

Integrated Impact Assessment

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IIA review checklist

For internal use only

Review or approval required	Officer	Date
Lead officer	Ellie Anderson	29/10/2024
Business Management Partner review of IIA overall	Katherine Preston	28/11/2024
Finance Partner review of revenue and capital information	Maria Brady	24/10/2024
Operational HR – Lead Specialist review of workforce implications	Helen Purdon	29/10/2024
DLT	Adult Social Care & Prevention	30/10/2024
Director	Laura Choake	28/11/2024
Cabinet Portfolio Holder	Cllr Adam Walker	

IIA quality assurance checklist

Quality assurance required	Officer	Date
Louise Crosby: Equality and Wellbeing	Louise Crosby	04/11/2024
Geraldine Cunningham: Economic Development	Geraldine Cunningham	05/11/2024
Joan Flood: Community Safety	Joan Flood	29/11/24
Adrian McLoughlin: Climate Change	Adrian McLoughlin	04/11/2024
Louise Reeve: Consultation	Louise Reeve	06/11/2024
David Forster: Carers	David Forster	20/11/2024
Zoe Foster: Public Health		

Informing our approach to fairness

Proposal name

Promoting independence through the expansion of our Reablement service.

Date of assessment

October 2024

Lead officer

Ellie Anderson, Assistant Director, Prevention

Assessment team

Daryll Alder, Ben McLaughlan, Kathryn Williams, Stacey Urwin

Portfolio area

Adult Social Care, Health, and Prevention

Version number

1

Planned review date

January 2025

Section A: Current service

1 What does the service, policy or function do?

Reablement is a preventative service which aims to address immediate care and support needs and prevent crises. It involves occupational therapists and other support to help people maintain or increase their independence in managing day-to-day tasks.

It provides a prompt, personalised, short-term service which helps people to recover and live independently at home. People may access reablement following a:

- change in social care needs
- loss of confidence at home

Reablement is part of 'Adult Social CarePoint', previously known as 'Social Care Direct'. This is our adult social care front door. In most cases, a person's first contact with adult social care in Newcastle will be with Adult Social CarePoint. This team gets to understand a person's situation and their goals, and looks at all preventative ways we can help to support them, including Reablement. If a person has ongoing care and support needs after being supported to be as independent as possible, their longer-term support is then managed by our community social work teams.

2 Who do we deliver this service, policy or function for?

The service supports adults of all ages across the city who access adult social care services, including people with care and support needs, and unpaid carers. We receive approximately 10,000 new contacts to Adult Social CarePoint every year.

3 Why do we deliver this service, function or policy?

Under the Care Act 2014, local authorities are given duties to prevent, reduce, and delay the need for care and support, and to provide certain types of information and advice.

Many of these functions are currently delivered through our Adult Social CarePoint and Information Now service.

The relevant Care Act 2014 provisions include the two sections below:

"A local authority must provide or arrange for the provision of services, facilities or resources, or take other steps, which it considers will:

- a) contribute towards preventing or delaying the development by adults in its area of needs for care and support.
- b) contribute towards preventing or delaying the development by carers in its area of needs for support.
- c) reduce the needs for care and support of adults in its area.
- d) reduce the needs for support of carers in its area."

“A local authority must establish and maintain a service for providing people in its area with information and advice relating to care and support for adults and support for carers.”

The intention of these services is to support people to remain well and to help people understand what support is available in the city and how to access it.

4 How much do we spend on the service, function or policy?

Gross expenditure: £107,240,120

Gross income: £49,183,980

Net budget: £58,056,140

Comments:

The above figures relate to per annum expenditure across adult social care commissioned services for older people, people accessing mental health support, and people with physical disabilities.

The proposal is to reduce the amount of commissioning spend by £4.75million overall by preventing, reducing, and delaying more needs at the earliest possible stage using short term intervention.

