

Future of Respite (Short Break) Services for Children with Disabilities

**Equality Impact Assessment in accordance with
Section 75 and Schedule 9 of The Northern Ireland Act
1998**

Consultation Dates: 3 March 2014 - 26 May 2014

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Introduction

This Equality Impact Assessment (EQIA) has been prepared to assess the impact of the Trust's proposal for the future of respite (short break) services for children with disabilities.

An EQIA is an in-depth analysis of a proposal to determine the extent of the impact on equality of opportunity for the nine equality categories under Section 75 of the Northern Ireland Act 1998.

Statutory Context Section 75 NI Act 1998

Section 75 of the Northern Ireland Act 1998 requires each public authority, when carrying out its functions in relation to Northern Ireland, to have due regard to the need to promote equality of opportunity between nine categories of persons, namely:

- between persons of different religious belief, political opinion, racial group, age, marital status or sexual orientation;
- between men and women generally;
- between persons with a disability and persons without; and
- between persons with dependants and persons without.

Without prejudice to its obligations above, the public authority must also have regard to the desirability of promoting good relations between persons of different religious belief, political opinion or racial group.

The Equality Commission for Northern Ireland (ECNI) approved the Trust's new Equality Scheme in July 2011. The Scheme outlines how the Trust proposes to fulfil its statutory duties under Section 75. Following approval of the Scheme, existing policies were screened to assess impact on the promotion of equality of opportunity or the duty to promote good relations using the following criteria:

- What is the likely impact on equality of opportunity for those affected by this policy, for each of the Section 75 equality categories?
(minor/major/none)
- Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?
- To what extent is the policy likely to impact on good relations between people of a different religious belief, political opinion or racial group?
(minor/major/none)

- Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group?

Further, the Trust gave a commitment to apply the above screening methodology to all new and revised policies as an integral part of the development process and where necessary and appropriate to subject new policies to further equality impact assessment.

The Trust is committed to the promotion of human rights in all aspects of its work. The Human Rights Act gives effect in UK law to the European Convention on Human Rights and requires legislation to be interpreted so far as is possible in a way which is compatible with the Convention Rights. It is unlawful for a public authority to act incompatibly with the Convention Rights. The Trust will make sure that respect for human rights is at the core of its day to day work and is reflected in its decision making process and in taking forward this proposal.

This EQIA has been made available as part of a formal consultation and the Trust welcomes your views.

A copy of this EQIA report is available on the Trust's website at <http://www.northerntrust.hscni.net>.

If you have any queries about this document, and its availability in alternative formats (including Braille, disk and audio cassette, and in minority languages to meet the needs of those who are not fluent in English) then please contact:

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Deadline for comments will be 26 May 2014.

Following consultation a summary report of feedback received will be made available.

In compliance with the legislation, when making any final decision the Trust will take into account the feedback received on this EQIA and from any consultation carried out in relation to this proposal.

Our Proposal

The Department of Health, Social Services and Public Safety describe a short break or respite service as “*any service which allows a disabled child to have enjoyable planned experiences away from his/her primary carers and gives carers a break from their caring responsibilities*”.

Respite services provide opportunities for disabled children and young people to spend time away from their primary carers. They allow parents and carers the time to spend with their other children or to deal with everyday life. The children and young people may need extra care and support at home. There are several ways that carers can get a break, either through families or friends, or voluntary organisations that offer a few hours of support each week. Services provided by the Trust can include day, evening, overnight and weekend activities and can take place in the child’s family home, the home of an approved carer or in a residential or community unit.

Respite services are of immense value to children and their families but we know that families will have different preferences as to the type of service that is most helpful for them.

There is an increasing demand for respite services and the needs of children and families has changed, so the way in which we provide our services needs to be reformed so that the assessed needs of children and their families can be met in a fair and consistent way.

We have carried out an initial scoping exercise of how we currently provide respite services and we know that current services do not match the changing needs of children and families. We know that many families who receive direct payments for social services are moving away from using traditional overnight care.

