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| Assessment No | 1031 | Owner | rickeera.kaur |
| Resource | HSCP | Service | Joint |
| | FirstName | Surname | Job Title |
| Head Officer | Rickeera | Kaur | Contracts & Commissioning Officer |
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| Members | Neil McKechnie - West Dunbartonshire HSCP - Contracts, Commissioning and Quality Manager Sylvia Chatfield - West Dunbartonshire HSCP Adult, Mental Health and Addictions Services, Head of Service Service Providers | | |
| | <i>(Please note: the word 'policy' is used as shorthand for strategy policy function or financial decision)</i> | | |
| Policy Title | Care at Home - Framework for Commissioning Provider's of Adult Community Support Services | | |
| | The aim, objective, purpose and intended out come of policy | | |
| | WD HSCP Adult services work in partnership with the Providers, who are responsible for referred packages of care for individuals receiving support in the community. A new commissioning framework is being developed, that will serve as the contract for Provider's working in partnership with the HSCP service. Intended outcomes are: -Increased capacity for the provision of care to people in need, thus increasing the number of people accessing support currently -Creating choice and consistency in care services for people who use services in WD -More efficient ways of working, and improved joint working relationships with the Providers -Compliance with WD HSCP financial process and procedure, and national guidance in the commissioning of social care services -Cost saving, as this will replace the use of individual contracts and reflect market value more efficiently -Anticipated improved outcomes for people who use services as they will have less barriers to accessing the support service of their choice -Benefits to social care market locally and alignment with ethical commissioning best practice. | | |
| | Service/Partners/Stakeholders/service users involved in the development and/or implementation of policy. | | |
| | HSCP Adult SW and Health Services HSCP Commissioning and Procurement services Service Providers. | | |
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| Does the proposals involve the procurement of any goods or services? | | | Yes |

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| If yes please confirm that you have contacted our procurement services to discuss your requirements. | Yes |
| SCREENING | |
| <i>You must indicate if there is any relevance to the four areas</i> | |
| Duty to eliminate discrimination (E), advance equal opportunities (A) or foster good relations (F) | Yes |
| Relevance to Human Rights (HR) | Yes |
| Relevance to Health Impacts (H) | Yes |
| Relevance to Social Economic Impacts (SE) | Yes |
| Who will be affected by this policy? | |
| People who use Adult care and support services in WD Workforce of the Providers | |
| Who will be/has been involved in the consultation process? | |
| Adult Services HSCP workforce Commissioning and contracts team | |

Please outline any particular need/barriers which equality groups may have in relation to this policy list evidence you are using to support this and whether there is any negative impact on particular groups.

| Specific group to consider | Needs | Evidence | Impact |
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| Age | Older adults are more likely to require support from health and social care services, however the framework will contract Providers to support adults from 16+ | The Adult Strategic Needs assessment http://www.wdhscp.org.uk/media/2521/sna-aop-june-2022.pdf | Positive - adults will be more able to readily make choice in which provider they wish to deliver their support and there will be less barriers in commissioning services, therefore should be less gaps in delivering services. |
| Disability | The majority of people utilising Adult services are affected by disability or physical or mental health illness. | The Adult Strategic Needs assessment http://www.wdhscp.org.uk/media/2521/sna-aop-june-2022.pdf | Positive - there should be improved consistency of care and quality of care, when delivered under a comprehensive framework. This allows contract monitoring and quality assurance processes to be streamlined. |
| Gender Reassign | There are no current statistics regarding delivery of services to people who have changed gender, however this is likely to be reflective of the wider population in WD as the service delivers to any person needing support with care due to ill health or infirmity. | The 2021 census for England and Wales found 0.5% of respondents had changed their gender from that which was assigned at birth, which could be used to give a tentative indication of local need. | Positive - as above. A wider range of staff, experience, and more personalised care is available by utilising a Framework with Provider's to manage packages of care and support. |
| Marriage & Civil Partnership | NA | NA | NA |
| Pregnancy & Maternity | The Provider's have existing policies and practice in relation to their duties in supporting maternity and parenting needs in the workplace. | There is limited data or research regarding the prevalence or impact of pregnancy of the social care workforce. | Neutral, there should be no impact from this contract. |

