

Equality Analysis (EA)

Financial Year
2017/18

Section 1 – General Information (Aims and Objectives)

Name of the proposal including aims, objectives and purpose

Tower Hamlets Ageing Well Strategy

The strategy sets out how local communities and organisations will work together to improve the wellbeing of residents aged 50 and over in the borough. Over the next 15 years to 2030 the number of people living in Tower Hamlets aged 65 or over is expected to increase significantly by almost 60% from 16,700 to 26,700. Within this the number of people aged 90 and over is projected to increase by 143%¹.

The aim of the Ageing Well Strategy is to enhance the health, wellbeing and quality of life of people growing older in Tower Hamlets – ensuring that Tower Hamlets is a borough where growing older is about retaining your independence and dignity with the assistance of family, friends and the community where necessary but knowing that the right care and support is there if that independence becomes significantly reduced or your changing circumstances mean increased isolation and loneliness.

In developing this strategy, we have worked closely with older people and a range of local groups and organisations to identify what matters to people as they grow older in our borough and how by working together we can make Tower Hamlets a better place to grow older in. National and local policy and research has also been extensively reviewed to help understand the broader context within which the strategy is framed and to identify solutions that can be implemented locally to help achieve our desired outcomes.

The strategy tells you:

1. What we have identified as the key priorities relating to ageing well in the borough;
2. Why we have identified these key priorities;
3. What we plan to do to make a positive difference in each of these priority areas.

Many of the plans set out in this strategy are ambitious, and will require close and effective partnerships across a range of local organisations from the statutory, community and private sectors and, crucially, with local communities for these ambitions to be realised. Preparing the strategy is the first step – ensuring that the plans set out here are delivered over the next three years will require significant effort and progress will need to be reviewed regularly. The strategy explains how the activities involved in delivering the strategy will be managed and monitored.

A new Carers' Strategy for the borough has been developed alongside the Ageing Well Strategy. For many older residents, providing informal care to partners, children, grandchildren, other family members, neighbours or friends is part of their day to day life. The priorities and plans identified throughout this

See Appendix
A

Current decision
rating



strategy apply just as much to those for whom this informal caring role is a day to day reality as it does to any other older resident of the borough. We have decided, however, not to incorporate a specific theme focused on informal carers into this strategy as this would only replicate the priorities and plans identified in the Carers' Strategy so would not add value here.

Conclusion - To be completed at the end of the Equality Analysis process

The Ageing Well Strategy aims to enhance the health, wellbeing and quality of life of people growing older in Tower Hamlets – ensuring that Tower Hamlets is a borough where growing older is about retaining independence and dignity with the assistance of family, friends and the community where necessary but knowing that the right care and support is there if that independence becomes significantly reduced or changing circumstances mean increased isolation and loneliness.

Putting the Strategy in place will involve increasing the numbers and diversity of people who engage with us and building closer relationships with statutory, voluntary and community partners for the benefit of the borough's older people.

The strategy has the potential to deliver positive outcomes for the borough. However we recognise that there is a need to be vigilant to ensure that the approach is not discriminatory in its implementation. For example, the increasing use of technology and digital platforms to communicate and engage with people will not work for those who are digitally excluded.

To mitigate this, a new information strategy targeted on the older population of the borough that uses a mix of communication methods will be developed. The strategy will also support the borough's Digital Inclusion Strategy by seeking opportunities to support increasing computer literacy.

All associated contracts will have a requirement to record number of people with protected characteristics, in order to assist with service planning and to ensure people from all communities are participating in and accessing services. There is also a commitment within the strategy to develop an 'Equalities Charter' for older people's services that will provide a baseline expectation in respect of future service development and contracting activity in terms of how services are designed and delivered to ensure equality of access across the protected characteristics.

Name:

(signed off by)

Date signed off:

(approved)

Service area:

Integrated Commissioning

Team name:

Ageing Well

Service manager:

Keith Burns

Name and role of the officer completing the EA:

Section 2 – Evidence (Consideration of Data and Information)

What initial evidence do we have which may help us think about the impacts or likely impacts on service users or staff?

