

Due Regard Statement

Please use this statement to evidence how 'due regard to' the three aims of the public sector equality duty has been made (section 149 of the Equality Act 2010) during the development of the 'policy'.¹

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by the ACT:
- Advance equality of opportunity between people who share a protected characteristic and people who do not share it; and
- Foster good relations between people who share a protected characteristic

Name of the 'policy':	Redevelopment of the Pre Placement Contract for the provision of personal and/or nursing care in a care home.
Person(s) responsible for completing this statement	Jenny Cooper – Lead Commissioner, Older People Althia Lyn – Commissioning Officer, Older People
Briefly describe the activity being considered including aims and expected outcomes	<p>Background</p> <p>Gloucestershire County Council (GCC) and Gloucestershire Clinical Commissioning Group (GCCG) currently purchase permanent and short term care home beds in Gloucestershire including the provision of intermediate care beds for older persons. The contract for the provision of care is known as The Pre Placement Contract (PPC) and sets out the agreement between GCC, GCCG and providers in relation to the purchase of residential, personal and or nursing care.</p> <p>The PPC was originally put in place in 2006. We are now seeking to develop a new contract for the provision of bed based care which will be in line with legislation and with</p>

¹ For 'policy': any new and existing policy, strategy, services, functions, work programme, project, practice and activity. This includes decisions about budgets, procurement, commissioning or de-commissioning services, service design and implementation.

	<p>commissioning intentions outlined within the Older People Care Home Strategy and the Adult Social Care Market position statement.</p> <p>The new contract is likely to incorporate:</p> <ul style="list-style-type: none"> • changes to the way providers are paid for services • clarification regarding equipment which is expected to be provided in care homes • new specifications covering all aspects of care to be commissioned
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Service information (if applicable) or Needs analysis (if applicable)

<p>Who is responsible for delivering the service?</p>	<p>Gloucestershire County Council is responsible for commissioning bed based care for Gloucestershire residents who are eligible for council funded support and on behalf of the Clinical Commissioning Group for residents who have eligible health needs. The service is delivered by the private care home market and by Gloucestershire Care Partnership who do so under a block contract.</p>
<p>Service user data/Needs analysis information (Source: 2011 Census, 2013 ONS Mid-Year Population Estimates (MYE) and GCC Service User Diversity Report 2018/19) Gloucestershire County Council Population Profile (2019).</p>	
<p>Age</p>	<p>As at 31 March 2019 a total of 1272 people aged 65 or over were receiving council-funded residential or Nursing Care (excluding those whose primary need related to learning disability or mental health). The over-85s are the largest user group 679 (48.9%), followed by those aged 75-84 438 (33.2%) and the 65-74s 155 (18.0%).</p>
<p>Disability</p>	<p>As at 31 March 2019, approximately 335 people aged 18+ were receiving council-funded residential care with 2 in receipt of council funded nursing care whose primary need related to learning disability. Those aged 45-64 years constitutes the largest group in receipt of residential care (169 people).</p> <p>Over the same period, a total of approximately 108 adults aged 18-74 were receiving council funded residential or nursing care whose primary support need related to physical disability. With those aged</p>

	<p>between 45-64 years constituting the largest group in receipt of these services (43 people).</p> <p>As at March 2019 60 people aged 18+ were receiving council funded residential care whose primary support need was Mental Health. Those aged 45-64 constituted the largest group in receipt of this service (25 people).</p>
Sex	<p>Current data shows the number of adults receiving community and residential services as 3,306 male, while females total 4,600 for the 60+ age group.</p>
Race	<p>The 2011 Census found that 7.7% of Gloucestershire residents (46,100 people) were born outside the UK compared to a national average of 13.45. 48% were born in another European Country and 22.3% were born in the middle East or Asia.</p> <p>The same Census found that 91.6% of Gloucestershire residents were White British; 2.1% were Asian/Asian British; 1.5% were from a Mixed/Multiple Ethnic group; 0.9% were Black/Black British; 0.6% were White Irish; 0.1% were of Gypsy or Irish Traveller origin; 3.1% were 'other White' and 0.2% were in another ethnic group.</p> <p>According to the 2011 Census 18,784 people in Gloucestershire (3.3% of the population) did not speak English as their main language. Amongst this group, Polish was the most common language (5,516 people) followed by Gujarati, (1065 people) then Chinese at (1000 people). An EU language other than Polish was the main language spoken by 5993 people. At district level, Gloucester had the highest proportion of people for whom English is not the main language 95.7%), followed by Cheltenham (5.3%. Older people were less likely than younger people to be proficient in English; 29% of people aged 50 and over who did not speak English as main language were not proficient in English compared with 17% of people aged under 50 who did not speak English as a main language.</p> <p>In house recording data shows that 92% of our care home population are White British, 1% Black British and less than 1% in each of the other minority ethnic groups recorded.</p>
Gender reassignment	<p>There are no official estimates of gender reassignment at either national or local level. However, in a study funded by the Home Office, the Gender Identity Research and Education Society (GIRES) estimate that there are between 300,000 and 500,000 people aged 16 or over in the UK are experiencing some degree of gender variance. These figures are equivalent to somewhere between 0.6% and 1% of the UK's adult</p>

