

‘You will not get far if you perceive the duty to be over burdensome or take a mechanistic approach....there will be progress if the duty is seen as a way of fundamentally changing the core values and culture of the organisation.....we need an outcome-oriented approach’ – CRE Chair 2001

# Equality Impact Assessment (EIA): Stage 1

## Initial Screening Form for New/Revised Policies or Functions

### A: Summary Details

Directorate:

Section: Commissioning

Person responsible for the assessment: Kate Young

Contact details: 0207 364 2163

Name of Procedure to be assessed: review of services funded by Carers' Grant

Date procedure scheduled for Overview and Scrutiny/Cabinet/LAB: September 6<sup>th</sup> 2006

<b>Service Head</b>	Barbara Disney
<b>Signature</b>	
<b>Date</b>	

### B: Preparation

*It is important to consider all available information that could help determine whether the policy could have any potential adverse impact. Please attach examples of available monitoring information, research and consultation reports.*

**1. Do you have monitoring data available on the number of people (from different target groups) who are using or are potentially impacted upon by your policy? Please specify what monitoring information you have available (your monitoring information should be compared to the current available census data to see whether a proportionate number of people are taking up your service).**

### 1.1 Data on Carers accessing services in Tower Hamlets

No.	Description	Source
<b>Potential need</b>		
<b>17,649</b>	No. informal carers in Tower Hamlets making up 9% of the total population.	ONS Census Data 2001
<b>4,942</b>	Out of the total no. of carers, 28%, are full-time carers giving 50 or more hours per week.	ONS Census Data 2001
<b>Numbers helped</b>		
555	No. of adults receiving Social Services who have an informal carer who will be either directly or indirectly supported	SWIFT (Quality and performance section)
277	Children with Disabilities who receive Social Services the vast majority of whom will have parents whose needs are considered in their care arrangements.	SWIFT (Quality and performance section)
1463	Number of carers who received either a service or advice and information from a grant funded voluntary sector organisation	Performance Information returns from voluntary organizations, checked through review
<b>2295</b>	<b>Total no. of carers supported</b> making assumption that none are double counted (i.e. best case scenario).	

### Age groups of Carers Currently supported by Carers Services

	Under 18	18-64	65-74	over 75
<b>TOTAL</b>	<b>27</b>	<b>448</b>	<b>70</b>	<b>44</b>

### 1.2 Ethnicity and age breakdown for population of Tower Hamlets

Ethnic Group	All People	%	0-15	%	16 -19	%	20-29	%	30 - 64	%	65+	%
White British	84,151	42.9	10,556	12.5	2,621	3.1	19,974	23.7	37,866	45.0	13,134	15.6
Bangladeshi	65,553	33.4	26,168	39.9	6,071	9.3	13,666	20.8	17,299	26.4	2,349	3.6
White Other	12,825	6.5	741	5.8	232	1.8	5,844	45.6	5,538	43.2	470	3.7
Black African	6,596	3.3	1,811	27.4	465	7.0	1,171	17.8	2,853	43.3	296	4.5
Black Caribbean/ British	5,225	2.7	941	18.0	306	5.9	650	12.4	2,686	51.4	642	12.3
Indian	3,003	1.5	479	15.9	167	5.6	1,066	35.5	1,133	37.7	158	5.3
Chinese	3,573	1.8	522	14.6	202	5.7	1,291	36.1	1,377	38.5	182	5.1

Source: Census 2001 standard Tables: Crown Copyright

**1.3** The Delivery and Improvement Statement 2005-06 based on monitoring information provided by the organisations funded by the Carers' Grant that provide respite services, showed that of the breaks provided to carers through the Carers' Grant 42% were to people who describe themselves as White British and 56% from a BME background. This aspect of service delivery is proportionate to the population.

**1.4** In terms of the overall numbers of carers in the borough, it remains the case that there are a significant number of carers who are not getting any support, either from social services or from a voluntary sector organisation. Although it's the case that not all these people will want support, it clearly means that we cannot afford to assume that carers are getting the message that they are entitled to an assessment and that support may be available.