5 How many people do we employ to deliver the service, function or policy?

Number of posts: 343 posts (289 posts currently occupied)

Number of full-time equivalent officers: 253.64 FTE

Comments: The above posts are made up of colleagues across Adult Social CarePoint and Information Now. Information Now is the city’s online information and advice service.

Section B: Proposals for the future service

6 How we are proposing to change the service, function or policy

This proposal gives us the opportunity to implement a preventative approach in all our interventions with people. This will include at the first point of contact and at the point that a person's needs change, regardless of their environment. We will also use this approach when undertaking planned reviews. The proposal is to add a preventative and rehabilitative approach to every part of our interaction and assessment function and make every contact with people an opportunity to improve independence and quality of life.

This will involve expanding the coordinator role in Reablement to:

- Increase capacity to respond to all new contacts and requests for additional support. The Reablement service will work alongside Moving and Handling Coordinators and Occupational Therapists as needed. The team will consider equipment, adaptations and technology which can support people to remain independent at home for as long as possible.
- This will involve redesigning Reablement to include an enhanced therapy service, ensuring access for all individuals with existing support packages, and providing training for all practitioners on the benefits of assistive technology and other types of digital supports.

We will build on the multi-disciplinary approach developed for our Home First service, which offers short-term support for people discharged from the hospital where over a third of care packages managed by Home First enabled people to live at home with reduced need for paid support.

We will also improve our short-term response to crisis and hospital admissions ensuring any service provided during a crisis is time-limited (maximum of 2-4 weeks), purposeful, and helps the person to remain safely at home. Linked to the Reablement offer we will provide:

- Short-term preventative support, such as a temporary increase to home care, during a crisis to avoid the use of more costly emergency care home placements.
- This support offer would include overnight support when necessary.

This will be supported by the expanded Reablement role with potential consideration for a redesigned overnight offer.

Under this proposal we aim to make better use of assisted technology and digital solutions to prevent more costly and restrictive care and support interventions. We plan to increase the use of assisted technology to help keep people safe, well, and connected at home. Additionally, we will bring the Council's 24-hour assistive

technology response and support service (called Ostara) and Reablement services closer together to improve our overnight offer with a combination of carer support and welfare checks, thus reducing the need for long-term support.

We will review our assisted technology offer and expand the range of products available through the Ostara service. Furthermore, we intend to create a new Digital Champion Senior Health and Social Care Officer role to lead on digital solutions that negate the need for care packages.

By implementing an expanded Reablement offer we will work alongside commissioned providers to identify ways to support people to be as independent as possible and recover from crises quickly – reducing the need for ongoing additional 1:1 or 2:1 support. The goal will be to promote people's independence, reducing their need for additional support, and where appropriate, enabling them to return home.

Moving and Handling Coordinators will be deployed to support people who are accessing additional 2:1 care by exploring less-restrictive alternative approaches, such as using hoists, equipment, and positive behavioural approaches. This ensures that requests are thoroughly reviewed by a multi-disciplinary team as quickly as possible, considering all support options available, and reducing need for long-term increases.

For people who still require additional support, timely review dates will be set to ensure the support remains appropriate to the person's needs. We aim to build on and enhance the skills of the provider workforce, ensuring that proportionate methods are applied consistently, confidently, and decisions regarding increased support are made collaboratively.

The proposal will encompass all requests for additional 1:1 or 2:1 support, addressing issues such as falls, challenging behaviour, and safeguarding risks. This approach will also apply to existing emergency or temporary placements. It aims to assist the person in returning home with the appropriate level of support needed to meet their requirements.

All the above improvements will include consideration of our assistive technology response and support service offer, and how this can support individuals in optimising their independence.

7 What evidence did you use to inform this proposal?

Front Door research undertaken by Ways to Wellness, commissioned by the Elders Council

- Research into the Torbay model showed that there is potential to prevent more people from needing social care by offering more services during their first contact with adult social care.
- Based on feedback received as part of our IIA 2024-25 'Transforming the Adult Social Care Front Door' published in November 2023, consultation feedback from the Elders Council suggested developing a well-resourced

Front Door offer that managed public contacts and provided guidance through the complexities of adult social care and other service information.

