Appendix H

Cumulative Equalities Impact Analysis for 2015/16 budget proposals and proposed Medium Term Financial Strategy to 2020

The council's statutory duties under the Equality Act 2010

1. This paper sets out how, as a Public Body, Barnet Council (and other organisations acting on its behalf) has approached its statutory obligation under the 2010 Equality Act and Public Sector Equalities Duties (PSED) to pay due regard to equalities in relation to Barnet's Business Planning. This includes the 2015/16 budget proposals and Medium Term Financial Strategy (MTFS) planning process to 2020.

2. To enable financial decisions to be made in a fair, transparent and accountable way, which take account of the needs and rights of all our citizens and different groups in the community, the council pays active due regard to the need to:

- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

This is in relation to the 9 protected characteristics as identified in the 2010 Equality Act during its Business Planning process which determines the Corporate Plan, Budget and MTFS. The protected characteristics are age, disability, ethnicity, gender, gender reassignment, marriage civil partnership, pregnancy, maternity, sexual orientation and religion or belief. In addition, as in previous years, the council has sought to assess the impact on carers, (including adult and young carers), people currently out of work and those on low income – groups who are not defined as a protected characteristic under the 2010 Equality Act but who may nevertheless experience additional barriers to equal life chances. This is in line with the council commitment to fairness as discussed at Policy and Resources Committee on 10 June 2014, when Members advised that Committees 'should be mindful of fairness and in particular. of disadvantaged communities when making their recommendations on savings proposals.'

Further detail of PSED and fairness requirements is given at Appendix one to this paper.



- 3. This assessment of cumulative equalities impact takes into account the:
 - Demographic make-up and trends of the borough. An equalities and cohesion summary is included at Appendix 2.
 - Individual assessment of 2015/16 proposals carried out in the Children's Service (Family Services and Education & Skills), Adults and Communities and Street scene Delivery Units, and the Commissioning Group. These use evidence and data to take account of the broad diversity of our residents and service users.
 - Inclusive approach to fairness adopted by each Theme Committee to highlight and respond to equal opportunities within their 5 year Commissioning Plans and priorities.

4. This report looks at whether a single decision or series of decisions might have a greater negative impact on a specific group or groups and at ways in which negative impacts across the council have been minimised or avoided. This assessment also considers how the broader economic context of austerity and reductions in government spending to reduce the UK budget deficit such as welfare reform, might affect the UK economy and the cost of living and therefore have a negative impact because of the economic context of the budget proposals.

5. As with last year's budget savings, the 2015/16 budget is aimed at protecting front line services and to achieve savings, so far as possible, without reducing current service levels across universal and statutory services. It is however, important to recognise that change is an unavoidable consequence of the level of savings that the council is required to make in response to rising demand and reducing Government funding. That said, the council strives to do everything possible to mitigate any disproportionate impact on protected characteristics and vulnerable groups who are impacted by the change.

6. The report looks ahead to the MTFS planning process to 2020 and the process for further analysis and consultation in the scheduled year for each saving.

Barnet's Equality Policy and Strategic Equalities Objective

7. The council aims to ensure that a consistent approach to assessing the equalities impact of its proposals is taken across services. This includes understanding any cumulative impact on any particular group and any mitigating actions that can be put in place and a commitment to refine equality assessments as proposals develop. Consultation on the council's budget proposals closed on 11 February but, due to the timings involved in clearing reports for publication, at the time of writing, the final responses to the consultation have not been fully considered in this report. However, consultation feedback, with any changes reported to Full

Council on 3 March when a final decision on the 2015/16 budget and MTFS is made an updated equality impact assessment will also be available for this meeting.

8. In response to organisational change across the council, including the adoption of commissioning operating model, set-up of the Customer and Support Group (to provided council back office activities) and Re (to provide Developmental and Regulatory Services), the council has taken action to strengthen the consistency and rigour of the approach to equalities and ensure that roles and responsibilities are clear.

9. The council's Equalities Policy was refreshed in January 2014 and advice and guidance provided across the organisation, including to internal and external Delivery Units. This is published on the council's <u>website</u>. Barnet's Equality Policy focused on providing equality of access and opportunity so that all our citizens can make equal choices and have fair life chances in Barnet. This covers all areas of council activities. The council aims to provide excellent and value for money universal and statutory services which respond to the diversity of our borough and to treat people fairly, giving everyone an equal chance to have a good quality of life.

10. The council's commitments are set out in the Equality Policy and its Strategic Equalities Objective, which is enshrined in the council's constitution - that citizens will be treated equally, with understanding and respect; have equal opportunity with other citizens; and receive quality services provided to Best Value principles.

