Part A

Initial Impact Assessment

Proposal name

EIA start date

Advocacy Framework Extension & Retender

Brief aim(s) of the proposal and the outcome(s) you want to achieve

The purpose of the report is to request an extension to the current social care advocacy contract and request permission to go out to tender for a future advocacy contract.

Proposal type ○ Budget Non Budget
If Budget, is it Entered on Q Tier? ○ Yes
Year of proposal (s)
○ 21/22 ● 22/23 ● 23/24 ● 24/25 ○ other
Decision Type ○ Coop Exec ● Committee (e.g. Health Committee) ○ Leader ○ Individual Coop Exec Member ○ Executive Director/Director ○ Officer Decisions (Non-Key) ○ Council (e.g. Budget and Housing Revenue Account) ○ Regulatory Committees (e.g. Licensing Committee)
Lead Committee Member
Lead Director for Proposal
Alexis Chappell
Person filling in this EIA form
Avi Derei

01/04/2023

Equality Lead Officer O Adele Robinson Beverley Law Annemarie Johnston Ed Sexton Bashir Khan O Louise Nunn **Lead Equality Objective** Understanding Workforce Leading the city in Break the cycle and Communities improve life chances Diversity celebrating & promoting inclusion **Portfolio, Service and Team Is this Cross-Portfolio Portfolio** O Yes No People Is the EIA joint with another organisation (eg NHS)? Please specify Yes No Consultation Is consultation required (Read the guidance in relation to this area) Yes O No If consultation is not required please state why This is an extension of an existing arrangement and a request to go to tender for a future advocacy contract. We are not proposing reducing funding or changing scope of any existing services. As part of the re-tender process, we are planning on carrying out consultation rather than co-production. This is due to an imminent change to legislation that will fundamentally change the advocacy offer in Sheffield. The consultation will take place with existing staff, a sample of referrers to the service and a sample of customers using the services. Are Staff who may be affected by these proposals aware of them Yes Are Customers who may be affected by these proposals aware of them Yes If you have said no to either please say why Customers – It's a statutory responsibility for the council to commission advocacy services. While the services may not be delivered in the current model it would be irresponsible to communicate to customers that the current Advocacy contract may come to an end without offering an alternative.

Initial Impact

Under the <u>Public Sector Equality Duty</u> we have to pay due regard to the need to:

- eliminate discrimination, harassment and victimisation
- advance equality of opportunity
- foster good relations

For a range of people who share protected characteristics, more information is available on the <u>Council website</u> including the <u>Community Knowledge Profiles</u>.

Identify Impacts

Identify which characteristic the proposal has an impact on tick all that apply

•	• •
● Health	Transgender
● Age	• Carers
Disability	 Voluntary/Community & Faith Sectors
Pregnancy/Maternity	○ Cohesion
● Race	○ Partners
O Religion/Belief	Poverty & Financial Inclusion
● Sex	O Armed Forces
 Sexual Orientation 	○ Other
 Cumulative 	

Cumulative Imp	act
Does the Proposal hav ● Yes ○ No	•
Year on Year	Across a Community of Identity/Interest
O Geographical Area	O Other
negative impact on the came in to place we fell sport purchased advocation which led to delays thro decisions being made with	s statutory advocacy requirements will have a cumulative most vulnerable residents in Sheffield. Prior to this contract shy of meeting our statutory advocacy requirements. The cy services were unable to keep up with new demand ughout social care and health services and often led to ithout advocacy involvement. This also created a all reviews and other decision challenges.
Proposal has geograph ○ Yes ● No	nical impact across Sheffield
If Yes, details of geograp	hical impact across Sheffield
Local Area Committee ◆ All○ Specific	Area(s) impacted
If Specific, name of Local	Committee Area(s) impacted

Initial Impact Overview

Based on the information about the proposal what will the overall equality impact?

We view advocacy as a fundamental step in bridging the gap and amplifying the voices of marginalised populations in Sheffield.

SCC currently have a Statutory duty under the Care Act 2014, Mental Capacity Act 2005, The Health and Social Care Act 2012 and the Mental Health Act 2007 to maintain a stable and sustainable care market. The local authority also has a duty under the Care Act 2014 to arrange an independent advocate for adults as part of assessment and care management including safeguarding enquiries. The expiration of the contract without another in place to follow will mean that we fail to meet our Statutory duty

Advocacy helps people with disability facing complex challenges, people who cannot advocate for themselves, or don't have family, friends or peers who can support them in an informal capacity.