- We similarly acknowledge concerns raised in feedback as part of our IIA 2024-25 'Transforming the Adult Social Care Front Door' published in November 2023, about allocations to social workers and that this proposal would have an increased workload from people with long-term needs. However, by implementing a preventative approach in all our interventions with people as outlined within this proposal, we will ensure people with low-level, non-complex needs are supported quickly, and specialist resources will be better managed to support those most in need.

Learning from other areas:

- We have learned from the experience of other areas who have been able to further promote independence and reduce reliance on paid support by investing in their Reablement teams, including: Manchester, Sheffield, Leeds
- Learning from national pilots, including: NHS England's Intermediate Care Framework, NICE Intermediate Care guide

2021 Census

- There has been a 7% growth in the city's adult population since 2011, and a 15% increase in the number of people aged 65+.
- 7.5% of people said they were in bad or very bad health.
- 11.2% of people said their day-to-day activities were limited a little, while 9.7% of people said their day-to-day activities were limited a lot.
- 5.3% of people provide more than 19 hours of unpaid care per week.

Service Data

A **resolve pilot** was undertaken by the reablement service utilising waiting list information for people who had contacted, or been referred to, Social Care Direct and were on the resolve waiting list for social care allocation, of the 115 people considered in the remit of the initial pilot:

- 9% received a care package of support from reablement.
- 55% were signposted, or provided additional information or advice by the reablement service contact and did not require ongoing social care input; and
- 34% remained on the resolve list as requiring further social care input.

This provided evidence of the beneficial impact of a reablement approach in reducing the onwards requirement for social care input in several cases.

What are the financial impacts of the proposal?

Net revenue savings: £4.75 million

Net income: £0 million

Comments: During 2025/26, these proposals will realise net revenue savings of £4.75million against a net budget of £58 million.

The proposals are split as below:

- Promoting independence using equipment, assistive technology and digital £2.375 million
- Taking a preventative approach to all interactions with people with care and support needs, to promote independence, and ensure the most appropriate, cost effective and least restrictive care £2.375 million

8 What will be the impact of the proposal on employees?

Reduction in full-time equivalent posts: 0 FTE

% of workforce: 0%

Comments: while this proposal will reshape how we provide support at the Adult Social CarePoint, it does not relate to any workforce reductions.

Section C: Consultation

9 Engagement to help develop the proposal

Who we have engaged with to develop this proposal

Colleagues who work in adult social care, specifically those who work in Adult Social CarePoint, Adult Community, Hospital Social Work, and Information Now.

When and how we engaged

Across Spring and Summer 2024, we held a series of consultation sessions with Social Work colleagues on our Adult Social CarePoint. These were held at The Beacon, Westgate Road and attended by around 70 colleagues representing Social Care Direct, Adult Community and Hospital Social Work and Information Now.

The sessions were run in a participatory manner with an initial presentation about the proposed Adult Social CarePoint model followed by facilitated roundtable discussion. Additional discussions outside this forum also took place with Service Managers from Learning Disability and Autism, Mental Health, and Safeguarding Adults.

We have also engaged with colleagues to prototype this way of working.

Main issues raised

Colleagues viewed the proposals positively, emphasising the benefits of a multi-skilled team which would reduce and minimise hand-offs across teams. Broadening skill sets to include occupational therapy, moving and handling, and other skill sets

was welcomed. Access to housing and financial support, alongside other preventative measures, was highlighted as crucial.

Continued communication and shaping the model with feedback were welcomed.

Concerns included ensuring adequate resources in adult community teams and understanding how community team offerings might evolve with the new model.

10 Who will we engage with during the consultation

Who will we engage with during the consultation – adult social care users

People who use adult social care services in Newcastle.

