

GOOD HEALTH SELECT COMMITTEE 6TH JULY 2005

REPORT OF THE DIRECTOR OF SOCIAL SERVICES

REPORT ON THE ANNUAL REVIEW OF THE SOCIAL SERVICES EQUALITY AND DIVERSITY ACTION PLAN 2004/05

1.0 PURPOSE OF THE REPORT

- 1.1 To inform the Good Health Select Committee, of the achievements and progress made against the Directorate of Social Services' Equality and Diversity Action Plan 2004/05

2.0 BACKGROUND

- 2.1 Each year the Social Services Directorate, along with other directorates within the Authority, prepares an Equality and Diversity Action Plan. The SSD Action Plan for this year was considered by this Select Committee in April 2005
- 2.2 In line with revised guidance to Directorates issued in Jan 2004 the annual review of last year's (2004/05) Action Plan has taken place in the first quarter of 2005/06 and the attached report brings the findings of the review to this Committee's attention.
- 2.3 The equality and diversity agenda has relevance both to the way the organisation conducts its business and to the services it provides.

3.0 PROPOSAL

- 3.1 That the Select Committee note and comment on the review findings on the implementation of the Social Services Directorate's Equality and Diversity Action Plan 2004/05

4.0 FINANCE

- 4.1 The implementation of this action plan was contained within current resources

5.0 LAW

The Council may do anything incidental to conducive to or which is calculated to facilitate the discharge of the Councils functions under section 111 of the Local Government Act 1972. The Councils Social Services function is discharged under a number Statutes including the National Assistance Act 1948 and the Children Act 1989.

6.0 EQUAL OPPORTUNITIES

- 6.1 The implementation of equality and diversity action plans presented to the Select Committee is expected to have promoted the interests of all disadvantaged groups who are stakeholders in the Social Services Directorate's business. Any realisation of the ambitions contained within the plan contributed to achieving fairer access to services and reducing social exclusion.

7.0 RECOMMENDATION

- 7.1 That the Select Committee act on the proposal contained at 3.1



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ANNUAL REPORT – DIVERSITY AND EQUALITY ACTION PLAN 2004/05

The Directorate is responsible for the assessment, provision and arrangements for social care services to a wide range of service users and carers, and employs over 2200 staff in four divisions: Older People & Physical Disability, Learning Disability & Mental Health, Children & Families and Business Services. The Directorate's aim is to ensure the best possible social care services for the people of Dudley Borough to protect and support those most in need. In pursuit of this aim the Directorate will: -

- Give people a say in how services are delivered
- Value the work and contribution of staff and carers
- Work in partnership with other agencies and community groups
- Treat people fairly

The Directorate of Social Services fully supports the Council's Equality and Diversity Policy and this is demonstrated in the aims of the Directorate Strategic Plan and Divisional Business Plans.

The Directorate recognises the key role that equality and diversity initiatives play in reducing social exclusion and ensuring fair access to services. The work of the Directorate of Social Services is rooted in the values of inclusivity, social inclusion and empowerment.

KEY FACTS

Staffing

Workforce Profile

Period	Gender	<u>White Groups</u>		<u>Ethnic Minority Groups</u>		Total
		FT	PT	FT	PT	
as at March 04	Female	489 (8D)	1245 (4D)	67	71	1872
	Male	175 (5D)	78	24 (1D)	10	287
as at March 05	Female	541 (9D)	129 (5D)	73	64	1968
	Male	191 (6D)	75 (2D)	41	10	317

Notes: FT – Full-time; PT – Part-time; D – Employees with disabilities

As at March 05 total no. of female employees: **1968**

No. of employees who have identified themselves as disabled: **22**

No. of employees who have identified themselves as of ethnic minority: **188**

Period	% Female	% POA and above – Female	% Ethnic Minority	% POA and Above – Ethnic	% with a Disability	% POA and Above with a Disability
as at March 04	86.7	73	8	13	0.8	2.2
as at March 05	86.1	72	8.1	13.4	1.0	2.0

Activity

Some principal facts about our activity in the context of most recent census information are:

Children & Families

National Census 2001 - 10.74% of Dudley's population aged under 18 from BME Groups

During the period April 2004 to March 2005 :

