

Equality Impact Assessment – 2643 (formerly EIA 903)

Carers' Strategy Delivery Plan

Introductory Information

Proposal type

- Budget
- Project

Decision Type

- Cabinet
- Cabinet Committee (e.g. Cabinet Highways Committee)
- Leader
- Individual Cabinet Member
- Executive Director/Director
- Officer Decisions (Non-Key)
- Council (e.g. Budget and Housing Revenue Account)
- Regulatory Committees (e.g. Licensing Committee)

Lead Cabinet Member

Cllr George Lindars-Hammond

Entered on Q Tier?

- Yes
- No

Year(s)

<input type="radio"/> 14/15	<input type="radio"/> 15/16	<input type="radio"/> 16/17	<input type="radio"/> 17/18	<input type="radio"/> 18/19	<input type="radio"/> 19/20	<input type="radio"/> 20/21	<input checked="" type="radio"/> 21/22
-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

EIA date

04/02/2021

EIA Lead

- | | |
|--|--|
| <input type="radio"/> Adele Robinson | <input checked="" type="radio"/> Ed Sexton |
| <input type="radio"/> Annemarie Johnston | <input type="radio"/> Louise Nunn |
| <input type="radio"/> Bashir Khan | <input type="radio"/> Michael Bowles |
| <input type="radio"/> Beth Storm | <input type="radio"/> Michelle Hawley |
| <input type="radio"/> Diane Owens | <input type="radio"/> Rosie May |

Person filling in this EIA form

Lee Teasdale-Smith

Lead officer

Alexis Chappell

Lead Corporate Plan priority

<input type="radio"/> An In-Touch Organisation	<input type="radio"/> Strong Economy	<input checked="" type="radio"/> Thriving Neighbourhoods and Communities
<input checked="" type="radio"/> Better Health and Wellbeing	<input type="radio"/> Tackling Inequalities	

Portfolio, Service and Team

Cross-Portfolio

- Yes No

Portfolio

People Services

Is the EIA joint with another organisation (eg NHS)?

- Yes No

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

Update Feb 2024

This EIA has been produced to take account of the updated delivery phase of the Carers Strategy. It considers the impacts of the Carers Strategy Delivery Plan which goes to the Adult Health & Social Care Policy Committee for an update in March 2024.

The Carers Strategy takes a multi-agency approach and partners alongside SCC have actions in the Delivery Plan; these actions are driven by the 'Carer Principles' that were co-produced when refreshing the carers strategy. They tell us, what carers will say and what organisations will do if the strategy is working:

Carers will say	Organisations will
1. I have good quality information and advice which is relevant to me and the person I care for.	We will: <ul style="list-style-type: none"> • Identify carers and understand that not all people in a caring role will recognise the term carer. • Link up carer registers across Sheffield to make carer identification more effective. • Be proactive, giving carers good quality information and advice when it is wanted or needed. • Give personalised information and advice that is specific to the carer and the person they care for.
2. I know what my rights are and how to enforce them. There are laws that help and protect me as a	We will: <ul style="list-style-type: none"> • Make effective interventions at the right time to prevent, reduce or delay carers' needs developing/escalating. • Recognise carers' rights and support them