	<p>population. By applying the same proportions to Gloucestershire's 16+ population, we can estimate that there may be somewhere between 3,092 and 5,154 adults in the county that are experiencing some degree of gender variance.</p> <p>There is no recorded data on the gender reassignment status of residents in care homes in Gloucestershire at this time.</p>
<p>Marriage & civil partnership</p>	<p>Current population Among residents of Gloucestershire:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 30.5% are single and have never married or registered a same-sex civil partnership <input type="checkbox"/> 50.2% are married; <input type="checkbox"/> 0.3% are in a registered same-sex civil partnership; <input type="checkbox"/> 2.3% are separated but still legally married or still legally in a same sex civil partnership; <input type="checkbox"/> 9.5% are divorced or formerly in a same sex civil partnership which is now legally dissolved; <input type="checkbox"/> 7.2% are widowed or a surviving partner from a same sex civil partnership⁴³. <p>Gloucestershire has a lower proportion of people who are single or separated when compared to the national figure. In contrast the proportion of people who are married, divorced or widowed exceeds the national figures.</p> <p>There is no recorded data on the marital status of residents in care homes in Gloucestershire at this time.</p>
<p>Pregnancy & maternity</p>	<p>The Equality Act protects women who are pregnant, have given birth in the last 26 weeks (non work context) or are on maternity leave (work context) against discrimination in relation to their pregnancy.</p> <p>Current situation There were 6,739 live births in Gloucestershire in 2016. Table 16 shows the age of mothers at the delivery of their baby in five year age bands), the highest proportion of deliveries were to women aged 30 to 34 continuing the trend of later motherhood. Births to mothers aged 25-29 and 30-34 account for a slightly higher proportion of total births in Gloucestershire than they do nationally, whilst those to mothers aged under 25 account for a slightly lower proportion. At district level:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Gloucester and the Forest of Dean have a higher proportion of births to mothers aged under 20 (4.0% and 3.6% respectively) than Gloucestershire and England. <input type="checkbox"/> Cheltenham, Cotswold and Stroud have a higher proportion of births to mothers aged 35+ than

	<p>Gloucestershire and England</p> <p>Residents of care homes are unlikely to be pregnant as the provision is generally for older people or those whose frailty requires 24 hour support and/or supervision.</p>
<p>Religion or Belief</p>	<p>According to the 2011 Census, 63.5% of residents in Gloucestershire were Christian, making it the most common religion. This was followed by no religion which accounts for 26.7% of the total population. Gloucestershire has a higher proportion of people who are Christian, have no religion or have not stated a religion than the national figures. In contrast it has a lower proportion of people who follow a religion other than Christianity, which reflects the ethnic composition of the county.</p> <p>At district level:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Cheltenham had the lowest proportion of people who are Christian at 58.7% of the total population, this was lower than the county and marginally lower than the national figure. <input type="checkbox"/> Cotswold had the highest proportion of people who follow Christianity. <input type="checkbox"/> Cheltenham had the highest proportion of Buddhists, Hindus and people who have no religion. <input type="checkbox"/> At 3.2% of the total population Gloucester had the highest proportion of Muslims. <input type="checkbox"/> Stroud had the highest proportion of people who follow an "Other Religion" and of people who did not state their religion. <p>87% of residents in care homes indicate that they are Christian whilst 11% indicate that they don't follow a religion. Less than 1% follow each of the Buddhist, Muslim, Sikh, Jewish and Hindu religions. It should be noted that 40% of residents have no religion recorded and therefore the data held is not complete.</p>
<p>Sexual Orientation</p>	<p>There are no definitive data on sexual orientation at a local or national level. Estimates used by the Department of Trade and Industry in 2003, and quoted by Stonewall, suggest around 5-7% of the population aged 16 and over are lesbian, gay or bisexual⁶⁶. If this figure were applied to Gloucestershire it would mean somewhere between 25,800 and 36,000 people in the county are LGB. A more recent estimate from the 2017 ONS Annual Population Survey (APS) suggests that 2.1% of the England population aged 16 and over is LGB⁶⁷: if this figure were applied to Gloucestershire it would mean that there are approximately 10,800 LGB people in the county.</p> <p>There is no recorded data on the number of our care home population who are LGB but if we applied the ONS percentage to residents of care homes there would be an estimated 38 LGB people in the current population of care home residents where GCC is the commissioner.</p>