- 12% of contacts to SSD C&F related to children from BME Groups
- 12.1% of new referrals to C&F related to children from BME Groups
- 11.8% Children's assessments completed by C&F were regarding children from BME Groups
- 14% of new services provided by C&F related to children from BME Groups

As at 31st March 2005 :

- 6.8% of children on the Child Protection Register were from BME Groups
- 14% of looked after children were from BME Groups

*Children in Need Census as at Month 2005 - total children**

- Total With Disability 25%
- Autistic 36%
- Learning Disability 17.8%
- Hearing Impaired 1.9%
- Visual Impaired 2.1%

Swift as at 25/05/2005 - total 1385 children in need (open referral aged under 18 years)*

- Total With Disability 20.3%
- Hearing Impaired 1.0%
- N2 Disability 16.1%
- Physical Disability 12.6%
- Visual Impaired 1.0%

*Please note some children may fall into more than 1 category

Adult Services

National Census 2001 - 6.3% of Dudley's population from BME groups

During the period 01/04/2004 to 31/03/2005:

- 10.1% of contacts to SSD Adult Teams related to Adults from BME groups
- 6.0% of new referrals related to Adults from BME groups
- 4.8% of clients with completed assessments related to Adults from BME groups
- 4.6% of new services related to Adults from BME groups

As at the 31/03/2005

- 6.2% of open referrals related to Adults from BME groups
- 5.4% of open services related to Adults from BME groups

Note: The drop in percentage between contacts and referrals/assessments & services is due to the fact that 45.1% of contacts from BME adults have an outcome of advice & guidance given.

- *National Census 2001 - In Dudley, 5.3% of all economically inactive 16-74 year olds are permanently sick or disabled. This is the same percentage as the England average, but lower than the West Midlands average.*
- *Limiting Long Term Illness - This question recorded whether a person perceives that they have a long term illness, health problems or disability which limits their daily activities or the work they can do, including problems due to old age:*
 - *19.1% of the total population of Dudley Borough consider themselves to be suffering from a limiting long-term illness.*

There were a total of 11,414 clients (aged 18+) receiving a service during 2004/05 of these:

- 75% were Physically Disabled
- 14% were Mental Health
- 7% were Learning Disabled
- 4% were Other

Of those clients receiving a community based service (9966) i.e. helped to live at home (excludes residential and nursing)

- 77% were Physically Disabled
- 12% were Mental Health
- 8% were Learning Disabled
- 3% were Other

There were a total of 1455 clients supported in residential and nursing care as at 31/3/2005, of these,

- 57.2% were Physically Disabled

- 23.7% were Mental Health
- 18.8% were Learning Disabled
- 0.2% were Other

A review of Mental Health Services for BME communities was completed in 2003. Following consultation with relevant groups the BME forum (now a sub-group of the Local Implementation Team) has developed an Action Plan. The Mental Health Service is now an integrated Mental Health Service – integrating health and social care provision. Beacon & Castle PCT are the lead agency and social care staff are seconded to the service. Birmingham and the Black Country NHS have been successful in becoming one of 17 pilot BME Focused Implementation sites nationally for delivering Race Equality in Mental Health. Beacon & Castle PCT, as the lead for the integrated Mental Health Service are involving themselves fully in this initiative, using the 3 building blocks

- More appropriate in responsive services
- Community engagement
- Better information

RACE EQUALITY SCHEME (RES)

The Impact Assessments for those policies that were identified as priority have been undertaken. Where an impact assessment has identified any adverse effect of policies, the relevant areas of work have been prioritized in 2005-06 Year 3 RES action plan. Outcomes of assessment have also informed the Directorate's Equality & Diversity action plan for 2005/06.

A programme of consultation has been undertaken with Heads of Service throughout the 3 years of the RES. In this last year the Directorate, along with the rest of the Council has reviewed its scheme and has published its list of policies to be impact assessed for the coming year as follows:

- Access to Social Care qualification (post entry) and NVQ Programme
- Children with Disabilities Team
- Permanent Placements Team
- Domiciliary Care – Statement of Purpose/Service User Guide
- Assessment and Care Management Policy (Adults)
- Residential Services (Learning Disability)

The dialogue with informed parties, both within and beyond the Directorate, will be maintained through contact with community groups, members of the public, service users and carers.