11. Barnet has mainstreamed equality considerations into key projects and strategies so that the impact can be assessed at the outset and reviewed as proposals develop so that we are aware of and remove any discrimination or barriers in our proposals.

12. In this way decision makers can make fair and justifiable decisions because they are presented with a realistic picture which can be taken into account in decision making.

Equal opportunities in times of continuing financial challenge

13. A principal focus of Barnet's approach to the challenges ahead is its aim to be fair in a time of continuing financial challenge. That approach has required a continuing and relentless drive for efficiency and a fundamental and transparent rethink of future service delivery options. The council has made clear that there is not a fixed or rigid view about how services should be designed and delivered. Therefore the council savings proposals look at new and alternative delivery models, shared services with partners and possibly other authorities, workforce efficiencies and office accommodation savings as the council works in joined up ways with Barnet residents and partners.

14. The council's MTFS proposals (set out at Appendix C to the budget paper) will be revisited and subject to further analysis consultation and equality impact assessments in the scheduled year for each saving. The detailed analysis of each MTFS proposal will inform future years' cumulative equalities impact.

15. Equalities considerations have been integrated into the priorities and savings plans for each Committee. Committee Commissioning Plans and priorities will come together in the council's new Corporate Plan, which will be presented to Full Council in April.

16. In developing its Commissioning Plans and budget proposals to 2020, the council has mainstreamed the principles of its Equalities Policy into key business proposals, planning processes, projects and strategies. This covers all transformation projects (set out at Appendix E to the budget paper) and strategies (which have been or are currently subject to consultation) including Early Years, Libraries, Schools and Education, Customer Access, Housing, Entrepreneurial Barnet, Community Engagement, Community Assets, Carers, Sports and Physical Activities and options for a new Council Tax Support scheme.

17 The council has adopted the following key values to safeguard and promote equality of opportunity in all aspects of council activities and services and to deliver good outcomes. We will strive to make Barnet a place:

- Of opportunity
- Where responsibility is shared, fairly
- Where people are helped to help themselves recognising that prevention is better than cure
- Where people are helped to help themselves recognising that prevention is better than cure
- Where services are delivered efficiently to get value for the taxpayer.

A Growing and Diverse Borough

18. In developing this cumulative analysis, the council has taken account of demographic information about Barnet from 2011 Census as updated by GLA population forecasts 2014 and the most recent Resident's Perception Survey (June 2014). The data shows Barnet as a successful, growing and increasingly diverse borough. Barnet is a highly educated with professions to match that profile. Barnet has a lower unemployment benefit claimant rate at 6.5% in comparison with London at 7.4% and NEETs at 2.3% is 4th lowest in the country. By the end of 2015 Barnet is forecast to be the most populous London borough with a relatively high percentage of households with multiple ethnicities and multiple languages spoken.

19. Barnet is seen as safe and cohesive by residents where 94% of residents report feeling safe in the day time and 72% in the dark. 84% of residents agree that people from different backgrounds get on well together.

The 2014/15 Cumulative Equalities Analysis

20. Last year, the council noted a regrettable impact across a number of budget proposals and wider macro-economic impacts for the following protected groups:

- Older people
- Younger people
- People with disabilities including mental health and learning disabilities
- Women and lone parents

21. The report also recognised the impact on the following groups:

- Unemployed people
- People on low income
- Carers

2015/16 budget proposals

22. The proposed council budget of £282.585 million for 2015/16 includes identified savings of £17.269m. As with last year's budget savings, 2015/16 savings are aimed to achieve savings so far as possible without reducing current service levels across universal and statutory services.

23. Alongside reductions to public spending, demographic change has also increased pressure on services. This has increased demand for services and across the Children's Services and Adults and Communities Delivery Units.

24. The council has taken a rigorous and proportionate approach in considering the overall impact of the 15/16 budget proposals and MTFS proposals to 2020. The Children's Services, Adults and Communities and Street scene Delivery Units have conducted 14 EIAs on proposals that will impact residents.

25. Ten of the 14 EIAs are showing either significant or minimal positive impact. One is showing impact not known for a back office reorganisation in Adults and Communities and the Street scene proposals for street cleansing covered in one EIA, are assessed at no impact. 3 EIAs are showing a minimal negative impact. These are for short term Floating Support (Adults and Communities) and Special Educational Needs transport (Children's Service) and the proposals to reduce council tax support. These are discussed in more detail below

Adults and Communities Delivery Unit 2015/16 budget proposals

26. The Adults and Communities Delivery Unit - incorporating social care and Community Safety - has a budget of £85.2million for 2015/16 which includes identified savings of £8.4m. Ten EIAs have been conducted on Adults and Communities proposals.