<p>carer, and they cover things like:</p> <ul style="list-style-type: none"> • Employment. • Protection from discrimination. • Right to education. • Social security benefits. • Assessment of my need(s). 	<ul style="list-style-type: none"> • Balance caring with education/employment. • Avoid inappropriate caring. • Be involved in health/social care planning for the person they care for. • Arrange regular training for staff so they understand carers rights and know what support is available to carers. • Take a whole family approach to assessment and support. This will result in a holistic view of the needs of the cared-for person and their family/network of support.
<p>3. The caring I do is valued and I am listened to. This includes:</p> <ul style="list-style-type: none"> • My own needs, wants, opinions and feelings as a carer. • My needs, wants opinions and feelings when talking about the person I care for. 	<p>We will:</p> <ul style="list-style-type: none"> • Listen to carers and support them to participate in decision making with the person they care for. • Recognise and understand the importance of carers who are experts by experience. • Treat carers with dignity and respect. • Enable and empower carers to have a 'voice.' • Work with carers like they are partners in the delivery of health/social care. • Build relationships with carers, recognising that trust is earned. This is particularly important for organisations providing support to the cared-for person. • Help carers to reduce or stop their caring role when that is what the carer wants. • Consider different cultural and religious beliefs. • Co-design/co-produce support for carers with carers.
<p>4. I have breaks from caring, meaning I have a life of my own and time for friends and family.</p>	<p>We will:</p> <ul style="list-style-type: none"> • Signpost or provide carer break support. • Take a personalised approach, asking carers 'what matters to you?' • Be flexible, allowing carers to make best use of their time to give more scope for breaks • Encourage carers to get replacement care via an assessment of the person they care for. • Support carers to be digitally included to help keep in touch with friends and family.
<p>5. My prospects in life are not affected due to me being a carer. I can access education, employment, and training.</p>	<p>We will:</p> <ul style="list-style-type: none"> • Work together with the carer to raise aspirations and achieve the outcomes that matter to them in their lives. Recognising that this is especially important for young carers transitioning to adulthood. <p>Be carer aware with carer friendly policies/processes e.g. flexible working.</p>

<p>6. I am supported to look after my mental/physical health and wellbeing.</p>	<p>We will:</p> <ul style="list-style-type: none"> • Understand that caring can negatively impact on a person's health and wellbeing. • Promote self-care so carers are more actively interested in their own health. • Support carers to access services/groups that will promote health and wellbeing e.g. exercise groups/move more initiatives. • Proactively engage at risk groups including carers who are isolated or lonely.
---	--

The delivery plan will also be shaped by the vision of the carers strategy. This says that Sheffield is a *'City where Carers are valued and have the right support to continue to care for as long as they want to.'* This vision is echoed in *'Living the life you want to live,'* which says, *'Unpaid carers are recognised for their expertise and supported to make the right choices for them and their family.'*

The first, and most important step, in making this vision a reality is identifying carers. If we don't know who our carers are, then how can we value and support them? NHS England's Commitment to Carers (2014) states that *'It takes carers an average of two years to acknowledge their role as a carer. It can be difficult for carers to see their caring role as separate from the relationship they have with the person for whom they care whether that relationship is as a parent, a son or daughter, or a friend.'* The identification and support of carers is the responsibility of all partners in the health, education, and social care systems. Though the Care Act/Children and Families Act (2014) duties apply primarily to local authorities, the Care Act and other relevant guidance applies to other partners e.g., NICE's ['Supporting Adult Carers'](#); this guidance is clear, detailing that carers should be identified and supported whilst in the health system. Supporting carers is also promoted via NHS England's ['Commitment to Carers'](#) and ['Supporting carers in general practice: a framework of quality markers'](#). [The Health and Care Act \(2022\) places a duty on hospital trusts to take any steps that it considers appropriate to involve carers, as soon as feasible when discharge planning. Health services are a essential partner for this delivery plan and this is underlined by NHS England's Commitment to Carers \(2014\) which states that '70% of carers come into contact with health professionals, yet health professionals only identify one in ten carers with GPs, more specifically, only identifying 7%.'](#)

The delivery plan aims to identify more carers in the health and social care systems, in order to link them into support and achieve our vision and 'Carer Principles'.

Impact

Under the [Public Sector Equality Duty](#) we have to pay due regard to the need to:

- eliminate discrimination, harassment and victimisation
- advance equality of opportunity

- foster good relations

More information is available on the [Council website](#) including the [Community Knowledge Profiles](#).

Note the EIA should describe impact before any action/mitigation. If there are both negatives and positives, please outline these – positives will be part of any mitigation. The action plan should detail any mitigation.

Overview

Briefly describe how the proposal helps to meet the Public Sector Duty outlined above

The proposal supports SCC’s responsibilities under the Public Sector Equality Duty, specifically in relation to people who share different protected characteristics:

For example, younger people, older people, people with a disability, people from different ethnic backgrounds who require care and will benefit from support to their carers (people who provide unpaid care).

