



# Equality Impact Assessment SUMMARY - DFG

This report tells you about changes to:

The DFG working practices Policy to enable the team to complete adaptations quicker, continue to reduce waiting times and utilise previous underspend. This is in line with numerous Future Council Strategies including Early Help for all ages contributing to early intervention and prevention: promoting independence and reducing pressures on Health and Social care partners.

The changes we are making are:

### **Help to move property provision is established.**

In instances where the Council is satisfied that this will benefit the disabled person at least as much as improving or adapting their existing accommodation. Barnsley will approve up to £7500.00 for this purpose.

### **That provision is established for Shared Lives Carers providing Interim Care for Vulnerable Adults leaving Hospital**

Funding will be provided for the types of adaptations that are normally provisioned for disabled people via a Disabled Facilities Grant. The Council will accept the recommendation within an OT assessment as evidence that the adaptation is necessary and appropriate.

### **Provision is made for waiving some of the means testing for Fast Track Adaptations (Stair Lifts, Through Floor Lifts, Ceiling Track Hoists, Access Ramps)**

The DFG will waive Means Test for Fast Track adaptations only where applicants qualify. In line with social care contribution thresholds a new triage will be introduced, instead of a full means test for Fast Track adaptations, applicants with less than £23,250 or who have social care without having to contribute will have the means test waived. Those who have savings of £23,250 or over will continue to be fast tracked but will undergo the means test. This is because the time spent performing means tests outweighs the contributions made.

The aspirational impact of this change is to further reduce waiting times for adaptations and create capacity for the team to focus on processing applications rather than means tests which do not bring any significant income.

### **Improving the approach to Dual adaptations**

To promote a person centered approach, in cases where more than one adaptation is approved by the panel the second adaptation can be brought forward on the waiting list to be completed whilst the first is being undertaken: if this is deemed in the best interest of the applicant as a more viable and is less intrusive option than having more than one program of works at one property at separate times. It is also more efficient for the DFG team and approved contractors involved.

### **The formal Introduction of the framework for level access shower**

These are assessed and fitted for people with mobility problems who cannot safely manage a bath, as such a shower adaptation will usually become the preferred option. This may also require adaptations to the toilet and sink.

A recent pilot scheme recruited a pool of contractors who were able to mobilise quickly in order to make the adaptations. This has seen a reduction in waiting times for adaptations (as the previous process required a lengthy tender exercise for each adaptation) and has increased the number of adaptations able to be processed. As a result of this success four more contractors are now being recruited to support this further. An official Framework has been approved by Cabinet, approved contractors have been selected via a Procurement Tender exercise and formal implementation is impending. Throughout this process EIA considerations were discussed the consensus being (comms with SMT, DMT, Procurement, DFG staff and senior managers)– that there are no detrimental effects, the framework has a 1+ 1+ 1+ years agreements and numerous quality control mechanisms (including service user feedback) in case any negative issues were experienced with view to rectification immediately.

**e) Future minor changes to the approach to DFG are dealt with through Delegated Decision Making**

Appropriate delegation will enable a faster decision making process for subsequent practice and policy amendments without the need for Cabinet approval. The Executive Director of Communities would consult the Cabinet member for Communities on any significant changes to practice or policy for a decision on the appropriate level of approval required. All EIA issues will be considered and guidance sought by collaborating with necessary partners and stakeholders.

### We are making these changes because:

To continue and build upon efforts made over the last 12 months to stream line processes and as per box one.

We recognise that previous processes didn't work very well, this resulted in unnecessary pressure on other finite resources, a displacement of staff efforts and some additional expenditure which could have been avoided. The previous processes also had a negative impact on our customers health and wellbeing, with longer waiting times for adaptations, longer stays in hospital and potentially multiple adaptations (at different times) etc.

Streamlining these process however, should enable us to undertake more adaptations, support people in a more timely manner, reduce the amount of time people have to stay in hospital and ensure that people get the right support at the right time.