27. Four are showing significant positive impacts for age and disability support for younger adults to live independently, for mental health , refocusing mental health support for younger adults on recovery, enablement and social inclusion and support; for age, physical disability and learning disability for people who live outside the borough to settle in their chosen area and for all the protected characteristics from improvements to how people access social services through 'The Front Door'. Four EIAs are showing minimal positive impact – for all the protected characteristics and carers from an improved offer to carers, the community offer which promotes choice and independence for service users through personal budgets and enables people to live independently in the community; for people with learning disabilities from working with leisure services to reduce dependency on specialist day care provision. The fourth aims to maintain outcomes for residents and service users including all the protected characteristics and reduce costs through contract negotiation.

28. One EIA that is showing a minimal negative impact covers changes to the model for Floating Support – a preventative service that supports vulnerable people to live independently, maintain their tenancy and prevent homelessness. The initial assessment of minimum negative impact is because the budget for this service will be reduced by 25% which will limit the length of time the service can be made available. The minimum negative impact is on people with disabilities, (people with mental health issues have access to a separate scheme with 9 month availability) young single parents, and people from Black and Minority Ethnic Background. The changes in floating support aim to protect this important preventative service and to provide support to vulnerable people to maintain their tenancies. Reductions in the length of time the service is available to people is balanced by protecting the service and maintaining its reach. Support will be offered for 4 - 6 months - 9 months for people with mental health issues. Key mitigations include monitoring the service, arrangements for service users to request an extension and the possibility of referral to alternative community lead programmes.

29. One proposal is a back office staff reduction which is currently showing impact not known and this will be reviewed as proposals take shape.

Childrens Service Delivery Unit 2015/16 budget proposals

30. The Childrens Service - incorporating Education and Skills and Family Services – has a budget for 15/16 of \pounds 54.8m. This includes identified 15/16 budget savings for Education_& Skills of \pounds 1.2m and \pounds 2.2m for Family Services.

31. Childrens Service has produced EIAs of the service redesign of Early Years provision and the options for the management of Education and Skills services. Both of these proposals aim to deliver improved outcomes and are showing a minimal positive impact on people with the protected characteristics.

32. An EIA is being developed for changes to the Special Educational Needs transport policy for children. These proposals are currently shown as an efficiency saving and final proposals will tighten up application of eligibility criteria. Although early indications show a minimal negative impact overall for the children who use the service and their carers, this is a cautious assessment because no change is anticipated for the majority of 865 service users. The principal mitigation will be that no one currently in receipt of support will lose it and any change in the way support is delivered to existing service users will be made only after individual discussion and review so that change is discussed and agreed with service users and/or their carers. Arrangements will be discussed and agreed on an individual basis that promote choice and independence.

The anticipated savings from the review of eligibility criteria which is planned for implementation in September 2015 assume that 14 fewer children will be identified for support each year. The proposal is that eligibility for transport for new starters will be based on an individual assessment of need and those who are not eligible will be supported to consider alternative transport arrangements. For this reason the initial assessment of impact is minimal negative. The equality impact assessment will be updated and reviewed and any equality impacts will be taken into consideration before any final decision is taken.

Street Scene Delivery Unit 2015/16 budget proposals

33. The Street scene Delivery Unit has a budget of £14m for 15/16 which includes identified savings proposals of £1.681m. The budget proposals include two efficiency savings to street cleansing services and the EIA is showing a neutral impact. The proposals take into account resident and staff views, service knowledge and priorities, data analysis on street conditions and pilot scheme results to ensure that service efficiencies are achieved whilst maintaining maximum street cleanliness.

34. Ongoing monitoring of these proposals is included in the Action Plan that accompanies the Equality Impact Assessment. Any outcomes from staff or resident focus groups and on-going data analysis of street conditions and service specific software reviews highlighting changes in delivery will be monitored.

Consultation and the legally protected groups

35 The budget proposals have been subject to public consultation that closed on 11 February 2015. Due to the timescales involved in producing and clearing this report, this draft is based on the responses to the consultation received at the time of writing. The cumulative assessment will be updated to take account of feedback where before it is presented to Full Council on 3 March.

36. The consultation underlines Barnet's commitment to openness, transparency and community engagement in exposing the challenges faced to residents and

involving them in determining our approach and priorities. The council will continue to engage with residents about priorities for spending and make efforts to reach a wide range of groups so that feedback is inclusive.

Changes in Council Tax support

37. At their meeting on 13 January 2015 meeting the Policy and Resources Committee agreed to reduce Council Tax Support to 80% for those of working age. This is a 2016/17 budget saving but Council Tax Support recipients will see the impact in their bills in 2015/16. It is therefore considered as part of this years cumulative impact assessment. The equalities impact assessment for the reduction in council tax is showing a minimal negative impact on women, lone parents people with disabilities and carers.

