

2. Proposed change

Directorate	Council and Health System Partners
Title of proposed change	Croydon Dementia Strategic Plan
Name of Officer carrying out Equality Analysis	Richard Eyre

2.1 Purpose of proposed change

SUMMARY

The Croydon Dementia Strategic Plan for Croydon has been reviewed and further developed in light of the myriad of strategies that impact on the wellbeing and independence of people with dementia. It was an ideal opportunity to a single Croydon wide approach, with a clear focus on tackling inequality and making sure no-one is left behind. This is especially important given the disproportionate impact the Covid-19 pandemic has had on those people with dementia and their carers, as identified in the report titled 'Worst Hit' produced by the Alzheimer's Society in 2021.

The strategic plan provides clarity to our residents, carers, workforce, providers and partners, on the core dementia care offer and services provided by statutory and non-statutory partners in the borough and should be read alongside other key strategic plans including the Mayor's Business Plan, Adult Social Care and Health Strategy and the Croydon Health and Care Plan.

The key objectives and actions of the strategy will be supported through development of full business cases evidenced and approved actions, and with decisions supported where necessary by equality impact assessments.

The primary objectives of the strategic plan are to improve awareness of dementia prevention and provide transformation to services within the available budget and to meet legislative statutory requirements.

Delivery of the actions within the strategic plan will be owned by the Croydon Mental Health Programme Board, which reports to the Senior Executive Group and ultimately into the Croydon Health and Care Board co-chaired by the Executive Mayor of Croydon and the Place Based Lead for Health. Review of potential changes as business cases for change will be received by the Programme Board. Business cases will need to have detailed equality impact assessments to support decision making / recommendations.



CONSULTATION

There has been significant and continuous consultation on development of the strategic plan. This is explained in further detail below.

The Croydon Dementia Action Alliance

The Croydon Dementia Action Alliance is the vehicle through which local organisations, business, groups, and individuals across multiple sectors are committed to enabling people with dementia and carers to live well by taking action to contribute to a more dementia friendly borough. The work is facilitated by a Communities Coordinator employed by Alzheimer's Society, and the aim is that all organisations who are a part of the Croydon Dementia Action Alliance play a proactive role in making the borough more dementia friendly, both as individual members and collaboratively as an alliance.

There are a wide variety of organisations represented within the Alliance, including from those from the voluntary sector, community groups, retail and business, faith groups, the arts, culture and leisure sector and health and social care. This enables a borough wide response to dementia, including work with organisations representing black and minority ethnic communities such as the Croydon BME Forum and the Asian Resource Centre. A list of organisations who play an active role in the Croydon Dementia Action Alliance can be found in the appendix B of the Strategic Plan.

The Croydon Dementia Action Alliance plays a practical role in promoting all aspects of the Croydon Dementia Strategy, from Preventing Well to End of Life Care, as outlined through the course of this strategy.

Ultimately this impact assessment can only be seen as an overarching view on the purpose and vision of the strategic plan. There is however a commitment from all system partners to initiate full impact assessments on all relevant areas of the action plan, and to ensure the analysis informs decisions taken on changes to existing services, or in the development of new service models.

The Croydon Dementia Steering Group

The Croydon Dementia Steering Group brings togethers senior representatives from both commissioning and provider organisations to develop and drive the strategic work around dementia. The Steering Group also oversees the work the Croydon Dementia Action Alliance including



supporting the work of the Communities Coordinator. The Group involves people with dementia and their carers in its meetings and work programmes.

Active members of the Croydon Dementia Steering Group can be found in Appendix C of the strategic plan.

Development of the Croydon Strategic Plan

The strategic plan has been developed by the Alzheimer's Society, in collaboration with members of the Croydon Dementia Strategy Steering Group and Croydon Dementia Action Alliance.

In the development, the views and experiences of people affected by dementia in Croydon have been sought through face-to-face conversations, online surveys, and focus groups.

Healthwatch Croydon conducted three surveys to see:

- How people affected by dementia experienced receiving a dementia diagnosis;
- Whether they feel supported to manage their dementia;
- How they have experienced services within Croydon; and
- What they feel could be improved to make Croydon a good place to live with dementia.

