

# Equality Impact Assessment [version 2.9]



Title: Better Lives at Home – Strategic Outline Business case – budget proposals	
Budget proposal [ASC1 + ASC 14]	<input checked="" type="checkbox"/> New <input type="checkbox"/> Already exists / review <input type="checkbox"/> Changing
Directorate: People/Growth and Regeneration	Lead Officer name: Helen Pitches/Louise Davidson
Service Area: Adult Social Care and Housing Delivery	Lead Officer role: Strategic Commissioning Manager/Housing Enabling Lead

## Step 1: What do we want to do?

The purpose of an Equality Impact Assessment is to assist decision makers in understanding the impact of proposals as part of their duties under the Equality Act 2010. Detailed guidance to support completion can be found here [Equality Impact Assessments \(EqIA\) \(sharepoint.com\)](#).

This assessment should be started at the beginning of the process by someone with a good knowledge of the proposal and service area, and sufficient influence over the proposal. It is good practice to take a team approach to completing the equality impact assessment. Please contact the [Equality and Inclusion Team](#) early for advice and feedback.

### 1.1 What are the aims and objectives/purpose of this proposal?

Briefly explain the purpose of the proposal and why it is needed. Describe who it is aimed at and the intended aims / outcomes. Where known also summarise the key actions you plan to undertake. Please use plain English, avoiding jargon and acronyms. Equality Impact Assessments are viewed by a wide range of people including decision-makers and the wider public.

The proposal sets out the Strategic Outline Business Case for the Better Lives at Home programme. The strategic case sets out options for Bristol City Council in how to meet the housing with care and support needs of our Care Act-eligible citizens. The case sets out how best to meet that demand through a flexible delivery model – working with Registered Providers (Housing Associations) and Bristol City Council Housing Development Teams to make sure we have the right housing built over the next few years to meet both the housing and the care and support needs for Bristol citizens. In building the right housing with the right support we will also get better value of money.

The proposal is that this demand for the right housing with care and support will continue to be a corporate priority and will underpin and be factored into the City Council’s commitment to deliver affordable homes through the HRA’s 30-year plan and housing delivery plans.

In addition, it seeks approval for the ‘in principle’ allocation of ‘general needs’ housing to meet the housing requirements of Care Act-eligible citizens to live independently with the right support, and to consider this a principle that will be part of the local lettings review process.

This proposal will allow Bristol City Council to further deliver on its commitment to support people moving out of care settings (Residential or Supported Living) who no longer need it and can be supported in the community in general needs accommodation with up to ten hours of support a week.

### 1.2 Who will the proposal have the potential to affect?

<input type="checkbox"/> Bristol City Council workforce	<input checked="" type="checkbox"/> Service users	<input checked="" type="checkbox"/> The wider community
<input checked="" type="checkbox"/> Commissioned services	<input checked="" type="checkbox"/> City partners / Stakeholder organisations	

Additional comments:

### 1.3 Will the proposal have an equality impact?

Could the proposal affect access levels of representation or participation in a service, or does it have the potential to change e.g. quality of life: health, education, or standard of living etc.?

If 'No' explain why you are sure there will be no equality impact, then skip steps 2-4 and request review by Equality and Inclusion Team.

If 'Yes' complete the rest of this assessment, or if you plan to complete the assessment at a later stage please state this clearly here and request review by the Equality and Inclusion Team.

**Yes**       **No**      [please select]

## Step 2: What information do we have?

### 2.1 What data or evidence is there which tells us who is, or could be affected?

Please use this section to demonstrate an understanding of who could be affected by the proposal. Include general population data where appropriate, and information about people who will be affected with particular reference to protected and other relevant characteristics: <https://www.bristol.gov.uk/people-communities/measuring-equalities-success>.

Use one row for each evidence source and say which characteristic(s) it relates to. You can include a mix of qualitative and quantitative data e.g. from national or local research, available data or previous consultations and engagement activities.

Outline whether there is any over or under representation of equality groups within relevant services - don't forget to benchmark to the local population where appropriate. Links to available data and reports are here [Data, statistics and intelligence \(sharepoint.com\)](#). See also: [Bristol Open Data \(Quality of Life, Census etc.\)](#); [Joint Strategic Needs Assessment \(JSNA\)](#); [Ward Statistical Profiles](#).