When and how we will engage

Between 11 December 2024 – 15 January 2025 as part of the council's budget consultation process. We will also collaborate with people to co-design elements of our expanded reablement offer beyond the budget consultation process. We will draw upon our knowledge of people using this service to ensure we engage with them in ways that work best for them – for example, ensuring consultation materials are available in large print and other formats as required, providing non-digital ways to engage, and asking local support groups (such as the Elders Council) to help us reach their customers, clients and members who use our services.

Who will we engage with during the consultation – carers

Unpaid Carers in Newcastle.

When / how: between December 2024 – January 2025 as part of the council's budget consultation process. We will also work with unpaid carers to co-design elements of our reablement offer beyond the budget consultation process. As above, we will do this using a variety of communication and engagement channels to support carers to take part.

Who will we engage with during the consultation – colleagues

Colleagues who work in adult social care, specifically those who work in Adult Social CarePoint, and Information Now.

When / how: between 11 December 2024 – 15 January 2025 as part of the council's budget consultation process. We will continue to collaborate with colleagues to co-design elements of the reablement offer beyond the budget consultation process.

Who will we engage with during the consultation – voluntary and community sector (VCS) organisations

Who we want to engage with during consultation: voluntary and community sector organisations with an interest in adult social care. This includes, but is not limited to, the Elders Council, Disability North and Newcastle Carers.

When / how: between 11 December 2024 – 15 January 2025 as part of the council's budget consultation process. We will also work with local organisations to co-design elements of the reablement offer beyond the budget consultation process.

11 Feedback from the consultation process

Who provided feedback during the consultation

To be completed post consultation

When and how did we engage

To be completed post consultation

Main issues raised

To be completed post consultation

Section D: Impact assessment

In this section you will find details of any actual or potential negative impacts and benefits we have identified for this proposal. You will also find information about actions we will take to mitigate any potential disadvantage.

We have assessed the impact of this proposal for people with characteristics protected by the Equality Act 2010 and other areas where there could be an impact

Age

Type of impact

Potential benefit

Impact

Our proposal seeks to strengthen connections between people and their neighbourhoods for adults of all ages. It is anticipated most people will benefit from a shift from reliance of paid carer support to one that gives them greater flexibility in their social care offer and inclusion in their community. People seeking adult social care support for the first time through our reablement offer are more likely to be older adults. By enhancing preventative support offer it is anticipated that more adults will

be supported to remain well for longer. Enhancing the response rate and the skill set of staff providing that response can address earlier developing issues relating to, for example falls and loss of confidence this delaying the need for long term support and potentially reducing the risk for accidental injury that might result in hospital admission.

How we will remove or reduce the impact

Not Applicable

Type of impact

Potential disadvantage

Detail of impact

Change can bring about anxiety and may translate into worsening perceptions of the care and support available or provided. People have been used to receiving a traditional service and may feel that this model is not giving them what they think they should have. People with existing packages may feel they are “losing a service” by becoming more independent.

How will this be addressed or mitigated?

We will support people to understand the benefits of our new ways of working. We will provide assurance that we will continue to meet eligible care needs whilst also seeking to maximise a person’s opportunities, identifying their own local support networks to highlight the strengths, capacity, and knowledge of all involved to better meet individual outcomes. We will collaborate with older people in the city, and representative forums, to co-design elements of the service and ensure considerate communication for this cohort, who may be more impacted by this perception. We will also use age-friendly principles in the design.

Disability

Type of impact

Potential benefit

Impact

People seeking adult social care support for the first time are more likely to have a disability. By enhancing the preventative support offer we anticipate that more adults will remain independent for longer. The aim is also to enable people to live in their own home for as long as possible.

How we will remove or reduce the impact

We will collaborate with disabled people in the city to co-design elements of the service. We will also use disability friendly principles in the design. All support is individualised to a person's needs.

Type of impact

Potential disadvantage

Detail of impact

Change can bring about anxiety and may translate into worsening perceptions of the care and support available or provided. People have been used to receiving a traditional service and may feel that this model is not giving them what they think they should have. People with existing packages may feel they are "losing a service" by becoming more independent.

