

## Part A

### Initial Impact Assessment

**Proposal name** Adult Social Care Workforce Development Strategy

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

In Sheffield we are prioritising the development of our adult health and social care workforce. In our [Adult Social Care Strategy](#) we made a commitment to recognise and value our unpaid carers and social care workforce and the recognition that they make to our city.

As part of our commitment we undertook work to develop our [Sheffield Care Sector Workforce Development Strategy \(WDS\)](#). *The strategy was developed in partnership with the Sheffield Health and Care Sector, and this was launched at our Health and Social Care policy committee in March 2023.*

As part of the Strategy, we implemented five key themes which we felt would address some of the longstanding issues affecting the adult health and social care workforce. Our key themes are:

- Valuing and Empowering the Adult Care Workforce
- Creating a More Representative Adult Care Workforce
- Increasing Recruitment in Adult Care
- Improving Retention in Adult Care
- Improving Conditions for the Adult Care Workforce

This EIA is to support the update to our Sheffield Adults Care Sector Workforce Development Strategy which is due at our Adults Health and Social Care Policy Committee on January 31<sup>st</sup>, 2024.

Some notable achievements to the WDS relating to Equality and Diversity include the development and implementation of our Equality, Diversity, Inclusion and Social Justice Delivery Plan at Health and Social Care Policy Committee on 14<sup>th</sup> December.

Other longer-term ambitions within the WDS include, but are not limited to:

- Recognising the value of the ASC workforce - setting out how we will promote a positive image of social care as a rewarding, challenging, and fulfilling career, and increasing public understanding of social care.
- Better understanding our workforce – improving the information that we hold on the ASC workforce including understanding the reasons why people are leaving roles, how their development needs are being met and how we will meet future workforce needs.
- Supporting Equality, Diversity and Inclusion – aiming to increase the diversity and inclusiveness of the social care workforce in Sheffield, creating career opportunities that appeal to all parts of the community.
- Developing recruitment methods including supporting graduate and apprenticeship opportunities, working with partners to support recruitment into ASC.
- Improving the learning and development offer in ASC and supporting development of career pathways across health & social care.

- Supporting the Health and Wellbeing of the ASC Workforce – supporting best practice and approaches to wellbeing for ASC workforce in Sheffield.

**Proposal type**

- Budget       non-Budget

**If Budget, is it Entered on Q Tier?**

- Yes       No

If yes what is the Q Tier reference

**Year of proposal (s)**

- 21/22    22/23    23/24    24/25    other

**Decision Type**

- Coop Exec  
 Committee (e.g. Health Committee)  
 Leader  
 Individual Coop Exec Member  
 Executive Director/Director  
 Officer Decisions (Non-Key)  
 Council (e.g. Budget and Housing Revenue Account)  
 Regulatory Committees (e.g. Licensing Committee)

**Lead Committee Member**

Angela Argenzio

**Lead Director for Proposal**

Alexis Chappell

**Person filling in this EIA form**

John Chamberlain

**EIA start date**    16/03/2023

**Equality Lead Officer**

- |                                      |   |
|--------------------------------------|---|
| <input type="radio"/> Adele Robinson | <input type="radio"/> Ed Sexton                   |
| <input type="radio"/> Bashir Khan    | <input type="radio"/> Louise Nunn                 |
| <input type="radio"/> Beverley Law   | <input checked="" type="radio"/> Richard Bartlett |

**Lead Equality Objective ([see for detail](#))**

- |   |  |   |  |
|---|--|---|--|
| <input type="radio"/> Understanding Communities | <input checked="" type="radio"/> Workforce Diversity | <input type="radio"/> Leading the city in celebrating & promoting inclusion | <input type="radio"/> Break the cycle and improve life chances |
|---|--|---|--|

## Portfolio, Service and Team

### Is this Cross-Portfolio

Yes  No

### Portfolio

People

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

Yes  No Please specify

## Consultation

### Is consultation required (Read the guidance in relation to this area)

Yes  No

### If consultation is not required please state why

### Are Staff who may be affected by these proposals aware of them

Yes  No

### Are Customers who may be affected by these proposals aware of them

Yes  No

### If you have said no to either please say why

This proposal shouldn't directly affect customers.