For workforce / management of change proposals you will need to look at the diversity of the affected teams using available evidence such as [HR Analytics: Power BI Reports \(sharepoint.com\)](#) which shows the diversity profile of council teams and service areas. Identify any over or under-representation compared with Bristol economically active citizens for different characteristics. Additional sources of useful workforce evidence include the [Employee Staff Survey Report](#) and [Stress Risk Assessment Form](#)

<b>Data / Evidence Source</b> [Include a reference where known]	<b>Summary of what this tells us</b>
Extra Care Housing Needs Analysis. Sources: <i>Extra Care Housing Listing Bristol City Council 'LAS' Management Report</i> .	<ul style="list-style-type: none"><li>• Most people who live in Extra Care Housing are over the age of 85. The ages of current residents in Extra Care Housing, who receive care and support range from 44 to 101 years old, with larger numbers in the older age bands. 34.7% are aged over 85 years and almost half (49.6%) are aged over 80.</li><li>• Most residents in Extra Care Housing are female (two thirds).</li><li>• The most recorded ethnicity among residents is White British (74.38%). There is evidence that people from Black, Asian, and Minority Ethnic communities are underrepresented in ECH, such as those from Black African ethnicity.</li></ul>

	<ul style="list-style-type: none"> <li>• In total, 39.42% of service users are recorded as Christian, or one of the Christian denominations, which reflects the dominant religion in Bristol.</li> <li>• Disability – There is a lack of recorded data on disability. Out of a total of 769 service users across all ECH schemes, 6.9% are recorded as disabled people. It is likely this figure is an underrepresentation of the level of disability.</li> <li>• Carers – There is a significant number of people living in ECH that are carers or have a carer. According to LAS data, 35.7% of people living in ECH are recorded as being a carer or having a caring role.</li> <li>• Marital Status – There is a lack of recorded data on marital status. Of the 85 service users living in ECH with a recorded relationship status, almost one third are married (32.94%), almost one third widowed (30.59%) and just over a quarter (25.88%) a recorded as single.</li> <li>• Gender reassignment - There is a lack of recorded data on gender reassignment.</li> <li>• Analysis of residents in Extra Care Housing who receive care and support from the onsite care and support provider, shows that half of service users (51.2%) have their primary support need listed as ‘Physical Support - Personal Care Support’. The second most common primary support need is ‘Physical Support - Access and Mobility Only’ (17%). 9.5% of service users have ‘Mental Health Support’ as their Primary Support reason, 8.1% ‘Support with Memory and Cognition’, 4.4 % ‘Sensory Support,’ 3.5% ‘Social Support (Support for Social Isolation/ Other),’ and 0.6% ‘Substance Misuse Support’.</li> </ul>
<p>Bristol Joint Strategic Needs Assessment Health and Wellbeing Profile 2020/21</p> <p>LSE: Projections of older people with dementia and costs of dementia care in the United Kingdom, 2019–2040</p>	<ul style="list-style-type: none"> <li>• Dementia - The number of people with dementia aged over 65 is projected to rise by 28.4% in Bristol in the next 10 years. This higher rise is largely due to the projected increase in people in the older age range (85+) (LSE Projections). The number of people from Black, Asian, and Minority Ethnic communities with dementia is expected to increase significantly faster than the national average (Bristol JSNA).</li> <li>• Disability - Half of people over 65 in Bristol are currently living with a limiting long-term illness (LLTI) or disability. It is forecast that the number of over 65s with an LLTI whose day-to-day activities are significantly limited will reach 21,596 by 2035, a rise of almost 30 per cent (Bristol JSNA 2018 estimate).</li> <li>• Sexual orientation - The Bristol City Council 2019 Older People’s Needs analysis states that based on 2017 population estimates, there could be at least 1,950 LGB people over 65yrs in Bristol. This could rise to 3,196 people by 2,041, given projected population increases.</li> </ul>
<p>Better lives at home needs analysis Data gathered from a number of sources – Census, JNSA et al</p>	<ul style="list-style-type: none"> <li>• The working age adults (16-64 year olds) population, 314,100, is a higher proportion than nationally (68.4% vs 62.8%), especially young adults up to 40 years old.</li> </ul>

