

Appendix 3: Equality Impact Assessment (EIA) Report

This form should be completed for each Equality Impact Assessment on a new or existing function, a reduction or closure of service, any policy, procedure, strategy, plan or project which has been screened and found relevant to equality.

Please refer to the ‘EIA Report Form Guidance’ while completing this form. If you need further support please contact acesstoservices@swansea.gov.uk.

Where do you work?
Service Area: Adult Services
Directorate: People

(a) This EIA is being completed for a:

Service/ Function	Policy/ Procedure	Project	Strategy	Plan	Proposal
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(b) Please name and describe here: Proposed Model for Residential Care

Following the commissioning review of Residential care for older people (2016), the preferred option is now progressing for decision – in summary the proposal is to shape the internal provision of residential care to focus on complex care needs, short-term residential reablement and respite care. To achieve this change resources will need to be focused upon specialisms and as a result ‘standard’ / non- complex residential care provision will no longer be provided by the Council. Standard /non-complex residential care will be provided via our externally commissioned services only. The change would also mean a concentration of staff resources and skills to ensure the necessary specialists and the right environment are in place to achieve our resident’s outcomes.

By adopting the preferred options and developing its provision in relation to complex care, the Council will be able to provide better care for people with complex needs such as dementia. This is an identified area of need that the independent sector struggles to meet.

Refocussing internal provision in this way will hopefully allow the Council to provide better services and care for its residents. It will also provide market certainty for the independent sector surrounding the commissioning of standard residential care.

The Council also recognises that to deliver this vision of an improved residential care offer will require significant capital investment and this requirement has been added to the Council’s Capital programme for the next 5 years.

By concentrating its resources on these specialisms, the Council will work towards providing an improved service for residents in Swansea, but will need less in-house beds to provide these specialisms.

This consolidation of resources can be achieved through the closure of one residential care home identified as Parkway Residential care home following an evaluation exercise to determine the Council home least fit for purpose to deliver the preferred future model (a separate EIA has been completed for the specifics surrounding this).

(c) It was initially screened for relevance to Equality and Diversity on: 25/01/15, December 2016 & March 2017. This EIA has been continually updated alongside the consultation process. The report outlines the final impact taking into account the outcomes of the consultation.

(d) It was found to be relevant to...

- | | | | |
|------------------------------------|-------------------------------------|--------------------------------------|-------------------------------------|
| Children/young people (0-18) | <input type="checkbox"/> | Sexual orientation | <input type="checkbox"/> |
| Older people (50+)..... | <input checked="" type="checkbox"/> | Gender reassignment | <input type="checkbox"/> |
| Any other age group | <input checked="" type="checkbox"/> | Welsh language | <input checked="" type="checkbox"/> |
| Disability | <input checked="" type="checkbox"/> | Poverty/social exclusion..... | <input checked="" type="checkbox"/> |
| Race (including refugees)..... | <input checked="" type="checkbox"/> | Carers (including young carers)..... | <input checked="" type="checkbox"/> |
| Asylum seekers | <input type="checkbox"/> | Community cohesion | <input type="checkbox"/> |
| Gypsies & Travellers..... | <input type="checkbox"/> | Marriage & civil partnership | <input type="checkbox"/> |
| Religion or (non-)belief | <input type="checkbox"/> | Pregnancy and maternity | <input type="checkbox"/> |
| Sex..... | <input type="checkbox"/> | | |

(e) Lead Officer

Name: Cathy Murray

Job title: Principal Officer Service Provision

Date: 17th August 2018

(f) Approved by Head of Service

Name: Alex Williams

Date: 17th August 2018

Section 1 – Aims (See guidance):

Briefly describe the aims of the initiative:

What are the aims?

In line with the principles of the Social Services and Wellbeing (Wales) Act, the model agreed for Adult Services in 2016 had the following principles at its core:

- Better prevention
- Better early help
- A new approach to assessment
- Improved cost effectiveness
- Working together better
- Keeping people safe

It was agreed through an options appraisal and consultation that in order to best meet these strategic priorities a remodelling of our internal provision was needed with a focus on complex care, short-term residential reablement and respite. The focus of the service would be about aiming to achieve better outcomes for people with reablement and greater independence for both residents and carers at its core.

In line with the key principle of better prevention, if the proposed model for Residential Care is implemented the Council will be able to designate more 'in-house' beds as respite provision, which will allow carers greater certainty and planning surrounding respite arrangements helping them to keep their loved ones at home for longer by providing them with a much needed break.