## Initial Impact

Under the [Public Sector Equality Duty](#) we have to pay due regard to the need to:

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

For a range of people who share protected characteristics, more information is available on the [Council website](#) including the [Community Knowledge Profiles](#).

## Identify Impacts

**Identify which characteristic the proposal has an impact on tick all that apply**

|  |  |
|--|--|
| <input checked="" type="radio"/> Health          | <input type="radio"/> Transgender                                    |
| <input checked="" type="radio"/> Age             | <input checked="" type="radio"/> Carers                              |
| <input checked="" type="radio"/> Disability      | <input checked="" type="radio"/> Voluntary/Community & Faith Sectors |
| <input type="radio"/> Pregnancy/Maternity        | <input checked="" type="radio"/> Partners                            |
| <input checked="" type="radio"/> Race            | <input checked="" type="radio"/> Cohesion                            |
| <input checked="" type="radio"/> Religion/Belief | <input checked="" type="radio"/> Poverty & Financial Inclusion       |
| <input type="radio"/> Sex                        | <input type="radio"/> Armed Forces                                   |
| <input type="radio"/> Sexual Orientation         | <input type="radio"/> Other  |

## Cumulative Impact

**Does the Proposal have a cumulative impact**

- Yes  No

|  |  |
|--|--|
| <input checked="" type="radio"/> Year on Year      | <input checked="" type="radio"/> Across a Community of Identity/Interest |
| <input checked="" type="radio"/> Geographical Area | <input type="radio"/> Other  |

*If yes, details of impact*

This is a 3-year WDS which should have a positive impact on the ASC workforce across Sheffield.

**Proposal has geographical impact across Sheffield**

- Yes  No

*If Yes, details of geographical impact across Sheffield*

City wide proposal for ASC workforce.

**Local Area Committee Area(s) impacted**

- All  Specific

*If Specific, name of Local Committee Area(s) impacted*

## Initial Impact Overview

**Based on the information about the proposal what will the overall equality impact?**

The aim is to improve equality implications and conditions for all adult social care workers in Sheffield. The proposal aims to value and empower the workforce and make the adult social care workforce more representative of our communities.

**Is a Full impact Assessment required at this stage?**  Yes  No

**If the impact is more than minor, in that it will impact on a particular protected characteristic you must complete a full impact assessment below.**

## Initial Impact Sign Off

**EIAs must be agreed and signed off by the Equality lead Officer in your Portfolio or corporately. Has this been signed off?**

Yes  No

Date agreed

Name of EIA lead officer

## Part B

### Full Impact Assessment

#### Health

**Does the Proposal have a significant impact on health and well-being (including effects on the wider determinants of health)?**

Yes       No      *if Yes, complete section below*

#### Staff

Yes       No

#### Customers

Yes       No

#### Details of impact

Within this proposal there are specific plans to improve the health and wellbeing of the adult social care workforce and people that we support in Sheffield.

The WDS sets out how we will improve some of the underlying areas of sickness and absence. It will support initiatives to improve health and wellbeing and aim to measure and improve staff morale across ASC.

In Sheffield the average number of sickness days across ASC in 22/23 is 8. This has decreased from 9.9 in 21/22. This is higher than the national average of 5.7.

The WDS aims to work with partners to understand the impact of health and wellbeing on the ASC workforce in Sheffield. We will work with partners to co-design initiatives to improve health and wellbeing.

Longer-term the WDS aims to influence areas relating to workforce which will have a positive impact on customers. This includes, but is not limited to:

- Trying to improve equality and diversity amongst ASC workforce and creating a more representative workforce who understand the needs and experiences of the people that they work with.
- Improving the learning and development offer for ASC. This will improve the quality of care available for customers in Sheffield.
- Improving retention of the ASC workforce – this means that we will have a more stable workforce with customers working with people that they know and trust.
- Improving recruitment in ASC – this means that we will have sufficient staff to meet the demands of an aging and the increasingly acute needs of our customers.