Most of the senior managers along with the members of the Directorate Equality and Diversity Steering Group have received training on the RES processes. This has supported the effective undertaking of impact assessment work. Impact assessments are not a precise science. The process is best tackled by assembling the right data, consulting with relevant parties, and then gathering together as managers to interrogate the data, making an assessment of what is happening and identifying strategies to address inequalities.

Successful implementation of the Race Equality Scheme and Equality and Diversity Action Plan 2005-06 will continue to be a priority for the Directorate.

Directorate – Progress Report on the Equality and Diversity Action Plan for 2004/05

Objective (and lead officer)	Planned outcome/performance indicator	Progress/final outcome
<p>Workforce Profile – Make progress in securing greater match at all levels in the organisation between the makeup of the local community and the makeup of the Directorate’s workforce <i>Lead Officer – Head of Human Resources</i></p>	<p>Representation of black and minority ethnic staff is increased by 0.5% by April 2005</p> <p>Three targeted recruitment campaigns run during the year</p> <p>Pilot (to include BME staff as advisers on selection panels) will be run and evaluated during the year</p>	<p>The workforce profile has remained relatively stable during the year, at between 7.7% & 7.4% of staff from black & minority ethnic groups. This compares favourably with the borough profile. However we failed to achieve our target of a 0.5% increase of BME representation. We contributed to and participated in recruitment activities including a Fair in the borough coordinated by DREC, as well as other generic events. We publicised the directorate as an equal opportunities employer and service provider on Radio Ramadan. We are further reviewing the ethnic composition of our recruitment panels.</p>
<p>Equality Standard: To participate in the Corporate Equality Standard activity assisting the Authority to develop a toolkit to support the eventual achievement of the Equality Standard (initially level 2) <i>Lead Officer – Assistant Director – Business Services</i></p>	<p>Directorate of Social Services as part of the Council, to progress towards achievement of Equality Standard Level 2</p>	<p>We had expected to pilot some assessment activity relating to the Equality Standard as part of corporate developments. However this did not take place, due to a change in corporate policy. We are currently undertaking assessment activity to evidence our performance against Level 2 of the standard. Appointment of a Policy Officer – Diversity and Equality, with a particular focus on gender and disability, has allowed us to give this more substantial attention.</p>

<p>Race Equality Scheme: To achieve full implementation of Race Equality Scheme Programme <i>Lead Officer – Head Of Race Equality and Communications</i></p>	<p>Appropriate services improved through completion of Impact Assessments. Potential for service improvement through further development of programme</p>	<p>RES Year 2 Reviews completed, required actions identified and implemented</p> <p>RES Year 3 Review completed, required actions identified to be implemented 2005/06</p> <p>List of Policies & Functions of Revised Race Equality Scheme Year 2005-08 in place as part of Corporate Scheme. Increased capacity identified to achieve effective progress of 05/06 impact assessments</p> <p>Service improvements include: -</p> <ul style="list-style-type: none"> • Improved availability of translated information into community languages • improved access to interpreters in Asian Languages and BSL. • Equality and Diversity Training made mandatory for managers • Increased access for BME communities to meals on wheels.
<p>BVPI2b – improve quality & accuracy of information to support the achievement of 50% Corporate score against BVPI2b – Duty to promote race equality <i>Lead Officer – Head Of Human Resources/ Head of Information and Support Services</i></p>	<p>Improved availability of information – demonstrable evidence and achievements against BVPI2B</p>	<ul style="list-style-type: none"> • An information analyst (HR management information) is in post and data quality improved – minimal gaps in ethnicity information re staff. • Commended by CSCI for prompt publication of Race Relations Act information with clear signposting to the information on our web-site. • In 03/04 the score achieved was 57.9%. We have a target figure of 63.2% Corporately set for 04/05.