Information from a range of documents has been used to develop the strategy's approach and action plan and include the following:

- Community Plan 2015
- Single Equality Framework 2016/17
- Strategic Plan
- Older People's JSNA 2016
- Falls JSNA 2015
- Last Years of Life JSNA 2015
- Loneliness and Isolation in Older People JSNA 2016
- Physical Activity JSNA 2017
- POPPI (Projecting Older People's Population Information)

Section 3 – Assessing the Impacts on the 9 Groups

Please refer to the guidance notes below and evidence how your proposal impacts upon the nine Protected Characteristics in the table on page 3?

For the nine protected characteristics detailed in the table below please consider:-

- **What is the equality profile of service users or beneficiaries that will or are likely to be affected?**

The strategy sets out the council's approach and commitment to people over 50 in Tower Hamlets. Service users and beneficiaries will include people falling under all of the protected characteristics except Pregnancy and Maternity (except in very rare cases).

- **What qualitative or quantitative data do we have?**

Census 2011 data on Tower Hamlets population

Office of National Statistics (ONS) and GLA population estimates

Community Plan 2015

Borough Equalities Assessment

Local Voices' Annual Reports

Older People's Reference Group minutes and reports, including from strategy development workshops

Relevant JSNAs

- **Equalities profile of staff?**

N/A

- **Barriers?**

There are a number of challenges impacting older people in Tower Hamlets. Life expectancy is lower than other parts of London; people's health starts to deteriorate in Tower Hamlets on average 10 years earlier than nationally; the borough's profile indicates the highest prevalence of loneliness in the country; 63% of older residents have a limiting long-term condition which limited their day-to day activities "a little" (26%) or "a lot" (37.6%); Half of older people in the borough live in income deprived households.

Other challenges for many older people include:

- Reduced voice and representation due to many older people being digitally excluded, and some being fearful of crime which limits their ability to take part in evening public meetings
- Insufficient access to information, particularly in print form (again due to digital exclusion)
- Reduced mobility due to physical impairment and reduced confidence in using public transportation

- **Recent consultation exercises carried out?**

As part of the strategy's development, consultation has been carried out with key stakeholders to better understand the things that matter to older people.

Groups consulted and involved in the development of the strategy included:

- A series of strategy specific workshops with the Older People's Reference Group
- Individual surveys undertaken with service users of the largest preventative service in the borough, LinkAge Plus
- A strategy specific workshop with the voluntary and community sector locally

The series of workshops with the Older People's Reference Group covered the following themes:

- Housing and the physical environment;
- Health and wellbeing;
- Loneliness and isolation;
- Getting help and support in my local community when I need it.

The workshops were all well attended by OPRG members and supplemented by additional sessions at regular OPRG meetings.

The findings of the consultation undertaken by the council reveals that there is no particular concern that any one group within the nine protected characteristics would be negatively impacted by the Ageing Well Strategy. Representation from the LGBT community highlighted the barriers that older LGBT people can experience in accessing services and the development of the Equalities Charter is a first step in responding to that concern.

- **Additional factors which may influence disproportionate or adverse impact?**

N/A

- **The Process of Service Delivery?**

Equalities monitoring and analysis will be built into the following to comply with general equality duties and equalities more broadly:

- Tendering and specifications
- Awards process
- Contract clauses
- Performance measures
- Monitoring arrangements