Advocacy supports people from BME community to access appropriate high-quality services as early as possible. This need is clearly recognised within the Department of Health action plan Delivering Race Equality in Mental Health Care.

Advocacy services in Sheffield offer vital support in preserving older people rights during decision making and is especially relevant in the decision making for older people to move into residential environments. Currently approx. 45% of the referrals to the service are for over 65s with the main criteria being RPR advocacy. The role of a Relevant Person's Representative (RPR) is to maintain contact with the person and to represent and support them in all matters relating to the deprivation of liberty safeguards (DoLS).

Advocacy offer essential support to LGBTIQ+ and non-male Sheffield residents, especially in mental health which disproportionally affects this section of the population and in turn increases referrals to mental health services in the city. We are aware from national statistics that In England, in 2014, one in six adults had a common mental health problem: about one in five women and one in eight men. From 2000 to 2014, rates of common mental health problems in England steadily increased in women. According to a research project conducted by Youth Chances, 52% of LGBTQ people reported self-harming, compared to 35% of heterosexual non-trans young people. Furthermore, 44% of the LGBTQ people reported suicidal thoughts, compared to 26% of heterosexual non-trans respondents. Our current advocacy contract offers support in the areas of independent mental health advocacy, independent mental capacity advocacy, independent mental capacity advocacy with a focus on deprivation of liberty and NHS complaints, amongst other areas.

The current Advocacy contract has been awarded to Sheffield Advocacy Hub who are non profit organisation and part of Citizens Advice Sheffield. The organisation sets itself a priority of reducing and eliminating inequality in society via their helpline, advocacy services and other social right campaigning.

Is a Full impact Assessment required at this stage? ● Yes O No

If the impact is more than minor, in that it will impact on a particular protected characteristic you must complete a full impact assessment below.

Initial Impact Sign Off EIAs must be agreed and signed off by the Equality lead Officer in your Portfolio or corporately. Has this been signed off? O Yes O No Date agreed 24/01/2023 Name of EIA lead officer Ed Sexton

Part B

Full Impact Assessment

Yes	O No	if Yes, complete section be	low
Staff Yes	O No	Customers ● Yes ○ No	
Advocacy MIND res being.	e feel that the Hub as it wil earch sugges	e extension will have a positive give them further consistency ts a link between clarity on emeat the proposed extension will	v around their employment. uployment future and well-
wellbeing advocacy support v	of Sheffield services in t vill remove ba	residents who are currently in rate future. The consistency and rriers and enable the voice of bugh the decision-making procession.	receipt of or that may access availability of advocacy the individual to be
	trom intorno	tion that Advacacy Lish callect	that a large propertion of the
individua challenge service so 12% of tl 22% hav	Is who access The annual the themselve the individuals a cognitive	tion that Advocacy Hub collect the service see themselves as reporting shows that 39% of the as having mental health diffic accessing the services have a mpairment, such as dementia, th Impact Assessment being	s having a health difficulty or he individuals accessing the culties at the point of referral, learning disability and that , stroke, brain injury.
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Details of impact

Staff - We feel that the extension will have a positive impact on staff at the Advocacy Hub as it will give them further consistency around their employment. This is particularly important to those with protective characteristics approaching retirement age. The University of Hull research via UK government, European Commission, Trades Union Congress comments on the difficulties of those aged 50-69 to find employment in new sectors.

Customers - We feel that the proposed extension will benefit the Sheffield residents who are currently in receipt of or that may access advocacy services in the future. From the Advocacy Hub statistics, we can gather that 41% of the individuals who access the hub are over the age of 65, which is far higher than their representation in the general populi of 18.9%. Peter Scourfield highlights in The British Journal of Social Work that advocacy plays a part in helping older people in residential care remain full citizens.

Disa	bil	ity

In	npact on S	taff	In	pact on	Custo	omers
lacktriangle	Yes	\circ N	0	Yes	0	No

Details of impact

Staff - We feel that the extension will have a positive impact on staff with disabilities at the Advocacy Hub as it will give them further consistency around their employment. We are aware from the Office of National Statistics that employment within the disabled population of a working age in UK stands at 52% on comparison with a general population which is 76% which highlights the need around job security for those with disabilities.

