

Equity in experience and outcomes

Score: 2

2 - Evidence shows some shortfalls

What people expect

I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.

The local authority commitment

We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support and treatment in response to this.

Key findings for this quality statement

Understanding and reducing barriers to care and support and reducing inequalities

The local authority was working to understand its local population profile, demographics and to have an awareness of the challenges in reaching all communities. The local authority used the voluntary and community sector to reach out, but there was a lack of protocols for sharing data and information. Senior leaders told us the local authority planned to undertake thematic reviews in 2025, such as an in-depth review of homelessness and veterans.

The Joint Needs Assessment (JSNA), contained over 30 topic specific chapters, grouped into themes, as well as other supporting information, to identify ways to improve the health and wellbeing of the local community and reduce inequalities for all ages. Identifying seldom heard groups and inequalities was highlighted by the local authority as an area for improvement. The local authority currently had an Equality and Inclusion Framework to start their improvement journey and were considering how this strategy could be co-produced in future.

Senior leaders told us the local authority had some understanding of the community and seldom heard groups such as Roma Travellers and identified there was a long-standing military and veteran community in Medway. However, there was limited understanding of new communities coming into Medway. The local authority recognised there had been a lack of processes to capture data on equality diversity and inclusion and was now included in future plans. An Equality, Diversity and Inclusion board had been created which had been a corporate initiative and senior leaders attended this board as part of adult social function. Within adult social care specifically, there was an EDI network, which met bi-monthly. These learning sessions look to challenge staff unconscious bias and expand peoples understanding.

Medway's Better Care Fund Plan 2023-2025 had key priorities which included reducing health inequalities in relation to service delivery and recognising local areas of deprivation. The specific focus was to address disparity amongst ethnic minority groups, disadvantaged groups, and socially isolated groups. A number of initiatives were listed as being key to promoting equality issues such as the Community Health Catalyst Programme - led by the voluntary sector which engaged with groups, utilising health inequalities funding.

The local authority had some regard to its Public Sector Equality Duty (Equality Act 2010) in the way it delivered its Care Act functions. The Better Care Fund used diversity impact assessments which they regularly revisited to ensure they were able to address inequalities of access and outcomes for people. We were given an example where data had been used to drive better outcomes for people. Data had been provided to staff to improve pathways into employment for people with a learning disability. The data enabled staff to better understand the current situation and what changes needed to be made. The outcome was an increase from 1.6% to 2.3% of people with a learning disability in paid employment.

A senior leader told us surveys and focus groups had been held with people who were from seldom heard groups including sex workers, LGBTQ+ community and ex-servicemen, to inform the Joint Health and Wellbeing Strategy.

Local authority staff involved in carrying out Care Act duties were increasing their understanding of cultural diversity within the area and how to engage appropriately. Staff were able to attend lunchtime workshop sessions with the aim to increase awareness to all staff of the people who may not be being heard. A review of internal networks was taking place including the equality and diversity network which met on a bimonthly basis. However, we saw conversation 3 of the Care Act 3 eligibility assessment and eligibility guidance did not prompt practitioners to consider people's needs in relation to protected characteristics. There were a number of prompt examples/scenarios but none of them related to factors such as LGBTQ+, religion or language.

Staff identified areas for improvement such as ensuring services were accessible for individuals of all needs and told us promotion of staff education resources was needed. They gave examples of work which had been undertaken on communication passports and told us video interpreters for the deaf would be available in September 2024.

Medway local authority was part of the Kent and Medway Autism and Learning Disability Collaborative which was a joint initiative with the aim of system improvement to health and care services for people with learning disabilities and autism. Workstreams within the collaborative included increasing the uptake of annual health checks, further developing hospital passports, and reducing the number of inpatients. Senior leaders told us NHS England recognised the Medway model for building relationships on wards and supporting discharge as a good model and shared this nationally.

The local authority had a project which worked with the Department of Work and Pensions supporting people with a learning disability into paid employment. There were currently 24 people accessing the project with almost half of the participants known to adult social care.

Medway local authority supported a Consortium of voluntary community organisations, who had a 25% ethnic minority community reach. There were still more ethnic communities to connect with. Partner health organisations were working with other Consortium members to improve the reach to more ethnic minority groups and other groups in the community. The local authority diversity impact statement noted in 2022, only 7% of unpaid carers using the carer's support service were of ethnic origin in. We did not receive any information if this figure had increased.

Inclusion and accessibility arrangements

More improvements were needed in relation to the inclusion and accessibility arrangements in place so people could engage with the local authority in ways which worked for them. The local authority was aware of this and taking steps to address it.

Staff we spoke to told us they were able to accommodate varying communication methods depending on need and gave examples of face-to-face visits or use of interpretation services to gather information on the persons support needs. Staff also told us the local authority needed to pay more consideration to accessible information and accessible communication methods, as well as staffing understanding of accessible information standards. Staff liaised with the deaf services team when needed. However, a partner organisation told us they identified the deaf community as a community which may struggle to access services as there was no funding for an interpreter. The local authority confirmed they would have video interpreters for the deaf available in September 2024.

Another partner organisation was reaching local communities and seldom heard people through various projects. One project supporting people for whom English was not their first language, set up language cafes to support people, share information and signpost them to other services. Another partner organisation provided a number of positive examples of how they ensured the provision of accessible information and advice for service users, for example, use of interpreting services, use of care navigators, and access to assistive technology.

Accessibility was a challenge if needed out of hours. The use of interpreters was available, and advocacy support was available out of hours.

Senior leaders told us work was ongoing to explore alternative options to the waiting well letter. Some teams made phone calls to people waiting for services, however it was not evident if this was the standard practice across all teams or if this was an initiative by some teams.

The local authority was developing a learning disability and autism offer to improve and increase support to people. This included recruiting to 2 social worker posts to strengthen the team's experience of supporting people with learning disabilities, an increase in training, and arrangements for Oliver McGowan training to be delivered by people with lived experiences. There was a joint multi-disciplinary approach to drug, alcohol and domestic abuse services, specifically for people who were marginalised and seldom heard.

The local authority worked positively with Ukrainian populations. They commissioned translation of their 'adult abuse and what to do about it' leaflet into Ukrainian. This was made available on the Kent and Medway Safeguarding Adults Board (KMSAB) website and hard copies of the leaflet were printed so these could be shared at events and with agencies who requested them. The KMSAB was committed to having its information leaflet on how to recognise and respond to abuse available in all the languages which were most commonly spoken in Kent and Medway.