Equality Impact Assessment

Title of policy – Working for Personalised Care: A framework for supporting Personal Assistants in the social care workforce

Description of the policy

1. The Government is committed to personalising the provision of adult social care services and is determined that all those eligible for support will receive a personal budget by 2013. The employment of personal assistants (PAs) is central to this process.

2. Social care is a vital service for many older, disabled and vulnerable people. To achieve a more personalised social care service, a major shift towards supporting PAs and their employers will be necessary.

3. The Personal Assistants' (PA) Framework is a key workforce deliverable mentioned in the *Vision for Adult Social Care*[1]. The *Vision* states that the needs of PAs and their employers will be addressed in a PA strategy to be published in 2011. The framework for PAs sets out an approach, to enable support for an 'evolving' PA workforce and for their employers, over the coming years. Its main aim is to support the future growth of the PA workforce and their employers, while also sharing best practice from across the country.

4. The *Vision* recommended further growth in personal budgets with Councils providing access to all those eligible for care by 2013. PAs are becoming increasingly important within the workforce, providing personalised care for individuals to maintain independence, achieve personal outcomes and participate fully in local communities. Personalised care provides people who use services with choice and control over how they live their lives.

5. The framework represents the latest stage of work to support the development of personalised social care and its publication is scheduled for July 2011. It will provide a timely bridge between the *Vision's* commitments and the publication of a White Paper on Social Care due later in the year.

Background

6. The framework was commissioned under the Adult Social Care Workforce Development Programme Board's remit to oversee implementation of the Adult Social Care Workforce Strategic themes.

[1] Department of Health (2010) A Vision for Adult Social Care: Capable Communities and Active Citizens, p35

7. The framework is a response to workforce-related barriers to PA working. It sets out an approach to future growth and development and sharing best practice examples supporting personalised care provision by PAs for their direct employers.

8. It has been developed jointly with people who use services, their PAs and with sector partner organisations. Key themes including recruitment and retention, learning and development, support and risk have developed as a result of bespoke research conducted with direct employers and their PAs, and informal consultation in a PA Summit event held in December 2010. A full list of the organisation the PA framework has been jointly developed in co-production with is set out in a list of contributors. See list at annex A

9. The framework will be finalised during a period of challenging economic and financial conditions, especially for local government. The framework purposely does not impose any additional financial or administrative burdens on local authorities and is cost neutral. Rather, it provides opportunities and examples using existing and additional resources provided for adult social care, in new and different ways.

Localism

10. The PA framework builds on the ideas of cultural change in the provision of local services set out by the Big Society. It concentrates on a localised approach to supporting PAs and their employers, recognising that they are best placed to develop their own solutions. It acknowledges the role of active citizens, working in partnership with their families, communities and local organisations, to empower individuals and communities to exercise control over the provision of local services. It also picks up the theme of getting the balance right between central and local government and local communities and the individual.

Personalisation, the vision for adult social care and direct payments

11. The key elements of transformation of adult social care, focus on choice, control and flexibility for everyone and were first set out in the concordat agreement, *Putting People First*[2].

12. The *Vision for Adult Social Care* published in November 2010, continues this work setting out the overarching principles, which underpin a modern 21st century system of social care. In particular, two of principles, personalisation and people are directly relevant to the PA framework. Personalisation acknowledges it is individuals and not institutions that take control of their care with personal budgets preferably in the form of direct payments being provided to all those who are eligible as the central means of bringing this about. People recognises the importance of the workforce who can provide care and support with skill, compassion and imagination and who are given the freedom and support to do so.

13. The *Vision* identifies the importance of personal budgets as the way of providing people who use services with control. Two reports (*National evaluation of the individual budgets pilot programme* and *Individual Budgets: impacts and outcomes for carers*) show how people, including carers, have benefitted from enhanced control over their care. The IBSEN national evaluation states that people receiving an

[2] Putting People First: a shared vision and commitment to the transformation of Adult Social Care (DH, 2007)

individual budget were more likely to feel in control of their daily lives, compared with others receiving conventional social care support.

14. One of the central messages in the *Vision* holds that the time is now right to make personal budgets the norm, for all who receive ongoing care and support, ideally as a direct cash payment to give maximum flexibility and choice. This EQIA draws on the content of the EQIA that was prepared as part of the *Vision*.

