Equality Impact Assessment

Introductory Information

Budget/Project name	Carers' Strategy Delivery Plan		
Proposal typeBudgetProject	Reference number 903		
 Decision Type Cabinet Cabinet Committee (e.g. Leader 	Cabinet Highways Committee)		
 Individual Cabinet Member Executive Director/Director 			
O Officer Decisions (Non-Ke			

• Regulatory Committees (e.g. Licensing Committee)

Lead Cabinet Member

Cllr George Lindars-Hammond

Entered on Q Tier?

○ Yes ● No

Year(s)

0	0	0	0	0	0	0	
14/15	15/16	16/17	17/18	18/19	19/20	20/21	21/22

EIA date

04/02/2021

EIA LeadAdele RobinsonEd SextonAnnemarie JohnstonLouise NunnBashir KhanMichael BowlesBeth StormMichelle HawleyDiane OwensRosie MayPerson filling in this EIA formLead officerLee Teasdale-SmithAlexis Chappell

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Lead Corporate Plan priority

○ An In-Touch	 Strong Economy 	 Thriving Neighbourhoods
Organisation		and Communities
 Better Health and 	○ Tackling	
Wellbeing	Inequalities	

Portfolio, Service and Team

Cross-Portfolio		Portfolio		
○ Yes	No	People Services		

Is the EIA joint with another organisation (eg NHS)?

○ Yes ● No

Brief aim(s) of the proposal and the outcome(s) you want to achieve

This EIA has been produced to take account of the updated delivery phase of the Carers Strategy. It considers the impacts of the Carers Strategy Delivery Plan which goes to the Adult Health & Social Care Policy Committee in December 2022.

The Carers Strategy takes a multi-agency approach and partners alongside SCC have actions in the Delivery Plan; these actions are driven by the 'Carer Principles' that were co-produced when refreshing the carers strategy. They tell us, what carers will say and what organisations will do if the strategy is working:

Carers will say	Organisations will
 I have good quality information and advice which is relevant to me and the person I care for. 	 We will: Identify carers and understand that not all people in a caring role will recognise the term carer. Link up carer registers across Sheffield to make carer identification more effective. Be proactive, giving carers good quality information and advice when it is wanted or needed. Give personalised information and advice that is specific to the carer and the person they care for.
 2. I know what my rights are and how to enforce them. There are laws that help and protect me as a carer, and they cover things like: Employment. Protection from discrimination. Right to education. Social security benefits. Assessment of my need(s). 	 We will: Make effective interventions at the right time to prevent, reduce or delay carers' needs developing/escalating. Recognise carers' rights and support them to: Balance caring with education/employment. Avoid inappropriate caring. Be involved in health/social care planning for the person they care for. Arrange regular training for staff so they understand carers rights and know what support is available to carers. Take a whole family approach to assessment and support. This will result in a holistic view of the needs of the cared-for person and their family/network of support.
3. The caring I do is valued and I am listened to. This	We will: Pagested to carers and support them to participate in

 includes: My own needs, wants, opinions and feelings as a carer. My needs, wants opinions and feelings when talking about the person I care for. 	 decision making with the person they care for. Recognise and understand the importance of carers who are experts by experience. Treat carers with dignity and respect. Enable and empower carers to have a 'voice.' Work with carers like they are partners in the delivery of health/social care. Build relationships with carers, recognising that trust is earned. This is particularly important for organisations providing support to the cared-for person. Help carers to reduce or stop their caring role when that is what the carer wants. Consider different cultural and religious beliefs. Co-design/co-produce support for carers with carers.
 I have breaks from caring, meaning I have a life of my own and time for friends and family. 	 We will: Signpost or provide carer break support. Take a personalised approach, asking carers 'what matters to you?' Be flexible, allowing carers to make best use of their time to give more scope for breaks Encourage carers to get replacement care via an assessment of the person they care for. Support carers to be digitally included to help keep in touch with friends and family.
 My prospects in life are not affected due to me being a carer. I can access education, employment, and training. 	 We will: Work together with the carer to raise aspirations and achieve the outcomes that matter to them in their lives. Recognising that this is especially important for young carers transitioning to adulthood. Be carer aware with carer friendly policies/processes e.g. flexible working.
 I am supported to look after my mental/physical health and wellbeing. 	 We will: Understand that caring can negatively impact on a person's health and wellbeing. Promote self-care so carers are more actively interested in their own health. Support carers to access services/groups that will promote health and wellbeing e.g. exercise groups/move more initiatives. Proactively engage at risk groups including carers who are isolated or lonely.