The change affects around 22,000 households who have already been affected when Council Tax Support was reduced to 91.5% in 2013. The reduction in support to 80% in 2015 could amount to a £1 to £2 per week increase to a Council Tax Support claimant's bill. The group affected have a low income, are working age, 60% of them are women and 1/3 are single parents. No information is available on other aspects of the protected characteristics as this information is not required to process a claim. In mitigation it is proposed to monitor the impact of the change and for the most vulnerable, discretionary funds and Discretionary Council Tax Support will be promoted to relieve hardship. The council will also consider increasing funds available in discretionary support to help those struggling to pay the Council Tax as part of the mitigation.

38. The impact of the council budget proposals cannot be seen in isolation. The challenging macro-economic climate is also likely to impact on some legally protected groups – for example, changes to the benefit system, pressure on wages and increasing housing costs in London- and this can add to the cumulative impact when taken together with council proposals.

39. For example the council's Housing Committee has recently agreed to an increase in council housing rents in line with Government guidance. The increase of Consumer Price Index (at September 2014) +1% will take effect in April 2015. Rent policy will be reviewed as part of the council's Housing strategy and a full EIA on all proposals will be undertaken ahead of implementation of any proposals arising from the review.

Cumulative Impact of 15/16 budget proposals and mitigations

40. Delivery Units have gathered data to analyse the impact by protected characteristic and included equalities action plans to mitigate any avoidable adverse impact.

41. Negative impacts have been identified for the following protected groups as indicated below:

- Age -Children and young people with disabilities SEN Transport
- Some children and families (particularly large families) and lone parents council tax
- Age older people Floating support
- Disability mental health Floating support and council tax support
- Women council tax support
- Pregnancy and maternity- Floating support and council tax
- Race and ethnicity- Floating support

Positive impacts have also been identified for all of these groups in relation to other proposals.

In addition the following other vulnerable groups may also be affected:

- Unemployed people
- People with a low income

42. Specific proposed mitigations for the protected characteristics are outlined at paragraph 28 for Floating support, paragraph 32 for SEN transport and paragraph 36 for council tax support and include:

- Changes to the specification for generic and mental health floating support service that supports vulnerable residents to live independently and maintain their tenancy.
- Individual review and discussion of the SEN transport policy and eligibility criteria with existing service users. Further equalities impact assessment on the eligibility criteria and discussion with new starter parents on sourcing alternative transport arrangements so that those who are not eligible have time to put in place alternative transport arrangements.
- Ongoing monitoring and review of equality impact assessments where negative impacts are not currently noted but could be picked up during implementation.
- Support to people who are impacted by welfare reforms through a multi-agency approach that brings together JobCentre Plus, Housing, Public Health, the Revenue and Benefits service and voluntary sector partners to offer support to people to maximise their income through work or find affordable accommodation.
- Promotion of discretionary funds available to help people manage the transition to work or help those facing crisis or hardship. The principal mitigation for working age claimants is support into and back to work and for other groups less able to find employment, the use of discretionary funds for claimants.

Equality impact on staff

43. All Human Resources implications will be managed in accordance with the council's Managing Organisational Change Policy that supports the council's Human Resources Strategy and meets statutory equalities duties and current employment legislation. This includes completing internal staff focused Equality Impact Assessments at the appropriate time in all restructures.

Medium Term Financial Strategy proposals up to 2020

44. There is insufficient detail of the MTFS proposals at this stage. Paragraphs outline what preliminary analysis has been done and how this will be developed for the budget year in question.

45. The MTFS sets out how the council proposes to live within its budget to 2020, where further savings of £73.5m are required. Each MTFS proposal has been subject to high level equalities analysis as outlined at Appendix C to the budget paper and, where appropriate, will be subject to a full EIA before final decisions are taken by Committees and savings are formally cast into annual budgets.

46. Each Committee has attempted to mitigate any anticipated high level negative impact of proposals through the development of their individual Commissioning Plans and priorities. Some detailed EIAs have already been developed and accompanied relevant Committee papers- for example in relation to Early Years provision, Education and Skills services, and the Fostering Policy. One of the MTFS proposals (Council Tax support) is showing minimal negative impact (discussed in more detail above).

47. The Transformation Programme outlined at Appendix E is planned to operate over the same period. Each project will be subject to equality requirements set out in the Council Project management toolkit and to review and challenge, with business cases reported to Committees at relevant points in time.

Considering fairness- Barnet Customer Segments

48. In meeting the financial challenge, the council will seek to strike the right balance between the needs of the more frequent users of services and the needs of the wider taxpayer, and making sure that all residents from our diverse communities – the young, old, disabled people and those on low incomes – benefit from the opportunities of growth.