#### Comprehensive Health Impact Assessment being completed

Yes       No

*Please attach health impact assessment as a supporting document below.*

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

Yes       No

Name of Health Lead Officer

## Age

### Impact on Staff

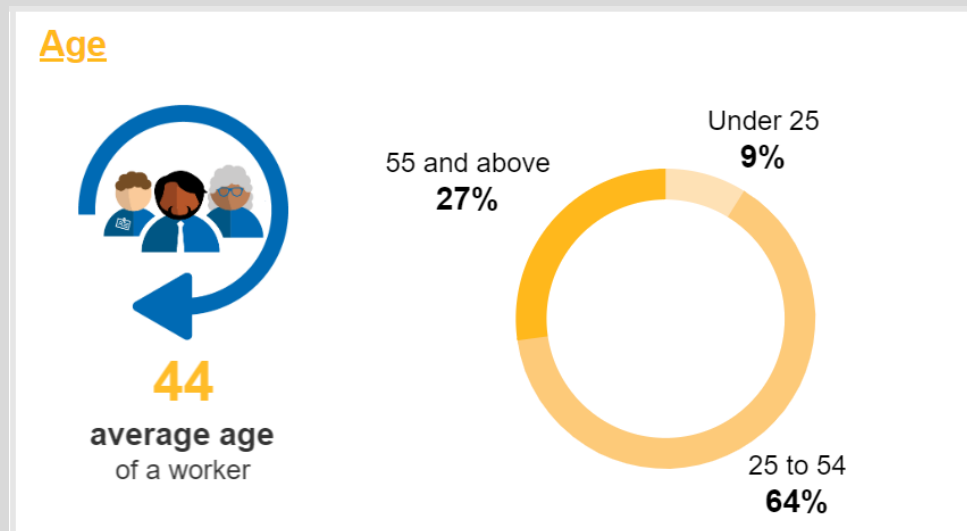
Yes  No

### Impact on Customers

Yes  No

### Details of impact

This proposal aims to make the adult social care workforce more representative of our diverse communities in Sheffield. Skills for care data currently suggests that the average age of the ASC worker in Sheffield is 44 years old. In SCC the median age of our workforce is 49. Across ASC only 9% of the workforce is age 25 years or younger.



We know that our future workforce is going to require more people working in ASC. Therefore, we need to attract more younger people from a diverse range of backgrounds to work and develop in ASC.

In Sheffield there are approximately 7,600 people in receipt of care. A large proportion of people in care are over 65. In Sheffield 95,000 people are over 65 and this figure is projected to increase by 13,000 by 2030. Therefore, the interventions outlined in this proposal should have a positive impact on the elderly population of Sheffield.

The WDS aims to improve recruitment into ASC. We will look at ways to attract a diverse range of people into starting careers in ASC from a range of backgrounds. This will include looking at ways to improve the volume of young people joining and staying in careers within ASC.

We will also look at interventions to improve retention in ASC and look at ways in which people can stay in Health and Social Care with rewarding career progression pathways. Interventions to improve the learning and development offer for our ASC workforce are likely to have positive impacts on the quality of care offered to people in receipt of care.

## Disability

### Impact on Staff

Yes  No

### Impact on Customers

Yes  No

### Details of impact

In Sheffield, population data suggest for working adults 19% of people are declared as having a disability. Within Adults Care and Wellbeing Directorate there is 16.3% workforce with a disability declared.

We expect that this proposal will have a positive impact on both staff and customers with a disability. This proposal aims to make the adult social care workforce more representative of our diverse communities in Sheffield include those with a disability. We will work with partners in H&SC to improve our understanding of the ASC workforce and look into ways that we can improve health and wellbeing offer for all workers.