The delivery plan will also be shaped by the vision of the carers strategy. This says that Sheffield is a '*City where Carers are valued and have the right support to continue to care for as long as they want to.*' This vision is echoed in 'Living the life you want to live,' which says, '*Unpaid carers are recognised for their expertise and supported to make the right choices for them and their family.*'

The first, and most important step, in making this vision a reality is identifying carers. If we don't know who our carers are, then how can we value and support them? NHS England's Commitment to Carers (2014) states that '*It takes carers an average of two years to acknowledge their role as a carer. It can be difficult for carers to see their caring role as separate from the relationship they have with the person for whom they care whether that relationship is as a parent, a son or daughter, or a friend.*' The identification and support of carers is the responsibility of all partners in the person, and social care systems.

Though the Care Act/Children and Families Act (2014) duties apply primarily to local authorities, the Care Act and other relevant guidance applies to other partners e.g., NICE's <u>Supporting Adult Carers</u>; this guidance is clear, detailing that carers should be identified and supported whilst in the health system. Supporting carers is also promoted via NHS England's <u>Commitment to Carers</u>; and <u>Supporting carers in general practice: a framework of quality markers</u>. The Health and Care Act (2022) places a duty on hospital trusts to take any steps that it considers appropriate to involve carers, as soon as feasible when discharge planning. Health services are a essential partner for this delivery plan and this is underlined by NHS England's Commitment to Carers (2014) which states that '70% of carers come into contact with health professionals, yet health professionals only identify one in ten carers with GPs, more specifically, only identifying 7%.'

The delivery plan aims to identify more carers in the health and social care systems, in order to link them into support and achieve our vision and 'Carer Principles'.

Impact

Under the <u>Public Sector Equality Duty</u> we have to pay due regard to the need to:

- eliminate discrimination, harassment and victimisation
- advance equality of opportunity
- foster good relations

More information is available on the <u>Council website</u> including the <u>Community Knowledge Profiles</u>.

Note the EIA should describe impact before any action/mitigation. If there are both negatives and positives, please outline these – positives will be part of any mitigation. The action plan should detail any mitigation.

Overview

Briefly describe how the proposal helps to meet the Public Sector Duty outlined above

The proposal supports SCC's responsibilities under the Public Sector Equality Duty, specifically in relation to people who share different protected characteristics:

For example, younger people, older people, people with a disability, people from different ethnic backgrounds who require care and will benefit from support to their carers (people who provide unpaid care).

The proposal also supports broader SCC equality priorities that go beyond legally defined protected characteristics: i.e. carers themselves will directly benefit, and there will be an impact on health, poverty and other areas of interest.

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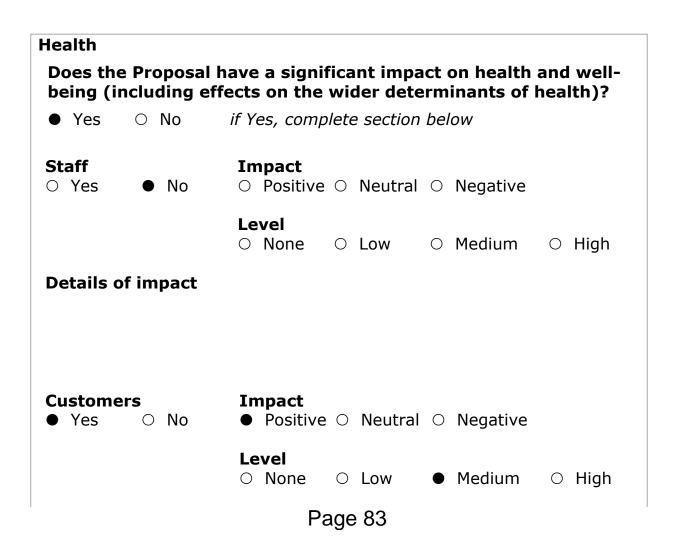
It is critical that we do what we can to support our carers; Coronavirus continues to have a profound impact on our caring population, including a dramatic increase in the number of those caring for someone living in Sheffield. <u>Carers UK reported</u> that the financial impact of the Coronavirus pandemic has been even harder on under-represented groups and the 'cost of living crisis' will likely exacerbate the impact; this means, that existing social, economic and health inequalities could be further amplified and embedded.