The proposal also supports broader SCC equality priorities that go beyond legally defined protected characteristics: i.e. carers themselves will directly benefit, and there will be an impact on health, poverty and other areas of interest.

It is critical that we do what we can to support our carers; [Carers UK reported](#) that the financial impact of the Coronavirus pandemic has been even harder on under-represented groups and the ‘cost of living crisis’ will likely exacerbate the impact; this means, that existing social, economic and health inequalities could be further amplified and embedded.

Impacts

Proposal has an impact on

<input checked="" type="radio"/> Health	<input type="radio"/> Gender reassignment
<input checked="" type="radio"/> Age	<input checked="" type="radio"/> Carers
<input checked="" type="radio"/> Disability	<input checked="" type="radio"/> Voluntary/Community & Faith Sectors
<input type="radio"/> Pregnancy/Maternity	<input checked="" type="radio"/> Cohesion
<input checked="" type="radio"/> Race	<input checked="" type="radio"/> Partners
<input type="radio"/> Religion/Belief	<input checked="" type="radio"/> Poverty & Financial Inclusion
<input checked="" type="radio"/> Sex	<input type="radio"/> Armed Forces
<input type="radio"/> Sexual Orientation	<input type="radio"/> Other

Give details in sections below.

Health

Does the Proposal have a significant impact on health and well-being (including effects on the wider determinants of health)?

Yes No *if Yes, complete section below*

Staff

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Customers

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

In March 2021 the Department of Health and Social Care produced a report arguing that there is growing evidence to suggest that caring should be considered a social determinant of health. The report detailed the impact caring has both mentally and physically stating:

'The evidence available suggests that the consequences of caring for older people are not significantly different to the consequences of caring for other populations. The rapid review evidence indicates that carers of older people experience poor mental health, including anxiety and depression, alongside 'carer burden', stress and poor quality of life. This aligns with findings from previous research about the impact of providing unpaid care (for any population) on mental health.

The report goes on to say:

'...carers are at increased risk of illness, and specifically musculoskeletal conditions, cardiovascular disease, generalised cognitive deterioration and function, and poor sleep.'

The Delivery Plan will have a positive impact on carers' health. It will support carers being identified earlier, multiagency working i.e., Sheffield Teaching hospitals, Sheffield Integrated Commissioning

Board, Sheffield health and Social Care Trust and other partners working together in a strategic way to support carers.

The refreshed Carers Strategy and Delivery Plan both have health outcomes, focused on maintaining or improving the health of carers. They also focus on prevention and early intervention as well as health and wellbeing.

One of the aims of the Carers Delivery Plan is to identify more carers. Once identified partners can link carers into the Carers Centre. Evidence is clear that the Carers Centre has a positive impact on health and wellbeing. In 2023, 72% of carers said the Carers Centre had supported them with their emotional/mental wellbeing and 54% said the SCSS supported them in caring for their own physical health (based on 107 responses to the standard carer feedback survey questions)

Refresh Young Carer, Parent and Adult Carer Strategy Principles

These Principles were co-produced with carers and professionals from organisations that typically interact with, or support carers. The Work on the Delivery Plan will use the updated 'Carers Principles' to maintain the momentum:

Principle 6 is 'I am supported to look after my mental/physical health and wellbeing.' Organisations that sign up to the strategy will be expected to:

- Understand that caring can negatively impact on a person's health and wellbeing.
- Promote self-care so carers are more actively interested in their own health.
- Support carers to access services/groups that will promote health and wellbeing e.g., exercise groups/move more initiatives.
- Proactively engage at risk groups including carers who are isolated or lonely.

Comprehensive Health Impact Assessment being completed

Yes No

Please attach health impact assessment as a supporting document below.

Public Health Lead has signed off the health impact(s) of this EIA

Yes No

Health Lead

Age

Staff

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Customers

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Approximately 20% of carers in Sheffield are aged 65 and over and one in three are aged 50-65. We also know that carers are getting older (21% increase of carers aged 65+ from the 2001 to 2011 census).