The reablement provision within Residential Care will also be further developed to better support people when leaving hospital or when they are finding it difficult to stay at home without support. Again, in line with the key principles of better prevention and early intervention, providing people with support in this way allows them to regain skills and independence to return to their own homes in line with their desired personal outcomes.

To achieve these objectives, if the Residential Care Model is approved by Cabinet, following public consultation the changes would be as listed below

- The closure of Parkway Residential Home.
- Gradual phase out of standard residential care in the remaining five Swansea Council Residential Care homes. (Ty Waunarlwydd, Bonymaen House, St Johns, Rose Cross House and The Hollies)
- Some residents at Parkway would need to relocate to independent sector homes.
- No new admissions for standard residential care in Local Authority provision. This will mean that those individuals who wish to access standard residential care in the future will access independent sector provision only

Who has responsibility?

Head of Adult Services – Alex Williams

Who are the stakeholders?

- Service users
- Carers / Families
- ABMU Health Board representatives (including Older People Mental Health and Therapies)
- Cabinet and Elected Members (including political and opposition majority, representing areas across Swansea)
- Provider Staff (including, Managers, Care Officers and Drivers)

- External Day Care providers (Gwalia, Swansea Carers Centre and Red Cafe)
- Future Day Care Service Users representatives (Network 50+, Age Cymru, Alzheimer's Society, SCVS Swansea Dementia Friendly Forum, Advocacy Officer and Minority Ethnic Elders - SBREC)
- Integrated Community Services staff (Social Work Team Leaders, Social Workers and Care Management Officers)
- Officers from Social Services (including key Budget Holders, Commissioning, Safeguarding, Direct Payments, Local Area Coordinator).
- Officers from Corporate departments (accountancy, human resources, legal, commercial & commissioning unit, health & safety, housing, scrutiny and property)
- Union representation (GMB, UCATT and Unison)
- Older Peoples Commissioner
- Council Sheltered Housing complexes
- Other organisations e.g SCVS, Carers centre, Age concern, Disability Liason Group, Contracted independent providers , Swansea Dementia Forum , 50+ Network , Ageing Well Steering group

Section 2 - Information about Service Users (See guidance):

Please tick which areas you have information on, in terms of service users:

- | | | | |
|------------------------------------|-------------------------------------|--------------------------------------|-------------------------------------|
| Children/young people (0-18) | <input type="checkbox"/> | Sexual orientation | <input type="checkbox"/> |
| Older people (50+)..... | <input checked="" type="checkbox"/> | Gender reassignment | <input type="checkbox"/> |
| Any other age group | <input checked="" type="checkbox"/> | Welsh language | <input checked="" type="checkbox"/> |
| Disability | <input checked="" type="checkbox"/> | Poverty/social exclusion..... | <input type="checkbox"/> |
| Race (including refugees)..... | <input checked="" type="checkbox"/> | Carers (including young carers)..... | <input checked="" type="checkbox"/> |
| Asylum seekers | <input type="checkbox"/> | Community cohesion | <input type="checkbox"/> |
| Gypsies & Travellers..... | <input type="checkbox"/> | Marriage & civil partnership | <input checked="" type="checkbox"/> |
| Religion or (non-)belief | <input checked="" type="checkbox"/> | Pregnancy and maternity | <input type="checkbox"/> |
| Sex..... | <input checked="" type="checkbox"/> | | |

Please provide a snapshot of the information you hold in relation to the protected groups above:

There are 6 in-house residential care homes with a total of 198 beds. 180 of those beds are currently registered with CIW; 135 are used for long-term care, with the remaining 45 used for residential reablement or respite.

Taking a snapshot in time, the following table shows the number with complex needs at each site.

Care Home	Total beds	Beds used for Long Term care	Total no of residents with complex care needs	Complex due to dementia
Bonymaen House	29	6	3	0
Parkway NB 26 beds are registered.	36	22	30*	7
Rose Cross	33	23	17	7
St Johns	29	29	6	0
The Hollies	23	15	14	0
Ty Waunarlwydd NB 40 beds are registered.	48	40	13	13
TOTAL	198	135	83	27

**indicates use for respite where appropriate – i.e not permanent residents so multiple residents would have used the same bed at differing times.*

At the snapshot taken, the total number of residents using the beds in line with the preferred model of residential reablement, complex care and respite were as follows:

Service Type	Current usage
Complex Care (not inc dementia)	86
Dementia Care as a subset of Complex Care	48
Assessment and rehab Services	34
Respite services	23
TOTAL	143

Within Adult services we hold client records for all service users on the PARIS client management system which provides greater detail around all of the protected groups. Unfortunately these records do not capture all of the service user information as a mandatory requirement nor can it easily disaggregate records to specific services i.e we cannot pull information on clients based on the services they use.