Impacts

Proposal has an impact on

Health	O Gender reassignment
● Age	Carers
 Disability 	 Voluntary/Community & Faith Sectors
• Pregnancy/Maternity	Cohesion
Race	Partners
○ Religion/Belief	Poverty & Financial Inclusion
• Sex	O Armed Forces
 Sexual Orientation 	O Other

Give details in sections below.



Details of impact

In March 2021 the Department of Health and Social Care produced a report arguing that there is growing evidence to suggest that caring should be considered a social determinant of health. The report detailed the impact caring has both mentally and physically stating:

'The evidence available suggests that the consequences of caring for older people are not significantly different to the consequences of caring for other populations. The rapid review evidence indicates that carers of older people experience poor mental health, including anxiety and depression, alongside 'carer burden', stress and poor quality of life. This aligns with findings from previous research about the impact of providing unpaid care (for any population) on mental health.

The report goes on to say:

`...carers are at increased risk of illness, and specifically musculoskeletal conditions, cardiovascular disease, generalised cognitive deterioration and function, and poor sleep.'

The Delivery Plan will have a positive impact on carers' health. It will support carers being identified earlier, multiagency working i.e., Sheffield Teaching hospitals, Sheffield Integrated Commissioning Board, Sheffield health and Social Care Trust and other partners working together in a strategic way to support carers.

The refreshed Carers Strategy and Delivery Plan both have health outcomes, focused on maintaining or improving the health of carers. They also focus on prevention and early intervention as well as health and wellbeing.

These focuses are essential as, according to Carers UK, 58% of carers felt like their physical health has been impacted by caring through the Coronavirus pandemic This is reflected in our local caring population too. The Council used Citizen Space to conduct a carer questionnaire which closed in April 2021. Our finding in relation to healt6h were that:

- 28% of carers reported their health as either bad (18.4%) or very bad (9.2%).
- 51% of carers indicated that their physical health has got worse since the start of the pandemic.
- 33% of carers described their mental wellbeing as bad (25.7%) or very bad (7.6%).
- 68% of carers feel that their mental wellbeing has got worse since the start of the pandemic.

Refresh Young Carer, Parent and Adult Carer Strategy Principles

These Principles were co-produced with carers and professionals from organisations that typically interact with, or support carers. The Work on the Delivery Plan will use the updated 'Carers Principles' to maintain the momentum:

Principle 6 is 'I am supported to look after my mental/physical health and wellbeing.' Organisations that sign up to the strategy will be expected to:

- Understand that caring can negatively impact on a person's health and wellbeing.
- Promote self-care so carers are more actively interested in their own health.
- Support carers to access services/groups that will promote health and wellbeing e.g., exercise groups/move more initiatives.
- Proactively engage at risk groups including carers who are isolated or lonely.

Comprehensive Health Impact Assessment being completed

○ Yes ● No

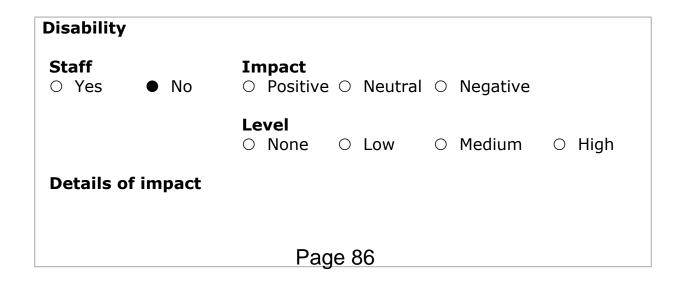
Please attach health impact assessment as a supporting document below.