The Delivery Plan will have a positive impact on those aged 65 and over as it will help support carers and as there are a disproportionate number of carers over 65, compared with the general population of Sheffield (approximately 15%).

Disability

Staff

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Customers

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

There are approximately 17,000 people in Sheffield who provide unpaid care who themselves have a long-term health problem. This includes approximately 7,000 carers whose day-to day activities are limited a lot, 50% of whom provide more than 50 hours of care per week.

We also know that young carers are more likely to have special educational needs or a disability than their peers.

The Carers Strategy and Delivery Plan will positively impact all carers, as one of the main aims is to identify more carers and provide them with support, including those with a disability.

Race

Staff

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Customers

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Approximately 11% of those caring in Sheffield are Black Asian Minority Ethnic (BAME). The Delivery Plan will have a positive impact on BAME carers. For example one of the delivery plan actions is:

'Monitor and continuously improve the carer support services delivered by Sheffield Carers Centre and Sheffield Young Carers, in partnership with unpaid carers

This will include monitoring our carers services to make sure they reflect our diverse population in Sheffield.'

Sex

Staff

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Customers

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

The carer support proposed will positively impact women, this is due to the makeup of the carer population in Sheffield – approximately 60% of carers are women and 40% are men. SCC needs to ensure that the carers we engage and support are reflective of the demographic profile in Sheffield to ensure equity. This will be done via SCC's equalities monitoring which is a standard part of contract monitoring.

Furthermore, a key aim of the delivery plan is to identify and support more carers. [Evidence](#) shows that typically, providing care is disproportionately done by women and girls. The delivery plan will help us identify more carers and therefore more women and girls who we can support.

Carers

Staff

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

This is an opportunity to consider SCC employees within the broader aims of the strategy. Unpaid carers made up 18.6% of SCC's workforce in 2022-23 (the most recently available year). The delivery Plan has actions related to campaigning/awareness raising during Carers Week/Carers Rights Day. This includes messaging to our own staff, highlighting our carer support e.g. Employers for Carers/paid carers leave etc.

Customers

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

SCC (and partners) are being responsive to needs of carers through the Delivery Plan and our response to the refreshed Carers Strategy 'Principles.' The Delivery Plan aims to drive activity and achieve outcomes for carers by clearly setting out the milestones/actions that our multi-agency partnership will be focusing on. For more information, please see the Committee Report and Appendix 1 of that report (which contains the Delivery Plan).

Voluntary/Community & Faith Sectors

Staff

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Sheffield Young Carers and Sheffield Carers Centre are VCS partners in the Delivery Plan. A proportion of their workforce are in a caring role, furthermore, both partners are part of the Sheffield VCS network and can support other organisations (including their staff) with identifying and supporting

Customers Yes No**Impact** Positive Neutral Negative**Level** None Low Medium High**Details of impact**

As above, the Delivery Plan will work with the VCS to raise carer awareness so that more of their customers who are carers are identified and supported.

Cohesion**Staff** Yes No**Impact** Positive Neutral Negative**Level** None Low Medium High**Details of impact****Customers** Yes No**Impact** Positive Neutral Negative**Level** None Low Medium High**Details of impact**

Carers are an essential component to community cohesion. The care they provide, to some of the most vulnerable people in our society should be recognised and valued. The Delivery Plan will mean Sheffield continues to support our carers, for example by creating a joint health and care plan. This in return will help our health and social care systems and our communities, having a positive impact on cohesion.

Partners

Staff

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Several partner organisations are signed-up to the Delivery Plan and a multiagency approach, including Sheffield Teaching Hospitals, Sheffield Integrated Care Board, Sheffield Health and Social Care Trust, Sheffield Carers Centre, Sheffield Young Carers etc. It is vital we take a partnership approach to identify carers in the health, education and social care systems. The delivery plan encourages organisations to work together to recognise, value and support carers.