SCC recently introduced its Workplace Adjustment Passport which records employee's reasonable adjustments and flexible working arrangements and it had a positive impact on staff with disabilities. Person centred processes such as these are likely to have long term benefits on the accessibility of employment for disabled staff and their ability to develop within the organisation.

This proposal will also improve the learning and development offer for ASC workforce in Sheffield. We expect that this will have a positive impact on the people that they support as we will have a better trained, more stable and supported workforce.

## Pregnancy/Maternity

### Impact on Staff

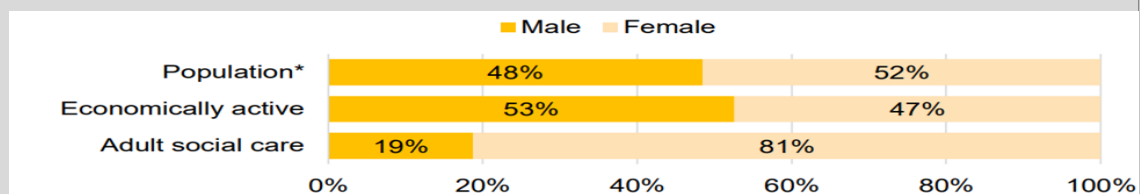
Yes  No

### Impact on Customers

Yes  No

### Details of impact

The care sector workforce is made up of around 81% female workers. Male workers remained in the minority at 19%.





In Sheffield the gender of the care sector workforce is largely in line with national statistics. The workforce is predominantly female. In SCC Adults Care and Wellbeing Directorate the workforce follows similar trends in terms of gender. **79.7%** of the workforce is female, this accounts for most of our workforce whilst **20.3%** of the workforce is male.

Currently there are no targeted interventions aimed at staff/customers who are pregnant or on a period of maternity leave within this strategy. However, there may be interventions identified later as part of co-design work when we explore health and wellbeing for the ASC workforce. This may raise specific areas and interventions relating to pregnancy/maternity leave which we may need to develop as part of future work.

Where there are interventions and opportunities then we will need to ensure that these continue to be accessible to staff who are pregnant or on maternity leave and ensure that communication is consistent throughout.

## Race

### Impact on Staff

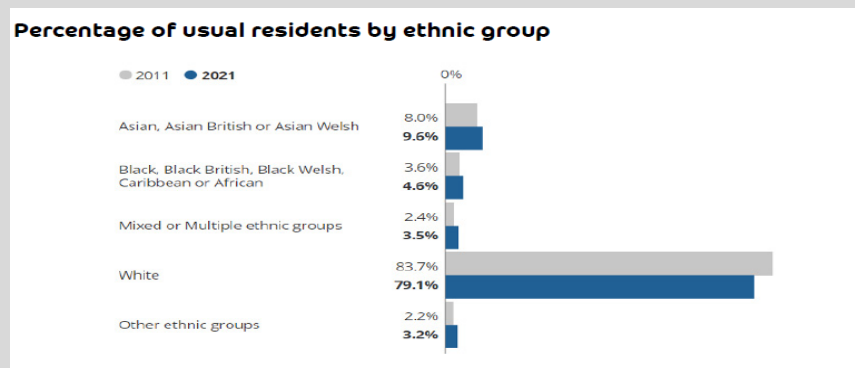
● Yes    ○ No

### Impact on Customers

● Yes    ○ No

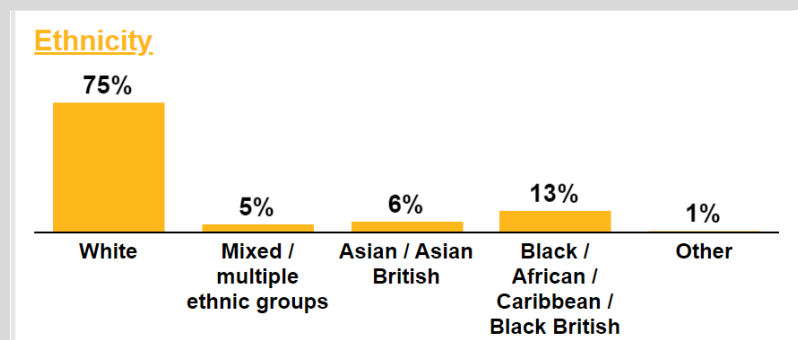
### Details of impact

The breakdown of ethnicity data in Sheffield is given below:

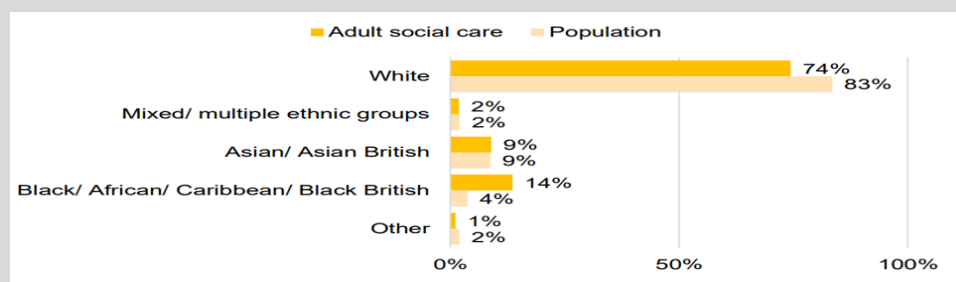


From the data there is a slight under-representation in Asian/Asian British data for Sheffield (6% of the workforce is Asian/Asian British vs 9.6% of the population).

The below gives a breakdown of ethnicity in the ASC workforce in Sheffield.



The following shows national data for ethnicity data across ASC:

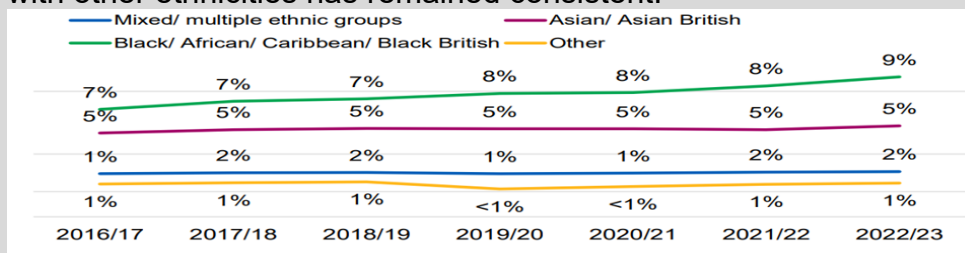


In Sheffield there is a notably higher proportion of people with a Black/ African/ Caribbean/ Black British ethnicity within adult social care (13% of the total workforce) compared to the population (only 4% of the population).

In Sheffield City Council Adults Care and Wellbeing Directorate our workforce ethnicity breakdown is as follows:

- 80.7% of workforce identified as 'white British'
- 17.7% of workforce identified as 'BAME'

Managerial roles have seen a slight increase in the number of people with a Black/ African/ Caribbean/ Black British ethnicity background, rising from 7% in 2016/17 to 9% in 2022/23. The chart below shows the proportion of people with other ethnicities has remained consistent.



Sheffield City Council workforce data suggests a similar trend. There has been a small increase in the representation of BAME workforce at senior management level. Relatively speaking the data suggests an under representation for BAME employees at manager level.

| SCC Grade            | % of Workforce |
|----------------------|----------------|
| 1 – 5                | 18             |
| 6 – 9                | 16.1           |
| 10 – 11              | 14.5           |
| Chief Officer Grades | 10.5           |

We expect that this proposal will have a positive impact on race for staff and customers in ASC in Sheffield. This proposal aims to make the adult social care workforce more representative of our diverse communities in Sheffield.

There are specific interventions contained within this proposal which will aim to support equality, diversity and inclusion throughout the ASC workforce. This includes the development of our Equality, Diversity, Inclusion and Social Justice Delivery Plan at Health and Social Care Policy Committee on 14<sup>th</sup> December. This addresses some of the issues raised as part of the race equality commission & SACHMA reports.