Please Note -

Reports/stats/data can be added as Appendix

Target Groups	Impact – Positive or Adverse	Reason(s)
Race	Positive	<p>Please add a narrative to justify your claims around impacts and,</p> <ul style="list-style-type: none"> Please describe the analysis and interpretation of evidence to support your conclusion as this will inform decision making <p>Please also how the proposal will promote the three One Tower Hamlets objectives?</p> <ul style="list-style-type: none"> - Reducing inequalities - Ensuring strong community cohesion - Strengthening community leadership <p>The Projecting Older People Population Information System (POPPI) shows that nearly two thirds of the older population in Tower Hamlets are white. 25.3% are Asian or Asian British, 8% are Black / African / Caribbean / Black British, 1.2% mixed and 1% other.</p> <p>The demographics section of the strategy highlights how the ethnic make-up of the older population will change over time, with an increasing proportion from BAME communities. The need to factor this change into future service planning activities is highlighted.</p> <p>National, regional and local indicators all show that there are low levels of qualifications amongst Black and Minority Ethnic (BAME) communities in Tower Hamlets.</p> <p>The Ageing Well Strategy aims to empower communities to work together with the council and other agencies in designing and delivering solutions which are aligned to local need. The council recognises that there are inherent challenges in engaging a more diverse breadth of the community (especially across cultures and language barriers) and ensuring inclusive ways of engaging communities are further developed.</p> <p>Action plans to implement the strategy will be developed in conjunction with the Older People’s Reference Group, funding for which comes as part of a larger, preventative contract working with older people. This contract contains provisos for the inclusion of BME groups in order to ensure that, to the greatest extent possible, these groups are accessing services and have an organised, co-ordinated voice that provides an opportunity to influence key decisions made by statutory and other bodies on issues that affect their lives. Members of this group are trained in personal basic IT skills (where appropriate).</p> <p>Specifications for all contracts let which contribute to the Ageing Well strategy require providers to reach</p>

		<p>out to groups which are currently under-represented including BME groups (as appropriate to the specific contract aims and goals), and as a matter of course to record services users' equalities data as a part of annual monitoring data. Contracts also specify where appropriate the need to offer a culturally appropriate service, for example offering culturally appropriate food, and ensuring services offered are relevant to and desired by the borough's diverse communities.</p> <p>To assist those for whom English is not a first language, written information is requested to be accessible by using plain English. Promotional materials are required to be available in community languages.</p> <p>The council will need to monitor to ensure the actions being developed to support the strategy take into account the specific needs of BME groups and do not have an adverse impact.</p>
Disability	Positive	<p>Both men and women in Tower Hamlets from age 50 live significantly fewer years disability free (14.6 for men & 14.1 for women) than those in England (19.1 for men & 19.4 for women). Tower Hamlet residents have a significantly lower proportion of life spent without disability from age 50 compared to England¹.</p> <p>Some of the things that matter to older people uncovered through consultation for the Ageing Well Strategy include issues that are particularly relevant to people with disabilities, as they may be less mobile and feel more vulnerable at home and out in the community. For example:</p> <ul style="list-style-type: none"> • Being able to access health (including GPs) and social care services when we need them and without having to wait; • Feeling safe in our own homes and while out and about; • Knowing what is going on in our local area, particularly about activities that we might benefit from, and being able to access those activities in settings that are welcoming and safe; • Having the right housing options for people as their needs change is a crucially important part of staying independent; • Information to be accessible (for many older people the internet isn't currently the best way of

¹ ONS, Disability-free life expectancy (DFLE) and life expectancy (LE) for females at age 50 by Clinical Commissioning Groups in England, 2010-2012, published 2014; <http://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/lifeexpectancies/datasets/2011censusanalysisdisabilityfreelifeexpectancyatbirthatage50andage65clinicalcommissioninggroupscgs201012>; Latest accessed 12/10/16

achieving this)

- Many older people particularly ‘younger older’ people would welcome the opportunity to provide more support to older neighbours and other vulnerable older people living locally to us, but need training and information to be able to do this effectively;
- Having locally based services that are easier to access is preferable to having to travel to other parts of the borough.

The following themes which will be addressed within the strategy are particularly relevant to older people with disabilities:

- Ensuring that people with longer term health and social care needs experience care and support that is truly personalised to their individual circumstances, strengths and needs, and that optimises their independence.
- Keeping people informed in accessible ways.
- Ensuring that the right housing and accommodation options are available to people as they age.
- Optimising independence and wellbeing: Supporting people, as they age, to continue making a positive contribution in our communities.
- Optimising independence and wellbeing: staying healthy and active.
- Living well with dementia.
- Optimising independence and wellbeing: Getting the help and support I need as close to home as possible.
- Optimising independence and wellbeing: Last years of life.