Therefore, Residential Care Services staff capture information on their clients manually on site. This information has been collated as part of the Impact Assessment report for the identified site for potential closure

In support of the proposed model for Residential Care, future service user demand and level / complexity of need has also been considered to ensure we propose a model which is fit for purpose and sustainable.

A regional population assessment was conducted by Western Bay (covering Neath Port Talbot, Bridgend and Swansea Localities) which has helped to better understand the future need in our locality amongst older people and carers, key extracts include:

- By 2041 the number of people over 65 is expected to increase by 37%
- By 2035 the number of people over 85 is expected to increase by 119%

Projection tools used this information to predict the following around the level of need of our regional population:

- By 2020 the population aged over 65 would exceed 111,070 in the region with around 45% of this group living alone. Of that group it is predicted 18.5% would be unable to manage at least one mobility activity on their own (including going outdoors).
- The number of people with dementia is also predicted to significantly increase across the region due to the increased life expectancy and ongoing improvement of diagnosis of the condition. People with dementia are likely to have complex needs
- It is estimated that one in four people in a general hospital bed have dementia
Many experience delays in discharge and an estimated third of people with dementia die in hospital

The population assessment does not break down the data into individual protected groups. We know however that very few people from BME communities access our services. The main reason for this is that people from BME communities tend to be cared for at home by extended family networks and are less likely to approach us for statutory support.

Any actions required, e.g. to fill information gaps?

Continued monitoring of those who access the Residential Care system/ Social Services by protected group.

As described manual records need to be maintained in relation to service user details on site at Residential Care Homes.

Swansea Council alongside regional partners including the Local Health Board are progressing with the implementation of the Welsh Community Care Information System – this will hold client records for all local authority and Health services and replace the current PARIS client management system used within Adult Social Services. The new system will be developed to better capture and easily extract information around our service users and protected characteristics.

Section 3 - Impact on Protected Characteristics (See guidance):

Please consider the possible impact on the different protected characteristics.

Current & future Service Users & Carers

	Positive	Negative	Neutral	Needs further investigation
Children/young people (0-18) →	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Older people (50+) →	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any other age group →	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability →	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Race (including refugees) →	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asylum seekers →	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gypsies & travellers →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Religion or (non-)belief →	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex →	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual Orientation →	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gender reassignment →	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Welsh Language →	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Poverty/social exclusion →	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Carers (inc. young carers) →	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community cohesion →	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Marriage & civil partnership →	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pregnancy and maternity →	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Thinking about your answers above, please explain in detail why this is the case.

Positive Impact:

- Children and young people
- Older people
- All age groups
- Disability
- Carers (incl. young carers)
- Race
- Religion or (non) belief
- Sex
- Sexual Orientation
- Gender Reassignment

The model has been developed to provide the necessary resource and capacity to deliver the best possible Residential Care Services to those most in need across Swansea. The principle is that in line with population projections there is an increased and increasing level of complex needs, particularly with older people with dementia in Swansea. Likewise, reablement and the capacity to support individuals to fulfil their personal outcomes and increase independence and the likelihood of returning home to their communities is crucial to the wellbeing of older people in Swansea.

This demand, alongside other complex health issues, will only continue to grow in the years to come – realigning Residential Care Services now will provide Swansea Council the opportunity to upskill staff and create the necessary Residential Care Service environment which will support the outcomes of service users and carers. This is a positive impact on current service users, their carers and future clients alike by ensuring the service is fit for purpose and sustainable at that level for future years.

In addition the proposed model will continue to provide Residential Care Services to all those where it is the only means of support to meet their outcomes including older people with learning disabilities, mental health problems, sensory impairment or physical disabilities, regardless of their protected characteristic.

For these clients services will be improved with more specialist support which will better meet their needs.

The model also accommodates an increase in respite care beds – offering carers including young carers a necessary break from care duties, when needed. This will be positive, supports the preventative model and recognises the importance of the health and well being of both the individual and their support network

We do however recognise that although the proposed model is positive for the future of Swansea residential care the impact on those affected by the closure of Parkway residential home must be acknowledged – this detail and actions to minimise disruption are detailed in the specific equality impact assessment report related to Parkway.