It is important to recognise that this proposal is driven by a need to make sure that we provide services that are equal for everyone that are safe, sustainable and are value for money.

Transforming Your Care, A Review of Health and Social Care in Northern Ireland, concluded that there is a need for change in the way services are delivered to manage increasing demand, deliver high quality, evidence based services that provide child centred care. One of the key proposals outlined in the document is further development of a more diverse range of age-

appropriate day support and respite and short-break services. We know that with increased technology and medical expertise, more children with life limiting illnesses are living longer so there is and will continue to be an increasing demand for a greater range of respite services

This proposal is part of a wider review of services to children with disabilities and complex physical health and social care needs. It is aimed at delivering a modernised service that ensures:-

- Equitable access to services based on assessed need
- Safe and effective care
- Flexible and sustained provision
- Support networks for parents and carers, including access to suitable respite care

The Trust currently provides a range of respite services. We work in partnership with the voluntary and community sector, including the Northern Ireland Children's Hospice in providing respite services. We also acknowledge the valuable contribution made by our approved host families who provide respite in their homes through our Sharing the Care Short Break Service.

The range of respite services includes:-

- Residential based respite
- Family based respite
- Summer scheme provision
- Community activities
- Evening and weekend group activities
- After school activities
- Sponsored day care

Overnight care is also provided in the home, particularly for children with complex physical healthcare needs to enable parents to have a night's rest. This type of care is similar to that provided within a hospital environment. There is an urgent need for us to provide respite for these children and families in addition to this essential support.

Currently 125 families receive respite services through the Sharing the Care Short Break Service for day and overnight care, with 55 families receiving respite through Whitehaven and 22 from Rainbow Lodge.

We believe that children and their families would benefit from a wider range of more flexible services, which would enable greater choice and fairer access, while still maintaining the option of overnight residential care. We also need to develop respite services for children with complex physical health care needs.

We have recently experienced difficulties in retaining consistent levels of suitably qualified staff to ensure that essential standards of care and safety can be maintained consistently in our children's residential units. This has meant that, on occasions, planned respite for children had to be cancelled. These safety concerns led to the temporary closure of Cherry Lodge in May 2013. At this point, respite services from within Cherry Lodge continue to be suspended with respite being offered from within Whitehaven, through Direct Payments, from the Sharing the Care Short Break Service, through day care and domiciliary support or a mix of a number of these alternatives.

Over the last months there have been individual meetings with parents and carers of children who have used Cherry Lodge to find out how they feel about the alternative respite arrangements they have received since the Unit was temporarily closed. On the basis of what we have heard from the parents and carers, and because of the likelihood that we could not guarantee consistent levels of respite in future, the Trust has been considering the long term future of the Unit.

We would like to be in a position to offer more flexible respite options to suit the changing needs of individual children and families. One way of doing this would be to combine our resources to continue to provide residential based respite from within Whitehaven and Rainbow Lodge. We will continue to provide respite through our Sharing the Care Short Break Service and progress our plans for increasing our range of respite services. Arrangements for those families who are supported within their own homes would not change.

Our future plan is to have a purpose built respite unit in a central location in the Trust. We would envisage a purpose built unit that would be a resource centre for children and families throughout the Trust area that could accommodate all children with disabilities who need respite care. We have listed this development as our priority for capital investment with the Department of Health, Social Services and Public Safety. In April 2014, we will begin to develop an outline business case for this and we would welcome participation from parents, carers and others in this project.

We are committed to improving the way we provide services for to children with disabilities and complex physical health and social care needs so that children have equal access to services according to their assessed need and we need you to help us to do this. We believe that the people who use the

service, their carers and communities and the staff who deliver the service are best placed to tell us what the new service should look like and we are keen to involve these groups specifically in the process.