15. The *Workforce Development Strategy*[3] recently published by Skills for Care also acknowledges that the 'increase in direct payments take up and the extension of personal budgets alongside people funding their own care, will be instrumental in changing the shape of the workforce, for example leading to increases in the number of personal assistants'. A new Recruitment and Retention Strategy published in 2011[4] also recognises that recruitment and retention in the social care sector continues to be a priority.

16. Delivering the *Vision* will demand an even more capable responsive skilled and well trained workforce, which will include PAs. The *Workforce Development Strategy* aims to bring benefits in terms of how the workforce will be encouraged and supported to develop new skills, work in different ways and in new and emerging organisations.

Personal assistants, people who use services and equality

17. PAs play a unique role in the lives of people who employ them, increasing autonomy and enabling the rights of individuals to make choices about how they live their lives. For years, disabled people and the organisations supporting them have campaigned for changes to social care, especially for a vehicle through which they would be able to participate in society.

18. A key request included trusting disabled people who choose to employ their own assistance rather than use state provided care services. Funds previously spent on council or state provision, would be spent employing someone or people to work with that individual. Through this approach, disabled people would be able to live life on their own terms, work, form friendships, complete further and higher education, and most importantly secure improved life chances.

19. PAs are employed to enhance the choice and control a disabled person has over his or her life. The PA is central to improving equality for people who use services. PAs play a key role in developing and sustaining the right of individuals to make informed choices about how they live their lives.

20. The opportunity to recruit a PA is an important development which personalisation offers to people who use adult social care services. It is something that all disabled people, or their carers, who decide to become employers of PAs can benefit from. But with the right to employ PAs are responsibilities. It is in the interest of direct employers and their PA employees, to ensure they follow the regulations set

[3] Capable, Confident, Skilled: A workforce development strategy for people working, supporting and caring in adult social care (Skills for Care 2011)

[4] Adult social care workforce recruitment and retention strategy (Skills for Care 2011)

by employment law, follow good working practices in employment for their PAs and reward PAs appropriately, both in pay and terms and conditions.

21. People who use adult social care come from all ages, from all backgrounds, socio-economic groups, ethnic and faith communities and different sexual orientations. PA working is about individuals and what every individual needs is "based on a complex mix of experience, identity and preferences"[5].The new policy environment set out in the *Vision* is one where many more people will have the opportunity to employ a PA.

Specific impacts on equality

22. The PA framework is consistent with delivery of Office of Disability Issues' social care section of the RoadMap 2025[6]. This aims to achieve disability equality by 2025. The RoadMap compliments commitments made in the Independent Living Strategy, setting out to support:

- working to ensure people have greater choice and control over their care and support through access to personal budgets
- people have access to a range of high quality information, advice, advocacy and support
- greater investment in cost effective preventative interventions that reduces the demand for health and social services
- greater involvement of service users in the transformation of social care and personal budgets

23. Evidence and research has been gathered and used throughout the framework and examples of existing inequalities are examined. Disabled people are less likely to be independent , to be in employment, education or fully engaged in their wider community. The framework focuses on support for <u>all</u> people who use social care services not any one group of disabled people.

<u>Human rights</u>

24. A person-centred approach to adult social care is very much about extending human rights and the PA framework acknowledges work by the independent living movement for disabled peoples' rights. It recognises challenges in exercising choice and control over their everyday lives. It acknowledges that PAs working with disabled employers with mutual respect and equality, increase their independence, autonomy and quality of life and sustain their opportunities to make choices about how they live their lives.

25. Research evidence[7] has shown that the vast majority of employers of PAs who are recipients of direct payments are satisfied with the care and support they receive

[5] Putting People First: Equality and diversity matters 2. providing appropriate services for Black and ethnic minority people (CSCI 2008)
[6] Office of Disability Issues: http://odi.dwp.gov.uk/roadmap-to-disability-equality/social.php
[7] Employment aspects and workforce implications of Direct Payments (IFF Research/Skills for Care, 2008)

under the scheme. A majority of employers surveyed were very satisfied with friendly and empathetic attitudes of PAs and the respect they offer. Many view the care and support they receive under direct payments as superior to the services previously received under the LA.and the incidence of abuse has declined.

