

APPENDIX B - Equality Analysis (EqA)

Questionnaire

Please refer to the guidance before completing this form.

3. How are the equality strands affected? Please detail the effects on each equality strand, and any mitigating action you have taken so far. Please include any relevant data. If you do not have relevant data please explain why.									
Equality Strand	Affected?	Explain how affected	What action has been taken already to mitigate this? What action do you plan to take to mitigate this?						
1. Age	Yes ⊠ / No □	Positive impact	N/A						
		The support lots available through the Accommodation and Support Approved provider list will be available for people aged 18 upwards. There is no upper age limit to the provision.							
		Young adults							
		Young adults (aged 18-25 year) who may have either low needs or very complex needs will particularly benefit from having a variety of skilled providers who can support them to meet their aspirations of having greater choice and independence by living in their own home: developing their independent living skills; supporting them to access education and employment; developing their social networks and supporting them to be an active part of their community. This support will ensure that they have the right support to prepare them for their on-going pathway in to adulthood.							

Additionally younger adults with complex needs or behaviours that may challenge some services will benefit from having skilled providers in borough. This will mean they should not have to go far from Barnet to have the right support to meet their needs. Enabling them to remain close to their family networks and support.

Older adults

Older adults will benefit from having providers who have the knowledge and skills to support service users as their needs change, to support and enable them to remain as independent as possible. Older adults will benefit from providers having the skills to reduce avoidable hospital admissions (e.g. by using assistive technology to avoid falls) and having flexible skilled support in place to enable service users to return home following a hospital admission.

Sheltered plus provision will maximise choice for older people by providing an alternative, for some people, to residential care. Providing a home for life, with flexibility in care and support to meet changing need.

Data

Barnet's general older people population

The Barnet over-65 population is forecast to grow three times faster than the overall population between 2015 and 2030, and the rate increases more in successive age bands. For instance, the 65+ population will grow by 34.5% by 2030, whereas the 85 and over population will increase by 66.6%.

Barnet Population 2015, by Broad Age Group (JSNA 2015-20)

	All Persons					
Age	No. of People	% of People				
0 - 15	77,789	21.2%				
16 - 64	237,901	64.8%				
65 and over	51,575	14.0%				
Total	367,265	100.0%				

2. D	Disabilit	Yes ⊠ / No □	Positive impact	N/A
У			Learning disabilities	
			People with learning disabilities will benefit from having access to a range of providers that have the skills and knowledge to provide them with personcentred support that will enable them to increase their	

independence, support them to have an active role in the community.

Autism

People with autism will benefit from having providers that have the specific skills and knowledge to enable them to increase their independence, support them to have an active role in the community.

Physical and sensory impairment

People with physical and sensory impairments will benefit from having providers that have the skills and knowledge to enable them to increase their independence, support them to have an active role in the community.

Mental health

People with mental health_conditions will benefit from having a range of different support options that can respond to people's individual needs (e.g. support at home, supported living and specialist mental health step-down support).

"Support at Home" will offer flexible and short term housing related support for people with mental health conditions. Support is to help people live independently in their own accommodation (private renters and home owners) in the community.

The "Supported Living" offer includes accommodation, care and support for people with disabilities, including learning disabilities and mental health conditions

The expectation is that Supported Living providers work with residents to enable them to develop their independent living skills supporting them to reduce the level of support they need and to move-on from supported living services.

The "Support At Home" specialist mental health step-down' service includes accommodation and high level support, following discharge from Secondary Mental Health Services. Provides access to 24 hour support that is flexible and responsive to individual's needs. The service will be time limited, supporting individuals to successfully move to independent living. Therapeutic support can be offered alongside the accommodation based support through partnerships with secondary mental health services.

Data

Learning Disabilities

The proportion of people with learning disabilities (PWLD) is under 0.5% of the overall Barnet population; however over 11% of Adult Social Care

service users are PWLD.

Overall the number and proportion of service users with PWLD has remained relatively stable, however, this current trend is not expected to continue in the future. A 14% growth in the number of residents with moderate to severe learning disabilities is projected over the next decade.