49. The degree and scale of the challenge means that the council will need to change its relationships with residents, by working with local people to ensure services better meet their needs and, in certain circumstances, residents taking on more personal and community responsibility for keeping Barnet a great place to live.

50. This year officers have complemented the usual processes of Equality Impact Assessment by starting a process to assess which resident groups (described as Barnet customer segments who share key characteristics, such as age, occupation and income) will feel the impact of the range of budget proposals.

51. The council's Insight team is using data to understand more about who uses council services and map which groups are impacted by more than one proposal. This work is still in development and will contribute to the cumulative impact assessment in future years.

Conclusion and overall cumulative Equalities Impact Assessment of 2015/16 budget

52. This paper outlines how the council has paid due regard to equalities in its approach to policy making, consultation and fair decision making in the approach to set a balanced budget. In times of unprecedented and continuing austerity in Local Government budget reductions are a necessity and the council has tried to make decisions - which are often difficult - in a fair way adopting the values set out in paragraph 17 of this report. The council has continued to plan early for savings and protect front line services as much as possible.

53. The Equality Impact assessments carried out in Delivery Units show that the 15/16 budget proposals have been drawn up using information about service users. Where changes in service delivery is proposed the changes reflect the Council's broader aims of prevention rather than cure, promoting choice and independence through optimising personalised budgets wherever practicable, taking into account alternative community based services and sources of support, promoting the participation of people with learning difficulties into mainstream leisure services, enabling people to live and stay for as long as possible in the community, providing a range of options for service users and residents to contact the council, Front Door providing options on how residents and service users can approach the council for advice and support, new build housing for wheelchair users which improve housing options, changes to Mental health services are expected to improve the service by providing more choice and independence. Children's Service indicate that their proposals for early years will have a minimum positive impact on the protected characteristics and in particular they anticipate improved access to information and services for pregnancy and maternity. The Education and skills review also indicates minimum positive impact for the protected characteristics. This paper therefore identifies some positive impacts, for the protected characteristics particularly for Children and young people, Carers, people with physical disabilities, learning disabilities and mental health issues and for people of different races, religion and belief.

54. Some negative impacts have been identified for service users including those with protected characteristics. The Floating support EIA indicates there may be a minimum negative impact on older people, people with disabilities and pregnancy and maternity. Reductions in the level of council tax support identify a minimum negative impact on women, single parents, pregnancy and maternity and disability and people of working age.

The review of SEN transport proposals anticipates a perceived minimum negative impact on service users and their carers because of change rather than any actual reduction for existing service users.

55. In response to the Council's decision that Council Committees should be mindful of fairness and in particular of disadvantaged communities when making their recommendations on savings proposals, as with last year, this report notes a regrettable continuing cumulative minimal negative impact for low income groups. This picture continues to emerge from EIAs which have sought to assess the impact on additional groups such as carers (including young carers), people on low income and the unemployed and council customer data about who uses council services and maps which groups are impacted by more than one proposal. It is also confirmed in economic and social policy research studies from economic and social policy organisations such as Institute for Fiscal studies and Joseph Rowntree Foundation.

56. In order set a balanced budget savings are unavoidable and the council has sought to ensure that no one group in the borough carries the burden of those savings. There is a planned and iterative process to assess the impact of decisions each year and identify principal mitigations to ease any negative impact on particular groups of residents. The council will continue to monitor this for future years through our assurance processes and explore any specific equalities impact of our proposed MTFS decisions in the scheduled year of saving as part of that year's budget proposals.

Appendix One

The 2010 Equality Act outlines the provisions of the general and specific Public Sector Equality Duties and requires Barnet to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010;
- Advance equality of opportunity between people from different groups;
- Foster good relations between people from different groups;
- Set and publish equality objectives, at least every four years; and
- Publish information to show their compliance with the Equality Duty, at least annually. The information published must include information relating to

employees (for public bodies with 150 or more employees) and information relating to people who are affected by the public body's policies and practices.

This places a legal obligation on the council to pay due regard to equalities.. We do this by assessing the impact of our actions on different groups in Barnet including those identified in equality legislation as protected characteristics, namely: age, disability, gender, gender reassignment marriage, civil partnership, pregnancy, maternity, sexual orientation, religion or belief.

Fairness Agenda

At their first meeting on June 10 2014 Members of the Policy and Resources Committee discussed the concept of fairness and how Council Committees should be mindful of fairness and in particular, of disadvantaged communities when making their recommendations on savings proposals.