**2. If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data for this area? If not, specify the arrangement you intend to make; if not please give a reason for your decision.**

**3. Please list any consultations that you may have had and/or local/national consultations, research or practical guidance that will assist you in completing this EIA.**

### **3.1 Visits to service providers and analysis of monitoring information.**

A visit was made to all providers of services primarily to carers of adults and standard questions asked about the method of service delivery, criteria and access arrangements, and current concerns. In addition, last year's monitoring information was compared to information provided in evaluation reports, and a sample of assessments looked at where available.

### **3.2 Postal/ email survey of social workers**

A standardized questionnaire was sent to every social work team leader to disseminate to their teams. There was a poor response overall, but the 22 responses from the service

give some useful indications of the level of knowledge and understanding of social workers of carer's needs and provisions, and the differing perception of need in different care groups.

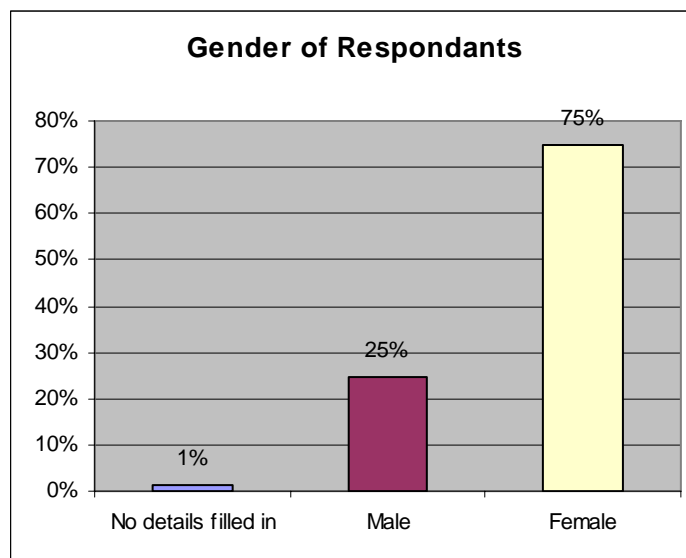
### 3.3 Postal survey of carers known to Carer's Services

A standardized questionnaire was designed in collaboration with provider organizations, including carers' feedback, translated into Syletthi and Somali, and sent out to an estimated 700 current and past users of carer's services with the aim of capturing their views on and knowledge of, the range of services on offer to them. A more accurate figure cannot be obtained as half the surveys were sent out by providers on our behalf and exact numbers are not known.

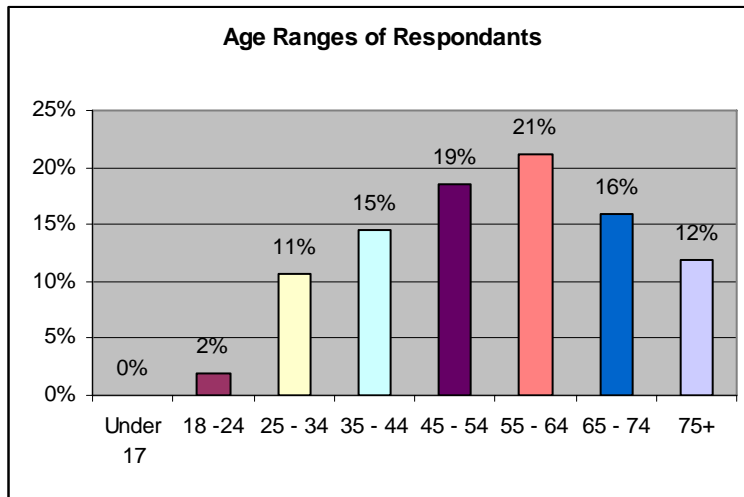
A total of 168 Carers completed the surveys, representing a 24% response rate. 5 people sent them back uncompleted saying that the person they cared for had died. Many respondents had not answered every question, or responded to more than one option so percentages given relate only to each individual point and will not total up to 100% overall for each question.

