service user may be relocated to new accommodation. Due to the nature of learning disabilities, the service user may struggle to understand why they must change accommodation. A change like this can cause distress for some people with a learning disability. To minimise the impact on service users of any potential changes there will be a robust communication plan implemented for service users and families and an extended mobilisation period to allow additional time to explain the changes and ensure service users understand what they mean

It is also important to acknowledge that in some cases paid employment may

		not be an appropriate option for the service user due to their complexity of need.
Gender (sex)	Entry into services are based on eligible needs not gender. All people, regardless of gender, will receive the appropriate level of care and support.  The recommissioning programme provides the opportunity to ensure that any gender specific needs are addressed within care and support plans and the suitability of the placement.  The recommissioning recognises that there are fewer female service users and will include provisions to ensure that females feel safe when they live in mixed-gender shared accommodation.  All services should help people to challenge and deal with the consequences of discrimination, harassment and victimisation related to their gender.	There is no evidence to suggest that these proposals will have a disproportionately negative impact on anyone based on gender.
Gender reassignment	Support workers should help those seeking gender reassignment to obtain appropriate support from the NHS. Support workers should help people to challenge and deal with the consequences of discrimination, harassment and victimisation related to gender reassignment.	There is no evidence to suggest that these proposals will have a disproportionately negative impact on anyone based on gender reassignment.
Marriage and civil partnership	Support workers should be skilled to support people to access sex and relationships education, to access social activities where they may have the opportunity to meet a potential partner, and to have privacy when needed.	There is no evidence to suggest that these proposals will have a disproportionately negative impact on anyone based on their marital status.
Pregnancy and maternity	Support workers should be skilled to support pregnant women and their partner to access universal and specialist maternity services, financial advice and to move when they need a more appropriate home.	Some accommodation services may not be suitable for service users who are pregnant such as shared accommodation and the service user may need to move.  For some respite services may not be able to be accessed by pregnant service users due the accommodation available.

		Some pregnant service users in paid employment will need to be advised of and need help to understand their employment rights whilst pregnant. A risk assessment and mitigating actions maybe required to continue to enable the service user to undertake their job.
Race/ethnicity	All services should provide support to service users that are relevant to their culture. Support workers should help people to challenge and deal with the consequences of discrimination, harassment and victimisation related to their race/ethnicity.	There is no evidence to suggest that these proposals will have a disproportionately negative impact on anyone based on their race or ethnicity.
Religion and belief, including non belief	All services should be aware and skilled to support people to attend religious services and practice religious customs in accordance with the person's wishes. Support workers should help people to challenge and deal with the consequences of discrimination, harassment and victimisation related to their belief.	There is no evidence to suggest that these proposals will have a disproportionately negative impact on anyone based on their religion and belief.
Sexual orientation	Support workers should be skilled to help people to have a positive view of their sexual orientation and to help lesbian, gay and bisexual service users to meet other people with a similar sexual orientation. Support workers should help people to challenge and deal with the consequences of discrimination, harassment and victimisation related to their sexual orientation.	There is no evidence to suggest that these proposals will have a disproportionately negative impact on anyone based on their sexual orientation.

### 4. Actions

Action	Lead Officer	Deadline
Include within all re procurement exercises and tender	Jo Warren /	Sept 21
evaluations and Social Value assessment of potential	Procurement	
providers capability to support the Council to deliver against	Team	
its equalities' duties.		
Involve service servicers and their families in the design of	LD	Ongoing
service specifications and the evaluation of tenders by	Commissioning	
potential providers.	Team	
Include within all contracts a requirement to routinely report	Dimitra	Sept 21
on the protected characteristics of its services users.	Nikoloudaki/	
Include within contract monitoring meeting a standard	Quality	
agenda item on equalities.	Assurance	
	Team	

All commissioned services will routinely monitor and report on the protected characteristics of its service users to assure the Council that they are actively monitoring and implementing appropriate actions to address inequalities.		
Commission bespoke community support services that are age, gender and culturally specific to avoid within group discrimination and/or risk of exploitation.  The recommissioning exercise will need to give additional consideration to young adults (under 30) so as to increase their access to support in the community	Melanie Cressey	March 22
Recommission the Supported Employment contract and increase the proportion of people with a learning disability who want to be in paid employment.	Catherine Tyrrell	Nov 22
Commission Shared Lives Services that are age, gender and culturally specific. Recommission services that recruit carers that are able to support female service users and a wide range of diverse ethnic groups so as to increase the number of female service users and those from different ethnic groups.	Catherine Tyrell	Dec 22
Commission accommodation-based services that are age and gender and culturally specific to avoid within group discrimination and/or risk of exploitation Give additional consideration to young adults (under 30) and older adults aged 65+.	Caroline Coles/ Alan Hiscutt	March 23
Raise awareness of the universal and specialist family planning, maternity service and gender identity services available locally for people with learning disabilities.  Liaise with CCG Richmond and Public Health to identify any gaps in service with service users and providers.	Elizabeth Pepper	Oct 21
Commissioned providers will be required to demonstrate that they co- produce with service users through the performance and contracting monitoring schedules.	LD Commissioning Team	Ongoing

#### 5. Consultation

Each commissioning exercise will undertake a series of stakeholder engagement activities to ensure the views of a wide range of professionals and experts by experience inform the design of service specifications and the tender evaluation criteria.

The views of service users will be sought through a variety of mechanisms that include but are not limited to online surveys via the Council's corporate website, focus groups and a range of community groups and stakeholder and partnership forums.

This will include asking people their views about the services and on the draft EINA. This EINA will be revised following that consultation.