Aim of proposal

To provide flexible respite (short break) services that ensure the child is at the centre of service provision and families are supported in their caring role

Strategic Context

The strategic direction for the provision of services to children is laid down in a number of key strategic documents notably,

- Investing for Health Strategy 2002
- A Healthier Future: A 20 Year Vision for Health and Wellbeing in NI 2005-25
- Bamford Review
- Children Order 1995 (Guidance and Regulations) Volume 5 Children with a Disability: Short-term or respite care
- Every Child Matters (DHSSPS, 2004)
- 10-year Strategy for Children and Young People in Northern Ireland 2006-16
- Children’s Matters Task Force – DHSSPS
- DHSSPS Priorities for Action 2008-09
- Care Matters – DHSSPS Recommended Standards of Care for Children
- Regional Child Protection Standards (Sept 2008)
- The Equal lives Report of the Bamford Review, Chapter 4, also outlined recommendations for children, young people and families
- Our Children and Young People – Our shared Responsibility – SSI Overview Report – December 2006
- The Strategy for Children and Young People in NI: “Our Children & Your Young People – Our Pledge 2006-16”, DHSSPS
- Short breaks (respite): families of children with disabilities – NI Assembly, Research and Information Service Briefing Paper
- RQIA (2013) Baseline Assessment and Review of Community Services for Children with a Disability

The Office of the First and Deputy First Minister, 10 Year Strategy for Children and Young People in Northern Ireland 2006 – 2016, ‘Our Children and Young People Our Pledge’ pledges to deliver improved outcomes for children and young people, and to ensure that all future policies developed and services offered to and accessed by children and young people are based on identified need and on evidence about what works. The values and philosophy of the 10 year strategy are:

- Respect the rights of children and young people
- Adopt a child centred approach which is rooted in child development
- Build on the strengths of the family
- Involve children, young people and their carers in the assessment of their needs
- Apply evidence and knowledge based approaches
- Emphasis that assessment is a continuing process and not an event
- Promote inter-agency involvement

- Base decisions on shared values.

Consideration of Available Data and Research Sources

Profile of Young People Receiving Residential Respite Services

Section 75 Group		Average Across Services
Gender	Female	29%
	Male	71%
Religion	Roman Catholic	14%
	Protestant	37%
	Other	49%
Age	0-5	0%
	6-10	12%
	11-16	82%
	17+	6%

The above table provides the profile of a snapshot of children and young people currently receiving residential respite services.

The Trust has relied on the following quantitative and qualitative information when considering the equality implications of this proposal.

- Northern Ireland Statistics and Research Agency(NISRA)
- Northern Ireland Health and Personal Social Services Workforce Census 2006
- The Equal Opportunities Commission for Northern Ireland (EOCNI) Cost of Caring Report 1993
- Regional Strategy 'A Healthier Future (2005-2025)
- Investing for Health Strategy 2002
- 2001 Census of Population (Northern Ireland)
- Northern Ireland Health and Personal Social Services Workforce Census 2006
- Statement of Key Inequalities, Equality Commission for Northern Ireland
- Trust Board Monthly Performance Report
- Bamford Review
- 10-year Strategy for Children and Young People in Northern Ireland 2006-16
- Children's Matters Task Force – DHSSPS
- Care Matters – DHSSPS Recommended Standards of Care for Children
- Regional Child Protection Standards (Sept 2008)

- Our Children and Young People – Our shared Responsibility – SSI Overview Report – December 2006
- 10 Year Strategy for Children and Young People in Northern Ireland 2006 – 2016, ‘Our Children and Young People Our Pledge’
- NHSCT Trust Delivery Plan
- Available data in respect of the Section 75 groupings for current service users and staff.

This list is not exhaustive.

Assessment of Impact on Affected Service Users by Section 75 Equality Groups

Please note: Due to the small numbers of children and young people directly affected by this proposal the Trust has taken the decision that in order to protect the identity of individuals, specific information will not be published in this document. However the data has been considered by Trust staff.

The Trust has held individual meetings with all parents, carers, children and young people affected by this proposal to gather feedback on any potential adverse impact. The Trust will continue to fully engage with families and carers throughout this process and we will be guided by them on how best to meet the individual needs of their children.

With regard to the information gathered in respect of the 9 equality categories, the Trust has noted the following in relation to the current users of residential respite services.