Customers - We feel that the proposed extension will benefit Sheffield's' disabled population who are currently in receipt of or that may access advocacy services in the future. A large proportion of advocacy commissioned through this framework has direct links to the disabled population of the city, other services have an indirect links. Over the past year Advocacy Hub have reported 12% of referrals are from individuals with a learning disability and 22% had a cognitive impairment. There is a specific section of the framework that is classed as generic LD advocacy and other types of advocacies such are Independent Mental Health Advocacy, DOLs and Independent Mental Capacity Advocacy, traditionally have some very strong links to individual with disabilities.

Pregnancy/Maternity

Impact on Staff		Impact on Customers		
Yes	○ No	Yes	No	

Details of impact

Staff - We feel that the extension will have a positive impact on pregnant staff at the Advocacy Hub as it will give them further job security. A study conducted by IFF Research on behalf of the Department for Business, Innovation and Skills and the Equality and Human Rights Commission comments on the difficulty for pregnant individuals in seeking employment once made redundant from their current roles.

Race

Impact on Staff

Impact on Customers

● Yes ●

No

 \circ No

Details of impact

We feel that the extension will have a positive impact on staff from BAME backgrounds at the Advocacy Hub as it will give them further consistency around their employment. As seen from the table below, overall there is more BAME representation in Sheffield Advocacy Hub's workforce than in the population of Sheffield. We are aware from Office for National Statistics that employment rate for the BAME community stand nationally at 66% in comparison with White British at 78%. It would be correct to assume on that basis that the risk is higher around regaining employment for BAME workers if Sheffield Advocacy Hub were to give notice to their workforce.

	Sheffield advocacy hub staff 2022	Sheffield 2011 population census
Caribbean	4.70%	1%
Black African	2.38%	2.60%
Other	4.70%	4.40%
Asian	9.52%	8%
Prefer not to say	7.14%	NA
White Asian	2.38%	0.60%
White British	69.04%	84%

Customers - We feel that the proposed extension will benefit Sheffield's' BAME population who are currently in receipt of or that may access advocacy services in the future. The Sheffield Advocacy Hub have told us that 12% of referrals made to the service are for individuals who self-identify in the BAME community.

We are aware from research that Rethink, mental health charity has carried out that the BAME community are disproportionally affected by mental health difficulties. In turn the need for advocacy is essential and in particular advocacy support such as Independent Mental Health, Independent Mental Capacity, Care Act and NHS Complaints.

Advocacy supports people from BAME community to access appropriate highquality services as early as possible. This need is clearly recognised within the Department of Health action plan Delivering Race Equality in Mental Health Care.

Religion/Belief

Impact on Staff Yes

Impact on Customers

Yes

O No

Details of impact

Customers – Advocacy plays a key role in supporting individuals with varying religious beliefs. Part of the advocate role is to ensure an individuals' wishes and feels are considered within health and social care decision making processes. This becomes essential for individuals who specific beliefs and ensuring they have the ability to exercise personal choice.

For instance, a person who follows the Jehovah's Witnesses beliefs, may refuse blood transfusions in hospital but may have been deemed to have no/fluctuating capacity in regard to this decision. An advocate would ensure they are supported to express personal choice and preference.

Sex

Impact on Staff ● Yes ○ No

Impact on Customers

● Yes ○ No

Details of impact

Staff - We feel that the extension will have a positive impact on staff with protected characteristics at the Advocacy Hub as it will give them further consistency around their employment. Of the Advocacy Hub workforce, women represent 72%, men 24% and 4% preferred not to say. We know from the Women and Economy, house of Commons briefing paper that in the UK, 15.49 million women aged 16+ were in employment in October-December 2020, down 117,000 from a year ago. The female employment rate was 71.8%, down from a record high of 72.4% a year previously. The male employment rate was 80.6%. 9.61 million women were working full-time, while 5.88 million were working parttime. From these stats we can tell that there would be a more substantial impact on the non-male members of the workforce if the contract was terminated.

Customers - We feel that the proposed extension will benefit individuals with protected characteristics who are currently in receipt of or that may access advocacy services in the future. The analysis of referrals 2020-2021 found that 47% of the referrals were made for individuals who identified as female, 42% for individuals who identified as male, 10% preferred not to disclose, 0.6% individuals who identified as transgender and 0.5% individuals who identified as non-binary. We are aware from the Office of National Statistics that women live on average 3.6 years longer than men. This will in turn have an affect on those entering care and those who need to access advocacy support via the current framework.

