

# 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 took steps to understand their population however, leaders and staff identified there were areas for improvement to fully understand the needs of the population. B&NES was an affluent area with pockets of deprivation. There was a risk of deprivation going unnoticed due to the rurality of some areas.

Health partners felt adult social care worked collaboratively regarding the awareness of inequalities within the community and were working to improve their knowledge of seldom heard and hard to reach people within the community. The local authority had recently held an event for the boater and travelling communities with health partners. Leaders and partners told us they felt this had a positive impact on the community by being visible and approachable in the community. Whilst there was an understanding of the needs of most of the local communities there were still some shortfalls in working with and identifying seldom heard voices. There were gaps in the knowledge of some staff and leaders with regards to Equality Diversity and Inclusion.

Data collected by the local authority did not currently record people's ethnicity, race, religion as a prerequisite when contacting the first response team, this meant the local authority had missed an opportunity to further identify seldom heard and hard to reach people and may impact on the local authorities understanding of the needs of the community when commissioning new services. Data provided from the local authority showed gaps in capturing data around people with protected characteristics, information was held on a computerised system, for ASC. However, this information was not mandatory for staff to complete during a person's first contact, so information was recorded inconsistently and meant it was hard to use the data to identify people and their needs. The local authority was aware of the need to make better use of data and plans were underway to improve this. Planned changes to data collection systems was intended to improve access to this type of data however, at the time of assessment the ability to interrogate data to determine a person's ethnicity, race or religion was limited. The local authority told us that the recording of information regarding a person's protected characteristics such as a person's ethnicity or gender were recorded once a person had progressed to a Care Act Assessment or care planning.

---

The local authority had an Equality, Diversity and Inclusion (EDI) lead in place to highlight the importance of EDI to staff and in the community.

The local authority had completed a Strategic Evidence Based Document to understand the health, care and support needs of the people in B&NES. The Strategic Evidence Based Document included work to look at populations and identify groups who were more likely to face poorer outcomes or inequalities such as homeless people, migrants, boater and traveller communities, people with a learning disability and unpaid carers.

## Inclusion and accessibility arrangements

The local authority had taken steps to improve the accessibility of information for people and had identified the need to continue to provide more information in different formats to improve people's accessibility. The Community Wellbeing Hub was set up jointly with health, the HCRG group and the voluntary sector to improve people's accessibility to information, advice, and services. The local authority also provided advice and guidance via their Live Well B&NES website. We saw evidence of some documents, policies and procedures being available in other accessible formats such as large print, braille or an easy read format for people with a learning disability.

The local authority had a specialist hearing and vision team to support people with hearing and vision impairments and to ensure information and support was accessible. Staff told us the local authority was working on improving accessibility for people who communicate using British sign language to allow them to contact the council and gain the advice and guidance they needed. The hearing and vision team worked closely with voluntary organisations in the community and other social work teams within ASC to ensure people with a vision or hearing impairment had the support they needed. Staff told us, there was an increase in available technology. However, there was still a long way to go to embed the use of technology. We heard how 'what's app' was used by staff to talk via video call with people wanting advice and guidance but there were difficulties accessing and trialling higher tech offers.

---