<p>Disability Discrimination: To evaluate the likely implications and progress preparations for the introduction of the Disability Discrimination Act</p> <p><i>Lead Officer – Head of Physical Disability Services</i></p>	<p>Directorate prepared for the introduction of the Act</p>	<p>Audit completed and report presented to DMT. Our progress on this objective has been contingent on the corporate lead. Projects funded in 04/05 have included disabled parking at New Bradley Hall and Hearing Induction loop at reception of Castle Court, Greystone Passage and Kahan Court</p>
<p>Equality and Diversity Training: To deliver the required E + D training to staff and managers in the Directorate</p> <p><i>Lead Officer – Training and Development Manager (HR)</i></p>	<p>100% of planned programmes are available. 80% of booked places are taken up</p>	<p>Schedule of Dates published, and programme reviewed. 100% of programmes were offered, 27 courses organised but 4 cancelled due to poor take-up or attendance, therefore 23 courses ran. Average 76% of places on staff courses filled (higher numbers applied) Average 57% of places on managers courses filled</p>

<p>Cultural Awareness Training: To deliver required Cultural Awareness Training to teams/ units in the Directorate <i>Lead Officer – Head Of Race Equality and Communications</i></p>	<p>100% of planned programmes are available. 80% of booked places are taken up</p>	<p>Last year 2004 Cultural Awareness Training – approx 20 training sessions delivered (average attendance per session – 14)</p> <p>Cultural Awareness Review is underway to develop a programme to meet the needs of front line staff and managers at different levels.</p> <p>Evaluation of training on-going to ensure the needs of frontline staff are being met.</p>
<p>Cultural Competence Training: To develop and pilot a specific training module for cultural competence <i>Lead Officer – Training and Development Manager (HR)</i></p>	<p>Service user questionnaire indicates satisfaction with appropriateness of service delivery</p>	<p>Funding to support Cultural Competency external provision for training for care at home staff. Between Dec 04 and end of March 05 there were 12 courses that ran with 151 staff having attended. Evaluation sheets indicate substantial satisfaction by participants with the course.</p> <p>Project deferred in house because of staff vacancies</p>

<p>Translation & Interpretation: 1) To establish appropriate quality assurance processes for the translation service</p> <p>2) To update and upgrade the computers and software used by the translators in the Race Equality and Communication Service</p> <p>3) To maintain a sessional interpreters/translators register</p> <p><i>Lead Officer – Head Of Race Equality and Communication Services</i></p>	<p>Improved quality of translation and increased access to social care services. More efficient interpretation and translation service in place.</p>	<p>(1) Translation Quality Assurance Panel established through external Agency and providing active and effective quality and assessment of translation work.</p> <p>(2) New hardware & software installed. Staff trained and new facilities now being used. This has enhanced both processes and outputs</p> <p>(3) Appointment of Team Manager has enabled the start of a review of the interpreters/translators register and redesign of the business processes to support the register</p>
<p>Partnership Working: To develop and maintain cross agency dialogue to ensure that joint planning and review processes take appropriate account of equality and diversity legislative and good practice requirements (revised DIMP objective)</p> <p><i>Lead Officer – AD Business Services</i></p>	<p>Improved partnership working in regard to Equality and Diversity</p>	<p>Further dialogue has taken place and a report presented to the Health & Well-being Partnership. The AD Business Services has been invited, as a result of the activity, to join the local NHS Diversity & Equality Group. The same AD is also a member of the Beacon & Castle 'Diversity Matters Lead Group'</p>

<p>Consultation: To secure an effective relationship with Community Representatives Panel <i>Lead Officer – A.D. Business Services</i></p>	<p>Equality and Diversity informed by contact with the Community Reps. Panel</p>	<p>Have had 2 face-to-face meetings with the Community Reps Panel as planned.</p> <p>At the first the Directorate Management Team gave an overview of the work of the Directorate and some of the challenges it faces and the Panel advised of some of the issues they were concerned about e.g. what services were provided to Brain Injured People.</p> <p>At the second we advised the Panel of the emerging objectives for our Equality & Diversity Action Plan 2005/06 and received their comments for consideration</p>
<p>Commissioning & Planning: To review action planning for commissioning and planning for services within black and minority ethnic communities (D.I.M.P.) <i>Lead Officer – Head of Commissioning</i></p>	<p>Increased access for black and minority ethnic communities</p>	<p>New funding to support BME communities services in 04/05 include: Yemeni Luncheon Club; Additional CAB session in Lye; New Testament Welfare Association Day Care; Funding of African Caribbean Community Development Worker and Day Care Co-ordinator Lye; Halal / Vegetarian meals on wheels pilot; Some infra-structure funding to Asian Elders Group in Halesowen</p>
<p>Carers: To review the “We Care Too” document (working with black carers) and development/ implementation of improvement action plan <i>Lead Officer – Carers Coordinator</i></p>	<p>Action Plan being progressed to meet gaps and secure improvement</p>	<p>Benefits mapping exercise carried out for Link Age Steering Group identifying availability of advice provision for people from all communities and gaps to inform future planning of advice for older people. Link Age under the leadership of the AD for Older People & Physical Disabilities is looking at ways of addressing gap identified in reference to Bangladeshi, Pakistani and Yemeni communities.</p>