From these surveys, and further engagement work with people affected by dementia, we heard from over 75 who have received a dementia diagnosis, are an informal carer for someone living with dementia, or are a family member/friend of someone living with dementia.

A summary of the findings can be found in appendix E of the Strategic Plan.

21.06.23 (text above edited by R Eyre, Head of Improvement, Croydon Council)



3. Impact of the proposed change

3.1 Deciding whether the potential impact is positive or negative

Table 1 - Positive/Negative impact

Protected characteristic group(s)	Positive impact	Negative impact	Source of evidence
Age	Yes – the strategic plan will provide clarity to our residents, carers, workforce, providers and partners, on the core dementia offer and services provided by statutory and non-statutory partners in the borough. The highest risk factor for Dementia is age, predominantly affecting 5% of people aged 65 years and over and 20% of those aged over 80 years. Dementia however is not an inevitable part of ageing. Not everyone who is old has Dementia and not everyone who has Dementia is old. In Croydon there are an estimated 3,597 of people living with dementia; of which 2,692 people over the age of 65 who have received a dementia diagnosis.	None specifically identified.	Croydon Dementia Strategic Plan.



Disability	Yes – the strategic plan will provide clarity to our residents, carers, workforce, providers and partners, on the core dementia offer and services provided by statutory and non-statutory partners in the borough. The figures quoted above are significantly higher for people with a learning disability (around twice as high) and greater still for people with Down's syndrome and from an earlier age (e.g. 1/10 people in their 40's and over half of those above 60 years of age).		Croydon Dementia Strategic Plan.
Gender	Yes – the strategic plan will provide clarity to our residents, carers, workforce, providers and partners, on the core dementia offer and services provided by statutory and non-statutory partners in the borough. Research highlights that women have a greater risk of developing dementia during their lifetime. The main reason for this greater risk is because women live longer than men and old age is the biggest risk factor for this disease.		
Gender Reassignment	None specifically identified.	None specifically identified.	
Marriage or Civil Partnership	None specifically identified.	None specifically identified.	
Religion or belief	None specifically identified.	None specifically identified.	





Race	Yes – the strategic plan will provide clarity to our residents, carers, workforce, providers and partners, on the core dementia offer and services provided by statutory and non-statutory partners in the borough. As described in the Health and Care plan for Croydon 2019, 51.7% of residents are from a BAME background. The strategic plan aims to: Build strong links with organisations that support people from black and minority ethnic groups to encourage them to be part of Croydon Dementia Action Alliance, connect them to information about dementia (in different languages where possible), provide dementia awareness and support them to explore		Croydon Health and Care Plan. Croydon Dementia Strategic Plan.
	dementia friendly actions.		
Sexual Orientation	None specifically identified.	None specifically identified.	
Pregnancy or Maternity	None specifically identified.	None specifically identified.	

3.2 Additional information needed to determine impact of proposed change

Table 2 – Additional information needed to determine impact of proposed change

If you need to undertake further research and data gathering to help determine the likely impact of the proposed change, outline the information needed in this table. Please use the table below to describe any consultation with stakeholders and summarise how it has influenced the proposed change. Please attach evidence or provide link to appropriate data or reports.



Additional information needed and or Consultation Findings	Information source	Date for completion
None required at present.	None required at present.	None required at
		present.

3.3 Impact scores
Table 4 – Equality Impact Score

of Impact	2	2	4	6
Severity of		1	2	3
Sev	Lik	elihood	of Impa	act

Risk Index	Risk Magnitude	
6 – 9	High	
3 – 5	Medium	
1 – 3	Low	

Table 3 – Impact scores

Column 1	Column 2	Column 3	Column 4
PROTECTED GROUP	LIKELIHOOD OF IMPACT SCORE	SEVERITY OF IMPACT SCORE	EQUALITY IMPACT SCORE
Age	3	1	3
Disability	3	1	3
Gender	3	1	3
Gender reassignment	1	1	1
Marriage / Civil Partnership	1	1	1
Race	3	1	3
Religion or belief	1	1	1
Sexual Orientation	1	1	1
Pregnancy or Maternity	1	1	1



4. Statutory duties

4.1 Public Sector Duties

Tick the relevant box(es) to indicate whether the proposed change will adversely impact the Council's ability to meet any of the Public Sector Duties in the Equality Act 2010 set out below.