How will this be addressed or mitigated?

We will support people to understand the benefits of our new ways of working. We will provide assurance that we will continue to meet eligible care needs whilst also seeking to maximise a person's opportunities, identifying their own local support networks to highlight the strengths, capacity, and knowledge of all involved to better meet individual outcomes.

Gender reassignment

Type of impact

No impact

Impact

Not Applicable

How we will remove or reduce the impact

Not Applicable

Marriage and civil partnerships

Type of impact

No impact

Impact

Not Applicable

How we will remove or reduce impact

Not Applicable

Pregnancy and maternity

Type of impact

No impact

Impact

Not Applicable

How we will remove or reduce impact

Not Applicable

Race and ethnicity

Type of impact

No impact.

Impact

Not Applicable

How we will remove or reduce impact

Not Applicable

Religion or belief

Type of impact

No impact

Impact

Not Applicable

How we will remove or reduce impact

Not Applicable

Sex

Type of impact

No impact

Impact

Not Applicable

How we will remove or reduce impact

Not Applicable

Sexual orientation

Type of impact

No impact.

Impact

Not Applicable

How we will remove or reduce impact

Not Applicable

Other potential impacts

We believe that it is important to consider whether changes to our policies, services or functions could have other impacts on people that are not covered by the Equality Act.

A part of our assessments we also consider whether proposed changes could have actual or potential impacts relating to socio-economic issues, businesses, geography, community cohesion, community safety, the environment and health and wellbeing.

Carers

Type of impact

Potential benefit

Impact

Carers of all ages are likely to contact the Adult Social CarePoint. This proposal can support and enable a more personalised preventative reablement service that better balances statutory paid support that promotes the voice of the person alongside the care and support provided by (unpaid) carers, thus enabling them to maintain/access employment, social activities within or without their chosen communities. It also offers the opportunity to provide bespoke information and advice around preventative services and support available for carers much earlier on in the process. This will promote independence for both carers and the cared for person.

How we will remove or reduce the impact

Not applicable.

Type of impact

Potential disadvantage

Detail of impact

Change and a focus building upon and developing reablement approaches may be perceived as focusing greater reliance and responsibility on the caring role. People have been used to receiving a traditional service and may feel that this model is not giving them what they think they should have. People with existing packages may feel they are “losing a service” by becoming more independent.

How will this be addressed or mitigated?

We will support people to understand the benefits of our approach, co-designing with the people that use them and their carers. We will provide assurance that we will continue to meet eligible care needs whilst also seeking to maximise a person’s opportunities, identifying their own local support networks to highlight the strengths, capacity, and knowledge of all involved to better meet individual outcomes. As above we will also be able to have a much more detailed conversation with carers earlier on in their contact with Adult Social Care. We are still committed to commissioning carers support services going forwards – at the moment these are provided by Newcastle Carers and British Red Cross.

Socio-economic impacts

Type of impact

Potential benefit

Detail of impact

Our proposal seeks to strengthen connections between people, carers, and their chosen community, identifying what is strong in a person’s life, how they might better

connect to their communities, combine efforts, knowledge, and resources in new and innovative ways. By working together in this reablement way our aim is to reduce inequality and mitigate negative socio-economic impacts for people and their carers. Social care is means tested and chargeable, moving people to independence from formal paid care reduces expenditure for that individual.

How will this be addressed or mitigated?

Not Applicable

Businesses

Type of impact

Potential benefit

Detail of impact

Our proposal seeks to strengthen connections between people, carers, and their chosen communities, combining efforts, knowledge, and resources in new and innovative ways. We will continue to explore ways to strengthen and support people, organisations, and associations within our communities being an active partner within our collaborative partnerships to support people's opportunities within the local economy including the up skilling of people working within the local social care sector.

How will this be addressed or mitigated?