Carers (Cont.)

Information fact sheets for carers in 2004/05 were the Guides to Leisure, Support Group and Employment and are translated into 6 community languages, put onto website community and available on tape. A fact sheet on carer's assessments is being prepared. The fact sheets are used by community advisors as a resource. There is much evidence that many carers from these communities prefer to get their information from such sources – the fact sheets help to ensure that the advisers themselves have the best information available.

Slot in Radio Ramadan to explain about Carers Network. Specific fact sheet for Asian carers was prepared for this event

Strong links with carers groups including Black Carers Group, Ehsas (Empathy) has resulted in a number of successful applications for direct payments for carers

Established link with Penderels and Ehsas to encourage future take up of all D.P.S.

Targetting of BME Groups via SSD development workers has led to several groups being awarded grants from the carers grant to provide carers services including: - Asian Women's Centre, Ehsas, Karibu and Oscar.

<p>Housing With Care: To support the development of the Extra Care Sheltered Housing Scheme/ Service for black and minority ethnic elders <i>Lead Officer – Head of Older People’s Services and Head of Commissioning</i></p>	<p>Improved service available for black and minority ethnic elders</p>	<p>Henry Court now open in Charlton Street – 38 apartments providing sheltered housing to primarily, but not exclusively, African Caribbean elders. Henry Court also accommodates the African Caribbean Befriending Service day care (2 days) and their catering facilities.</p>
<p>Vegetarian & Halal meals <i>Lead Officer – Head of Commissioning</i></p>	<p>More service users accessing culturally appropriate meals on wheels from ethnic minority communities</p>	<p>‘Meals on Wheels’ pilot scheme to be consolidated through tendering process. Meal provision to approximately 140 service users per week, some 346 meals in total.</p>
<p>LPSA increase no. of Direct Payments and reduce delay for adaptations and collection of equipment <i>Lead Officer – Head of Physical Disabilities</i></p>	<p>100 People receiving a DP by December 2006. To reduce wait</p>	<p>All targets for LPSA are being met. Targets are being regularly monitored</p> <p>Delay for a stair-lift decreased from 12 months to 6 months.</p> <p>Number of service users in receipt of Direct Payments increased during from 20+ to over 50</p> <p>Number of additional pieces of community equipment collected increased from 1168 to 1726</p>