26. PA employers say they are generally confident about taking on an employee, although some have expressed concerns. Elderly people are most likely to have concerns although this becomes less important the longer a person has been an employer. This highlights the importance of good quality information, advice and guidance. The importance of access to sufficient and appropriate support services is set out in the framework.

27. The importance of effective safeguarding for people who use services, especially in respect of vulnerable people who lack capacity, is also addressed in the framework. Examples of how the access of user led organisations can provide the support that disabled people need are set out in detail.

28. Research[8] into the experience of PAs shows significant job satisfaction from observing the difference they make to employers' lives, resulting in a high level of commitment to the role. Effective PA working is based on a partnership of mutual respect and equality. Challenges that PAs experience include need for personal support and structures, help to define the role and job parameters, gaps in contracts covering sick leave, pay, pensions and holidays, and lack of training. The framework considers employee rights and draws attention to recent work by Skills for Care[9] which helps to build positive relationships.

29.The framework has been developed in line with a human rights based approach, and throughout, there have been contributions from a wide range of stakeholders across the sector and from individual employers and PAs.

Age

30. The approach set out in the framework applies equally to all age groups,18 years and over, eligible to ongoing adult social care, who wish to employ a PA or to become a PA. The framework is based on the needs of those who use adult social care and does not reflect the needs of younger adults or children who use services.

31. Research documents that of the 10 million disabled people in Britain, over half are above state pension age. Not surprisingly, the prevalence of disability rises with age and the numbers of older people with disability will continue to increase by around 80% between 2002 and 2026[10]. Demographic change means Britain has an ageing population with the percentage of over 65s set to grow.

32. For PA employers, evaluation of the individual budgets pilot programme (IBSEN)[11] has shown that in some cases older people can be less likely to be offered a personal budget and personalised support planning because they felt the planning and managing of their own support would be burdensome. As mentioned older

[8] IPSOS/MORI for DH (2010) Social Care Workforce Monitor Research – Personal Assistants
[9] Skills for Care (2010) Personalisation and Partnership:
[10] Office of National Statistics
[11] Glendenning et al, The national evaluation of the Individual Budgets Pilot Programme (Social Policy Research Unit/University of York

people are also more likely to have concerns about becoming an employer. This highlights the importance of good quality information, advice and guidance. The importance of sufficient support services is a central theme outlined throughout the framework.

33. Examination of social care workforce research[12], has shown that the majority of PAs tend to be middle aged. Work to ensure that PAs are representative is central to the framework and should be developed in delivery to ensure all age ranges are recruited to PA working.

34. Skills for Care studies show social care recruitment has focussed on getting young people into the workforce[13]. Whilst this remains important, a future recruitment approach should be broad enough should be representative and to encourage all ages groups interested in taking up a career in social care and especially to become PAs. The framework will follow this up with further work on the sufficiency of PA supply in order to ensure that PAs are representative of their employers, in terms of age.

35. The Department of Work and Pensions is encouraging the adult social care sector to promote improved recruitment and retention of older workers through it's 'Extending Working Life' initiative.

36. The framework's approach notes the importance of appropriate levels of support for all ages of employers and PAs. Delivery work will address the current situation with variable support services provided by councils and user led organisations across the country, so that direct payments and PA employment are accessible to all those who wish to take up an opportunity to support independent living, regardless of age.

Disability

37. Personalisation aims to increase choice and control over the provision of services placing it in the hands of people who use services. The Government is committed to ensure that all those eligible for support will have the opportunity to receive a personal budget by 2013.

38. Recognising that many disabled people do not get the same life chances as others, an overriding principle running through the framework is to provide disabled people with the opportunity to realise their potential.

39. The framework recognises the importance for all disabled people to receive personalised care and support including adults with physical difficulties, with mental health problems, with learning disability, with substance abuse problems, vulnerable people and older people with disabilities.

40. As set out in the *Vision*, the framework recognises the need to work closely with people who lack capacity and their carers or another suitable person. Data shows that people with mental health conditions, autism and complex care packages are currently among those least likely to take a personal budget.