Not Applicable

Type of impact

Potential disadvantage

Detail of impact

As the aim of the proposal is to reduce net expenditure on commissioned services there may be a perception of reducing opportunity of growth for businesses operating within Newcastle for adult social care services. The model includes Authority staff working alongside people already having services from commissioned providers.

How will this be addressed or mitigated?

We will work with businesses to understand our reablement model and how this may require a change to how they will be required to respond to support people where long-term services are required following this short-term intervention. We will also

work with the sector to understand where there is opportunity to offer support in the shared training or up-skilling of people working in social care service delivery. The reason our staff are working into other provision is to enhance our understanding of need through assessment and review.

Geography

Type of impact

Potential benefit

Detail of impact

Our proposal seeks to strengthen connections between people, their carers, and their chosen community that will better support people within their own neighbourhood geography and provide creative and flexible solutions to their support needs.

How will this be addressed or mitigated?

Not Applicable

Type of impact

Potential disadvantage

Detail of impact

Different areas of the city have different assets which may lead to neighbourhoods not being able to offer or respond to equality of support in their area.

How will this be addressed or mitigated?

We will support people and local communities to understand the benefits to assessing support options available, co-designing with the people that use them. We will provide assurance that we will continue to meet eligible care needs whilst also seeking to maximise a person's opportunities, identifying their own local support networks to highlight the strengths, capacity, and knowledge of all involved to better meet individual outcomes in a way that works in their chosen community. We will work with communities and community groups to develop community assets where we identify gaps in support.

Community cohesion

Type of impact

Potential benefit

Detail of impact

Our proposal seeks to strengthen connections between people and their neighbourhoods, combining efforts, knowledge, and resources in new and innovative ways. It will seek to build community capacity, support, and strengthen people's own networks and wider links and networks within their local communities.

How will this be addressed or mitigated?

Not Applicable

Community safety

Type of impact

Potential benefit

Detail of impact

Our proposal seeks to strengthen connections between people, their carers, and their neighbourhoods, combining efforts, knowledge, and resources in new and innovative ways. It will seek to consider paid support, strength in people's own networks, and wider links and networks within their local communities.

How will this be addressed or mitigated?

Not Applicable

Type of impact

Potential disadvantage

Detail of impact

Change and a focus building upon and developing 'community-centred' approaches may be perceived as creating vulnerability to areas with problems of Anti-Social Behaviour or crime which can bring about anxiety and may translate into worsening perceptions of the care and support provided.

How will this be addressed or mitigated?

We will support people, their carers, and local communities to understand the benefits of our approach to assessing support options available, co-designing with the people that use them. We will provide assurance that we will continue to meet eligible care needs whilst also seeking to maximise a person's opportunities, identifying their own local support networks to highlight the strengths, capacity, and

knowledge of all involved to better meet individual outcomes in a way that works in their chosen community.

Public health

Type of impact

Potential benefit

Impact

Our proposal will adopt an approach which seeks to strengthen connections between people, their carers, and their neighbourhoods, delivering services that will better support people within their own neighbourhood and provide creative and flexible solutions in support of their health and wellbeing at an earlier stage. In so doing we will address with our communities some of those wider determinants of ill health, such as loneliness, social isolation, with the aim for people to be less reliant on formal care which may help people to remain well for longer, improving overall public health and wellbeing. Keeping people well and independent for longer improves the overall health and wellbeing of people in the city and starts to tackle health inequalities.

How we will remove or reduce the impact

Not Applicable

Climate change and environment

Type of impact

Potential benefit

Detail of impact

Our proposal seeks to emphasise local neighbourhood working where practicable within our working practices. As a result, it should negate unnecessary travel and associated mileage and fuel by social care and partner employees/volunteers.

Our proposal similarly makes sure we offer people the right support, at the right time and in the right place. Promoting key services to include, but not limited, to our energy efficiency services will help people to stay warmer and healthier as they regain their independence so that they can go on living well in their own homes.

How will this be addressed or mitigated?

Not Applicable