

Name of proposal/policy	Prevention Contract: Northamptonshire Association for the Blind (NAB)	Budget number (if applicable)	
Service area responsible	Commissioning	Cabinet meeting date	11 th December 2018
Name of completing officer	Bernie Lally	Date EqIA created	27/09/2018 Updated 16/11/2018
Approved by Director / Assistant Director	Anna Earnshaw	Date of approval	01/10/2018 Update approved 16/11/2018

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'Due regard' to:

- Eliminating discrimination, harassment and victimisation
- Advancing equality of opportunity
- Fostering good relations

We do this by undertaking equality impact assessments (EqIAs) to help us understand the implications of policies and decisions on people with protected characteristics – EqIAs are our way of evidencing this.

All assessments must be published on the NCC equalities web pages. All Cabinet papers where an EqIA is relevant **MUST** include a link to the web page where this assessment will be published. If you require assistance in getting your EqIA published, please contact equalities@northamptonshire.gov.uk

PART 1

Description of current provision/policy and main beneficiaries/stakeholders

- NASS currently commissions a prevention service with NAB offering information, advice and support service for people of all ages (and their families and carers) who are blind/partially sighted. This was transferred from a previous Supporting People funded contract.
- Contract Annual Value: £73,800 (£49,500 from NASS, £24,300 from Children First), ends 31st March 2019.
- NAB provide advice and support to adults and children – also needs-based low level rehabilitation (for those not eligible under the Care Act for rehabilitation by NCC (OCS) specialist rehabilitation officers)
- This is a countywide service. A high level of home visits as rehab is best delivered in people's homes to take into account their living environment regarding trips/falls, room lighting, cooking, magnification etc.
- NAB have 3,000 people on their books of which about 220 are 0-25s; 600 referrals a year about 30 of which are 0-25s. Majority are older people (over 65s) who have degenerative sight conditions. Younger adults and children (support to children is funded by the Children's First contribution to the contract) predominantly have congenital or degenerative sight conditions. Contract delivers approximately 231 hours per week (gross) less 20% personal admin = in the region of 185 support hours; to which can be added approximately 80 hours per week volunteer input. The above figures do not include resources committed to NAB activities that do not form part of the 'service' funded, by NCC. NAB levies in considerable additional funding which cover the costs of NABs wider activities and the resources for these).
- The number of referrals annually has been fairly steady over last few years; the nature of demand is also similar but NAB increasingly undertake more in terms of follow up activities now because other agencies NAB would have previously referred a customer to are no longer operating
- NASS contribute £49,500 per annum to an overall service costing £315K pa. Up to 2010/11 the service was funded by NCC at £160K. The contract at that time was the core service. Since then they have leveraged in additional funding: currently in Year 3 of 3 years Lottery funding (£120K pa). Additional funding from applications to Trust funds; also legacies, donations and use of reserves. The core service now costs £300K pa of which NCC contribute £73K (£49,500K NASS) Core service is now much broader than that funded by the NCC contract, enabling a holistic approach to the individual encompassing health, housing, income etc. The provision of NCC funding is important when making applications to the Lottery and other funds as statutory agency funding is recognised as important and helps lever in additional funding which may not be available if NCC was not funding. Therefore NCC funding (£73Kpa) helps leverage in three times as much additional funding (£240K pa) through applications.
- NAB provide support at hospital eye clinics and more support for children in and outside schools as the LA/schools provision of support staff has reduced. NAB will refer customers to the VI team at OCS if a statutory need is identified and continue to provide support to these customers. NAB services complement the statutory service provided by NCC (OCS) providing a range of health and wellbeing checks/support that contributes to people being able to continue to live independently. Overall the number of visually impaired people is increasing as a result of people living longer and therefore the demand for this service will rise.
- There is no other comparable service funded locally

Description of proposal under consideration/development

The contract is due to end on 31st March 2019 so the proposal is to not recommission the service, subject to consideration of the consultation feedback and the equalities implications.

Data used in this Equality Impact Assessment (general population data where appropriate but each EqIA should contain information on people who use the service under consideration – if this is not applicable to your proposal then you probably do not need to do an EqIA)

Please summarise what the data tells us – for example “X number of people use this service, X are male, Y are female etc”

NOTE: Statistics refer to totality of relevant NAB services, NCC funding amounts to 23% of cost of such services

Note 2: Statistics refer to services delivered to Adults and Children unless otherwise specified

1. Average number of home visits, including follow up visits, made in response to referrals received. All age groups.

2016.17 1100

2017.18 836

1A. As 1 above including follow-up telephone calls

2014.15 1735

2015.16 1921

2016.17 2288

2017.18 1828

2. Number of regular groups and frequency 2017.18.

<u>Frequency</u>	<u>NAB</u>	<u>Other</u>
weekly - activity/interest	4	
monthly -social	9	
monthly - activity/interest	5	1
quarterly	1	

3. Average number of referrals accepted each year, with appropriate response delivered as per 1. and 1a. Above

2015.16 603

2016.17 805

2017.18 624

4. Evidence that service is available to visually impaired people across the whole of the county

<u>Locality</u>	2015.16	2016.17	2017.18
Kettering	117	133	121
South and West Northants	71	112	75
Northampton (South)	99	117	94
Northampton (North)	114	185	118