<p>Improvement of Mental Health Services for the BME Communities: To progress the improvement plan from the review of Mental Health Services for BME <i>Lead Officer – Acting Head of Mental Health Services</i></p>	<p>Specialist posts in place to promote improvement</p> <p>Improved service in the community</p> <p>Process in place to take forward implementation of further development</p>	<p>Due to the lack of success in appointing African-Caribbean social worker, funds were diverted to Rethink. The process of recruiting to the Community Development worker post(s) is in hand and may reflect developments with regard to the transcultural team</p> <p>The appointment of the Community Development Worker may enable the facilitation of this process as a result of their remit to identify, engage with and foster such services</p> <p>Work is on-going re: auditing uptake of services by BME groups and with regard to the ethnic representation of the M.H. workforce. Research is being undertaken re: accessibility and specification of the availability of appropriate leaflets, information sheets, web-sites, translation services etc. and staff training in cultural awareness</p> <p>The BME core group for mental health has been established with representatives of social care, health and voluntary groups represented. Proposals and action plans arising from this group inform both the larger BME forum for mental health and the business group for mental health services redesign.</p>
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<p>Enhancement of Learning Disability Services: To implement the Valuing People 'Learning Disability and Ethnicity Framework' <i>Lead Officer – Head of Learning Disability Service</i></p>	<p>Improved accessibility of advocacy to people with communication difficulties Trained volunteers from BME Community to be recruited</p> <p>People with learning disability from BME communities receive training to become self advocates</p> <p>Evaluate effectiveness of transition process for young people from BME communities. Make recommendations for improvements</p> <p>Lead on behalf of LDPB Direct input to planning process</p> <p>Identification of unmet need</p> <p>More people receiving support and having access to services</p>	<p>Dudley Advocacy have recruited a volunteer Advocacy Coordinator to support people with learning disabilities from minority communities. The project has begun to receive referrals for advocacy support particularly people with communication difficulties. Two volunteers from minority communities have completed advocacy training</p> <p>Apna group members meet regularly and discuss a range of issues. With the support of the development worker members have access to mainstream leisure activities. Several Apna members secured one off (service user) Direct Payments to help pay for Apna leisure activities.</p> <p>The University of Birmingham has been commissioned to undertake research into the needs of young Muslims in transition to adulthood. The study will evaluate service transition processes, and make recommendations. A multi agency steering group is supporting this initiative.</p> <p>An ethnicity group has been formed with two representatives of the Learning Disability Partnership Board in attendance with the Chair being the Head of Children with Disability Services. The group is considering service planning issues with regard to transition. In May 2005 the Learning Disability Partnership Board will be approached to confirm support for this group as a sub group of the board.</p> <p>An initial mapping exercise has identified the number of young people with learning disabilities in minority communities including the incidence within specific groups. Services were promoted in more accessible formats. The Directorate and the local NHS aired</p>
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	Culturally aware service delivery To have available training resource for use with staff and self advocates	service information on Radio Ramadan Dudley in a number of languages. A draft guide for staff on cultural awareness has been produced
Domestic Violence: To undertake a needs analysis in terms of domestic violence for children in need <i>Lead Officer – Assistant Director Children & Families</i>	All children victims of DV within the home referred to and assessed for services by SSD and partners	Awaiting progress reports from the CEs Community Safety Section and Dudley/Halesowen Refuges regarding progress with monitoring systems, but 3rd Children in Need census now complete so analysis can begin.
Asylum Seekers: To establish a protocol with the Asylum Seekers team to provide a service to unaccompanied asylum seeking children <i>Lead Officer – Head of Service Care Management North</i>	Improve the quality of service to asylum seekers and refugees by locating all such services within the AST where a specialist response can be provided	Work now reaching final stages and draft protocol has continued as a 'working document'. Relations between AST and SSD have been identified as significantly improved as a result and therefore agreement in place to have the protocol confirmed by Summer 2005.
Children with Disabilities: To develop, consult and implement a multi agency strategy for children with disabilities <i>Lead Officer – Head of Service, Children with Disabilities</i>	Strategy in place and services being delivered accordingly	Strategy in place, and services being delivered accordingly. Work has commenced to further review service provision to produce a detailed action plan. Consultation has included 'have your say day', and next stage of consultation has been fully planned and will be completed
Recruitment: To appoint a specialist worker for deaf/blind people to develop a new service for people with dual sensory impairments <i>Lead Officer – Head of Disability Services</i>	Staff aware of needs of deaf/ blind people, special services available to meet the needs. Increased independence of service users	Specialist Worker left the Authority during 2004/05. However we will be using the budget to purchase services from a specialist provider.

<p>Workforce: To review workforce training needs in relation to Children and Families Division <i>Lead Officer – A.D.Children and Families</i></p>	<p>Training needs identified and met on a routine basis. Staff culturally competent and users better served</p>	<p>Training needs analysis not yet completed - Aim to complete October 2005. This has been delayed in part because of introduction of new HR system. However if new system is successfully implemented the quality of the review will be enhanced.</p> <p>Learning to be fed into directorate strategy</p>
<p>Support and Dialogue: To promote the development and maintenance of appropriate support forums for staff and managers to progress the Equality and Diversity Agenda <i>Lead Officer – Head of Human Resources and Head of Race Equality and Communications</i></p>	<p>Nomination process results in one manager being accepted onto programme</p> <p>2 staff have undertaken shadowing</p> <p>2 staff are receiving mentoring</p>	<p>Black Manager supported in application to IDEA Black Managers' Development Programme – not accepted by IDEA. Directorate staff made significant contribution to development and launch of Corporate Black Workers' Group. Social Services Group relaunched</p>