Therefore, in addition to assessing the impact of proposals on the 9 protected characteristics, the council also tries to assess the impact on certain other groups who may be considered disadvantaged and/or vulnerable. These additional groups included carers (including young carers), people on low income and the unemployed.

An update on Barnet's Strategic Equality Objective measures

In a period of austerity, which has seen Barnet make £75m savings to 2015, with a further £73.5m required in the latter half of the decade, the council has had to make hard decisions in relation to universal, statutory and safeguarding services, some of which may prove unpopular. As this paper demonstrates, the council has endeavoured to do this in a fair way, with the engagement of our residents. The overriding challenge to Barnet is to deliver excellent services in a fair way at a time of continuing financial challenge and to incorporate the principles of equality into everything the council does. This will enable the council to demonstrate that financial decisions are made in a fair, transparent and accountable way which balances the needs and rights of all Barnet citizens and different groups in the borough. We use the following measures to understand how we are doing against our Strategic Equalities Objective:

- Satisfaction with Barnet remains high 87% of residents are satisfied with their local area as a place to live. This is 4 percentage points above the national average.
- Community cohesion is increasing with 84% of residents agreeing that people from different backgrounds get on well together in the borough, and 78% of residents feel there is not a problem or not a very big problem with people not treating each other with respect and consideration.

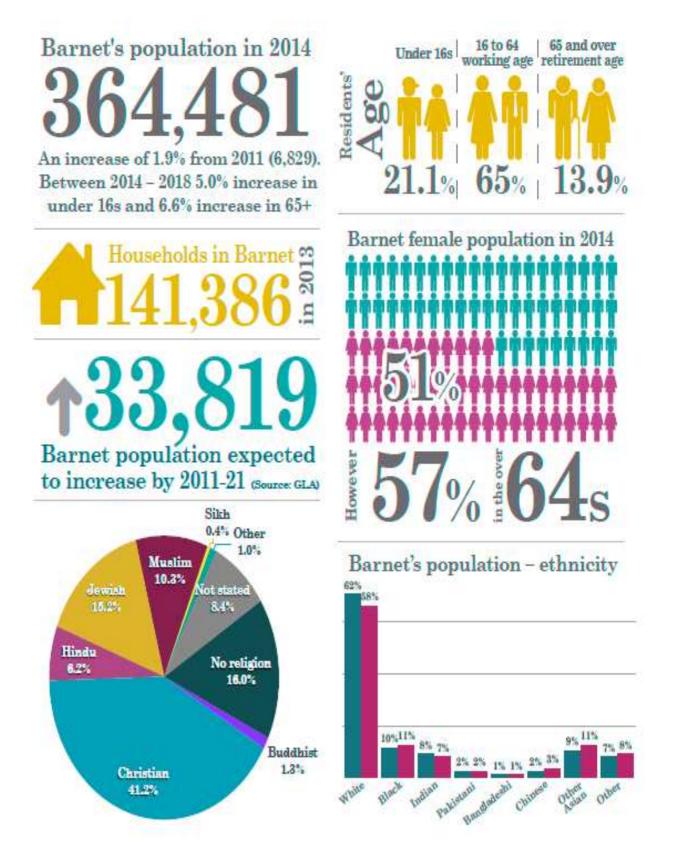
- 6.4% of Barnet residents claim out of work benefits in comparison with a London figure of 7.1%. There have been improvements in employment opportunities for young people and only 2.3% are not in employment education and training. This is the fourth lowest figure in the country and well below the London figure of 3.8%.
- Borough performance on Lifetime Homes has improved since October 1st 2013, the launch date of Re- who deliver the council's development services. There has been an improvement in the number of wheelchair accessible homes and those meeting the lifetime homes standard. Just fewer than 80% of new homes approved in 2013/14 will deliver Lifetime Homes standards compared with 65% in 2012/13. Wheelchair accessible homes were 7.4% of new homes approved. Re is also focussing on equal opportunities and undertaking an equalities impact assessment in the review of Housing Strategy following changes in housing legislation and welfare reforms.
- Overall there have been some health improvements in Barnet most notably child health outcomes outperform the London average and death amongst those under 65 years old from Cardio Vascular Disease continues to fall. However life expectancy is only slightly increasing with a slight decrease in the gap in life expectancy between the richest and the poorest.
- The Carers Strategy and the council's response to the Care Act are aimed to improve choice and the quality of life for those who care for others.
- Entrepreneurial Barnet, the Borough's economic strategy, builds on our aim to share the benefits of growth, promote employment opportunities, fair wages and wealth creation opportunities and make Barnet the best place for a small business in London.
- The council is working with JobCentre Plus and the Barnet Group to understand the impact of welfare reforms and support people to manage the transition. This includes setting up a join Welfare Reform Task Force to support people who have had their Benefits Capped and those who will start receiving Universal Credit in 2015/16. The team support people to maximise their income through benefits and work and to find sustainable accommodation. The council and JCP are also thinking about new ways to support young people, the long term unemployment and unemployed people with anxiety and depression through 3 joint projects with the WLA. These projects have been successful in attracting over £800k of Transformation Challenge Award funding from government in 2015/16 to kick start the new ways of working.