Residents who are disabled or have a health problem are typically far less likely to have access to the internet compared with non-disabled residents with no health problems (62 vs. 92 per cent according to the 2016 Tower Hamlets Annual Residents Survey) and thus experience digital exclusion. The Ageing Well Strategy action plan will include actions supporting the borough’s digital inclusion strategy, in relation to older people.

		<p>With regards to contracts associated with the Ageing Well Strategy, particularly open access 'preventative' services, the council will need to monitor to ensure that people with disabilities are able to access these to the greatest extent possible.</p>
Gender	Positive	<p>Specifications for all contracts let which contribute to the Ageing Well strategy require providers to reach out to groups which are currently under-represented including older men (as appropriate to the specific contract aims and goals), as this group is known to be less likely to access certain services. As a matter of course all contracts are required to record services users' equalities data as a part of annual monitoring data.</p> <p>Although women are generally more likely to access some of the council's preventative services aimed at older people than men, they also experience gender discrimination which affects many aspects of their lives. The council will therefore need to monitor to ensure the actions being developed to support the strategy take into account the specific needs of men and women and do not have an adverse impact.</p>
Gender Reassignment	Neutral	<p>No inadvertent bias or discrimination on the basis of gender reassignment is indicated in the proposals of the Ageing Well Strategy.</p> <p>Although there is nothing specific with regards to Gender Reassignment, providers of contracts associated with the Ageing Well Strategy are required to give due regard to all nine protected characteristics and to ensure their services are welcoming to all service users.</p> <p>The council will undertake monitoring to ensure equal access and inclusivity, and the monitoring information will be presented to the relevant management teams and escalated further if any identified issues are not addressed.</p> <p>The council will need to monitor to ensure the actions being developed to support the strategy take into account the specific needs of people who have reassigned their gender do not have an adverse impact.</p>
Sexual Orientation	Neutral	<p>There is a limited profile of the LGBT population in Tower Hamlets as sexual orientation was not a specific category used in the last Census. This means that Census analysis is not available on this characteristic.</p> <p>However, national research shows that that lesbian, gay, bisexual and trans people are facing unhealthy attitudes from health and social care professionals. A significant proportion of older gay people are likely to</p>

		<p>live alone, have limited family support and therefore are more likely to rely on formal services for help in the future. Many older gay people have experienced, or fear, discrimination because of their sexual orientation and they say this creates a barrier to receiving appropriate care and treatment. Fear of crime is a serious issue for older lesbian, gay and bisexual people. A survey revealed that 31.5% of older gay men and lesbians feel unsafe within their communities. High levels of LGBT people are socially excluded, isolated and disconnected in the UK. Factors which exacerbate this social exclusion include LGBT people who have multiple equalities strands, carers and those who are economically inactive.</p> <p>The broad aims of the Ageing Well Strategy to maintain and promote independence and wellbeing through various means will benefit LGB&T people generally. However, this group is known to be less likely to access services, for the reasons mentioned above. It is particularly important, therefore, that the Council ensure that services and contracts associated with the Ageing Well Strategy are aware of these issues and take all measures possible to ensure LGB&T people feel welcome to use them. The Council has taken various steps to work with providers in this area, however, much work remains to be done.</p> <p>The council will need to monitor to ensure the actions being developed to support the strategy take into account the specific needs of LGB&T people do not have an adverse impact. It will also need to continue working with providers (in-house and external) to improve how their services are perceived and experienced by LGB&T people. The proposed Equalities Charter will be a first step in improving access to services for the older LGBT population.</p>
Religion or Belief	Neutral	<p>It is possible that as gender segregation is observed within some faiths practised in the borough, having most services mixed gender may disproportionately impact male and female followers of those faiths.</p> <p>The council will need to monitor to ensure the actions being developed to support the strategy take into account any particular needs of people of various faiths do not have an adverse impact.</p>
Age	Positive	<ul style="list-style-type: none"> • Tower Hamlets has a relatively small proportion of residents aged over 65 accounting for just 5.9% of the overall population, compared to 17.4% in the overall UK population; • In 2015, there were an estimated 16,700 people aged 65 or over living in Tower Hamlets. It is expected that the number of older people will increase to 26,700 by 2030; • Life expectancy in Tower Hamlets at age 65 for men (17.3 years of life on average) and women (20.7 years of life on average) is lower than in London and England;