Gender

The gender profile of young people affected is majority female compared to the average gender profile across all residential respite services. The Trust considers that while there is a differential impact there will be no adverse or major impact on the basis of gender. The Trust is committed to ongoing monitoring for any adverse impact.

Persons of different age

The majority of children and young people affected by the proposal are within the 11-16 age bands. This is reflective of the average age across residential respite services. There is no evidence to suggest that this proposal will have any adverse or major impact on the affected children and young people because of their age. The Trust is committed to monitoring for any adverse impact.

Persons with or without a disability

All of the children affected by this proposal have a disability because of the nature of this service. Their specific requirements will be taken fully into account when meeting their future needs. The Trust will make sure that the needs of each child are fully assessed and that any special requirements are identified. Specific provision will be made to provide training and additional support through the redeployment of trained care assistants.

Persons of different marital status

All of the children and young people who use the Trust's residential respite services are single.

Persons of different religious belief

All of the Trust's residential respite services provide a welcoming environment where children from differing religious backgrounds are cared for together. There is no evidence to suggest that this proposal will have any adverse impact on children from any religious grouping. The Trust is committed to monitoring for any adverse impact.

Persons with/without dependants

All of the children and young people receiving respite services are dependants and the Trust is aware of the importance of the caring role. The Trust is committed to engaging effectively with carers in relation to meeting their child's future needs.

Carers are entitled to an individual carer's assessment to identify their specific needs and to establish the impact of caring on their own health and wellbeing. Carers can then be signposted to appropriate services and support.

Persons of different political opinion

The Trust does not collect information on political opinion. Proxy information, such as religious affiliation is accepted as a reasonable indication of a person's political opinion. As stated above, all respite services provide a welcoming environment where all children and young people are cared for together. There is no evidence to suggest this proposal will have an impact on the grounds of the children and young people's political opinion.

Persons of a different racial group

All of those affected by this proposal are white. There is no evidence to suggest that this proposal will have an impact on the grounds of racial background. Any specific cultural needs will be addressed during the

consideration of future care options. The Trust is mindful that there are increasing numbers of people of Eastern European origin living in the Northern Trust area. The Trust is committed to ensuring that its services are accessible and welcoming to everyone.

Persons of different sexual orientation

While no direct information is gathered on sexual orientation research would indicate that 10% of the population is lesbian, gay or bisexual.

There is no evidence to suggest that this proposal will have an adverse impact on persons of different sexual orientation.

Mitigation of Impact on Current Service Users

The Northern Health and Social Care Trust is committed to continually improving the quality of its services. The Trust's proposals are framed within the context of a number of strategic drivers directing the provision of health and social care in Northern Ireland.

The Trust believes that children and their families would benefit from a wider range of more flexible services, which would enable greater choice and fairer access, while still maintaining the option of overnight residential care. We also need to develop respite services for children with complex physical health care needs.

The Trust acknowledges that any changes to the current provision may have an impact on those affected. The Trust has held individual meetings with the families and carers affected to identify any adverse impact and to discuss how this can be mitigated. The Trust will provide support with transport for those children and young people who continue to require residential respite and will experience additional travel costs as a result.

The Trust will continue to communicate with families and carers in order to alleviate any concerns they may have. The Trust has experience in sensitively managing changes with children and their families and every effort will be made to keep any disruption resulting in any change to an absolute minimum. The Trust will continue to fully engage with families and carers throughout this process and we will be guided by them on how best to meet the individual needs of their children.

All the children and young people affected will have a review of their needs carried out to establish the level of care required and suitable alternatives will be identified and agreed.

More flexible respite options will be provided to suit the changing needs of individual children and families. Overnight respite will continue to be provided

for families from within Whitehaven Respite Unit, the Sharing the Care Short Break Service and Rainbow Lodge. Arrangements for those families who are supported within their own homes will not change.

The Trust is committed to the promotion of human rights in all aspects of its work. The Human Rights Act gives effect in UK law to the European Convention on Human Rights and requires legislation to be interpreted so far as is possible in a way which is compatible with the Convention Rights. It is unlawful for a public authority to act incompatibly with the Convention Rights. The Trust will ensure that respect for human rights is integral to the implementation of this proposal.