RACE EQUALITY SCHEME REVIEW REPORT YEAR 3 – ACTION PLAN

Directorate: Social Services

Division: Learning Disability (Richard Carter)

Division	<u>Policy</u>	Lead Officer	Issues highlighted through Impact Assessment Review Report 3		First review action date	Second review action date	Timescale to address these issues
Learning Disability	Day Care Services with Learning Disability (Adults)	Sue Close Ext 5830	1 2 3 4 5	Do not use census data Language barriers to access still exist Low uptake of services by BME communities Increase partnership with BME groups to promote service access Links with this faith communities need to be strengthened	21/12/04	28/04/05	March 2006
Learning Disability	Residential Homes for Learning Disability	Paul White Ext 5860	1 2 3 4 5	Low uptake of services by BME groups. There are some barriers to Asian Elders using residential care. Some people want a separate provision to meet their needs. Under-representation of BME staff How are the views of BME groups taken into account and any action arising from it Monitor the number of placements in residential and day care of BME service users People with learning difficulties are living longer which has implications for planning for residential homes to meet their future needs	21/12/04	28/04/05	March 2006

RACE EQUALITY SCHEME REVIEW REPORT YEAR 3 – ACTION PLAN**Directorate: Social Services****Division: Children & Families (Pauline Sharratt)**

Division	Policy/Function to be assessed	Lead Officer	Issues highlighted through Impact Assessment Review Report 3	First review action date	Second review action date	Timescale to address these issues
Children & Families	1. Placements for Children with Family and Support Services	John Donnelly Ext 5166	1. BME children asylum seekers and refugees, travellers appear to be under-represented 2. Census data is not used 3. Policies are needed to be updated in the light of second and third generation Asians and their children. 4. Unclear whether access/outcomes are monitored for Equality & Diversity Group. 5. It is not clear if there is any recognition of how the aim might be perceived by different groups and how the views of BME groups are taken into account and any action arising from this. 6. All black children should have a culturally sensitive placement plan	21/12/04	26/4/05	March 2006
Children & Families	2. Leaving Care Children and Young People	Cecilia Hanson Ext 7670	1. Under-representation of Asian Young People 2. Under-resourcing of hostels for Asian teenage girls 3. Unclear response as potential adverse impact 4. Language barriers to access still exist 5. Young people who are care leavers and become single parents face disadvantage 6. Age limits for leaving care do not fit in with other aspects such as entitlement to housing benefit. 7. Increase number of dual heritage carers with appropriate background 8. Develop and implement all placement plans to ensure the reviews take place of children who are trans-culturally/racially placed	21/12/04	26/4/05	March 06

RACE EQUALITY SCHEME REVIEW REPORT YEAR 3 – ACTION PLAN

Directorate: Social Services

Division: Older People & Physical Disabilities (Val Beint)

Division	<u>Policy</u>	Lead Officer	Issues highlighted t		First review action date	Second review action date	Timescale to address these issues
Older People	Day care services for Older People and Physical Disabilities	Annette Darby Ext 5896	1	Low up-take of intermediate care by BME communities	21/12/04	26/4/05	March 2006
			2	More resources and support required for BME people with Physical Disabilities			
			3	There is still a need to develop appropriate staff skills to manage cultural and religious diversity			
			4	More access and resources required for BME communities for minor adaptations and low-level interventions for older people, particularly for BME adults with challenging behaviour and adults with learning disabilities.			
			5	BME sexual needs do not get taken into account in assessment process			
Older People	Residential services for Older People	Barbara Walker Ext 5827	1	BME staff still under represented	21/12/04	26/4/05	March 2006
			2	Language barriers still exist			
			3	Low up-take of services by BME communities			
			4	There is still a need to develop appropriate staff skills to manage cultural and religious diversity			
			5	More support required for elderly people with physical and learning disabilities			