

**Draft Equality Impact Assessment  
on  
Self-Directed Support**

**Consultation Booklet**

**February 2015**

## **Your Opportunity to Have Your Say Responding to this Consultation Document**

The Health and Social Care Board (HSCB) is inviting service users, members of the public and other stakeholders to comment on the potential impact of the introduction of Self Directed Support on the Section 75 groups particularly focusing on Age (older and younger people), Disability, and Dependants (Carers). You are invited to review the following questions and provide your response. In addition, you can insert comments/feedback within the text box under each question.

Schedule 9, Section 75 of the Northern Ireland Act 1998 provides for a comprehensive consideration by public authorities of the need to promote equality of opportunity between specified groups.

- people of different religious belief, political opinion, racial group, age, marital status or sexual orientation;
- men and women generally;
- people with a disability and people without one;
- people with dependants and people without dependants.

Additionally public authorities must have regard to the desirability of promoting good relations between people of different religious beliefs, political opinions and racial groups.

Equality Screening carried out on Self Directed Support project identified three groups as facing potential impacts to using and accessing Self Directed Support. These groups are Age (older and Younger People), Disability and Dependants (Carers).

**We are seeking your views on the likely impact of the introduction of Self Directed Support in regards to these three groups identified through Equality Screening and detailed within this Draft Equality Impact Assessment.**

By “equality impacts” we mean whether or not, and in what ways, the Implementation of Self Directed Support will affect certain groups, and whether they will impact on those groups in a positive or a negative way.

We plan to update the Equality Impact Assessment in light of this consultation and the final version will be publicly available following the 12 week consultation period.

Comments are invited from all interested parties on the consultation questionnaire.

You can send us your consultation response or comments by post or by email to:-

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Email: Self Directed Support\_EQIA@hscni.net

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**Consultation closes at 5pm on Friday May 8<sup>th</sup> 2015**

Alternative formats of this document including Braille, Easy Read, audio formats, large print or minority languages (for those not fluent in English) are available on request. Please contact us as above with your request.

## **CONSULTATION QUESTIONS**

**Question 1: Do you have any views on the potential positive impacts of the implementation of Self Directed Support on any or all of the following equality categories, as identified in the draft EQIA:**

### **a)Age;**

**Freedom to direct care at a time & place which is most suitable to you and of your choosing (not having to fit into care staffs rotas).  
Flexibility to write into job descriptions tasks which are important to help you maintain independence and have been agreed in your support plan.  
Involvement in deciding what you need (not what you can get)  
Continuity of staff, timing of calls, flexibility of PA relationship where timings of visits can be altered by mutual agreement.**

### **b) Disability**

**Opportunity to avail of social, recreational & leisure activities which have been agreed in your support plan which can promote mobility & health.  
Flexibility of homecare tasks which can be accommodated if written into a support plan or job description  
Support around being an employer and the positive benefit associated with being capable/able to carry out the associated functions.**

### **c) Dependants (Carers)**

**Peace of mind for carers knowing that staff (they have been involved in recruiting) are working to the level of care you have set for your family member.  
Continuity and ability, as an employer, to manage staff.  
Knowledge that a care system is in place which they are happy with and will reduce concerns around "How will my loved one cope if Im not there in the future to provide the care I have always done.  
Freedom to do other things knowing that your family member is not being neglected**

**Question 2: Do you have any views on the potential negative impacts of the implementation of Self Directed Support on any or all of the following equality categories as identified in the draft EQIA:**

**a)Age;**

**Responsibility of being an employer could be difficult for anyone (regardless of age) if they have never had such a responsibility before. Due to lack of knowledge of keyworkers (this person is a trained social worker, not employer) and the fact that the contract with CIL is for payroll only, people may not have the full information & support they need to take on the employer responsibilities and this could cause increased stress or indeed lead to accusations of discrimination or difficulties with managing funds. The response to this is not to take away the employer option but to support people to perform this function.**

**b) Disability**

**Depending the individual's disability some people may be more likely to have the confidence to take on SDS (lack of uptake by people with learning difficulties, mental health difficulties or dementia). Add to this situations where individuals do not have immediate or extended family support. Persons living on their own or in rural areas may lack the independent support to take this on and may have a fear of changing the status quo in case it doesn't work out. Not all social workers will be knowledgeable about employment law and CIL support is limited to payroll and online forms due to the limited staff they have on the ground.**

**c) Dependants (Carers)**

**Additional paper work, the supervision of carers & timings of visits could result in more stress than carers have the will, time or ability to take on.**

- **Question 3: Are there any potential negative impacts that we may have missed for any of the section 75 groups (religious belief, political opinion, racial group, age, marital status sexual orientation, gender, disability and dependants)**

**The language barriers faced by people who don't speak English as a first language could be an issue when it comes to recruiting staff and following recruitment procedures. Anti-discrimination support should be offered as part of the recruitment and management of staff.**

**Question 4: If you have noted any negative impacts, how do you think they could be addressed?**

**a)Age;**

**Offering a standard option in all packages where staff recruitment, selection & management training is given to SDS employers. The current arrangement only offers online resources where people may need someone to be assigned to assist them through the recruitment process including sitting on interview panels, writing up questions etc. Offer of quarterly training sessions where SDS employers/supporters can attend training to ensure they are up to date with employment issues including managing when staff are sick, aren't working to the required standard or dealing with crisis.**

**b) Disability**

**As above**

**c) Dependants (Carers)**

**Question 5 : Do you have any views on the impact of the Self Directed Support on Human Rights? (Namely Article 8 – Right to respect for private & family life, home and correspondence)**

