

# Service and Community Impact Assessment (SCIA)

## Front Sheet:

### Directorate and Service Area:

Social and Community Services, Joint Commissioning

### What is being assessed:

Reduction in funding of £400,000 for the Dementia Support Service

### Responsible owner / senior officer:

Kate Terroni, Deputy Director Joint Commissioning

### Date of assessment:

August 2015

### Summary of judgement:

The council is considering a further reduction in funding of £400,000 for dementia support services by 2019/20 which may mean that existing services are significantly reduced or may no longer be available. This will adversely impact on the groups of people the service is designed to support, notably people diagnosed with dementia, their families and carers.

The reduction in funding for dementia support services could also lead to higher costs elsewhere in the adult social care system and there is a risk that existing Health funding for dementia services would not increase to mitigate some of these costs. The opportunity to intervene and support early on following the diagnosis of dementia could be lost.

Close work with NHS partners will be needed to manage the implementation of this option and to monitor and mitigate the impact on people with dementia.

## Detail of Assessment:

### Purpose of assessment:

To assess the potential impact of a further reduction in the council's spend on dementia support services. It considers the possible impact this could have on the local population, whether this could impact differentially on specific groups, and how the impact could be mitigated.

This assessment also fulfils the council's requirements under Section 149 of the Equality Act 2010, as set out below.

Section 149 of the Equality Act 2010 ("the 2010 Act") imposes a duty on the Council to give due regard to three needs in exercising its functions. This proposal is such a function. The three needs are:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic, and those who do not.

Complying with section 149 may involve treating some people more favourably than others, but only to the extent that that does not amount to conduct which is otherwise unlawful under the new Act.

The need to advance equality of opportunity involves having due regard to the need to:

- remove or minimise disadvantages which are connected to a relevant protected characteristic and which are suffered by persons who share that characteristic,
- take steps to meet the needs of persons who share a relevant protected characteristic and which are different from the needs other people, and
- encourage those who share a relevant characteristic to take part in public life or in any other activity in which participation by such people is disproportionately low.
- take steps to meet the needs of disabled people which are different from the needs of people who are not disabled and include steps to take account of a person's disabilities.

The need to foster good relations between different groups involves having due regard to the need to tackle prejudice and promote understanding.

These protected characteristics are:

- age
- disability
- gender reassignment
- pregnancy and maternity

- race – this includes ethnic or national origins, colour or nationality
- religion or belief – this includes lack of belief
- sex
- sexual orientation
- marriage and civil partnership

### **Social Value**

Under the Public Services (Social Value Act) 2012 the Council also has an obligation to consider how the procurement of services contracts with a life value of more than £173,934<sup>1</sup> might improve the economic, social, and environmental well-being of the area affected by the proposed contract, and how it might act to secure this improvement. However, it is best practice to consider social value for all types of contracts, service delivery decisions and new/updated policies. In this context, 'policy' is a general term that could include a strategy, project or contract.

### **Context / Background:**

A new Dementia Support Service for Oxfordshire was implemented in November 2015, with a 3 year contract awarded at a cost of approximately £585,000 per annum. The service involves the provision of Dementia Advisors to provide information, signposting and support for service users to enable them to live independently in their own homes, with or without support, for as long as possible.

The aims and vision of this new model for Dementia Support Services have been agreed as follows:

- Keeping people with dementia living well at home;
- Increasing support for people with dementia and their carers to reduce admissions to hospital and residential care;
- Providing a responsive service to people in crisis and at risk of deterioration;
- Creating a bridge between health and social care and community services that might help people with dementia live well;
- Proactively manage the challenge of increasing numbers of people with dementia at a time of considerable pressures on public funds

The new service is a consolidation of some of the previous services but due to a significant reduction in available funding, several elements of previous dementia provision are no longer available. These elements include services designed specifically to support the carers of people with dementia as well as services used by the person with dementia.

<sup>11</sup> [EC Procurement Threshold for Services](#)

## **Proposals:**

As a result of continuing financial pressures and the need to find further significant savings, the council is proposing to further reduce the funding available for dementia support services. In order to make the savings needed, the council will focus on statutory responsibilities and will continue to prioritise funding in areas that will have most impact for those with social care needs. This option will deliver potential savings of £400,000 in 2019/20 (at the end of the current contract period).

## **Evidence / Intelligence:**

Dementia is a 'growth area'; it is now recognised as a global epidemic with serious socio-economic implications for families and nations. As the proportion of Oxfordshire's population aged 85 and over increases, the number of people living with dementia is predicted to increase by more than 20% over the next six years.

Currently, the identification rate of dementia is 57.3% of the predicted 8,301 people expected to have dementia in the population of Oxfordshire. If no action is taken the Whole System Partnership (WSP Consultancy firm) predicts that the cost of dementia care in Oxfordshire will increase by around £11.4m in the next 5 years.

There are approximately 5000 people diagnosed with dementia in Oxfordshire, of whom 60% are in care homes. The Dementia Support Service is designed to support and work with the 40% of people who are not in care homes and will therefore provide around 2,000 people with dementia, and their carers, with information, advice, and support to enable them to live well with dementia. There is good evidence that if we assist people early on in this way, people stay in their communities for longer and with a better quality of life, delaying or reducing the need for higher cost residential services.

The proposed timing of further savings from dementia services is to allow the current contract to help determine which elements of the service are the most effective in supporting and delaying needs, and the extent to which services for people with dementia could be incorporated into mainstream adult social care activity. This will then inform future commissioning decisions.

## **Alternatives considered / rejected:**

The option to further reduce funding for dementia support services is one of a number of larger savings options being considered that aim to reduce council spending without affecting statutory services. As central government funding is continuing to be reduced, the council needs to make significant savings to meet budgetary pressures, and many other budget reductions have already been made and services stopped or reduced.

