

FULL EqIAA – MS Therapy Centre Physio and Exercise Classes

SECTION 1 – INTRODUCTION

On 19 November 2014 the Better Care: Stronger Communities Grant funding for the voluntary and community sector funding from 1 April 2015 to 31 March 2018 was approved by the Children, Adults and Health Committee.

On 24th February 2017 Children, Adults and Health Directorate explored the potential to review voluntary sector funding agreements and to consider whether there were opportunities to identify potential savings (21%) from the current budget. The review aims to relieve pressure on Council budgets and to establish what level of funding each organisation would be allocated, or not in future years.

The following criteria was used:

- Consistent delivery to target for the duration of the contract?
- Is demand for the service growing?
- How strongly does the service align to the original aims of the funding? Are there other services with a stronger alignment in relation to other services
- Which services have the best fit to match the current departmental strategy
- Financial Perspective
- Political Perspective
- Service User Perspective
- Provider Perspective
- Carers/family perspective
- Legal perspective

The funding period is coming to an end and we are undertaking the necessary steps to agree the decommissioning of various grants including the MS Therapy Centre physio and exercise classes.

SECTION 2 –RESEARCH AND CONSULTATION

DEMAND	<p>Is there any indication or evidence (locally or nationally) that different groups will have different needs, experiences, issues or priorities in relation to service / function / issue under consideration?</p> <p><i>NB. Primary source of evidence should be locally collected evidence; if none is available, national data can be used in</i></p>	Age	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input type="checkbox"/>
		Disability	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input type="checkbox"/>
		Gender Reassignment	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Marriage & Civil Partnership	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Pregnancy & Maternity	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Race	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Religion or Belief	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Sex	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Sexual Orientation	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>

	<i>its place.</i>	More information is needed	<input checked="" type="checkbox"/>
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OUTCOMES	Is there any indication or evidence (locally or nationally) that different groups will have participation levels, satisfaction levels or outcomes in relation to service / function / issue under consideration? <i>NB. Primary source of evidence should be locally collected evidence; if none is available, national data can be used in its place.</i>	Age	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input type="checkbox"/>
		Disability	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input type="checkbox"/>
		Gender Reassignment	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Marriage & Civil Partnership	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Pregnancy & Maternity	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Race	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Religion or Belief	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Sex	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		Sexual Orientation	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input checked="" type="checkbox"/>
		More information is needed	<input checked="" type="checkbox"/>		

South Gloucestershire JNSA Demographic (1)

	2016 Estimate (1)	2039 Projection(2)
Total population	277,600	330,800
Older people aged 50 years and over	103,800	134,600
Older people aged 65 years and over	51,400	79,200
Percentage of older people aged 65 years and over	18.5%	23.9%

Sources:

- (1) ONS 2016 Mid-Year Population Estimate
- (2) ONS 2014-based Sub-National Population Projections.

The age group that is predicted to make the largest proportional increases are those aged 65 and older with the number of 80-89 year old males predicted to double, the number of women aged 90 and over is set to triple and the number of males aged 90+ predicted to increase by nearly five times the current estimate.

Overall the health of South Gloucestershire is good. Life expectancy has been increasing and is higher than the national average. In 2011-13, life expectancy for men was 81.2

years compared to 79.4 years for England, and for women 84.5 years compared to 82.2 years for England.

Based on the 2011 census figures it is estimated that there are currently approximately 23,000 people aged 65 or over with a limiting long term illness that limits their day to day activities, this figure is predicted to rise to 33,400 by 2030. Of those aged 18-64, it is estimated that there are approximately 16,900 with a moderate or severe physical disability, a figure set to rise to 18,000 by 2030.

South Gloucestershire had a Black and minority ethnic population of 5% in 2011 – defined as the ethnic groups other than White. This has increased from 2.2% in 2001 but remains substantially lower than the England and Wales average of 14%. The largest ethnic groups were Asian (2%), Mixed (1%) and Black (1%). The White Gypsy or Traveller population is around 270 (0.1%). Younger age groups have the highest proportion of ethnic minorities.

