

## 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'.<sup>1</sup>

- 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':	Adult Social Care Infection Control Fund Round 2 Local Authority Circular (Department of Health & Social Care: 1 October 2020)
Person(s) responsible for completing this statement	Jenny Cooper – Interim Head of Integrated Commissioning (Older People)
Briefly describe the activity being considered including aims and expected outcomes	<p>Background</p> <p>On 22<sup>nd</sup> May 2020, the Department of Health and Social Care launched the Adult Social Care Infection Control Fund which was worth £600 million in total. The primary purpose of the fund is to support adult social care providers, including those with whom Gloucestershire County Council does not have a contract, to reduce the rate of COVID-19 transmission in and between care settings and to support wider workforce resilience.</p> <p>Due to its success in limiting the transmission of COVID-19 within and between care settings, the Adult Social Care Infection Control Fund has been extended until March 2021, with an extra £546 million of funding. This is a new grant, with revised conditions from the original Infection Control Fund. This funding will be paid as a grant ring fenced exclusively for</p>

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<sup>1</sup> 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.

actions which support care homes and CQC-regulated community care providers mainly to tackle the risk of COVID-19 infection. It is in addition to funding already received.

Gloucestershire County Council has been allocated the sum of £6,621,410 from the fund (based on 6,025 care home beds in Gloucestershire registered with the Care Quality Commission and 3,647 community care users in September 2020).

All sums from this fund must be used for COVID-19 infection control measures and will be paid in two equal instalments in October and December 2020.

Gloucestershire County Council are required to pass 80% of the funding to care homes in Gloucestershire (on a 'per beds' basis) and community care providers (on a 'per user' basis), including those with whom Gloucestershire County Council does not have a contract. Gloucestershire County Council has the discretion to allocate the remaining 20% of the funding to care homes or community care providers and to support wider workforce resilience in relation to COVID-19 infection control.

No payments will be made unless certain conditions are met by the provider, including that Gloucestershire County Council is satisfied that the funds are being used for infection control, weekly completion of the NHS capacity tracker (for care homes) and the CQC homecare survey (for community providers). Clawback provisions will also apply.

It is proposed that Gloucestershire County Council:

- distribute 80% of its allocation of the fund to all care homes (on a 'per beds' basis) and all community providers (on a 'per user' basis) in the county in two equal instalments in October and December 2020;
- distribute the remaining 20% of its allocation of the fund to other infection prevention and control measures including (but not limited to) additional PPE reserves, day services, non-regulated residential care, carers' support services, direct payment recipients, employment of PAs and the voluntary sector.

	<ul style="list-style-type: none"> <li>• require each provider to enter into a written grant agreement; and</li> <li>• require each provider to provide a written confirmation on a monthly basis of how much of the grant they have spent to date and what COVID-19 infection control measures they have spent the funding on.</li> </ul>
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**Service information (if applicable) or Needs analysis (if applicable)**

<b>Who is responsible for delivering the service?</b>	Adult social care services are delivered mainly by private and third sector providers through a variety of individual packages and placements to Gloucestershire residents who have eligible social care and/or health needs or who fund their care themselves. However, a small proportion of adult social care services are delivered by Gloucestershire County Council.
<p><b>Service user data/Needs analysis information</b>          (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>	
Age	<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>There is a further 1599 people over 65 receiving council funded community based services</p>

	<p>According to the 2011 census, 16.7% of Gloucestershire residents reported having a long-term limiting health problem or disability. Estimated projections suggest that in 2019 there will be approximately 11,825 people aged 18+ living with a learning disability in Gloucestershire which equates to 2.3% of the adult population</p> <p>Using the GP register of People suffering from a serious Mental Illness there are approximately 5,000 people living in Gloucestershire between the ages of 18 and 65 with a serious Mental illness at any one time.</p>
Disability	<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>Gloucestershire also has 1,997 people over 65 that use reablement services or receiving domiciliary care. 94% of the total delivery (1,877 Service Users) is to people who have declared themselves to have an age-acquired Physical Disability.</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 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%</p>

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.

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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