Other information

Market Position Statement Adults 2018, Gloucestershire County Council

Commissioning Strategy for Residential and Nursing Care Home Provision 2018

Care and Support Statutory Guidance <https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>

Care Act 2014 <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

Workforce data

Please document details of GCC staff only if they will be affected by the proposed activity. This could include GCC staff transferring under TUPE to a new service provider, relocating, employment at risk. **GCC Workforce diversity reports** are available on our website.

If the proposed activity does not affect GCC staff, please state 'Not affected below'.

Total number of GCC staff affected GCC staff data – Data taken from the GCC Workforce Diversity Report 2018/2019	Not affected
Age	Not affected
Disability	Not affected
Sex	Not affected
Race (including Gypsy & Traveller)	Not affected
Gender reassignment	Not affected
Marriage & civil partnership	Not affected
Pregnancy & maternity	Not affected
Religion or Belief	Not affected

Sexual Orientation	Not affected
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Consultation and engagement

Service users	<p>Users of care home services and their families will be consulted regarding changes to the payment of care home contributions. The consultation will be undertaken at a stage where the changes in process are fully understood and draft proposals for the new processes can be shared for comment. When consultation takes place all information will be provided in an accessible format appropriate to the consultee's needs. Examples include (but are not limited to): easy read format; large print; braille; translated to required language; support to read and interpret the information, for example by an advocate.</p> <p>The workforce will not be consulted as changes to this contract will not impact them.</p>
Workforce	
Partners	<p>Colleagues in Legal and Commercial Services, and Information Management Services will be engaged in the development of the new contract.</p>
External providers of services	<p>The development of the new contract will involve significant changes for providers of care home services. Whilst the service to the residents will remain unchanged the providers will have a new payment processes to adapt to and new specifications including the provision of equipment to fulfil. An extensive engagement programme is planned which will involve all provider of care home services to consider and comment on every aspect of change proposed. GCPA and providers will be invited to specific events to consider various aspects of change and interested parties will be invited to join working groups to consider some aspects in finer detail. In addition surveys will be used across the market to reach providers who are unable to attend events or workshops.</p>

Equality analysis: Summary of what the evidence shows and how has it been used

This section will allow you to outline how the evidence has been used to show 'due regard' to the three aims of the general equality duty. It is important that this consideration is thorough and based on sufficient information. Consideration should be relevant and proportionate.

- Eliminate discrimination
- Advance equality of opportunity
- Promote good relations.

NB All vulnerable people in this cohort will have a statutory assessment of needs that is unique to that person and will meet the individual assessed needs of that citizen taking into account the nine protected characteristics that will apply to them and their informal carer who are also entitled to a separate statutory assessment of needs.

Protected group	Challenge or opportunity considered and what we did
Age(A)	Older people are the largest group for whom this contract commissions a service. The development of the new contract should improve the quality of service that is provided in future and may include changes to the way that payment is made to providers and the way the assessed financial contribution is collected from residents and third parties. People who live in care homes and their families might be affected by changes to payment processes and therefore consultation will be undertaken with them towards the end of 2020. Efforts will be made to ensure that consultation is not intrusive and is equally accessible to all, for example written communications will be in large print if required and support to read and understand content will be provided if required.
Disability (D)	Disabled people are the second largest group for whom this contract commissions a service. The development of the new contract should improve the quality of service that is provided in future and may include changes to the way that payment is made to providers and the way the assessed financial contribution is collected from residents and third parties. People who live in care homes and their families might be affected by changes to payment processes and therefore consultation will be undertaken with them towards the end of 2020. Efforts will be made to ensure that consultation is not intrusive and is equally accessible to all, for example any written communications will be in an accessible format such as braille or easy read as required and verbal explanation of content will be provided if required.
Sex (S)	We have considered this protected characteristic and can identify no disproportionate impact for either gender. No gender specific consultation will therefore be undertaken. People who live in