	<ul style="list-style-type: none"> <li>• The older people population (aged 65+) is 59,800 (13.0%) lower than nationally (18.2%) but numbers are rising. A separate older people’s needs assessment and strategy will be completed to explore issues in more depth.</li> <li>• The Bristol population is 50% women and 50% men overall. However, there are more women than men aged 65+ and more men than women in the 25-49 year age group.</li> <li>• The city is increasingly diverse. 22% of Bristol’s population are non-‘White British’ and 16% are from Black, Asian and minority ethnic groups. There is likely to be a sizable increase in this number (the Schools Census shows 29.2% of pupils in Bristol are Black, Asian and minority ethnicity).</li> <li>• Bristol residents born outside the UK increased from 8% to 15% in the last decade. Of this 15%, 19,686 (4.6%) were born in other EU countries and 40,540 (9.5%) were born in countries outside of the EU.</li> <li>• There are now at least 45 religions, 187 countries of birth represented and 91 main languages spoken by people living in Bristol.</li> <li>• It is estimated that there are up to 31,500 Lesbian, Gay and Bisexual people living in Bristol. A Bristol survey showed LGBT participants were more likely to have health needs relating to anxiety and depression, physical and Mental Health conditions.</li> <li>• 71,700 people (16.7%) in Bristol have a “limiting long-term illness or disability” - lower than the 17.9% national average. Of these, 34,550 (8%) have day-to- day activities that are limited a lot and 37,150 (9%) have day – to - day activities limited a little</li> <li>• 16% of Bristol’s population (73,400 people) live in the 10% most deprived areas in England” in 2015, compared to 14% in 2010. The greatest levels of deprivation are in Hartcliffe &amp; Withywood, Filwood and Lawrence Hill. Higher numbers of people with long term health problems or disability live in these wards. There are higher numbers of care and support packages in these areas</li> <li>• Runnymede Trust reports indicate that ethnic minorities experience ‘greater disadvantage’ in the city than other locations, and greater disadvantage than in England and Wales as a whole in education and employment. This is particularly so for Black African people.</li> </ul>
<p>Better lives @ home needs analysis – ASC data</p>	<ul style="list-style-type: none"> <li>• Only 45% of ASC service users with mental health needs are women, despite the fact that mental health disorders are three times more prevalent in women than men</li> <li>• Only 36% of people accessing supported living services from the Learning Disabilities cohort are female 35.1% of service users accessing PfA are female</li> <li>• 18% of the service users in the Autism cohort are female</li> <li>• 34% of people accessing sensory impairment services are men</li> <li>• There is inequality in accessing care and support for Autism and carer support services for certain minority ethnic communities</li> <li>• Higher expected need among Black, Asian and minority ethnic communities are not reflected among PfA services users</li> </ul>

	<ul style="list-style-type: none"> <li>• There is an increased prevalence of Learning Disabilities, Autism and Physical and Neurological Disability among certain minority ethnic communities.</li> <li>• Provider feedback emphasises the value and improved outcomes of care where support staff speak the service user’s first language</li> <li>• From analysis of the Mental Health cohort, there are more Black, Asian and minority ethnic people eligible for Section 117 aftercare and they are more likely to experience placement breakdown</li> </ul>
<b>Additional comments:</b>	

## 2.2 Do you currently monitor relevant activity by the following protected characteristics?

<input checked="" type="checkbox"/> Age	<input checked="" type="checkbox"/> Disability	<input checked="" type="checkbox"/> Gender Reassignment
<input checked="" type="checkbox"/> Marriage and Civil Partnership	<input checked="" type="checkbox"/> Pregnancy/Maternity	<input checked="" type="checkbox"/> Race
<input checked="" type="checkbox"/> Religion or Belief	<input checked="" type="checkbox"/> Sex	<input checked="" type="checkbox"/> Sexual Orientation

## 2.3 Are there any gaps in the evidence base?

Where there are gaps in the evidence, or you don’t have enough information about some equality groups, include an equality action to find out in section 4.2 below. This doesn’t mean that you can’t complete the assessment without the information, but you need to follow up the action and if necessary, review the assessment later. If you are unable to fill in the gaps, then state this clearly with a justification.

For workforce related proposals all relevant characteristics may not be included in HR diversity reporting (e.g. pregnancy/maternity). For smaller teams diversity data may be redacted. A high proportion of not known/not disclosed may require an action to address under-reporting.

<p>There is a significant lack of data on sexual orientation, disability, marital status, gender reassignment and religion for service users on the Extra Care Housing Listing, Bristol City Council ‘LAS’ Management Report. It is not possible to fill the gap in this data for this EqlA.</p> <p>Internal reporting of protected characteristic at the care management assessment stage needs to be strengthened - to ensure these are being considered in the care assessment and referral stage. This will be a recommendation.</p>
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## 2.4 How have you involved communities and groups that could be affected?

You will nearly always need to involve and consult with internal and external stakeholders during your assessment. The extent of the engagement will depend on the nature of the proposal or change. This should usually include individuals and groups representing different relevant protected characteristics. Please include details of any completed engagement and consultation and how representative this had been of Bristol’s diverse communities. See <https://www.bristol.gov.uk/people-communities/equalities-groups>.