### To help us better understand the impact of the changes we asked these questions:

1. How can we reduce the delay in waiting times in order to increase the number of adaptations taking place in a timely manner, for the benefit of disabled people and their carers?
2. How can we minimise the level of intrusion and maximise the outputs, for the benefit of the health and wellbeing of disabled people and their carers?
3. How can we ensure that the contractors we recruit have an awareness of the importance of equality and inclusion and adhere to the council's expectations in relation this this – understanding that they are acting as advocates/representatives of the council?
4. How can we ensure that the scheme is administered equitably and we take steps to understand the impact of the scheme changes in real time?

## To answer these questions we did the following things:

1. Used information, data, costings, performance figures to identify appropriate ways to reengineer processes in line with legal and BMBC protocols
2. Through collaboration determined best way forward, with a caveat that close monitoring will be in place to amend or even reverse process if required.
3. Worked with partners in legal, procurement, health, audit, finance, commissioning and housing to determine dependencies and potential benefits and issues to overcome. By collaborating with interdependent stakeholders and anticipating processes which require amendment on implementation.
4. Monitored pilot initiatives to inform decisions
5. Consulted with appropriate stakeholders, specific expertise in BMBC, contractors and service users. There was also collaboration with Health Colleagues including Occupational Therapists and services within BMBC who provide care and support for numerous vulnerable residents in Barnsley including disabled and with learning disabilities.

## From this we learnt the following things:

We learnt the most appropriate and fair action to take within parameters to allow efficiencies to be introduced and additional staff capacity created to facilitate more adaptations for disabled children and adults to be completed sooner. Building up the success of the last 12 months where waiting times have now been halved. We will however continue to monitor this to understand the impact.

## The people most affected will be:

Overall: Disabled children and adults in Barnsley

Means Testing: Disabled people with income/savings over the threshold

## How they will be affected:

This change should be positive as disabled children and adults will receive adaptations sooner and will experience the benefits as stated earlier in this document.

*We understand that disabled people are diverse and we intend to monitor the administration of this scheme as well as the feedback we received (using disaggregated equality data) in order to ensure that the scheme is administered equitably. For example; do Disabled BME people report a different experience than Disabled White British people or do we process applications for Disabled Men quicker than Disabled Women etc.*

There are approximately 80 Disabled people per year who will continue benefit from reduced waiting times to receive fast track items, where they have been assessed by an OT.

Currently around 80% of applicants receive a full grant award (which is on average around £3800) and less than 20% contribute a small amount which on average of all fast tracks is around £100 after the means test has been

completed. The income the last 6 months was just over £2000.

The aspirational impact of this change is to further reduce waiting times for adaptations and create capacity for the team to focus on processing applications rather than means tests which do not bring any significant income.

Where means testing has been undertaken, consideration will also be given to the cumulative impact of the collective contributions an individual is making to services etc. This change can be reviewed or revised if any unforeseen negative effects are identified.

To help the changes to be as fair and equal as possible we will:

We will ensure no one is detrimentally affected in any way by the implementation of these changes.

We will make sure that processes and procedures are followed equitably to ensure that no-one is disadvantaged or treated unfairly in the administration of the scheme.

We will ensure that access to the service is equal by monitoring take up and outcomes (using demographic information to inform this), making sure that those people who need to service the most can access us. We will also ensure that we meet the access and communication needs of our customers during all interactions – the same will also be expected of our contractors.

We will ensure that we work closely with all necessary stakeholders including BMBC partners, Social Care, health, Legal, Procurement, EIA team etc and customers in order to better understand how this scheme works in practice. We will monitor customer satisfaction and feedback and ensure that we understand the real life experiences of our customers. Issues will be addressed and changes can be reversed if required. This will form part of a continual review process for this scheme.

Where means testing has been undertaken, consideration will also be given to the cumulative impact of the collective contributions an individual is making to services etc; particularly if the ask from the DFG is likely to leave the individual in a state of financial hardship. In this instance consideration will be given to whether it is appropriate to waive the contribution. However, this would be considered on an exception basis.