- The council is piloting a multi-agency 'Jobs Team' to support unemployed residents in Burnt Oak where joblessness is higher than the borough average into work. The model brings together the council, Jobcentre, the Government's Work Programme, voluntary sector, Public Health and housing providers in a joint team based in Burnt Oak. The objective of the *Working People, Working Places* pilot is to narrow the economic gap between Burnt Oak and the borough average. If successful, this approach will be considered for roll out in other areas.
- The council is actively seeking the view of people with learning disabilities and from different communities in Sports and Physical activities review so that the services provided will be attractive, accessible and affordable.

The council has joined up its thinking with partners on Health and Wellbeing Joint Strategic Needs Assessment, using data to inform the approach to promote inclusion, address social isolation and promote better health outcomes.

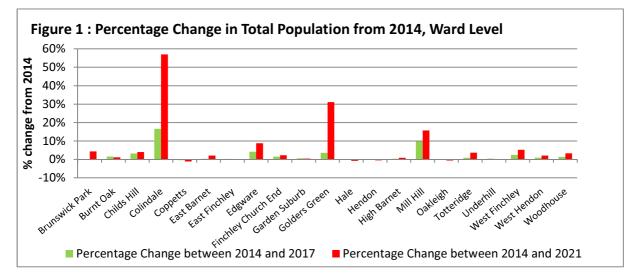
Appendix Two

Equalities and cohesion data summary



A growing borough

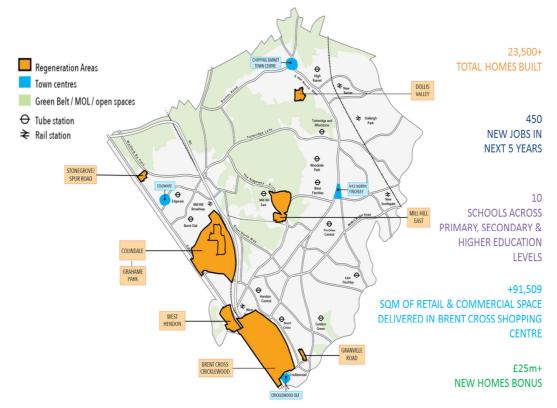
The 2013 round of GLA ward level projections, estimated the population of Barnet to be 364,481 by the end of 2014, making it the second most populous borough within London¹. Barnet is forecast to continue to grow and by the end of 2021 the population is expected to reach 391,472. Growth is forecast to spread across the borough, though varying degrees.



Barnet is an attractive place for young families and Inner Londoners who move away from Inner London as lifestyle changes and the cost of housing increases. Between 2014 and 2017, Colindale and Mill Hill are projected to show the greatest increase in total population. Between 2014 and 2021, Colindale is projected to increase by over 50%; while Golders Green is projected to grow by almost 30%. This population growth is, to a large extent, driven by the Brent Cross Cricklewood regeneration scheme.

¹ The latest Barnet population projections can be accessed <u>here</u>.

A map of Barnet's regeneration schemes



Age Structure in Barnet

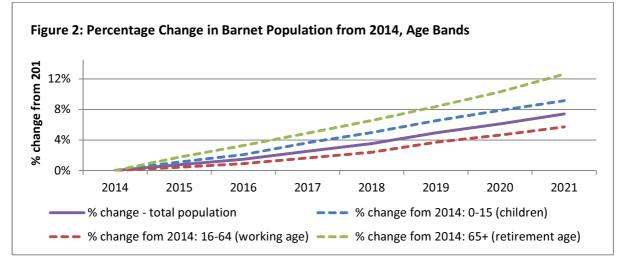
Barnet's projected population can be broken down into age groups. The age groups are:

- 0-15 (children)
- 16 64 (working age population)
- 65+ (retirement age)

The proportion of children in Barnet is projected to remain broadly the same from 2014 (21.1%) to 2021 (21.4%). Wards which see the biggest increase in the proportion of children are Hendon (1.7%), Colindale (1.5%) and West Hendon (1.2%). Wards which see a significant decrease in the proportion of children include: Golders Green (-1.8% (the population increase in this ward is likely driven by an increase in the population aged over 15)) and Brunswick Park (-1.1%). Golders Green already has the highest proportion of children (25.8%), and it is likely that this population of children is expected to age into working age before the next generation of children are born.