[12] Employment aspects and workforce implications of Direct Payments (IFF Research/Skills for Care, 2008)
[13] Adult social care workforce – recruitment and retention strategy (Skills for Care, 2011)

41. Promotion of user led support to provide disabled people with the information, advice and guidance they need locally, will aid greater participation in the take up of direct payments and growing use of PAs and more person-centred care.

42. The framework will provide opportunities to ensure that issues related to disability, for potential PA employers or PAs, can only be positively impacted as a result of delivery actions.

Gender

43. The approach set out in the framework applies equally to both gender groups who would like to become PAs and to those who would like to employ a PA.

44. ODI estimates[14] show that at 2008/09 of the 10.8 million disabled people in Britain, their prevalence disaggregated by gender was 5.1 million who are male and 5.7 million female.

45. On workforce supply, the care sector has a heavy weighting towards predominantly female employment. Research has shown that the vast majority of those working as PAs are female[15]. With the importance of the PA workforce being representative of those with needs in order to provide personalised care and support, there needs to be a rebalancing of the gender mix among PAs.

46. Research commissioned by Skills for Care[16] has gathered evidence about attitudes of men to employment in the care sector. The report makes recommendations to increase the attractiveness of the care sector to men. The research recognises the need to promote to employers the value of a balanced workforce in social care for people who use services and their families, so it feels fully responsive to men's and women's wants and needs.

47. The adult social care recruitment and retention strategy takes up this issue of gender imbalance and the need for the social care workforce, including PAs, to be able to respond to the range of needs within communities. The strategy proposes equalising proportions of men and women in the workforce and suggests employers encourage male support, target recruitment drives and promote the role of men in care. Skills for Care will play a central role in progressing this in the delivery plans for the framework.

Gender reassignment

48. There is little specific evidence on the experiences of transgender people in relation to the PA working and employment.

49. The PA Summit event raised the issue of a general shortage of lesbian, gay and transgender PAs. As with supply of PAs for other minority groups, more information is required and research needs to be undertaken. This is recommended within the framework to determine availability and demand from minority groups.

[14] Office of Disability Issues: facts and figures see
[15] Employment aspects and workforce implications of Direct Payments (IFF Research/Skills for Care, 2008)
[16] Men into care – a research-based contribution to a recruitment and retention issue (Skills for care 2010)

50. More research is proposed in the framework and review should be included in the plan of action.

Pregnancy and Maternity

51. The framework recognises the need to ensure PAs have access to full suite of statutory employment benefits including maternity and paternity leave, and that rights are adhered to when employees are pregnant. This is especially important given the current imbalance in the numbers of PAs who are female and makes employment rights, especially on maternity issues, important considerations.

52. Also important is ensuring employers are clear on their responsibilities when it comes to making statutory rights available to their PAs, and that PAs are fully aware of their entitlements.

53. Support to make sure that the necessary information, advice and guidance is available to PA employers and employees is central to the aims of the PA Framework. The framework will not negatively impact on the issues of pregnancy and maternity.

Ethnicity

54. The framework will not have a negative impact in relation to personalised social care for ethnic minorities.

55. As part of framework policy development, evidence has been commissioned from a disability consultant, Dr Ossie Stuart. Dr Stuart has written widely on the effects of personalisation on the black and ethnic minority communities for SCIE and other sector organisations. Dr Stuart's work has identified the following themes, including that:

- mainstream research has not focussed on black and ethnic minority groups and their experience of personalisation;

- evidence shows BME communities preferred option for employers is to recruit family members. This requires more information on community relationships with social services. Also the choice of relatives as providers of personal care for some is a natural and positive decision while for others it may be forced on them as a result of a lack of choice; and

- there are PAs from the BME communities who are successfully working with clients but there is little or no data on them, on their experience or on their specific requirements.

56. The framework proposes work to include commissioning relevant research to build an evidence base and good practice. This will need following up, to reveal ethnic minorities experience of personalisation.

57. A major survey by Skills for Care[17] may add to the information available on direct care workers, by quantifying how personalisation is working at present and building on earlier research broadened to cover other forms of personalisation.

Religion and belief

58. The framework will not have a negative impact on the issues of religion and belief.

59. Throughout the framework local authorities and support organisations are reminded of the importance of recognising diversity of needs. Encouraging flexible and innovative use of personal budgets and support for local employment requirements should include the opportunity to employ someone from the same faith background, if this is required. For PAs, the framework outlines the importance of employer awareness of statutory employment responsibilities including unfair dismissal, anti-discrimination and national minimum wage regulations.