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| Race | <p>People who use services come from a diverse population reflective of WD's wider demographics. However those from minority ethnic groups are likely to be over represented in poor health outcome indicators and in challenges accessing health and care services.</p> <p>People from minority ethnic groups are also over represented in the social care workforce (Skills for Care research estimates that to be 1 in 5 of the social care workforce in England).</p> | <p>The Providers and HSCP have in place suitable referral criteria that accounts for a needs led assessment.</p> <p>There are fair work and recruitment policies in place to reduce the risk of discrimination.</p> | <p>Neutral - there should be no change for people accessing the service and people working in the service.</p> <p>Positive - widening opportunities for other providers to be commissioned within WD allows for more employment opportunities within the local area.</p> |
| Religion and Belief | <p>People of various faiths and religions utilise, and work in, services.</p> | <p>There should be no impact, as access and allocation of the service is needs led, with consideration to cultural and religious needs accounted.</p> | <p>Neutral/ positive. There should be no change, as the processes and allocation of service packages are already in place, however the Framework may allow more flexibility.</p> |
| Sex | <p>8 out of 10 social care staff are female (Scot Gov National Care Service Evidence, 2022). Therefore any changes within services will disproportionately affect women.</p> | <p>The Framework will not affect the current workforce . However it may lead to increased recruitment by the Providers, which is of positive benefit.</p> | <p>Positive.</p> |
| Sexual Orientation | <p>LGBTI+ people are more likely to experience challenges in accessing health and social care services.</p> | <p>There are appropriate referral and service criteria processes in place via the framework that mitigate against discrimination as they are based on an individualised assessment of health and care needs</p> | <p>Positive - use of Providers allows a wider and more diverse workforce across commissioned services. Therefore the HSCP is more likely to be able to meet any identified individual needs or preferences in relation to personal care support provision.</p> |
| Human Rights | <p>There are numerous rights based issues relevant to the service, such as the right to health and social care supports and rights in relation to protected characteristics.</p> | <p>There should be no change within the service in this regard.</p> | <p>Neutral- the Framework will take account of human rights issues and considerations, including right to choice and right to quality of care.</p> |
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| Health | <p>People who access services are likely to have short or long term health needs that cause a need for support with social care. They may have further complex health or care needs.</p> <p>There are particular health considerations for the workforce in relation to providing a care at home service.</p> | <p>A holistic assessment of health and support needs is carried out within the service and interventions are led by this. The Provider will undertake further assessment and review to understand this further and respond accordingly.</p> <p>The Provider has suitable training and provisions to appropriately promote the wellbeing of their workforce in the work environment.</p> | <p>Positive - consistency of care should help promote better health outcomes and reduction of risk for people using the service. Providing opportunity for further Providers to work in the area allows a wider choice to individuals in terms of the support that they receive. Additional resourcing from Providers allows for more robust assessments of support needs.</p> |
| Social & Economic Impact | <p>Overall, substantially higher proportions of people in the most deprived areas in Scotland receive care support; 26% of people receiving home care lived in the most deprived areas, compared to 13.9% in the least deprived. However, this varies by age; 36.2% of those aged 16-64 receiving home care lived in the most deprived areas, compared to 7.5% in the least deprived, while there was little difference in the age 85 and over age group</p> | <p>The adult Strategic needs assessment - http://www.wdhscp.org.uk/media/2521/sna-aop-june-2022.pdf</p> | <p>Positive - delivery of consistent, person centered care should be have positive impact, and having choice around who provides the care can be empowering for people using the service.</p> |
| Cross Cutting | <p>As the Framework will manage provision of support for social care, it does impact all people in the local communities and wider society. Therefore there are several cross cutting considerations.</p> | <p>These should be accounted for through individualised care planning. Care planning should be more consistent and therefore of better quality when packages of support are assigned a Provider of the individual's choosing, where they so wish.</p> | <p>Positive.</p> |
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Actions

Policy has a negative impact on an equality group, but is still to be implemented, please provide justification for this.

Will the impact of the policy be monitored and reported on an ongoing basis?

Contract monitoring will be encompassed within the framework.

Q7 What is your recommendation for this policy?

Introduce

Please provide a meaningful summary of how you have reached the recommendation

The creation of a Framework for Providers of Adult Community Support services will bring current practices into compliance with procedures and processes. It allows for ethical commissioning practices to be embedded and for stability of services to be managed, thus improving Providers and their workforces' experiences of working in WD. This should also encourage outcomes led commissioning and reduce competitiveness in the social care market, by ensuring that Providers have consistency in their contracts and contract monitoring. By co-producing the framework with input from providers and people with lived experience, it is likely to be more reflective of the needs of individuals who use the service.