Public Sector Duties	Adverse impact	Non-adverse impact
Advancing equality of opportunity between people who belong to protected groups	-	X
Eliminating unlawful discrimination, harassment and victimisation		Х
Fostering good relations between people who belong to protected characteristic groups	-	X

5. Action Plan to mitigate negative impacts of proposed change

Table 4 – Action Plan to mitigate negative impacts

Complete this table to show any negative impacts identified for service users and/or staff from protected groups, and planned actions mitigate them.				
Protected characteristic	Negative impact	Mitigating action(s)	Action owner	Date for completion
Age	None specifically identified.	Delivery of the actions	Croydon Mental Health	Review potential changes
Disability	None specifically identified.	within the Strategic Plan will	Programme Board	as business cases for
Race	None specifically identified.	be owned by the Croydon		change are received at
		Mental Health Programme		the Board as and when
		Board, which reports to the		required.
Sex (gender)	None specifically identified.	Senior Executive Group		
		and ultimately into the		
		Croydon Health and Care		
		Board c-chaired by the		
		Executive Mayor of		





		Croydon and the Place Based Lead for Health. Review of potential changes as business cases for change will be received at the Programme Board. Business cases will need to have detailed equality impact assessments to support decision making / recommendations.
Gender reassignment	None specifically identified.	N/A
Sexual orientation	None specifically identified.	N/A
Religion or belief	None specifically identified.	N/A
Pregnancy or maternity	None specifically identified.	N/A
Marriage/civil partnership	None specifically identified.	N/A



6. Decision on the proposed change

Decision	information outlined in this Equality Analysis enter X in column 3 (Conclusion) alongside the relevant statement Definition	to show your conclusion. Conclusion - Mark 'X' below
No major change	Our analysis demonstrates that the policy is robust. The evidence shows no potential for discrimination and we all opportunities to advance equality and foster good relations, subject to continuing monitoring and review. REASON: Delivery of the actions within the Strategic Plan will be owned by the Croydon Mental Healt Programme Board, which reports to the Senior Executive Group and ultimately into the Croydon Healt Care Board c-chaired by the Executive Mayor of Croydon and the Place Based Lead for Health. Revipotential changes as business cases for change will be received at the Programme Board. Business need to have detailed equality impact assessments to support decision making / recommendations.	e have taken X th alth and iew of
Adjust the proposed change	We will take steps to lessen the impact of the proposed change should it adversely impact the Council's ability of the Public Sector Duties set out under section 4 above, remove barriers or better promote equality. We are take action to ensure these opportunities are realised. If you reach this conclusion, you must outline the a will take in Action Plan in section 5 of the Equality Analysis form	e going to
Continue the proposed change	We will adopt or continue with the change, despite potential for adverse impact or opportunities to lessen the i discrimination, harassment or victimisation and better advance equality and foster good relations between grothe change. However, we are not planning to implement them as we are satisfied that our project will not lead discrimination and there are justifiable reasons to continue as planned. If you reach this conclusion, you state out the justifications for doing this and it must be in line with the duty to have due regard and how reached this decision.	ups through I to unlawful hould clearly
Stop or amend the proposed change	Our change would have adverse effects on one or more protected groups that are not justified and cannot be our proposed change must be stopped or amended. Sion be considered at a scheduled meeting? Cabinet Meeting title: Cabinet > Date: 23 September	



7. Sign-Off

Officers that must approve this decision					
Equalities Lead	Name: De	enise McCausland	Date:		
	Position: Equalities manager				
Council Corporate	Name:	Annette McPartland	Date:		
Director	Position:	Position: Corporate Director of Adult Social Care			
South West London	Name:	Hilary Williams	Date:		
Integrated Care System	Position: Interim Director of Transformation and Commissioning				
Director / Lead		=			