Public Health Lead has signed off the health impact(s) of this EIA

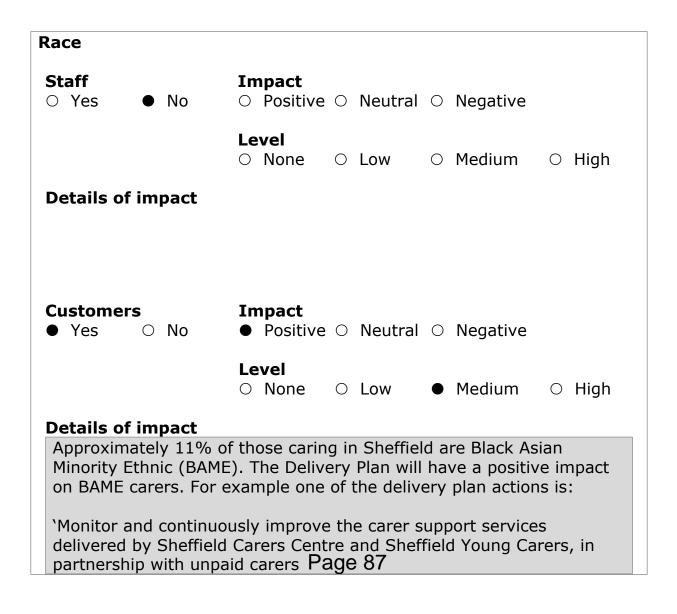
○ Yes ● No

Health Lead

Age				
Staff ○ Yes ● No	Impact O Positive O Neutral O Negative			
	Level O None O Low O Medium O High			
Details of impac				
Customers	Impact			
• Yes O No	-			
	Level ○ None ○ Low ● Medium ○ High			
Details of impac				
Approximately 20% of carers in Sheffield are aged 65 and over and one in three are aged 50-65. We also know that carers are getting older (21% increase of carers aged 65+ from the 2001 to 2011 census).				
over as it will hel	will have a positive impact on those aged 65 and support carers and as there are a disproportionate over 65, compared with the general population of mately 15%).			



Customers ● Yes O No	Impact ● Positive ○ Neutral ○ Negative				
	Level ○ None ○ Low ● Medium ○ High				
Details of impact					
unpaid care who the includes approximate	tely 17,000 people in Sheffield who provide mselves have a long-term health problem. This ely 7,000 carers whose day-to day activities are whom provide more than 50 hours of care per				
We also know that young carers are more likely to have special educational needs or a disability than their peers.					
as one of the main a	and Delivery Plan will positively impact all carers, ims is to identify more carers and provide them ng those with a disability.				



This will include monitoring our carers services to make sure they reflect our diverse population in Sheffield.'

Sex				
Staff ○ Yes ● No	Impact O Positive	O Neutral	 Negative 	
	Level O None	O Low	O Medium	⊖ High
Details of impact				
Customers ● Yes O No	Impact ● Positive	O Neutral	 Negative 	
	Level O None	○ Low	 Medium 	O High
Details of impact				
The carer support proposed will positively impact women, this is due to the makeup of the carer population in Sheffield – approximately 60% of carers are women and 40% are men. SCC needs to ensure that the carers we engage and support are reflective of the demographic profile in Sheffield to ensure equity. This will be done via SCC's equalities monitoring which is a standard part of contract monitoring.				
Furthermore, a key aim of the delivery plan is to identify and support more carers. <u>Evidence</u> shows that typically, providing care is disproportionately done by women and girls and the Coronavirus pandemic has exacerbated this. The delivery plan will help us identify more carers and therefore more women and girls who we can support.				

Carers			
Staff ● Yes	○ No	Impact O Positive O Neutral O Negative	
		Level O None O Low O Medium O High	

Details of impact

This is an opportunity to consider SCC employees within the broader aims of the strategy. Unpaid carers made up 14% of SCC's workforce in 2020-21 (the most recently available year). The delivery Plan has actions related to campaigning/awareness raising during Carers Week/Carers Rights Day. This includes messaging to our own staff, highlighting our carer support e.g. Employers for Carers/paid carers leave etc.