#### Profile of Carers who responded

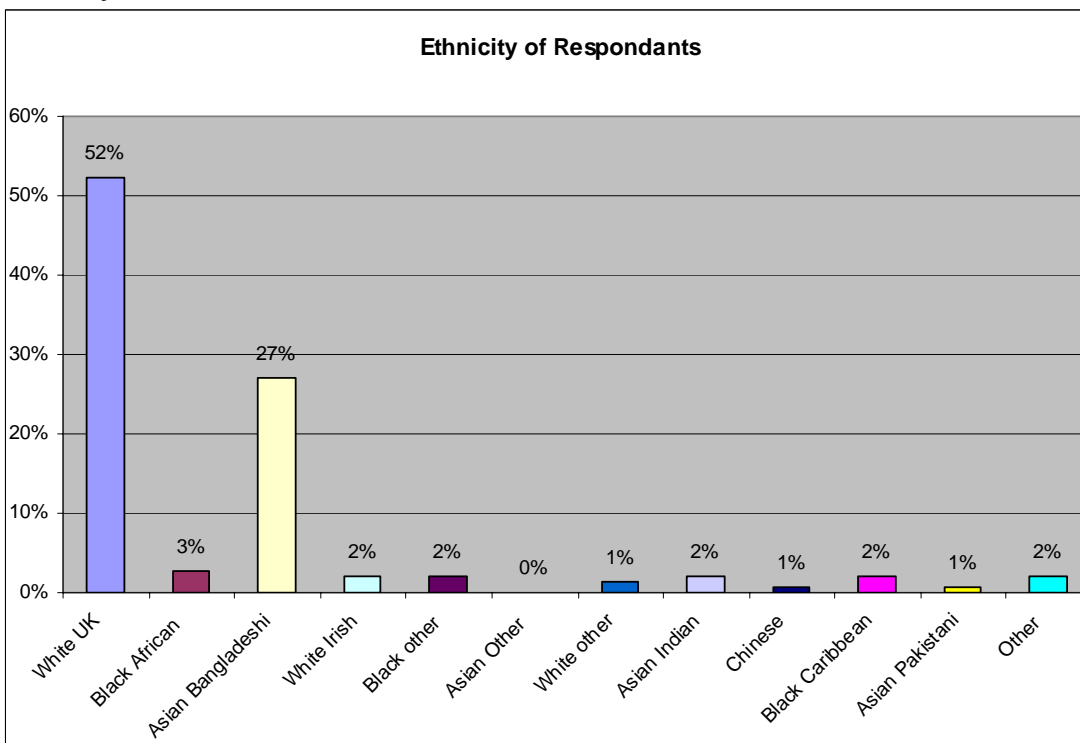
##### *Gender*



##### *Age ranges*



### Ethnicity



### 3.4 Discussion with other stakeholders

Conversations were held with professionals with expertise on particular aspects of service delivery where there were particular questions and issues relating to a provider, or cross-cutting issues where a service is joint funded by another part of the commissioning section.

## C: Your Policy or Function

### 1. What is the main purpose of the function?

To make a series of recommendations to ensure that the changing needs of carers in Tower Hamlets are addressed by a range of services which are needed and valued by carers, of high quality, and representing value for money.

**2 Are there any other objectives of the policy or function, if so what are they?**

To meet the requirements of the guidance accompanying the funding and to deliver services within the Grant allocation for the borough.

**3 Who are the main stakeholders of the procedure?**

Carers who provide regular and substantial care to a Tower Hamlets resident who is eligible for social services, or who live in Tower Hamlets and support someone who lives in another area.

The organisations that are funded by the Carers' Grant.

Referring agencies.

**4 Is the function associated with any other Council function (s)?**

Commissioning of other services for carers by Social Services Commissioning Section.

Provision of Direct Payments for Carers.

Carers' assessments by social workers.

**5 Are there any areas of the service that are governed by discretionary powers? If so, is there clear guidance as to how to exercise these?**

As a three star authority the Council retains the right to spend the grant as it wishes.

**6 Is the responsibility for the proposed function shared with another department or authority or organisation? If so, what responsibility, and which bodies?**

No.