In addition for future non-complex clients residential care will be managed via our externally provided / commissioned services. Whilst this could be perceived as negative, all external services are registered with Care Inspectorate Wales and effective contract monitoring is in place by Swansea Council to provide assurance over quality. Any quality issues are addressed at the earliest opportunity. There is also an oversupply of standard residential care in the independent sector. As of August 2018, there were 73 vacancies immediately available in the sector with a further 42 due to come up shortly but currently unavailable due to issues such as refurbishment. Swansea Council is keen to see the sector thrive and develop which greater demand into their residential homes will facilitate.

Neutral Impact:

- Poverty/social inclusion
- Welsh Language
- Asylum Seekers
- Marriage and civil partnership
- Pregnancy and maternity.

The current provision of Residential Care Services will remain unchanged in relation to the above areas. Impact will only be attributable to assessment of need as detailed above. As the proposed model describes we will continue to provide services to those with complex health needs and those older people with learning disabilities, mental health problems, sensory impairment or physical disabilities where these services are the only means of support to meet their outcomes.

The proposed model will have no impact on poverty and social inclusion as all individuals will have their needs met, if they are eligible for support, regardless of their financial circumstances.

Asylum seekers with no recourse to public funds would not be eligible for social care services, unless their human rights were breached.

There will be a neutral impact in relation to Welsh Language. As part of the wider Swansea Council objectives, Adult services will continue to develop and review its Welsh Language strategy focusing on the wider implementation of the 'active offer' as defined within 'More than just words' guidance. This is an ongoing area of development which will continue to improve but is unaffected by the proposed model of delivery. For the purposes of future consultation, information on language is held for service users and all correspondence and consultation materials will be available in Welsh Language format.

Needs Further investigation:

- Gypsies & Travellers
- Community Cohesion

It is recognised that not enough information is held in relation to the areas listed above to fully understand the impact of the revised model for Residential Care. However the principles of the overall proposed model maintain the objectives of building a sustainable service which will be best able to meet the needs of those with most complex support requirements throughout Swansea. Improved information gathering on these areas across Social Services and partner organisations will assist with this learning.

In relation to gypsies and travellers we currently do not capture information on this in relation to our residents, but the numbers are likely to be low or negligible as gypsy and traveller communities would generally care for family members within their communities rather than access the formal care system, unless circumstances meant that they were unable to manage.

Community Cohesion has been recognised and evaluated as part of the criteria when assessing the options for Residential service closures (detailed in the separate Equality Impact Assessment relating to Parkway). This assessment included a wider discussion around Residential Service's community links and active engagement of staff, premises and service users with the wider community via partner and voluntary organisations. There have been excellent examples of this work in practice with a number of Residential services which potentially have a positive impact on community cohesion. However, impact outside of service user engagement and impact on achievement of personal outcomes has not been formally expanded to fully understand wider implications and benefits. The Model and proposed reduction in Residential Services may or may not have a positive impact on community cohesion. This will be taken forward for review as part of the wider implementation if approved.

The EIA will remain open until such time as the model is implemented, and these areas will be investigated further. However, it is considered that there is unlikely to be a significant impact on these areas which isn't already being addressed.

Section 4 - Engagement:

What engagement has been undertaken to support your view? How did you ensure this was accessible to all?

A 12 week stakeholder consultation commenced on 30/04/18 and concluded 23/07/18.

Documents were provided in English and Welsh and were available in large print on request. We identified the preferred language of the affected Services Users when communicating with them during the consultation

Consultation information was provided to staff, and details were available on the Council website and intranet, through the Media, Facebook and Twitter.

A Stakeholder Map was created with the service which identified stakeholders and has been used by the service to evidence engagement with the stakeholders.

Consultation with stakeholders was as follows:

- All Councillors were briefed regarding the proposals

- Ward Councillors - Cllr Child, the Cabinet Member, spoke to or offered to speak to relevant Ward Councillors
- AM/MPs - letter issued to raise awareness of consultation
- Older Peoples Commissioner - letter issued to raise awareness of consultation
- Trade Unions – Initial meeting held with Management/HR and Unions. Meetings were held on an ongoing basis as necessary
- Library Managers briefed and provided copies of hardcopy questionnaires and displayed in all libraries
- Contact Centre Manager briefed to inform all relevant Contact Centre/Switchboard staff of consultation. Hardcopy questionnaires available in CC and Guildhall reception
- Email or letters sent to all identified relevant stakeholders raising awareness of the consultation and offering to attend any meetings if required
- All external residential homes were made aware of the consultation.
- The Head of Adult Services met with the Disability Liaison Group to raise awareness of consultation.
- Swansea Council sheltered complexes – hardcopy questionnaires issued.