Assessment of Impact on Current Staff by Section 75 Equality Groups

Profile of Current Staffing in the Northern Health and Social Care Trust by Section 75 Equality Group

Group	Workforce profile as at 1 January 2013	
Gender	86.5% Female 13.4% Male	
Age	16 – 24 years 25 – 34 years 35 - 44 years 45 – 54 years 55+	5.3% 21.2% 27.2% 29.6% 16.8%
Community Background	Protestant – 53.6% Roman Catholic – 35.9% Neither/Not known – 10.5%	
Religious belief	Muslim – 0.15% Hindu – 0.19% Sikh – 0.03% Jewish – 0.01% Buddhist – 0.10% Christian – 28.83% Other – 0.05% None – 4.71% No data held – 65.76%	
Political Opinion	Broadly Unionist – 13.1% Broadly Nationalist – 5.9% Other - 8.7% Do not wish to answer – 17.9% No data held – 54.4%	
Marital Status	Single – 25.4% Married – 68.3% Other – 6.3%	
Dependent Status	A child (or children) – 23.4% A dependent older person – 6.1% A person(s) with a disability – 3.5% None of the above – 18.8% No data held – 48.2%	
Disability	Declared disability – 2.3%	
Ethnicity	White – 79.7% Black African – 0.11% Bangladeshi – 0.00%	

	Black Caribbean – 0.03% Chinese – 0.05% Indian – 1.26% Irish Traveller – 0.02% Pakistani – 0.12% Mixed Ethnic Group – 0.06% Filipino – 0.40% Other – 0.47% Black Other – 0.01% Not Known – 17.69%
Nationality	EC – 0.12% Non-EC – 0.03% Polish – 0.15% British – 23.4% Scottish – 0.23% Welsh – 0.04% Irish – 7.43% Portuguese – 0.01% Latvian – 0.00% Lithuanian – 0.01% English – 0.12% Northern Irish – 2.13% Indian – 2.13% Filipino – 0.07% Pakistani – 0.02% No data held – 66.15%
Sexual Orientation	Opposite sex – 41.3% Same sex – 1.2% Same and opposite sex – 0.2% Do not wish to answer – 4.3% No data held – 53.1%

Please note: Due to the small numbers of Trust staff affected by this proposal the Trust has taken the decision, in order to protect the identity of individuals that specific information will not be included above. However the data has been considered by Trust staff.

The Trust recognises that this proposal may impact on staff in terms of relocation to a new work site. The Trust will put robust mitigating measures in place, adopting the principles of the Trust’s Management of Change HR Framework. Staff’s individual and specific circumstances will be considered and where adverse impact is identified, the Trust will take steps to mitigate its effects.

The table below includes the needs and experiences of health and social care staff as a whole, in relation to S75 categories. The Trust will be mindful of these needs and experiences during consultation with affected staff.

Between men and women generally

Historically the gender composition within the health and social care workforce has been predominately female. The gender profile of current Trust staff of 86.5% female and 13.4% male. The Trust is of the opinion that there is no evidence to suggest that there will be any adverse impact on the grounds of gender. The Trust is aware that this section of the workforce may have dependency and caring responsibilities and will consider mitigating measures for staff directly affected.

Persons of different age

The Trust is mindful that people over 45 may have increasing caring responsibilities. The Trust will consider mitigating measures for staff directly affected. The Trust is of the opinion that there is no evidence to suggest that there will be any adverse impact on the grounds of age.

Persons with or without a disability

There is an overall low percentage of employees in the Northern Trust (2.3%) who have declared a disability. The Trust is mindful that people may be reluctant to declare that they have a disability and is currently working with disabled people and representative groups to ensure staff that have or declare a disability are fully supported. There is no evidence to suggest that this proposal will have any adverse impact for current staff on the grounds of disability but if any of the staff declare themselves as having a disability, reasonable adjustments will be made in line with related employment policies and good practice guidelines.