## D: The Impact

Assess the potential impact that the policy could have on each of the target groups. The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any of the target groups you will need to also assess whether that negative potential impact is high, medium or low – see glossary in the attached guidance notes for definitions.

1.

a) Identify the potential impact of the policy on men and women:

Gender	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
Women	YES			Service take up
Men	YES			Service take up

b) Identify the potential impact of the policy on different race groups:

Race	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
Asian (including Bangladeshi, Pakistani, Indian, Chinese, Vietnamese, Other Asian Background – please specify _____)	YES	LOW		The Service has positive impact on Bangladeshi community, but it may have low



				negative impact on the other Asian communities.
<b>Black</b> (including Caribbean, Somali, Other African, Other black background – please specify_____)		<b>Medium</b>		Lack of information about the needs of the Somali Community.
<b>White</b> (including English, Scottish, Welsh, Irish, Other white background – please specify_____)	<b>YES</b>			42% of the total service users is proportionate to the local population.
<b>Mixed Dual heritage</b> (White and Black Caribbean, White and Black African, White and Asian, Other mixed background - please specify_____)		<b>LOW</b>		Lack of information about the needs of the people from mixed heritage.
<b>Other</b> (please specify)		<b>LOW</b>		Lack of

New Entrants				information about the needs of the emerging Community.
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c) Identify the potential impact of the policy on lesbian, gay men, bisexual or heterosexual people:

Sexual Orientation	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
Lesbian		Low		Lack of appropriate policy, training, monitoring date etc
Gay Men		Low		same as above
Bisexual		Low		same as above
Heterosexual		Low		same as above

d) Identify the potential impact of the policy on disabled people:

Disability	Positive	Negative (please	Neutral	Reason
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		<b>specify if High, Medium or Low)</b>		
		<b>LOW</b>		<b>People from certain impairment groups may be experiencing adverse impact as there is no sufficient data available to prove otherwise.</b>

**e) Identify the potential impact of the policy on different age groups**

<b>Age Group (specify, for example younger, older etc)</b>	<b>Positive</b>	<b>Negative (please specify if High, Medium or Low)</b>	<b>Neutral</b>	<b>Reason</b>
<b>Young Carers</b>			<b>YES</b>	<b>Equitable commissioning</b>

**f) Identify the potential impact the policy on different religious/faith groups?**

<b>Religious/Faith groups (specify)</b>	<b>Positive</b>	<b>Negative (please specify if High, Medium or Low)</b>	<b>Neutral</b>	<b>Reason</b>
<b>Buddhist</b>		<b>Low</b>		<b>Low access/take up</b>
<b>Christian</b>	<b>YES</b>			<b>High take up of</b>

				<b>services by White British population</b>
<b>Hindu</b>		<b>Low</b>		<b>Low access/take up</b>
<b>Jewish</b>	<b>YES</b>			<b>Take up os services</b>
<b>Muslim</b>	<b>YES</b>			<b>High take up of services by Asian/Bangladeshi population</b>
<b>Sikh</b>		<b>Low</b>		<b>Low access/take up and lack of information</b>
<b>Other (please specify)</b>			<b>YES</b>	

**g) As a result of completing Question 1 a-f above what is the potential impact of your policy?**

**High**                       **Medium**                       **Low**

If you have assessed the potential impact as HIGH you must complete a full potential impact assessment.

**2. Could you minimise or remove any negative potential impact that is of medium or low significance? Explain How.**

Race:

Gender:

Disability:

Age:

Sexual Orientation:

Religious/Faith groups:

Please ensure that all actions identified are included in the attached action plan and in your service plan.

Please sign and date this form, keep one copy and send one to Equalities Team..

**Equalities Impact Assessment Action Plan:**

**The following action plan should reflect the findings of the assessment in Section D.**

Recommendation/ Action required	Key activity	Progress Milestones	Responsible Officer	Resource implications
Better information about the needs of carers from minority communities (e.g Somali).				
Better Care Planning				
Effective Partnership working with the Children's Trust, voluntary sector and carers groups.				