<u>Autism</u>

Approximately 1% of the adult population have an Autistic Spectrum Conditions (ASC) which equates to about 2,600 people in Barnet. In 2015/16, there were 321 Adult Social Care service users in Barnet who were recorded as having autism (although this was not always their primary reason for accessing social care services).¹

Physical and sensory impairment

Over 50% of Adult Social Care service users have a physical or learning disability, and for people aged 65 and over this rate is significantly higher; 72.2% in 2013/14.

	201	1/12	20	12/13	2013/14		
Age Grou p	No.	% of Total Service Users	No.	% of Total Service Users	No.	% of Total Service Users	
18- 64	701	26.30%	689	24.90%	656	24.30%	
65+	3,352	68.90%	3,353	70.30%	3,427	72.20%	

Table 9-1: No. and % of Adult Social Care categorised as Physical Disability and Sensory Impaired

Source: SWIFT – Adult Social Care Database

Mental health conditions

There are 1,305 adults and older people with mental illness known to the Council receiving social care services. A further 15 people are in receipt of health rehabilitation services funded by the CCG.

The number of people with Mental Health needs in Barnet is expected to continue to increase, especially in the older age patient group due to an above average increase in the number of people in the local older population.

¹ Autism Self-Assessment Framework 2016

		2014	2015	2016	2017	2018		
	People aged 18-64 predicted to have a common		38,542	39,061	39,572	40,046		
	People aged 18-64 predicted to have a borderlin	e 1,066	1,079	1,093	1,107	1,120		
	personality disorder People aged 18-64 predicted to have an antisoci		828	842	856	869		
	personality disorder People aged 18-64 predicted to have psychotic		***					
	disorder	946	958	971	983	995		
	People aged 18-64 predicted to have two or mo psychiatric disorders	16,975	17,196	17,438	17,680	17,901		
	* Figures may not sum due to rounding. Crown copyright 2014 ** The prevalence rates have been applied to ONS population proje	tions for the 18-64	population to	give estimated	numbers pred	icted to have		
	a mental health problem							
2 Candor Unknown	No available data							NA
3. Gender reassign ment								
4. Pregnan –	No There are no direct im maternity in the propo		in rel	ation	to p	regna	ancy or	NA
cy and maternit	matering in the prope	Juli						
у								
5. Race / Yes 🗵 /	No Person centred suppousers to specify any s	•						NA
Ethnicity	they need to enable th	em to	mee	t cult	uralı	need	S.	
	Having an Approved F				•			
	users access to a great have a range of varied		_					
	meet the specific need	ls of d	iffere	nt se	rvice	use	rs.	
	<u>Data</u>				-			
	Compared to the Oute higher proportion of pe							
	group; 57.8% and 61.3 has higher rates of the		•	-				
	Asian and Chinese eth					,		
		However, certain areas within the Borough have a						
	higher proportional Bla population than the Bo	rough	ave	rage.		-		
		Based on the 2011 Census, Colindale, Burnt Oak and West Hendon all have populations where Black, Asian						
	and Minority residents population; this is sign	make	up c	ver h	nalf o	f the		
	wide average of 39%.	By ag	e, the	e hig	hest	propo	ortion	
	of the population from found in the 90 and ov	er age	gro	up (9	3.3%); wh	ereas	
		the highest proportion of people from Black, Asian and Minority Ethnic groups are found in the 0-4 age group (55.4%).						
	The table contains the	proje	cted	popu	latior	n grov	wth by	

ethnicity for the period 2015-2021 and 2015-2030. Barnet's population is projected to become increasingly diverse as the White British population is projected to decrease in proportion to the total population (from 61.3% in 2015 to 58.4% in 2021 and 56.4% in 2030).

All Black, Asian and Minority Ethnic groups are projected to increase in number during the period 2015 to 2030. Although over this period the proportion of individuals from Indian ethnic groups will reduce from 7.5% of the total population to 7.1%.