The following was also undertaken with those service users directly affected and their families and carers:

1. Bilingual Letters issued pre consultation and letters/questionnaires issued during consultation.
2. Consultation meetings took place at Parkway with residents and families on 8th May 2018, 21st May 2018, 5th June 2018 and 6th June 2018. The details of who attended the meetings is included in the specific Equality Impact Assessment in relation to Parkway.
3. 1 to 1s arranged as necessary at various times.
4. Social Workers met with relevant affected Service Users to complete review to help determine if had complex or non-complex needs to help inform their response to the consultation.
5. Other Council-run home residents were made aware of consultation by management and Welsh/English hardcopy questionnaires provided

A separate staff and Trade Union 12 week consultation ran concurrently to the wider stakeholder consultation. The staff consultation commenced on 30/04/18 and ended on 23/07/18, this exceeded the legal requirement of a 30-day consultation. It was identified that 34 staff were potentially affected at the start of the Consultation.

What did your engagement activities tell you? What feedback have you received?

Regarding the whole Residential Care Model and proposed closure the following number of responses were received:

Info received	No. rec'd
Online Questionnaire	42

Hardcopy Questionnaires	21 Included in the 42 above
Letters	2
Emails	5
Petition with 1000 names	1
TOTAL	50

42 respondents completed the questionnaire either online or on paper. The responses to both the paper and online questionnaire are amalgamated below.

(NB: numbers for each question differ as do the stats as some people choose not to answer all questions)

In relation to the Residential Care services model the following summarised responses were recorded:

- **Question 1. Do you agree or disagree with our proposed changes to residential care for older people? 39/42.**

Strongly agree 8, Tend to agree 7, Tend to disagree 4, Strongly disagree 20

- **Question 2. Please expand your answer below: 35/42 respondents commented (included in survey themes below).**

Key Themes	Responses Nos
Council Homes are better - the Council provides better care than services in the private sector	5 (14%)
In favour or enabling people to remain living independently for longer	2 (5%)
Impact on Choice (and Location) - reliance on independent sector for non-complex care reduces choice. Particularly in terms of location which is key to maintaining relationships. 1 comment that there is not enough choice for respite in the independent sector.	6 (17%)
Cost of Private Care Homes - third party charges mean that residents and their families will not be able to afford private care home fees.	3 (8%)
Definition of complex care - that the definition of complex care needs to be more specific.	1 (2%)
Concerns about privatisation of all	1 (2%)

council owned care homes.- this proposal may lead to closure / privatisation of all homes.	
Financial concerns. - concerned about decisions being driven by budget pressures.	2 (5%)
Financial Concerns Cont... concerned about private sector profit motives	2 (5%)
Support for Proposals. 4 comments were in support of proposals. 2 of these were very positive, 2 were neutral accepting that changes were necessary. 1 comment (from ABMU HB) was neutral on grounds that the proposal makes sense if care is available elsewhere (but commenting that calculations are not clear and assurances of alternatives have not been provided in the consultation.	4 (11%)
Multiple - This response highlights concerns relating to impact on residents, cost to families, quality of care in private sector, reduced choice and availability of respite care.	1 (2%)
Availability of beds - comments about difficulty finding care homes beds in independent sector. 1 Comment that beds at LA homes are always full. 1 comment that hospital bed blocking occurs because of lack of beds.	2 (5%)
Staffing Extra staffing will be needed for residents with complex needs.	1 (2%)
Wellbeing - comments received related to the impact that moves will have on residents' wellbeing. Some of these concerns relate to choice and location impacts and equalities and human rights impacts.	5 (12%)
Reablement - asked why can't Parkway be used for reablement services.	1 (2%)

- **Question 3. Are there any other options you feel the Council should have looked at in relation to the Residential Care Service for Older People? - 34/42 responded (included**

in survey themes below).