Sexual orientation

60. The framework supports the principle of a diverse and skilled workforce that is representative and responsive to the needs of people who use services.

61. The importance of sufficient supply of gay and lesbian PAs was raised at the PA Summit. Local authorities need to be mindful of the needs of their local community and ensure that appropriate information and support is available to meet demands. More information will be crucial to this process.

Civil partnerships

62.The framework is not expected to have a negative impact on PA employers or PAs who have entered into civil partnerships.

Socio-economic disadvantage

63.The framework is for the benefit of all people who use services. It is not for the benefit of any one socio-economic group at the expense of another. The framework will not have a negative impact by generating a socio-economic disadvantage.

Carers

64. A Carers UK survey(2008) identified the role of carers of people receiving direct payments managing payments on behalf of their relatives, undertaking administrative tasks and seeing this as their responsibility. Parents play significant roles as

[17] The workforce implications and employment aspects of people employing their own care and support Skills for Care (2010)

supporters and managers of direct payments for their disabled adult son or daughter. Parents often recruit PAs and manage any paperwork.

65. Clearly, there is a role for social care practitioners, local authorities and support organisations to recognise the important part played by carers in take up of direct payments and employment of PAs. Currently around 50,000 carers receive personal budgets including direct payments, with significant numbers in the age groups 18-64 and 75+.

66. The Workforce Development Strategy recognises the need for carers to be supported in their caring roles. The only way that carers will receive the necessary support is if they have access to the information advice and guidance, which will allow them to take effective decisions on behalf of themselves and the person cared for. The framework supports an approach which recognises the importance of involving carers, where appropriate, in decision making to ensure the right outcomes for people using services.

Summary, challenges and opportunities

67. PAs are an important part of the social care workforce, providing personalised care and support, allowing people to meet their needs, whether funded by the state or privately resourced. Disabled people who use services welcome the opportunities and benefits that come with greater independence and choice and control over their own lives.

68. The framework has been prepared, in partnership with national sector delivery partners and at the centre of its development has been research and informal consultation undertaken with individual direct employers and their PA employees.

69. Work resulting from the framework will be taken forward jointly. The Department of Health will work with our sector partners as part of our commitment to supporting the PA workforce and their employers over the coming years. We will work jointly with Skills for Care as our lead delivery partner, who will develop an action plan and manage implementation of the framework.

70. National delivery partners will wish to look at conducting their own equalities impact assessments as part of their involvement in the next steps, to assist their responsibilities in relation to equalities and human rights, working to reduce inequalities and discrimination and working to promote equality and good community relations.

71. The framework concentrates on a localised approach to supporting PAs and PA employers understanding that they are best placed to develop solutions to the challenges they face within their local communities. In line with the *Vision* for adult social care and the sector-wide agreement to moving forward with personalisation and community based support set out in ‘Think Local Act Personal, we will engage with those working under the partnership agreement to deliver a community based approach to PA services.

For the record

Name of person who carried out the EQIA

Stuart Perry

Date EQIA completed 4 July 2011

Name of Director who signed the EQIA

Glen Mason
Director of Social Care Leadership and Performance

<u>Annex A – List of stakeholders involved in producing the PA Framework</u>

Type of stakeholder	Name of organisation
Social care	Action on Elder Abuse Association of Director's of Adult Social Services Carers UK Council of Occupational Therapists English Community Care Association National Care Association National Care Forum National Skills Academy – Social Care Social Care Institute for Excellence (SCIE) Skills for Care Social caring UK Homecare Association
Local Government	LGA LG Improvement & Development (formerly IDeA) ADASS Wigan Council Hertfordshire County Council
Voluntary	National Centre for Independent Living ECDP (Essex Coalition for Disabled People) Cheshire Centre for Independent Living NAAPS (National Association of Adult Placement Services) Community Catalysts Shaping our Lives Breakthrough Ealing CIL Voluntary Organisations Disability Group

	Independent Living Alternatives (ILA)
Other	Unison TUC TASC Co-production group Citizen's Advice Expert Voices Eastern (EVE) SfC co-production group