## Religion/Belief

### Impact on Staff

Yes  No

### Impact on Customers

Yes  No

### Details of impact

The current profiles for religion and belief for Sheffield and SCC employees in shown below:

| Sheffield Profile - Religion and Belief Percentages |       | Sheffield City Council employees - Religion and Belief |                      |
|---|-------|--|----------------------|
| Christian   | 52.5% | Christian  | 43.7% 3090 Employees |
| No Religion   | 37.7% | No Religion  | 47.1% 3324 Employees |
| Muslim  | 7.5%  | Muslim   | 5.6% 395 Employees   |
| Other   | 0.5%  | Other  | 2.6% 186 Employees   |
| Buddhist  | 0.6%  | Buddhist   | 0.3% 19 Employees    |
| Hindu   | 0.9%  | Hindu  | 0.2% 14 Employees    |
| Sikh  | 0.2%  | Sikh   | 0.2% 15 Employees    |
| Jewish  | 0.1%  | Jewish   | 0.1% <10 Employees   |

The workforce data for the wider ASC workforce doesn't contain accurate information for the workforce on religion or belief.

From the data from our internal workforce, we can see that there is an underrepresentation for our workforce from Muslim and Hindu backgrounds. As part of this proposal, we aim to improve the equality and diversity of the ASC workforce. We will also aim to improve the data we hold on the wider ASC workforce to support our monitoring of the workforce.

This proposal should have a positive impact on customers of ASC services. With more representative workforce our customers will be supported by more people who understand their backgrounds, cultural and religious practices and beliefs.

## Sex

### Impact on Staff

Yes  No

### Impact on Customers

Yes  No

### Details of impact

In Sheffield the ASC workforce is predominantly female (**83%**).

In SCC Adults Care and Wellbeing Directorate the workforce follows similar trends in terms of gender. **79.7%** of the workforce is female, this accounts for most of our workforce whilst **20.3%** of the workforce is male.

This proposal aims to make the adult social care workforce more representative of our diverse communities in Sheffield. This proposal is like to have a positive impact on sex and will try to improve gender equality in the ASC workforce.

There may be specific interventions which are picked up as part of this proposal which will specifically support the health and wellbeing of the female workforce. This includes menopause support schemes which have already been trialled within ASC workforce in Sheffield.

## Sexual Orientation

### Impact on Staff

Yes       No

### Impact on Customers

Yes       No

### Details of impact

In SCC 4.7% of the staff identify as LGB+. Data for the representation of the wider workforce for sexual orientation is unclear. This is slightly under-representative of the wider population in Sheffield.

SCC currently has dignity and respect policies in place for the wider workforce and is a proud Stonewall employer.

Whilst there are no targeted interventions aimed at staff/customers sexual orientation within the ASC WDS. There may be interventions identified later as part of co-design work when we explore health and wellbeing and representation of the ASC workforce. This may raise specific areas relating to sexual orientation.

## Gender Reassignment (Transgender)

### Impact on Staff

Yes       No

### Impact on Customers

Yes       No

### Details of impact

In Sheffield 0.81% of people responded that they had a gender which was different to their birth. Data gathered from Skills for Care suggest that only 0.02% of the care sector workforce selected 'other' implying a gender different to their birth. It's worth noting that data collected by Skills for Care is imputed by employers rather than workers. This may have an impact on the accuracy of reporting.

At Sheffield Council data on gender reassignment of the ASC workforce is limited, and due to such small numbers cannot be analysed without risking identifying individuals. SCC has policy and guidance in place to support trans people in workplace and to enable their managers and colleagues to support them. SCC currently has dignity and respect policies in place for the wider workforce and is a proud Stonewall employer.

Whilst there are currently no targeted interventions aimed at this cohort of workers or customers we will review this element as part of the ongoing EIA review for the proposal.

There may be interventions identified as part of co-design work when we explore health and wellbeing for the workforce. This may raise specific areas relating to gender reassignment.