Key Themes	Responses Nos
Alternative Suggestions - respondents proposed alternative suggestions regarding use of building or type of service / ownership at location of Parkway.	6 (17%)
Care at Home - people commented that dom care services could lead to savings, or could be more appropriate than residential care	5 (14%)
Save Money Elsewhere - commented that the council should prevent closure by saving money elsewhere.	4 (11%)
Budget Pressures - comments that proposals are purely driven by budget pressures and do not show sufficient regard for resident welfare.	2 (5%)

Question 4. Considering the above, do you agree or disagree with the following...

The criteria used to access each care home were the right ones. 36/42 responded.

- Strongly agree 3, Tend to agree 14, Tend to disagree 6, Strongly disagree 13

The proposal to close Parkway Residential care 36/42 responded.

- Strongly agree 3, Tend to agree 8, Tend to disagree 7, Strongly disagree 17

How have you changed your initiative as a result?

The key potential adverse impacts of the overarching model for residential care on people with protected characteristics particularly older people are set out below, alongside appropriate mitigation:

- Inadequate staffing and unsuitable buildings could mean that the Council was unable to meet the needs of people with more complex needs; by way of mitigation the Council will ensure that adequate staffing is in place with suitably skilled and trained staff and that buildings are fit for purpose to meet people's needs.
- There is a risk that the proposed closure of Parkway could lead to insufficient number of beds in the market to deal with current and future demand for residential care for older people. At any given time, Swansea has an average 8% vacancy rate, which is approximately 125 beds. At the time of finalising the proposals there were 17 residents at Parkway, with a total of 26 beds. Closing Parkway would lead to a reduction of 9 vacant beds in the market reducing the total number of vacancies to 116. The modelling exercise undertaken during the review which took account of population projections would suggest that there are sufficient beds to meet current and future demand.
- All of the above had a potential adverse impact on carers due to the overall stress and worry of the situation, and being concerned about their loved ones. However, mitigating as set out above and in the separate EIA relating to Parkway would also mitigate the impact on carers by alleviating some of the stress and worry involved.

In addition to the above, it had already been agreed that the overarching model would be phased in gradually. Therefore, there would be no requirement for those with non-complex needs not resident at Parkway to move. They would be enabled to remain in their current home,

until such time as they moved on for natural reasons. This decision was taken to minimise the impact on the wider population and adverse impacts consequently on older people, people with disabilities and their carers.

In general, there was not majority support for the model or the proposal to close Parkway. However, the Council has considered all possible alternative options, but has not been able to identify any financially sustainable alternatives that allow it to ensure certainty of care for reablement, respite and more complex needs whilst overall enabling independence, helping people to remain at home for as long as possible and ensuring the needs to all vulnerable adults are met.

There is clearly a risk if the proposed model is approved, that there could be a negative impact on those individuals currently resident at Parkway due to the need to move. However, this risk can be mitigated as much as possible by ensuring robust social work assessment identifies those move on plans and all those affected are supported before, during and after any move. In addition, there could be a positive impact on the wellbeing of current residents at Parkway as they may be happier elsewhere and build positive relationships as part of any move. This is explored further in the Equality Impact Assessment specific to Parkway.

On balance therefore remodelling as per the proposals will allow the Council to effectively meet the requirements of both the Social Services and Wellbeing (Wales) Act and Well Being of Future Generations (Wales) Act by providing a model of care that is sustainable for the future, and effectively meets the needs of an ageing population with more complex needs. The Council is therefore confident that the recommendations put forward are appropriate despite there not being majority support for the proposals.

There were no proposed changes to the model as a consequence of the consultation responses as the impact would be minimised by restricting any potential moves to those resident at Parkway (a maximum of 17 residents), and all remaining adverse effects could be effectively mitigated.

Please consider all of your engagement activities here, e.g. participation, consultation, involvement, co-productive approaches, etc.

Any actions required (e.g. further engagement activities, mitigation to address any adverse impact, etc.):

A communication plan for the ongoing engagement with stakeholders throughout the process will continue – reaffirming the purpose of the model of delivery and latest updates around decisions. This communication plan will form a key part of the overall project plan should the proposals proceed.

Individual social work assessments will need to take place with all those affected at Parkway; full details of this will be included in the specific Equality Impact Assessment relating to Parkway.

Section 5 – Other impacts:

Please consider how the initiative might address the following issues - see the specific Section 5 Guidance

Foster good relations between different groups	Advance equality of opportunity between different groups
Elimination of discrimination, harassment and victimisation	Reduction of social exclusion and poverty

Please explain any possible impact on each of the above.

The service model for Adult Services aims to impact on all of the above.