		<ul style="list-style-type: none"> • In Tower Hamlets, people typically start to develop poorer health around ten years earlier than London and England. On average, a man living in the borough starts to develop health problems from the age of 54 compared to 64 in the rest of the country. For a woman, it is 56 compared to 64; • All-cause mortality rates for the 65-74 age group are higher than in London and England; • A model looking at loneliness has ranked Tower Hamlets as 1 out of 33 for London and 1 out of 326 for England, meaning that persons aged over 65 living in Tower Hamlets are predicted to be among the loneliest in both London and England. <p>The overall aim of the Ageing Well Strategy is to enhance the health, wellbeing and quality of life of people growing older in Tower Hamlets. It is to ensure that Tower Hamlets is a borough where growing older is about retaining independence and dignity with the assistance of family, friends and the community where necessary but knowing that the right care and support is there if that independence becomes significantly reduced or changing circumstances mean increased isolation and loneliness.</p> <p>The Ageing Well Strategy covers a wide age range from 50+. People needs and desires are likely to change as they age. The Council will need to ensure that actions supporting the strategy take into account these variations.</p>
Marriage and Civil Partnerships	Neutral	<p>No inadvertent bias or discrimination on the basis of marriage and civil partnerships is indicated in the proposals of the Ageing Well strategy.</p> <p>Equalities monitoring will be undertaken to ensure fairness and inclusivity throughout implementation.</p>
Pregnancy and Maternity	Neutral	<p>No adverse impact on the basis of pregnancy and maternity is indicated in the proposals of the Ageing Well Strategy and its action plan.</p> <p>This aspect of protected characteristics will not be monitored.</p>
Other Socio-economic Characteristics	Positive	<p>Socio-economic – Half of older people in the borough live in income deprived households.</p> <p>The overarching purpose of the Ageing Well Strategy to enhance the health, wellbeing and quality of life of people growing older in Tower Hamlets will assist in reducing inequalities associated with</p>

socioeconomic disadvantage. The majority of the associated services are free or means-tested. There are a range of preventative services which are open-access, and offer free or low-cost activities to ensure that all may participate, regardless of financial circumstances.

The council will need to monitor to ensure the actions being developed to support the strategy take into account any particular needs of people of lower socio-economic status do not have an adverse impact.

One Tower Hamlets Objectives

The Ageing Well Strategy promotes all three One Tower Hamlets objectives by:

- Reducing inequalities – Key Theme 4 will focus on ensuring that people, as they grow older, continue to have opportunities to access the employment market and that whether in or out of work and after retiring people are supported to access the full range of benefits to which they are entitled; by ensuring associated contracts active seek out and ensure the participation in particular of BME groups, men, LGBT, people with disabilities; funded contracts offer Information, Advice and Advocacy often around debt advice and other issues disproportionately affecting those with socioeconomic disadvantage;
- Ensuring strong community cohesion – Key Theme 8 will focus on tackling loneliness and isolation; the flagship project associated with this strategy is LinkAge Plus, a preventative project which draws together older people across ethnic groups through activities held in community hubs across the borough; some contracts associated with the Ageing Well Strategy incorporate requirements for intergenerational projects
- Strengthening community leadership – through the Strategy’s Key Theme 5 which is around supporting people, as they age, to continue making a positive contribution in our communities (through volunteering, as members of the OPRG group, and other methods)

Section 4 – Mitigating Impacts and Alternative Options

From the analysis and interpretation of evidence in section 2 and 3 - Is there any evidence or view that suggests that different equality or other protected groups (inc. staff) could be adversely and/or disproportionately impacted by the proposal?