Customers ● Yes ○ No

Impact

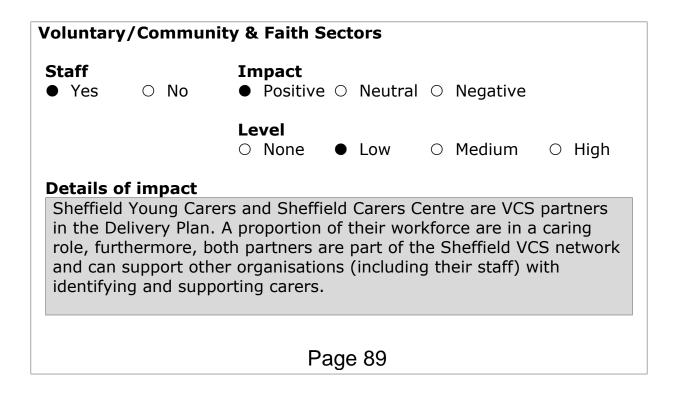
Docitivo O	Noutral	\cap	Nogativo	
Positive O	Neutral	\cup	negative	

Level ○ None ○ Low ● Medium ○ High

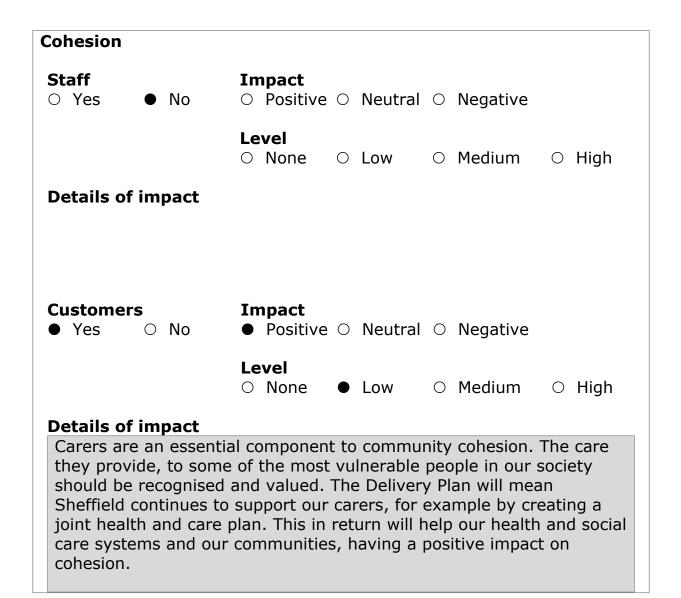
Details of impact

SCC (and partners) are being responsive to needs of carers through the Delivery Plan and our response to the refreshed Carers Strategy 'Principles.' The Delivery Plan aims to drive activity and achieve outcomes for carers by clearly setting out the milestones/actions that our multi-agency partnership will be focusing on. For more information, please see the Committee Report and Appendix 1 of that report (which contains the Delivery Plan).

This is more important than ever, due to the impact of Coronavirus. Carers UK figures suggest that there was a 50% increase in the number of carers since the start of the pandemic (nationally). If Sheffield followed the national trend, then there would be approximately 30,000 extra people caring meaning our total carer population could have reached 90,000 at the peak of the pandemic.



Customers ● Yes ○ No	Impact ● Positive ○ Neutral ○ Negative
	Level ○ None ○ Low ● Medium ○ High
	 Plan will work with the VCS to raise carer re of their customers who are carers are ed.



Partners		
Staff ● Yes	○ No	Impact ● Positive ○ Neutral ○ Negative
		Level ○ None ● Low ○ Medium ○ High
Details of	f impact	
Sheffield Trust, Sh we take a education	Integrated effield Care partnershi and social	h, including Sheffield Teaching Hospitals, Care Board, Sheffield Health and Social Care rs Centre, Sheffield Young Carers etc. It is vital p approach to identify carers in the health, care systems. The delivery plan encourages k together to recognise, value and support carers.
Customer O Yes	rs O No	Impact O Positive O Neutral O Negative
		Level O None O Low O Medium O High
Details of	f impact	

Poverty & Financial Inclusion		
Staff ○ Yes ● No	Impact O Positive O Neutral O Negative	
	Level O None O Low O Medium O High	
Details of impact		
Customers ● Yes O No	Impact ● Positive ○ Neutral ○ Negative	
	Level ○ None ○ Low ● Medium ○ High	
	Page 01	

Details of impact

Carers can often be financially disadvantaged due to caring. This is due to things like carers reducing their hours at work, stopping working in order to provide care, finding it difficult to regain employment after taking time away from work etc.