	<p>care homes and their families might be affected by changes to payment processes and therefore consultation will be undertaken with them towards the end of 2020. Efforts will be made to ensure that consultation is not intrusive and is equally accessible to all.</p> <p>We have considered this protected characteristic and can identify no disproportionate impact for any ethnic group. People who live in care homes and their families might be affected by changes to payment processes and therefore consultation will be undertaken with them towards the end of 2020. Efforts will be made to ensure that consultation is not intrusive and is equally accessible to all including translation of any written or verbal information as required.</p>
Race (including Gypsy & Traveller)(R)	
Gender reassignment(GR)	<p>We have considered this protected characteristic and can identify no disproportionate impact for any potential staff or service users. People who live in care homes and their families might be affected by changes to payment processes and therefore consultation will be undertaken with them towards the end of 2020. Efforts will be made to ensure that consultation is not intrusive and is equally accessible to all.</p>
Marriage & civil partnership (MCP)	<p>We have considered this protected characteristic and can identify no disproportionate impact for any potential staff or service users. People who live in care homes and their families might be affected by changes to payment processes and therefore consultation will be undertaken with them towards the end of 2020. Efforts will be made to ensure that consultation is not intrusive and is equally accessible to all.</p>
Pregnancy & maternity (PM)	<p>We have considered this protected characteristic and can identify no disproportionate impact for any potential staff or service users. People who live in care homes and their families might be affected by changes to payment processes and therefore consultation will be undertaken with them towards the end of 2020. Efforts will be made to ensure that consultation is not intrusive and is equally accessible to all.</p>
Religion and/or Belief (RAOB)	<p>We have considered this protected characteristic and can identify no disproportionate impact for any potential staff or service users. People who live in care homes and their families might be affected by changes to payment processes and therefore consultation will be undertaken with them towards the end of 2020. Efforts will be made to ensure that consultation is not intrusive</p>

	and is equally accessible to all.
Sexual Orientation(SO)	We have considered this protected characteristic and can identify no disproportionate impact for any potential staff or service users. People who live in care homes and their families might be affected by changes to payment processes and therefore consultation will be undertaken with them towards the end of 2020. Efforts will be made to ensure that consultation is not intrusive and is equally accessible to all.

Strengthening actions: Planning for further improvements

An extensive engagement programme with provider, resident, families and professionals is planned to span 2020. Within this consideration will be given to people with protected characteristics and efforts made to ensure that engagement has been accessible to them and their views taken into account.

Action Plan

Action	Who is accountable	Proposed Time Frame
Provider events	Jenny Cooper	March 2020 May 2020 July 2020 September 2020
Provider surveys	Jenny Cooper	March – June 2020
Provider workshops	Jenny Cooper	July – September 2020
Resident and family surveys	Jenny Cooper	August – September 2020

Monitoring and Review

Please indicate what processes/actions will be put in place to keep this 'activity' under review. For example, will progress be monitored/ reported to a board, scrutiny committee, project board etc.

This due regard statement will be reviewed and developed on an ongoing basis as the work to recommission bed based care in Gloucestershire develops. The progress will be monitored by the PPC Development Group.


Sign off and Scrutiny

By signing this statement off as complete you are confirming that 'you' have examined sufficient information across all the protected groups and used that information to show due regard to the three aims of the general duty. This has informed the development of the activity

	Date: 20/01.20
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Senior level sign off:

I am in agreement that sufficient information and analysis has been used to inform the development of this 'activity' and that any proposed improvement actions are appropriate and I confirm that I as the decision maker have been able to show due regard to the needs set out in section 149 of the Equality Act 2010.

Name of relevant Portfolio Holder/Cabinet Member: Carole Allaway Martin	
Signed by Portfolio Holder/Cabinet Member: 	Date: 21 January 2020

Publication

If this statement accompanies cabinet paper it will be published as part of the cabinet report publication process. Statements accompanying cabinet reports are also published on our website. If this statement is not to be submitted with a cabinet paper please maintain a copy for your own records that can be retrieved for internal review and also in case of future challenge.