Yes? No?

If yes, please detail below how evidence influenced and formed the proposal? For example, why parts of the proposal were added / removed?

(Please note – a key part of the EA process is to show that we have made reasonable and informed attempts to mitigate any negative impacts. An EA is a service improvement tool and as such you may wish to consider a number of alternative options or mitigation in terms of the proposal.)

Where you believe the proposal discriminates but not unlawfully, you must set out below your objective justification for continuing with the proposal, without mitigating action.

Section 5 – Quality Assurance and Monitoring

Have monitoring systems been put in place to check the implementation of the proposal and recommendations?

Yes? No?

How will the monitoring systems further assess the impact on the equality target groups?

Routine monitoring includes the capturing of protected characteristics where relevant for all service users.

Does the policy/function comply with equalities legislation?

(Please consider the [OTH objectives](#) and [Public Sector Equality Duty](#) criteria)

Yes? No?

If there are gaps in information or areas for further improvement, please list them below:

There are gaps in the evidence base for the areas of gender reassignment, sexual orientation, pregnancy and maternity and numbers of married and civil partnerships in the borough. However, it is not considered that further information in these areas will influence the implementation of the Ageing Well Strategy. Given that the strategy aims to enable and encourage local people to become involved in decision making about local services through more effective consultation, engagement and co-production, it is expected that activity undertaken as part of the strategy should result in positive impacts on these groups (where relevant) as well as all other equality groups.

How will the results of this Equality Analysis feed into the performance planning process?

Equalities monitoring will be embedded in the implementation method of each of the activities. This will include adaptations or extensions to current monitoring systems, performance

measures, relevant timeframes and a commitment to carry out an EA review once the strategy has been in place for one year.

Section 6 - Action Plan

*As a result of these conclusions and recommendations what actions (if any) **will** be included in your business planning and wider review processes (team plan)? Please consider any gaps or areas needing further attention in the table below the example.*

Recommendation	Key activity	Progress milestones including target dates for either completion or progress	Officer responsible	Progress
Ensure equalities monitoring is undertaken for all current associated contracts and services to support analysis and identification of needs.	<ol style="list-style-type: none"> 1. Annual monitoring of contracts' equalities data. 2. Reviews of services will be undertaken to prompt changes in action planning and to help evaluate and reassess targets for participation. 	<p>Annual monitoring</p> <p>Annual service reviews</p>	Commissioning Managers	
Ensure proposed Equalities Charter is developed as planned and that it is subsequently incorporated into all relevant service planning and contracting activity.	<ol style="list-style-type: none"> 1. Development of Equalities Charter in partnership with Older People's Reference Group 2. Inclusion of Charter in all relevant service development and contracting activities 	<p>December 2017</p> <p>Ongoing</p>	Keith Burns	
Contracts and service level agreements (SLA) resulting from the strategy's action plan to contain a clause mandating equalities monitoring of	<ol style="list-style-type: none"> 1. To discuss and implement contract/SLA clause with procurement and commissioning services to ensure collection and monitoring of equalities in all consultation and engagement 	Per contract	Commissioning Services / Procurement	

Appendix A

(Sample) Equality Assessment Criteria

Decision	Action	Risk
As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i> . It is recommended that the use of the policy be suspended until further work or analysis is performed.	Suspend – Further Work Required	Red 
As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i> . However, a genuine determining reason may exist that could legitimise or justify the use of this policy.	Further (specialist) advice should be taken	Red Amber 
As a result of performing the analysis, it is evident that a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the <i>Action Planning</i> section of this document.	Proceed pending agreement of mitigating action	Amber 
As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share <i>Protected Characteristics</i> and no further actions are recommended at this stage.	Proceed with implementation	Green: 