Ethnic Group	2015	2030	Ethnic Compositi on in 2015	Ethnic Compositi on in 2030
White	225,193	235,457	61.3%	56.4%
Black Caribbean	4,617	5,002	1.3%	1.2%
Black African	21,174	25,472	5.8%	6.1%
Black Other	11,588	16,377	3.2%	3.9%
Indian	27,530	29,512	7.5%	7.1%
Pakistani	5,698	6,941	1.6%	1.7%
Bangladesh i	2,453	3,139	0.7%	0.8%
Chinese	8,805	11,015	2.4%	2.6%
Other Asian	34,296	48,638	9.3%	11.6%
Other	25,917	36,012	7.1%	8.6%
Black, Asian and Minority	142,074	182,114	38.7%	43.6%

6. Religion or belief

Yes 🛛 / No 🗌

Positive Impact

Person centred support plans will enable service users to specify any specific support requirements they need in order to meet their religious or cultural needs.

Having an Approved Provider List will give service users access to a greater range of providers who will have a range of varied specialisms and expertise to meet the specific needs of different service users.

Data

Barnet Population by Religion, 2011

Barnet 2011

NA

		Religion	No. of	People	% of population	on			
		Christian	146	,866	41.2%				
		Buddhist	4,5	521	1.3%				
		Hindu	21,	924	6.2%				
		Jewish	54,	084	15.2%				
		Muslim	36,	744	10.3%				
		Sikh	1,2	269	0.4%				
		Any other religion	3,7	764	1.1%				
		No religion	57.	297	16.1%				
		Religion not stated	,	917	8.4%				
		(Source: Barne Assessment 20		_	Needs				
7. Gender / sex	Yes 🗌 / No 🔯	The scheme will residents regard	•	•	act on all _l	potential	NA		
8. Sexual orientati on	Unknown	No available da	No available data.						
9. Marital Status	Yes 🗌 / No 🔯	No foreseen important marital status.	No foreseen impact on any resident based on their marital status.						
10. Other key groups? Carers	Yes 🛚 / No 🗍	having Care Acra a crash-pad lot themselves and will benefit from support of skille the needs/beha escalate. Carers Data Data Trom the 2 32,256 resident in Barnet in 201	Carers supporting adults' who have been identified as having Care Act Eligible need, will benefit from having a crash-pad lot providing respite support for themselves and for the person they support. Carers will benefit from having the timely intervention and support of skilled professionals during periods where the needs/behaviours of the person they care for may escalate. Carers will benefit from having Data Data Data from the 2011 Census indicated that there were 32,256 residents who classified themselves as a carer in Barnet in 2011. Table 9-2: Number of carers assessed by the primary						
		Source: SWIFT –							
		Client Categ	gory	2011/12	2012/13	2013/14			
		Physical / Senso Impairment (18	-	226	248	177			
		Learning Disabil		115	171	160			
		Mental Health (18-64)	164	86	126			
		Other (18-64)		7	5	5			
	1		ı						

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			Older Adults	1,820	1,669	1,480			
			Total	2,432	2,179	1,948			
4. What measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? Include information about the groups of people affected by this proposal. Include how frequently will the monitoring be conducted and who will be made aware of the analysis and outcomes? Include these measures in the Equality Improvement Plan (section 15) People's individual packages of support will be reviewed through the annual review of their support plan,									
			ovision and that thi						
this will check	quality of se	ervice pro	ovision and that thi	s continues to r	eriect indivi	iduai choice	and needs		
The performance of providers will be monitored through provider forums and regular monitoring meetings with Barnet's Care Quality Service.									
	Assessr	nent							
	impact								
Posit	ive Impact			Impact or ot Known ²		No Imp	pact		
6. Scale o	of Impact								
	•		Namativa	l					
Positi	ve impact:		_	Impact or ot Known					
Minim	nal 🗌		Minimal						
Signif	icant 🗵		Significa	ant 🔲					
7. Outcome									
No change to	decision	Adjust	ment needed to decision			on impact - Stop / dverse missed			

² 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

8. Please give full explanation for how the overall assessment and outcome was decided

This initiative will have a positive impact on individuals as it will:

- Enable service users to have a varied range of person-centred options to support them to live well in the community and to develop their independence
- Provide a more personalised approach, working closely with individuals to match accommodation and support provision to their aspirations for a home, friends and good work
- Provide more specialised support to people with complex needs to enable them to live more independently in the community
- Given the positive impacts of all of the equality strands the decision was made to implement the proposal