Include the main findings of any engagement and consultation in Section 2.1 above.

If you are managing a workforce change process or restructure please refer to [Managing change or restructure \(sharepoint.com\)](#) for advice on consulting with employees etc. Relevant stakeholders for engagement about workforce changes may include e.g. staff-led groups and trades unions as well as affected staff.

<p>BL@H leads have attended the ASC equalities forum to present and get feedback on the development of the programme.</p> <p>ASC has a project called Make it Work. This is a partnership with local BAME led organisations and is looking to improve outcomes for Black, Asian and minority ethnic communities with social care needs by strengthening and diversifying the offer in ASC. BL@H programme is linked into this work and has attended MIW workshops to</p>
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develop partnership work in understanding the need and requirements for culturally appropriate supported housing offer.

## 2.5 How will engagement with stakeholders continue?

Explain how you will continue to engage with stakeholders throughout the course of planning and delivery. Please describe where more engagement and consultation is required and set out how you intend to undertake it. Include any targeted work to seek the views of under-represented groups. If you do not intend to undertake it, please set out your justification. You can ask the Equality and Inclusion Team for help in targeting particular groups.

Further engagement is required with

- People from Black, Asian and minority ethnic backgrounds who have social care needs
- Older LGBTQ+ people

The BL@H programme intends to develop co-production work streams to better understand the housing and care and support needs of Black, Asian and minority ethnic communities, particularly in relation to the impacts of poor mental health and placement breakdown on individuals, families and carers and the needs of older LGTQ+ Bristol residents.

## Step 3: Who might the proposal impact?

Analysis of impacts must be rigorous. Please demonstrate your analysis of any impacts of the proposal in this section, referring to evidence you have gathered above and the characteristics protected by the Equality Act 2010. Also include details of existing issues for particular groups that you are aware of and are seeking to address or mitigate through this proposal. See detailed guidance documents for advice on identifying potential impacts etc. [Equality Impact Assessments \(EqIA\) \(sharepoint.com\)](#)

### 3.1 Does the proposal have any potentially adverse impacts on people based on their protected or other relevant characteristics?

Consider sub-categories (different kinds of disability, ethnic background etc.) and how people with combined characteristics (e.g. young women) might have particular needs or experience particular kinds of disadvantage.

Where mitigations indicate a follow-on action, include this in the 'Action Plan' Section 4.2 below.

<b>GENERAL COMMENTS</b> (highlight any potential issues that might impact all or many groups)	
Whilst we have not identified any significant negative impact impacts from the Better Lives at Home Programme at this stage, we are aware that various characteristic groups are under/over-represented in service users compared to the local population, and that there are a number of existing disparities and issues for the cohort which we will aim to mitigate and address where possible through accessible and inclusive service design and delivery.	
<b>PROTECTED CHARACTERISTICS</b>	
<b>Age: Young People</b>	Does your analysis indicate a disproportionate impact? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Potential impacts:	
Mitigations:	
<b>Age: Older People</b>	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	As evidence above: existing services may not meet the needs of an increasing (and increasingly diverse) population of older people in Bristol
Mitigations:	Whole programme approach aims to mitigate this risk.
<b>Disability</b>	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	
Mitigations:	
<b>Sex</b>	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	Women are over-represented in services and more likely to be carers
Mitigations:	Whole programme aims to meet the needs of service users

<b>Sexual orientation</b>	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	Evidence older LGBTQ+ service users may not have needs fully met in existing services
Mitigations:	Targeted engagement with older LGBTQ+ communities to further understand needs and barriers.
<b>Pregnancy / Maternity</b>	Does your analysis indicate a disproportionate impact? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Potential impacts:	
Mitigations:	
<b>Gender reassignment</b>	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	Evidence older LGBTQ+ service users may not have needs fully met in existing services
Mitigations:	Targeted engagement with older LGBTQ+ communities to further understand needs and barriers.
<b>Race</b>	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	Some Black, Asian and ethnic minority people with social care needs may not have their needs fully met in existing services.
Mitigations:	Targeted engagement with Black, Asian and ethnic minority communities to further understand needs and barriers.
<b>Religion or Belief</b>	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	Some service users from particular faith groups may not have their needs fully met by existing services.
Mitigations:	Targeted engagement including with faith communities to further understand needs and barriers.
<b>Marriage &amp; civil partnership</b>	Does your analysis indicate a disproportionate impact? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Potential impacts:	
Mitigations:	
<b>OTHER RELEVANT CHARACTERISTICS</b>	
<b>Socio-Economic (deprivation)</b>	Does your analysis indicate a disproportionate impact? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Potential impacts:	
Mitigations:	
<b>Carers</b>	Does your analysis indicate a disproportionate impact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Potential impacts:	Evidence of systemic disparities for carers as above
Mitigations:	Whole programme approach aims to better meet the needs of carers
<b>Other groups</b> [Please add additional rows below to detail the impact for other relevant groups as appropriate e.g. Asylums and Refugees; Looked after Children / Care Leavers; Homelessness]	
Potential impacts:	
Mitigations:	