A Carers UK survey suggests that Coronavirus has further exacerbated financial issues, with 28% of carers saying they are struggling to 'make ends meet'. Applied to Sheffield this would mean that approximately 25,000 carers will be struggling with their finances. The cost of living crisis means that financial support will be a vital strand of work in our delivery plan.

It is important that carers are given appropriate financial advice and guidance as well as financial support via benefits, grants and other hardship funds. The Delivery Plan and our carers support services will continue to tackle poverty and financial hardship.

Service delivery connected to the Delivery Plan encourages links with other organisations such as Citizens Advice Sheffield to ensure carers are maximising their income including claiming appropriate benefits such as carers allowance.

Cumulative Impact

Proposal has a cumulative impact

○ Yes ○ No

O Year on Year	 Across a Community of Identity/Interest 	
O Geographical Area	O Other	

If yes, details of impact

The development of the Delivery Plan follows the successful contracting with Sheffield Carers Centre and Sheffield Young Carers in 2021 to provide support to a wide range of unpaid carers.

The Delivery Plan builds on several strategies including The Young Carer, Parent and Adult Carer Strategy. This says that Sheffield is a 'City where Carers are valued and have the right support to continue to care for as long as they want to.' This vision is echoed in 'Living the life you want to live', which says, 'Unpaid carers are recognised for their expertise and supported to make the right choices for them and their family.' Our Delivery Plan for carers will be shaped by the vision and help us achieve its ambition.

The vision is centred around delivery of six Carer Principles; these provide the guidance our multi-agency partnership will follow to improve the lives of carers in our city. This delivery plan will align with and adopt Commitment five 中省边的92 he life you want to live' which

states we will 'Recognise and value unpaid carers and the social care workforce, and the contribution they make to our city'.

Proposal has geographical impact across Sheffield ○ Yes ● No

If Yes, details of geographical impact across Sheffield

Local Partnership Area(s) impacted

• All O Specific

If Specific, name of Local Partnership Area(s) impacted

Action Plan and Supporting Evidence

Action Plan

Need to consider how to enhance communication to SCC's workforce – e.g. by intranet and other methods (e.g. supervision or team meeting prompts?)

Supporting Evidence (Please detail all your evidence used to support the EIA)

Consultation

Consultation required

○ Yes ● No

If consultation is not required please state why

The Delivery Plan is a mechanism to achieve aims set out in the Carers Strategy, which was subject to consultation and engagement. In addition, there is very close, ongoing engagement with partners through the Delivery Plan.

Are staff who may be affected by these proposals aware? ● Yes ○ No

Are customers who may be affected by these proposals aware?● Yes○ NoPage 93

Summary of overall impact

Summary of overall impact

In 2018 the Department of Health & Social Care produced the 'Carers Action Plan 2018-2020'. The document said that 'A sustainable social care system for the future is simply not possible without focusing on how our society supports carers'. Coronavirus has applied even more pressure to our health and social care systems in Sheffield; now more than ever, we need to care for our carers.

The Delivery Plan will have a positive impact across several areas outlined above and it will help support our carers. This is beneficial for our health and social care systems and our communities, as well as carers themselves.

Summary of evidence

Changes made as a result of the EIA

Escalation plan

Is there a high impact in any area?
 Yes ○ No

Overall risk rating after any mitigations have been put in place \bigcirc High \bigcirc Medium \bullet Low \bigcirc None

Sign Off

EIAs must be agreed and signed off by an Equality lead Officer. Has this been signed off? Page 94

• Yes	O No		
Date agreed	21/11/2022	Name of EIA lead officer	Ed Sexton

Review Date 04/02/2023

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