Wellingborough	115	149	136
Corby	87	109	80
Total	603	805	624

5. Evidence that visually impaired people from BME communities are able to access the service.

Data showing ethnicity of core client group (i.e. visually impaired people & carers) who receive some form of support each year. As at June 2018 (rounded to one decimal place):

White British – 95.8%

White Irish – 0.2%

White UK/Irish Gypsy/Traveller – less than 0.1%

White Other – 1.0%

Mixed ethnicity – 0.2%

Asian Indian – 0.8%

Asian Pakistani – less than 0.1%

Asian Bangladeshi - 0.1%

Asian Chinese – 0.1%

Asian Other – 0.4%

Black African - 0.3%

Black Caribbean – 0.4%

Black Other – 0.1%

Arab – 0.1%

Other – 0.4%

6. Clients receiving information and advice about the service and about living with sight loss on regular basis each year

2017.18 3,459 people

Tick the relevant box for each line by using a capital 'P' to make a <input type="checkbox"/>	Based on the above information, what impact will this proposal have on the following groups?			
	Positive	Negative	Neutral	Unsure
Sex				X
Gender Reassignment				X
Age				X
Disability				X
Race & Ethnicity				X
Sexual Orientation				X
Religion or Belief (or No Belief)				X
Pregnancy & Maternity				X
Human Rights (Please see articles in toolkit)				X
Other Groups (rural isolation, socio-economic exclusion etc)				X

Initial impact	
Explain your findings above	Actions identified to mitigate, advance equality or fill gaps in information
<p>The impact has been assessed as unsure because as yet, a decision has not been made on the future of the contract and we do not yet fully understand what the resulting impact of ending the contract may be. The above impacts will be updated following consultation.</p> <p>However, because of the nature of service users supported by this contract, people who share the protected characteristics of age and disability are likely to be affected by any changes to the contract.</p>	<p>The consultation exercise will help the Council to understand the impact of not continuing with this contract and/or whether any other options should be considered. At present, it is the view of officers that the contract offers considerable value for money because it delivers a low cost all-age county wide service, NAB levies in significant additional funding, which NCC or a private sector partner may not be able to access. However, the value for money based on the actual aspects of the service delivered with the NASS funding needs to be tested against the views of service users and against the wider context of the Council's financial position.</p>

Do you need to undertake further work (e.g. consultation, further equality analysis) based on the impact and actions identified above? If yes, set this out below and then carry out the work and complete Part 2

Consultation in October to seek views on the impact of not recommissioning the service from 1st April 2019.

Consultation will entail an online questionnaire which will also be sent to identified users. Consultation will also include two face to face events.

PART 2 – if required

Consultation, follow up data and information gathered from actions identified above

A consultation was carried out between 4th October and 8th November to better understand the potential impact on people with a visual impairment of removing the NCC funding which contributes to the services delivered by NAB. Feedback on the proposals was sought via a mixture of methods including a questionnaire and public events for service users.

What does this information tell us?

Responses to the consultation for NAB services broadly demonstrated a need for the services, a good level of engagement with the services, and that the services significantly helped to reduce levels of social isolation and escalating health needs.

Respondents to the consultation gave strong indications that removal of the NCC Adults funding for a Visually Impaired service would especially impact negatively on people with a sensory impairment, and especially on those people who additionally had health or mental health diagnosis. Removal of the public funding towards these services was viewed as likely to create especially escalating health needs, to a lesser degree escalating social care needs and to put vulnerable adults at risk.

A more detailed analysis of feedback received can be found in the accompanying Cabinet report

NAB raised concern that some of the data and information in the EQIA was incorrect. The data in the EQIA was provided at different times and in discussion by NAB and NCC accepts therefore that costs for example have changed since this was provided, however would stress that information in an EQIA is just snapshots of a point in time and NCC is of the view that any inconsistencies which may have concerned NAB do not affect the overall information being portrayed by NCC in this document.

Tick the relevant box for each line by using a capital 'P' to make a <input type="checkbox"/>	Based on the above information, what impact will this proposal have on the following groups?			
	Positive	Negative	Neutral	Unsure
Sex			X	
Gender Reassignment			X	
Age			X	
Disability		X		
Race & Ethnicity			X	
Sexual Orientation			X	
Religion or Belief (or No Belief)			X	
Pregnancy & Maternity			X	
Human Rights (Please see articles in toolkit)				X
Other Groups (rural isolation, socio-economic exclusion etc)		X		

Final impact analysis (taking the findings from Part 2 into account) – including review date if required

Findings from the recent consultation looking at the potential impact of ceasing NCC funding to NAB, demonstrate that this would have a significant negative impact on people with a disability. This would most significantly impact on people with a sensory impairment, however this impact would be felt more strongly still by with a sensory impairment and a Mental Health or other Health diagnosis, and likely put people with a sensory impairment at greater risk of developing mental health or other health problems. This is due to difficulties accessing healthcare for people with a sensory impairment, and due to the greater likelihood for people with a sensory impairment of becoming socially isolated. This risk may be further exacerbated for people with a sensory impairment who are additionally at risk of rural isolation.

The negative impact on carers was also clearly stated because of the support provided for the wider family.

Taking this into account, it is the recommendation that funding for a Visually Impaired Service is not ceased and continues.