### 3.2 Does the proposal create any benefits for people based on their protected or other relevant characteristics?

Outline any potential benefits of the proposal and how they can be maximised. Identify how the proposal will support our Public Sector Equality Duty to:

- ✓ Eliminate unlawful discrimination for a protected group
- ✓ Advance equality of opportunity between people who share a protected characteristic and those who don't
- ✓ Foster good relations between people who share a protected characteristic and those who don't

- |   |
|---|
| <ul style="list-style-type: none"> <li>• Co – production of housing and support with Black, Asian and minority ethnic, and LGBTQ+ communities</li> <li>• Potential development of culturally appropriate housing and support for people with care and support needs from Black, Asian and minority ethnic groups</li> </ul> |
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- Development of Specialist Supported Housing – BL@H developments will be built to agreed standards e.g. HAPPI standards. Units will be built to appropriate accessible standards for people with PSI e.g. Addison appts
- Improvement in the accessibility of the Homechoice scheme and access to general needs housing to that scheme for disabled people

## Step 4: Impact

### 4.1 How has the equality impact assessment informed or changed the proposal?

What are the main conclusions of this assessment? Use this section to provide an overview of your findings. This summary can be included in decision pathway reports etc.

If you have identified any significant negative impacts which cannot be mitigated, provide a justification showing how the proposal is proportionate, necessary, and appropriate despite this.

#### Summary of significant negative impacts and how they can be mitigated or justified:

No significant negative impacts identified – we will aim to address existing issues and disparities where possible through accessible and inclusive service design and delivery.

#### Summary of positive impacts / opportunities to promote the Public Sector Equality Duty:

The analysis work that has been completed to understand better the people who need housing with care and support has highlighted areas where the development of the right housing with support can positively impact on people based on their protected and other relevant characteristics.

- Engagement with the Make it Work project provides an opportunity to co-produce culturally appropriate supported housing with Black, Asian and minority ethnic communities
- Housing designed to meet need for people with complex needs - including physical and sensory needs.
- Engagement with the older people in the LGBTQ+ community
- Improvement in the accessibility of the Homechoice scheme and access to general needs housing to that scheme for disabled people

### 4.2 Action Plan

Use this section to set out any actions you have identified to improve data, mitigate issues, or maximise opportunities etc. If an action is to meet the needs of a particular protected group please specify this.

Improvement / action required	Responsible Officer	Timescale
Strengthen internal reporting of protected characteristics as part of ASC assessment	Stephen Beet	
Development of the Strategic outline business case to provide evidence base of value for money	Helen Pitches/Merlin Jones	Oct 2021
ASC engagement and involvement in the local lettings review process	Helen Pitches/Tanya Boden	Oct 21- Oct 22

### 4.3 How will the impact of your proposal and actions be measured?

How will you know if you have been successful? Once the activity has been implemented this equality impact assessment should be periodically reviewed to make sure your changes have been effective your approach is still appropriate.

People with social care needs will be living in the right housing that enables them to live independently.  
More people with care and support needs will be living in general needs accommodation.  
Fewer people will move out of Bristol as we will have the right accommodation for them in the city.



## Step 5: Review

The Equality and Inclusion Team need at least five working days to comment and feedback on your EqIA. EqIAs should only be marked as reviewed when they provide sufficient information for decision-makers on the equalities impact of the proposal. Please seek feedback and review from the Equality and Inclusion Team before requesting sign off from your Director<sup>1</sup>.

<b>Equality and Inclusion Team Review:</b> <i>Reviewed by Equality and Inclusion Team</i>	<b>Director Sign-Off:</b> Stephen Beet – Director: Adult Social Care
Date: 21/12/2021	Date: 21/12/2021

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<sup>1</sup> Review by the Equality and Inclusion Team confirms there is sufficient analysis for decision makers to consider the likely equality impacts at this stage. This is not an endorsement or approval of the proposal.