If a further reduction in spend on dementia support services is not made, then extra savings will need to be found elsewhere in adult social care.

## **Impact Assessment:**

Identify any potential impacts of the policy or proposed service change on the population as a whole, or on particular groups. It might be helpful to think about the largest impacts or the key parts of the policy or proposed service change first, identifying any risks and actions, before thinking in more detail about particular groups, staff, other Council services, providers etc.

It is worth remembering that 'impact' can mean many things, and can be positive as well as negative. It could for example relate to access to services, the health and wellbeing of individuals or communities, the sustainability of supplier business models, or the training needs of staff.

We assess the impact of decisions on any relevant community, but with particular emphasis on:

- Groups that share the nine protected characteristics
  - age
  - disability
  - gender reassignment
  - pregnancy and maternity
  - race – this includes ethnic or national origins, colour or nationality
  - religion or belief – this includes lack of belief
  - sex
  - sexual orientation
  - marriage and civil partnership
- Rural communities
- Areas of deprivation

We also assess the impact on:

- Staff
- Other council services
- Other providers of council services
- Any other element which is relevant to the policy or proposed service change
- How it might improve the economic, social, and environmental of the area affected by the contract **if** the Public Services (Social Value) Act 2012 applies

For every community or group that you identify a potential impact you should discuss this in detail, using evidence (from data, consultation etc.) where possible to support your judgements. You should then highlight specific risks and any mitigating actions you will take to either lessen the impact, or to address any gaps in understanding you have identified.

If you have not identified an impact on particular groups, staff, other Council services, providers etc. you should indicate this to demonstrate you have considered it.

**Impact on Individuals and Communities:**

This draft assessment sets out some initial considerations of the potential impacts on different groups, services, staff and providers and some initial possible mitigations; these will need to be explored further if the detail of this option is developed.

<b>Age and Gender</b>	
<b>Risks</b>	<b>Mitigations</b>
<p>There is a risk that the reduction in funding by the council on dementia support services could result in service reduction or withdrawal, with less support being available to people with dementia and their families and carers. This could negatively impact on their wellbeing and lead to earlier and/or more intensive interventions from social care and health services</p> <p>The majority of people diagnosed with dementia are older adults, who may also have other health issues/disabilities and therefore the impact is greater for this group of people</p> <p>For carers of people with dementia, any reduction of service could impact disproportionately on women, as higher numbers of women are carers</p>	<p>Close work with NHS partners will be needed to manage the implementation of this proposal and to monitor and mitigate the impact on people with dementia and their carers. This will be informed by close monitoring of the current contract for dementia services to assess the effectiveness of individual elements as well as the service as a whole.</p>

**No differential impacts have been identified on people who share protected characteristics beyond those given above.**

<b>Rural communities:</b>	
<b>Risks</b>	<b>Mitigations</b>
<p>These proposals could have a greater impact on people living in rural communities; there are high numbers of older people in these areas, hence there could also be a number of people living with dementia</p>	<p>More analysis on the potential impact on rural communities will need to be undertaken as these proposals are developed further</p>

<b>Areas of deprivation:</b>	
<b>Risks</b>	<b>Mitigations</b>
It is not clear whether there is an impact on people living in areas of deprivation who have dementia or their carers	More analysis on the potential impact on areas of deprivation will need to be undertaken as proposals are developed further

**Impact on Staff:**

<b>Risks</b>	<b>Mitigations</b>
There could be an impact on the workloads of operational teams and the Customer Service Centre; there is a risk of an increase in referrals for both new people and known social care service users, in particular emergency/urgent referrals at a time of crisis	<p>Comprehensive transition planning and additional short-term input into the system or work-arounds would help to alleviate additional pressures during the transition period.</p> <p>More analysis on the potential impact will need to be undertaken as this option is developed further.</p>

**Impact on other Council services:**

<b>Risks</b>	<b>Mitigations</b>
<p>The reduction in funding by the council on dementia support services could lead to higher costs elsewhere in the adult social care system e.g. increase in Delayed Transfers of Care (hospital discharge); increased home support and care home placements needed.</p> <p>There is a risk that existing Health funding for dementia services would not increase to mitigate some of these costs.</p> <p>The opportunity to intervene and support early on following the diagnosis of dementia could be lost.</p>	More analysis on the potential impact will need to be undertaken as these proposals are developed further

**Impact on providers:**

<b>Risks</b>	<b>Mitigations</b>
The providers of the service may not be able to continue some or all of the activities if funding is reduced, with subsequent risks to the organisations'	Any decisions about the future of dementia support services would be communicated as early as possible to providers of these services, so that they

finances and staff.	can plan accordingly. The council would also liaise with service providers to establish what provision could be maintained in the light of reduced funding.
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**Social Value**

*If the Public Services (Social Value) Act 2012 applies to this proposal, please summarise here how you have considered how the contract might improve the economic, social, and environmental well-being of the relevant area.*

**How might the proposal improve the economic well-being of the relevant area?**

N/A

**How might the proposal improve the environmental well-being of the relevant area?**

N/A

**Action plan:**

<b>Action</b>	<b>By When</b>	<b>Person responsible</b>
Decision on whether the funding will be removed as part of the broader budget proposals	February 2016	Council Members
Revise SCIA for implementation of preferred option	March 2016	Commissioning Manager
Develop costed proposal if this option is taken forward	March 2016 onwards	Commissioning Manager

**Monitoring and review:**

**Person responsible for assessment: Commissioning Manager**

<b>Version</b>	<b>Date</b>	<b>Notes</b> (e.g. Initial draft, amended following consultation)
v.1	20.08.15	Initial draft
v. 2	02.12.15	Updated – new service in place from Nov 2015