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 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>
Marriage & civil partnership	<p><b>Current population</b> Among residents of Gloucestershire:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> 30.5% are single and have never married or registered a same-sex civil partnership</li> <li><input type="checkbox"/> 50.2% are married;</li> <li><input type="checkbox"/> 0.3% are in a registered same-sex civil partnership;</li> <li><input type="checkbox"/> 2.3% are separated but still legally married or still legally in a same sex civil partnership;</li> <li><input type="checkbox"/> 9.5% are divorced or formerly in a same sex civil partnership which is now legally dissolved;</li> <li><input type="checkbox"/> 7.2% are widowed or a surviving partner from a same sex civil partnership<sup>43</sup>.</li> </ul> <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 &amp; 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><b>Current situation</b></p> <p>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"> <li><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.</li> <li><input type="checkbox"/> Cheltenham, Cotswold and Stroud have a higher proportion of births to mothers aged 35+ than Gloucestershire and England</li> </ul> <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"> <li><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.</li> <li><input type="checkbox"/> Cotswold had the highest proportion of people who follow Christianity.</li> <li><input type="checkbox"/> Cheltenham had the highest proportion of Buddhists, Hindus and people who have no religion.</li> <li><input type="checkbox"/> At 3.2% of the total population Gloucester had the highest proportion of Muslims.</li> <li><input type="checkbox"/> Stroud had the highest proportion of people who follow an "Other Religion" and of people who did not state their religion.</li> </ul> <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>

Sexual Orientation	<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 bisexual<sup>66</sup>. 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 LGB<sup>67</sup>: 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>
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### Other information

<p>Market Position Statement Adults 2018, Gloucestershire County Council</p> <p>Commissioning Strategy for Residential and Nursing Care Home Provision 2018 Joint Strategic Needs Analysis (JSNA) branded as #YourVoiceMatters</p> <p>Gloucestershire Adult Mental Health and Wellbeing Needs Assessment December 2017</p> <p>Care and Support Statutory Guidance <a href="https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance">https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance</a></p> <p>Care Act 2014 <a href="http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted">http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted</a></p>
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### 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'.

<p><b>Total number of GCC staff affected</b> GCC staff data – Data taken from the GCC Workforce Diversity Report 2018/2019</p>	<p>Not affected</p>
<p>Age</p>	<p>Not affected</p>
<p>Disability</p>	<p>Not affected</p>
<p>Sex</p>	<p>Not affected</p>
<p>Race (including Gypsy &amp; Traveller)</p>	<p>Not affected</p>
<p>Gender reassignment</p>	<p>Not affected</p>

Marriage & civil partnership	Not affected
Pregnancy & maternity	Not affected
Religion or Belief	Not affected
Sexual Orientation	Not affected

### Consultation and engagement

Service users	As these proposed changes are in response to urgent guidance from the Department of Health & Social Care in response to the COVID-19 crisis and have no impact on how services are delivered directly to the people who receive these services no consultation had been undertaken or is proposed.
Workforce	The purpose of this fund is to improve the safety and working conditions of people employed by Adult Social Care providers during the COVID-19 crisis and individual providers will consult with their workforce if these proposals are approved.
Partners	Colleagues in Legal and Commercial Services, and Information Management Services and communications will work with social care providers and Gloucestershire Care Provider Association (GCPA) to implement these arrangements.
External providers of services	Colleagues in Legal and Commercial Services, and Information Management Services and communications will work with Gloucester Care Partnership and Gloucestershire Health and Care NHS Foundation Trust and the private sector providers commissioned by Gloucestershire County Council on behalf of to implement these arrangements.

### 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
<b>Age(A)</b>	Older people are the largest group who require care and support services in Gloucestershire. The proposed uplift in support to social care providers should maintain the quality of service that is provided during the covid 19 crisis. People who receive these services and their families should not be affected by the proposed changes to infection control funding and therefore no consultation will be undertaken.
<b>Disability (D)</b>	Disabled people are the second largest group who require care and support services in Gloucestershire. The proposed uplift in support to social care providers should maintain the quality of service that is provided during the covid 19 crisis. People who receive these services and their families should not be affected by the proposed infection control funding and therefore no consultation will be undertaken.
<b>Sex (S)</b>	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 receive these services and their families should not be affected by the proposed infection control funding and therefore no consultation will be undertaken.
<b>Race (including Gypsy &amp;</b>	We have considered this protected characteristic and can identify no disproportionate impact for any ethnic group. People who receive these services and their families should not be affected by

<b>Traveller)(R))</b>	the proposed infection control funding and therefore no consultation will be undertaken.
<b>Gender reassignment(GR)</b> <b>Marriage &amp; civil partnership (MCP)</b> <b>Pregnancy &amp; maternity (PM)</b> <b>Religion and/or Belief (RAOB)</b> <b>Sexual Orientation(SO)</b>	We have considered these protected characteristics and can identify no disproportionate impact for any potential staff or service users. People who receive these services and their families should not be affected by the proposed infection control funding and therefore no consultation will be undertaken.

### **Strengthening actions: Planning for further improvements**

Adult Social Care providers in Gloucestershire require this urgent financial support to reach them as soon as possible, therefore, it has not been possible to plan or deliver any consultation.

#### **Action Plan**

Action	Who is accountable	Proposed Time Frame

### **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. The progress will be monitored by commissioners.

### 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

**Senior level sign off:**



Date: 12.10.20

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: 12.10.20

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**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.