Customers

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Poverty & Financial Inclusion

Staff

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Customers

Yes No

Impact

Positive Neutral Negative

Level

None Low Medium High

Details of impact

Carers can often be financially disadvantaged due to caring. This is due to things like carers reducing their hours at work, stopping working in order to provide care, finding it difficult to regain employment after taking time away from work etc. Carers UK states that Carers Allowance (for those caring for more than 35 hours per week) is the lowest benefit of its kind at only £76.75 per week (2023/24).

According to the Joseph Rowntree Foundation, 44% of working-age adults who are caring for 35 hours or more a week, are in poverty. Census 2021 data helps to give us an estimate of what that could be in Sheffield. There are 18,631 people (between 16-64) who are caring for either 20-49 or 50 plus hours per week. Of that population, approximately 8000 will be in poverty.

The cost of living crisis means that financial support has been vital strand of work in our delivery plan.

It is important that carers are given appropriate financial advice and guidance as well as financial support via benefits, grants and other hardship funds. The Delivery Plan and our carers support services will continue to tackle poverty and financial hardship.

Service delivery connected to the Delivery Plan encourages links with other organisations such as Citizens Advice Sheffield to ensure carers are maximising their income including claiming appropriate benefits such as carers allowance.

Cumulative Impact

Proposal has a cumulative impact

Yes No

<input type="radio"/> Year on Year	<input checked="" type="radio"/> Across a Community of Identity/Interest
<input type="radio"/> Geographical Area	<input type="radio"/> Other

If yes, details of impact

The development of the Delivery Plan follows the successful contracting with Sheffield Carers Centre and Sheffield Young Carers in 2021 to provide support to a wide range of unpaid carers.

The Delivery Plan builds on several strategies including The Young Carer, Parent and Adult Carer Strategy. This says that Sheffield is a 'City where Carers are valued and have the right support to continue to care for as long as they want to.' This vision is echoed in 'Living the life you want to live', which says, 'Unpaid carers are recognised

for their expertise and supported to make the right choices for them and their family.' Our Delivery Plan for carers has been shaped by the vision and is helping us achieve its ambition.

The vision is centred around delivery of six Carer Principles; these provide the guidance our multi-agency partnership has followed to improve the lives of carers in our city. This delivery plan aligns with and adopts Commitment five of 'Living the life you want to live' which states we will 'Recognise and value unpaid carers and the social care workforce, and the contribution they make to our city'.

Proposal has geographical impact across Sheffield

- Yes No

If Yes, details of geographical impact across Sheffield

Local Partnership Area(s) impacted

- All Specific

If Specific, name of Local Partnership Area(s) impacted

Action Plan and Supporting Evidence

Action Plan

Need to consider how to enhance communication to SCC's workforce – e.g. by intranet and other methods (e.g. supervision or team meeting prompts?)

Supporting Evidence (Please detail all your evidence used to support the EIA)

Consultation

Consultation required

- Yes No

If consultation is not required please state why

The Delivery Plan is a mechanism to achieve aims set out in the Carers Strategy, which was subject to consultation and engagement. In addition, there is very close, ongoing engagement with partners through the Delivery Plan.

Are staff who may be affected by these proposals aware?

- Yes
- No

Are customers who may be affected by these proposals aware?

- Yes
- No

If you have said no to either please say why

Summary of overall impact

Summary of overall impact

In 2018 the Department of Health & Social Care produced the 'Carers Action Plan 2018-2020'. The document said that 'A sustainable social care system for the future is simply not possible without focusing on how our society supports carers'. Coronavirus has applied even more pressure to our health and social care systems in Sheffield; now more than ever, we need to care for our carers.

The Delivery Plan will have a positive impact across several areas outlined above and it will help support our carers. This is beneficial for our health and social care systems and our communities, as well as carers themselves.

Summary of evidence

Changes made as a result of the EIA

Escalation plan

Is there a high impact in any area?

Yes No

Overall risk rating after any mitigations have been put in place

High Medium Low None

Sign Off

**EIAs must be agreed and signed off by an Equality lead Officer.
Has this been signed off?**

Yes No

Date agreed 21/11/2022 Name of EIA lead officer Ed Sexton

Date reviewed 05/03/2024 Name of EIA lead officer Ed Sexton

This page is intentionally left blank