In general terms The Social Services and Wellbeing (Wales) Act 2014 provides the legal framework for improving the wellbeing of people who need care and support, carers who need support and for transforming social services in Wales. It reforms social services law, changes the way people’s needs are assessed and the way in which services are commissioned and delivered. People with care and support needs will have more of a say in the care and support they receive and there is an emphasis on supporting individuals, families and communities to promote their own health and wellbeing.

The Act introduces common assessment and eligibility arrangements, strengthens collaboration and the integration of services particularly between health and social care, and provides an increased focus on prevention and early help. Local Authorities and health boards have come together in new statutory Regional Partnership Boards to drive integration, innovation and service change.

The Act also promotes the development of a range of help available within the community to reduce the need for formal, planned support. Local Authorities need to work with people to develop solutions to immediate problems and reduce the need for complex assessment and formal provision of care. Where people have complex needs, which require specialist and/or longer term support, local authorities will work with people and their families to ensure that high quality and cost effective services are available at the right time and in the right place.

Local Authorities and their partners need to make sure that people can easily get good quality information, advice and assistance, which supports them to help themselves and make the best use of resources that exist in their communities without the need for statutory support.

Local Authorities also need to ensure a shift from a deficit and dependency model to a model, which promotes wellbeing and independence focused on individual outcomes rather than service targets and objectives.

There will be stronger powers to keep people safe from abuse and neglect.

The Adult services model has interpreted this requirement and embedded into all service development, including the proposed model around Residential Care.

Our vision for health, care and wellbeing in the future is that:

“People in Swansea will have access to modern health and social care services which enable them to lead fulfilled lives with a sense of wellbeing within supportive families and resilient communities. We will help people to keep safe and protected from harm and give opportunities for them to feel empowered to exercise voice, choice and control in all aspects of their lives. Our services will focus on prevention, early intervention and enablement and we will deliver better support for people making best use of the resources available supported by our

highly skilled and valued workforce”.

Our proposed new model for Residential Care supports this vision and the overarching Swansea Council model for Adult Social Care agreed in 2016.

What work have you already done to improve any of the above?

Using this vision as our cornerstone a number of positive steps have been taken to address the 4 priorities listed. These include the development of integrated community Hubs which offer community based services staffed by Social Workers, Nursing staff, Occupational Therapists, Physiotherapists and other community support resources from both the Local Health Board and Local Authority – their purpose is to offer a consistency of approach regardless of the individual’s geographical location, staff member providing contact and services which are offered.

It also promotes a service around the individual ensuring that everyone who needs to be involved is available to offer a timely intervention if needed

This model also provides greater consistency in our approach to safeguarding – ensuring that the vulnerable have the most robust processes and professional framework in place to keep them safe from abuse.

It has also enabled us to develop alternative models to traditionally managed care like Residential Care Services – the investment and development of Bonymaen House and Ty Waunarwydd to focus services on reablement and complex care demonstrated improved outcomes for residents. Equipment, the right facilities and environment combined with the necessary skilled integrated resources (both Swansea Council and Local Health board employees) working together have helped to assist individuals in achieving their personal outcomes

The remodelling of Residential Care Services alongside the other commissioning reviews of services allows us to refocus our limited resources into the most complex of needs and shift investment into the more sustainable and long term investment of building on those assets which already exist within the community.

Is the initiative likely to impact on Community Cohesion? Please provide details.

The principle of maximising on people’s strengths and supporting the identified wellbeing outcome of improved independence and the ability to remain within our own homes and communities for longer will assist with the maximisation of existing schemes and development/potential investment in expansion of these available community based services. This forms part of the wider Prevention Strategy and overall service model for Adult Services in Swansea. It is also a corporate priority across Swansea Council. Community cohesion is consequently impacted on positively by encouraging people to maximise their networks and supports in communities rather than be reliant on statutory support.

How does the initiative support Welsh speakers and encourage use of Welsh?

Across all adult services the ‘Active offer’ is in place - at its heart is the idea that being able to use your own language must be a core component of care – not an optional extra.

In an aim to achieve this Adult Services alongside the whole council are working towards mainstreaming welsh language services as an integral part of service planning and delivery. This continues to be a priority regardless of outcomes tied to this proposal.

Actions (to mitigate adverse impact or to address identified gaps in knowledge).

Not applicable.

Section 6 - United Nations Convention on the Rights of the Child (UNCRC):

Many initiatives have an indirect impact on children and you need to consider whether the impact is positive or negative in relation to both children's rights and their best interests. Please read the UNCRC guidance before completing this section.