Sexual Orientation

Impact on Staff

Impact on Customers

Yes

○ No

Yes

O No

Details of impact

Staff - We feel that the extension will have a positive impact on staff with protected characteristics at the Advocacy Hub as it will give them further consistency around their employment.

The Stonewall LGBT in Britain Work Report tells us that almost one in five LGBT people (18 per cent) who were looking for work said they were discriminated against because of their sexual orientation or gender identity while trying to get a job in the last year.

Customers - We feel that the proposed extension will benefit individuals with protected characteristics who are currently in receipt of or that may access advocacy services in the future. The Women and Equalities Committee commented that a Government survey of 108,000 LGBT people found that many had difficulties accessing healthcare service.

National representative data from the NHS tells us that 16% of LGBT adults said they had a mental, behavioural or neurodevelopmental disorder as a longstanding condition. The proportion of heterosexual adults reporting the same was lower at 6%.

We can see from that research that the proportion of individuals from the LGBT community accessing health services is high and they are reporting difficulties in access health and social care services. Advocacy services are essential in narrowing the gap in these areas, giving a voice and support to individuals who access health and social care services.

Gender Reassignment (Transgender)

Impact on StaffImpact on Customers● Yes○ No● Yes○ No

Details of impact

Staff - We feel that the extension will have a positive impact on staff with protected characteristics at the Advocacy Hub as it will give them further consistency around their employment.

Customers - We feel that the proposed extension will benefit individuals with protected characteristics who are currently in receipt of or that may access advocacy services in the future. We are aware that from the Advocacy Hub referral information that 0.6% of individuals referred, identified as transgender and 0.5% of individuals referred identified as non-binary. Any negative impacts due to changes will affect these individuals disproportionately.

Carers Impact on Staff ● Yes ○ No **Impact on Customers** Yes \circ No **Details of impact** Staff - We feel that the extension will have a positive impact on staff with protected characteristics at the Advocacy Hub as it will give them further consistency around their employment. As much of the hub staff are part time employees, they may have additional caring roles. Any disruption to their employment may have an impact on their caring role. Customers -We feel that the proposed extension will benefit carers, who are currently in receipt of care themselves to be supported in decision making in relation to health and social care. It would further benefit carers who are caring for individuals known to social care and health services already by supporting to alleviate the weight of sole decision making for the future of the individuals they are caring for. Advocacy support would be of particular benefit for both young carers and older carers. Both groups are more likely to have more barriers to engagement with health and social care such as ill health, education commitments, multiple caring roles, etc. future. **Poverty & Financial Inclusion** Impact on Staff **Impact on Customers** Yes \circ No Yes No Please explain the impact Staff - We feel that the extension will have a positive impact on staff with protected characteristics at the Advocacy Hub as it will give them further consistency around their employment. As much of the hub staff are part time employees, there is a risk to those individuals who fall into low-income bracket. Any negative impacts due to changes to the Advocacy framework may affect them disproportionately.

Cohesion				
Staff ○ Yes	• No	Customers O Yes	• No	

Details of impact	
Partners	
Impact on Staff	
○ Yes • No	
Tuesday Cuetamana	
Impact on Customers ● Yes ○ No	
Details of impact	
_	
Armed Forces	
Impact on Staff	Impact on Customers
○ Yes • No	○ Yes • No
Details of impact	
Details of illipact	
Other	
Planca spacific	
Please specify	
Impact on Staff ○ Yes ○ No	Impact on Customers ○ Yes ○ No
O 165 O INU	U 163 U NO
Details of impact	

What actions will you take, please include an Action Plan including timescales
Supporting Evidence (Please detail all your evidence used to support the EIA)
Detail any changes made as a vestilt of the ETA
Detail any changes made as a result of the EIA
Following mitigation is there still significant risk of impact on a protected characteristic. O Yes O No
If yes, the EIA will need corporate escalation? Please explain below
Cirro Off
Sign Off
EIAs must be agreed and signed off by the Equality lead Officer in your Portfolio or corporately. Has this been signed off?
○ Yes ○ No
Date agreed DD/MM/YYYY Name of EIA lead officer
Review Date DD/MM/YYYY

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