**There is a potential that SDS could improve Article 8 due to the reduced numbers of staff coming & going from someones home. However there is equally the potential increased risk of vulnerability if a staff member is the only person in contact with a recipient and there are no checks and balances from family members and/or the social worker.**

**The current situation due to staff workloads is that you will often only hear from your social worker at an annual review or indeed if you are in crisis.**

**There is potential for someone to be vulnerable and not be aware that they are being manipulated/treated unfairly.**

**Question 6 : Do you have any views on the impact of the Self Directed Support on Good Relations between people of different religious beliefs, political opinions and racial groups?**

**Without the appropriate additional support for recruitment, selection and awareness raising around anti-discrimination law there is the potential for SDS employers to make decisions which could be deemed to be discriminatory when it comes to recruitment, selection and management of staff.**

## **ADDITIONAL COMMENTS**

If you would like to provide additional comments please include these in the following box:

**This consultation document refers SDS as including a range of service delivery options including Direct Payments.**

**The following comments relate mainly to the HSCB info leaflet – Introduction to SDS for Carers – Find out if SDS is right for you.**

**For the purposes of promoting SDS its important that the difference in the separate programmes (SDS & Direct Payments) is clearly stated. The reason for this is primarily due to the fact that there has been such a low uptake of Direct Payments. The limits around employing family members who live in the same house under Direct Payments has been a key factor in people not opting for that particular option. If people are told clearly of the full benefits of SDS it is unlikely to be seen as a different option and targets of 1 in 3 eligible Service users availing of SDS will not be realised.**

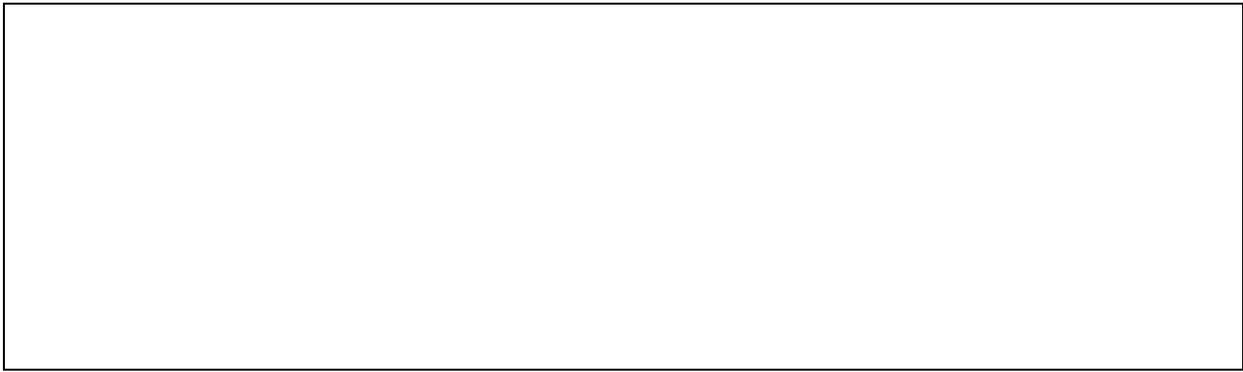
**We know that different rules apply to SDS & Direct Payments and if this is merely the use of a phrase we would recommend it is removed and replaced by a definition of SDS and a definition of Direct Payments.**

**This information seems to be more strongly weighed around not choosing SDS (I don't want to be an employer, If I don't want SDS can I refuse, what happens if I don't want the responsibility, Im happy with the support I receive). Only after 4 options against it do we have The advantages of SDS and the response is general, without practical examples of how it could make things better and the plus of having a continuity of carers into your own home which is a key to why many families who need care support opt out of it to begin with.**

**This document talks about the right to complain but lacks the appeal procedure which should be made available if people are not happy with indicative budgets.**

**Unless such information is more positive about what supports people can actually received and includes practical examples SDS will suffer the same low uptake as Direct Payments.**

**In relation to potentially disadvantaged groups this consultation should be rural proofed as we have already identified real difficulties for someone living in a rural area with a limited budget to attract staff to travel longer distances for between 30mins and 1.5hrs work over 3 or 4 visits per day.**



## Appendix A

### Freedom of Information Act (2000) – Confidentiality of Consultations

The HSCB will publish a summary of responses following completion of this consultation process. Your response, and all other responses to the consultation, may be disclosed on request. The Board can only refuse to disclose information in exceptional circumstances. **Before** you submit your response, please read the paragraphs below on the confidentiality of consultations and they will give you guidance on the legal position about any information given by you in response to this consultation.

The Freedom of Information Act gives the public a right of access to any information held by a public authority, namely, the Board in this case. This right of access to information includes information provided in response to a consultation. The Board cannot automatically consider as confidential information supplied to it in response to a consultation. However, it does have the responsibility to decide whether any information provided by you in response to this consultation, including information about your identity should be made public or be treated as confidential. This means that information provided by you in response to the consultation is unlikely to be treated as confidential, except in very particular circumstances. The Lord Chancellor's Code of Practice on the Freedom of Information Act provides that:

- the Board should only accept information from third parties in confidence if it is necessary to obtain that information in connection

with the exercise of any of the Board's functions and it would not otherwise be provided

- the Board should not agree to hold information received from third parties “in confidence” which is not confidential in nature
- acceptance by the Board of confidentiality provisions must be for good reasons, capable of being justified to the Information Commissioner

For further information about confidentiality of responses please contact the Information Commissioner's Office (or see website at:

**<http://www.informationcommissioner.gov.uk>**).