Will the initiative have any impact (direct or indirect) on children and young people (think about this age group holistically e.g. disabled children, those living in poverty or from BME communities)? If not, please briefly explain your answer here and proceed to Section 7.

All initiatives must be designed / planned in the best interests of children and young people.

Best interests of the child (Article 3): The best interests of children must be the primary concern in making decisions that may affect them. All adults should do what is best for children. When adults make decisions, they should think about how their decisions will affect children. This particularly applies to budget, policy and law makers.

Please explain how you meet this requirement:

We recognise that we need to ensure that all carers (regardless of age) are supported. For this reason, we have joint commissioning arrangements for Adult Services and Child & Family Services for those which support young carers. This proposal will ensure much needed respite for those carers supporting individuals with complex needs will continue to be provided.

Actions (to mitigate adverse impact or to address identified gaps in knowledge).

Impact on this group will continue to be monitored if the proposal is approved. Communication and engagement with alternative provisions for non-complex clients will be managed as part of the social work support if the proposal is approved.

Section 7 - Monitoring arrangements:

Please explain the monitoring arrangements for this initiative:

Monitoring arrangements:

EIAs to be continually updated in line with decision making and further consultation

Corporate communications team and Access to Services team will continue to be engaged in process with key updates provided as and when possible

Social work assessments for residents at Parkway to manage impact of change (if approved)

Ongoing project monitoring of overarching project plan to ensure project is delivered in line with objective and any adverse impacts are mitigated.

Implementation of model and affected processes to be mapped and planned appropriately (if approved)

Actions:

Ongoing update of EIA.

(Dependent on decision) commencement of social work assessments for those residents directly affected at Parkway.

(Dependent on decision) finalisation of revised project plan.

(Dependent on decision) implementation of proposed model and associated home closure.

(Dependent on decision) monitoring of outcomes and impact on non-eligible clients to be developed and produced.

Section 8 – Outcomes:

Having completed sections 1-5, please indicate which of the outcomes listed below applies to your initiative (refer to the guidance for further information on this section)

- Outcome 1: Continue the initiative – no concern
- Outcome 2: Adjust the initiative – low level of concern
- Outcome 3: Justify the initiative – moderate level of concern
- Outcome 4: Stop and refer the initiative – high level of concern.

For outcome 3, please provide the justification below:

For outcome 4, detail the next steps / areas of concern below and refer to your Head of Service / Director for further advice:

Section 9 - Publication arrangements:

On completion, please follow this 3-step procedure:

1. Send this EIA report and action plan to the Access to Services Team for feedback and approval – acesstoservices@swansea.gov.uk
2. Make any necessary amendments/additions.
3. Provide the final version of this report to the team for publication, including email approval of the EIA from your Head of Service. The EIA will be published on the Council’s website - this is a legal requirement.

EIA Action Plan:

Objective - What are we going to do and why?	Who will be responsible for seeing it is done?	When will it be done by?	Outcome - How will we know we have achieved our objective?	Progress
Inform Parkway Residents and their families, and staff of outcome of Cabinet Decision	Head of Service	Post Cabinet on 20/09/18	Letters issued	
Inform key stakeholders of outcome	Head of Service	Post Cabinet on 20/09/18	Letters/emails issued	
Inform other Council Residential service users	Head of Service	Post Cabinet on 20/09/18	Letters issued	
Revise overall project plan (if approved)	Project Management Support	Post Cabinet on 20/09/18	Project plan completed	
Stop all new admissions for standard residential care for non-complex needs (if approved)	Principal Officer for Service Provision	Post Cabinet on 20/09/18	No new admissions	
Commencement of Social Work Assessments to manage impact of change (if approved)	Principal Officer for Service Provision	Post Cabinet on 20/09/18	Monitoring that all assessments are taken	
Support before, during and after moves from Parkway (if approved)	Allocated Social Workers	Post Cabinet on 20/09/18	Ongoing monitoring by social workers	
Closure of Parkway (if approved)	Head of Service	Early 2019	Parkway closes	

Remodelling of remaining services in line with preferred model	Principal Officer for Service Provision	Early 2019	Revised model to deliver residential reablement, respite and complex care	
Ongoing revision to EIA	Project Management Support	Ongoing	Evidence of EIA being updated.	

*** Please remember to be 'SMART' when completing your action plan (Specific, Measurable, Attainable, Relevant, Timely).**