National Statistics (2)

In 2010, the Equality and Human Rights Commission (EHRC) produced its first progress report on equality, entitled *How Fair is Britain?* In October 2015, the EHRC published its follow-up report on both equality and human rights, entitled *Is Britain Fairer?* Taken from ***“Is Britain Fairer? The state of equality and human rights 2015”*** - the Equality and Human Rights Commission’s statutory five-yearly report on equality and human rights progress in England, Scotland and Wales.

The report found that there is a need to **improve the evidence and the ability to assess how fair society is** – The nature of the disadvantages faced by some vulnerable people (for example, the fast-growing numbers of people in their 80s/90s, transgender people, Gypsies and Travellers, ...) risks rendering them ‘invisible’. Greater effort is needed to identify the scale and nature of the issues affecting people with these and other characteristics.

The following conclusions were included in the report:

Age & Disability

Older disabled people who experience disadvantage were significantly less likely than nondisabled older people to report that they were receiving the practical support they need. This was also the case for older women aged 65 and over.

Access to public and community transport – a key means of combating social isolation for people without the opportunity/means to use other types of transport – was affected by funding cuts.

Overall life expectancy rose and the gender gap narrowed. However, some people, such as those with learning disabilities and serious mental illness, Gypsies and Travellers, and homeless people had lower life expectancy rates than the general population.

In the next 20 years there are likely to be more people with ‘complex health needs’ (more than one health problem) who require a combination of health and social care services. For example, the percentage of people over 85 will double.

Consultation information collected

Gender	Male	Female	Total
Number	14	29	43
Percentage	32%	67%	

Age	Under 50	51-60	61-65	66-75	76-80	81-85	86+	Not said	Total
No	8	13	6	13	3	1			44
%	18	29	13	29	7	2			

The majority of respondents (95%) who use the MS Therapy Centre exercise classes attended on a weekly basis. 79% attended the standing classes and 43% attended the seated classes.

Respondents reported that the greatest benefit from the classes was balance.

From the data it is clear to see that the service is valued by its users.

SECTION 3 - IDENTIFICATION & ANALYSIS OF EQUALITIES ISSUES AND IMPACTS

This is a service that supports people with multiple sclerosis to keep active, maintain independence, socialise and reduce social isolation.

If the service was to cease there would be equalities issues predominately relating to older people with physical disabilities and their carers. This would lead to a reduction in specialist classes reducing levels of physical activity and potentially increasing levels of social isolation.

SECTION 4 - EqIAA OUTCOME

Outcome	Response	Reason(s) and Justification
Outcome 1: No major change required.	<input type="checkbox"/>	
Outcome 2: Adjustments to remove barriers or to better promote equality have been identified.	<input type="checkbox"/>	
Outcome 3: Continue despite having identified potential for adverse impact or missed opportunities to promote equality.	<input checked="" type="checkbox"/>	This decision adversely impacts upon older disabled people using the service and their carers. The funding was time limited. There are budgetary pressures and the Council is no longer able to maintain levels of voluntary sector funding.
Outcome 4: Stop and rethink.	<input type="checkbox"/>	

SECTION 5 - ACTIONS TO BE TAKEN AS A RESULT OF THIS EqIAA

Inform the MS Therapy Centre that the funding will cease, giving the appropriate notice period.

We have discussed how the MS Centre can source alternative funding.

SECTION 6 - EVIDENCE INFORMING THIS EqIAA

1. South Gloucestershire JNSA - <http://edocs.southglos.gov.uk/jsna2017>
2. "***Is Britain Fairer? The state of equality and human rights 2015***" - the Equality and Human Rights Commission's statutory five-yearly report on equality and human rights progress in England, Scotland and Wales
<https://www.equalityhumanrights.com/en/britain-fairer>