Persons of different marital status

The marital status of staff working in the Trust as a whole is 68.3% married and 25.4% single. The Trust is of the opinion that there is no evidence to suggest that this proposal will have an adverse impact upon staff on the grounds of marital status. The Trust is mindful that research shows that the majority of women who have caring responsibilities tend to be married and will consider any mitigating measures for staff directly affected.

Persons of different religious belief

The religious profile of all staff across the Trust is 55.1% Protestant and 36.6% Roman Catholic. The Trust is of the view that there is no evidence to suggest that this proposal will have an adverse impact for current staff on the grounds of religious belief. The Trust will consider any mitigating measures for staff directly affected.

Persons with/without dependants

9.6% of Trust staff have indicated they are caring for a dependent older person or person with a disability and 23.4% have dependent children. We are also mindful that the majority of staff is female. Research indicates that 1 in 8 people in Northern Ireland have caring responsibilities and Carers Northern Ireland statistics indicate that 64% of females are carers. The Trust is aware of the caring obligations associated with its female employees. The Trust will consider any mitigating measures for staff directly affected.

Persons of different political opinion

The Trust considers that there is no evidence to suggest that this proposal will have an adverse impact for current staff on the grounds of political opinion.

Persons of a different racial group

Available figures indicate that the majority of staff affected is white. This is largely reflective of the overall average for all Trust staff (79.7%). The Trust considers that there is no evidence to suggest that this proposal will have an adverse impact upon current staff on grounds of racial group.

Persons of different sexual orientation

There is no evidence to suggest that this proposal will have an adverse impact on staff on the grounds of sexual orientation.

Mitigation of Impact on Current Staff

The principles of the Trust's Management of Change Human Resource Framework provide a robust and transparent process for decisions relating to affected staff. Steps will be taken to ensure that the implementation process in no way conflicts with the requirements of existing equality and anti-discrimination legislation. The Trust has systems in place to support staff through the changes. This includes providing information in a timely way, providing time for training, attending interviews, counselling, trying out posts and accessing Occupational Health Support.

A communication strategy will ensure staff are kept fully informed of any proposed action and developments. Staff will also be invited to regular communication meetings to discuss plans, to influence the planning process and express any concerns.

This proposal may impact on staff in terms of relocation to a new work site and redeployment to a different post and a new role. The Trust will work in

partnership with Staffside to assess the impact on staff and to put robust mitigating measures in place.

Formal Consultation

The Trust wishes to consult as widely as possible on this proposal and the findings of this EQIA. With this in mind the Trust will consult on this proposal over a twelve week period commencing 3 March 2014 and ending 26 May 2014.

Targeted consultation will include specific consultation with staff, service users and carers directly affected and a range of stakeholders.

To facilitate comments please complete the comments form available on the Trust Website at <http://www.northerntrust.hscni.net>, however we will accept comments in any format.

All enquiries regarding this consultation process should be directed to:

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Publication of the Results of this Equality Impact Assessment

The outcomes of this consultation process will be published and a summary of the feedback received will be posted on the Trust's website and Staffnet (intranet).

Monitoring

In keeping with the Equality Commission's guidance, the Trust will put in place a strategy to monitor the impact of this proposal on the relevant groups.

If as a result of this monitoring, the Trust finds that the impact of this proposal results in a greater adverse impact than predicted, or if the opportunities arise which would allow for greater equality of opportunity to be promoted, the Trust will make sure that measures are taken to achieve better outcomes for the equality groups.

Freedom of Information Act 2000 – Confidentiality of Consultations

The Northern Health and Social Care Trust will publish an anonymised summary of the responses received to our consultation process. However, under the Freedom of Information Act (FOIA) 2000, particular responses may be disclosed on request, unless an exemption(s) under the legislation applies.

Under the FOIA anyone has the right to request access to information held by public authorities; the Northern Trust is such a public body. Trust decisions in relation to the release of information that the Trust holds are governed by various pieces of legislation, and as such the Trust cannot automatically consider responses received as part of any consultation process as exempt. However, confidentiality issues will be carefully considered before any disclosures are made.