## Carers

### Impact on Staff

Yes     No

### Impact on Customers

Yes     No

### Details of impact

In 2021, **4.7% of Sheffield residents (aged five years and over) reported providing up to 19 hours of unpaid care each week**, a decrease from 7.4% in 2011.

In 2021 in the SCC ASC workforce 15.9% of staff identified as being an unpaid carer. As SCC has a high numbers of carers within its workforce and the age and sex profile (high numbers of females, median age 49) in comparison to the local community and the nature of the roles within ASC means that there is likelihood of having a high number of carers in this sector.

SCC has already introduced the Workplace Adjustment Passport to support and record flexible working arrangements. There has also been an increase in the amount of discretionary leave and unpaid leave staff can request to help with caring arrangements.

In Sheffield there are over 10,400 unpaid carers, there is limited data on the number of unpaid carers across the wider ASC workforce in Sheffield.

This proposal will seek to support activity to increase awareness of the support available to carers via a co-produced carers strategy.

We expect that this proposal will have positive outcomes for carers in ASC in Sheffield.

## Voluntary, Community & Faith sectors

### Impact on Staff

Yes     No

### Impact on Customers

Yes     No

### Details of impact

The aim is to improve equality implications and conditions for all adult social care workers in Sheffield. The proposal aims to value and empower the workforce and make the adult social care workforce more representative of our communities.

We will include VCFS organisations in future work to co-design interventions relating to the ASC workforce. VCFS organisations are represented on the Sheffield ASC Workforce Board which oversees much of the work referenced in this proposal. This proposal aims to improve cohesion across ASC providers and wider partners.

## Partners

### Impact on Staff

### Impact on Customers

Yes     No     Yes     No

**Details of impact**

The proposal will seek to work with partners across AHSC to improve conditions for workforce. The implementation of this proposal should see a positive effect upon partners across the ASC system. There is specific action suggested within the proposal which aim to improve cohesion between H&SC.

**Cohesion**

**Staff**

Yes     No

**Customers**

Yes     No

**Details of impact**

This plan should have a positive impact on cohesion across H&SC. The plan will propose cohesive working and integration to address long standing issues surrounding workforce in ASC. There is specific action suggested within the proposal which aim to improve cohesion between H&SC.

**Poverty & Financial Inclusion**

**Impact on Staff**

Yes     No

**Impact on Customers**

Yes     No

**Please explain the impact**

This proposal should have a positive impact on poverty and financial inclusion for the ASC workforce in Sheffield. There are specific actions which will aim to improve the learning and development offer for the ASC workforce. We will aim to create specific career development pathways which should make it easier for the ASC workforce to develop and progress across H&SC. This proposal aims to make pay and benefits more equitable across the ASC system. The proposal will also aim to look at ways to recognise and reward the ASC workforce.

**Armed Forces**

**Impact on Staff**

Yes     No

**Impact on Customers**

Yes     No

### Details of impact

Currently there are no targetted interventions aimed at staff/customers from Armed Forces. There may be interventions identified at a later time as part of co-design work when we explore health and wellbeing for the workforce. This may raise specific areas relating to Armed Forces.

### Other

*Please specify*

#### Impact on Staff

Yes  No

#### Impact on Customers

Yes  No

### Details of impact

## Action Plan and Supporting Evidence

**What actions will you take, please include an Action Plan including timescales**

There is an action plan included as part of the Workforce Development Strategy. This details the actions and timescales for activity mentioned within the EIA.

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

Evidence mentioned above is taken from SCC equalities data and Skills for Care Workforce Data Set.

### Detail any changes made as a result of the EIA

No specific changes made as a result of the EIA. We will regularly monitor and update the EIA to reflect work undertaken as part of the strategy.

**Following mitigation is there still significant risk of impact on a protected characteristic.**  Yes  No



**If yes, the EIA will need corporate escalation? Please explain below**

## Sign Off

**EIAs must be agreed and signed off by the Equality lead Officer in your Portfolio or corporately. Has this been signed off?**

Yes  No

Date agreed

Name of EIA lead officer

**Review Date**

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