Across Barnet, the proportion of retirement aged residents is expected to increase from 13.9% (50,691) in 2014 to 14.6% (57,098) in 2021. Most wards are projected to see an increase in the proportion of retirement aged populations; Colindale and Golders Green are the only wards to have a decrease in the proportion of retirement aged residents.

Figure 2 shows the percentage change in the Barnet population for each age group during the period 2014 - 2021. It shows that even though a rise is projected in all age groups, the rise is not uniform. The 65 and over age group is projected to increase by 12.6% (6,407), whereas the 0-15 age group is projected a 9.1% (7,038) increase and the 16-64 age group is projected a 5.7% (13,546) increase.



A borough that continues to be diverse

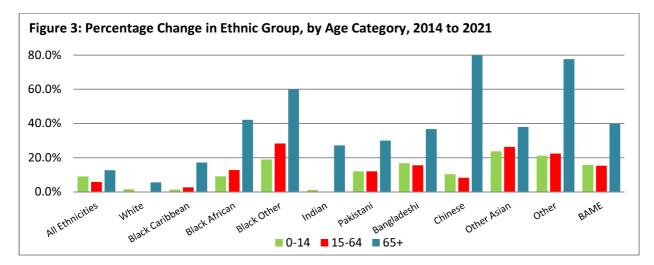
In 2014, 61.9% (225,697) of the Barnet population were from the White ethnic group, with the remaining BAME population comprised of Other Asian (9.0% (32,904)), Indian (7.6% (27,586)), Other (6.9% (25,109)), Black African (5.7% (20,759)), Black Other (3.1% (11,161)), Chinese (2.4% (8,669)), Pakistani (1.5% (5,618)), Black Caribbean (1.3% (4,578)) and Bangladeshi (0.7% (2,400)).

Barnet's population is more diverse in the south of the borough than the north. Barnet has a high percentage of households with multiple ethnicities and multiple languages spoken suggesting a higher level of ethnic integration than other parts of London, particularly other Outer London boroughs.

Barnet's population is projected to become increasingly diverse and by 2021 the White British population is projected to decrease in proportion to the total population (from 62.9% to 58.4%). All other ethnic groups show a slight increase, except for Indian, which decreases slightly in proportion from 7.6% of the total population in 2014 to 7.3% of the total population in 2021. The "Other Asian" ethnic group is projected to see the greatest percentage increase (from 9.0% to 10.6%) between 2014 and 2021.

Figure 3 shows the percentage change in ethnic group, by age category during the period 2014-2021. The "Indian" ethnic group is the only ethnic group with a projected decrease in the number of residents aged 15-64 (-0.2%) and minimal change in the 0-14 population (1.2%). This is countered by an increase in the 65+ population of 27.2%. This indicates Barnet's Indian population may already be in their late 50s, and are likely to move into retirement age by 2021 without having any more children.

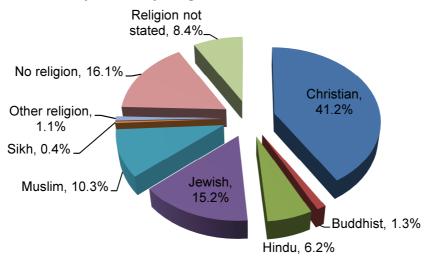
The "Chinese" ethnic group sees the greatest increase in its aged 65+ population (79.9%), whilst the "Other" ethnic group is projected to increase by 77.6% in this age range.



Those wards with a bigger ethnic minority population also have bigger migrant communities. In West Hendon and Colindale less than half of residents were born in the UK, while wards in the north of the borough have a higher proportion of UK born residents. The majority of people immigrate to the UK in early adulthood, for reasons of education, work and sometimes asylum and tend to stay in the country long term.

Based on the 2011 census data, Christianity remained the majority religion in Barnet with 41.2% (146,866 people) of the population identifying themselves as Christian. The next most common religions are Judaism (15.2%), Islam (10.3%) and Hinduism (6.2%). Barnet continues to have the largest Jewish population in the country. 16.1% (57,297) of the population said that they have no religion up from 12.8% in 2001.

Figure 5: Barnet's Population by Religion



Barnet Communities Together Network and Multi Faith Forum

The Communities Together Network, a group of partners representing Barnet's statutory (including police and fire services), community and faith organisations, work together to promote community cohesion in Barnet.

Barnet has a strong Multi Faith Forum which works with Communities Together Network. Their aims are to ensure that Barnet's diverse cultural communities should continue to live and work peacefully alongside one another and stand united in keeping Barnet as a great place to live. They challenge all forms of religious and racial hatred and intolerant language or behaviour.

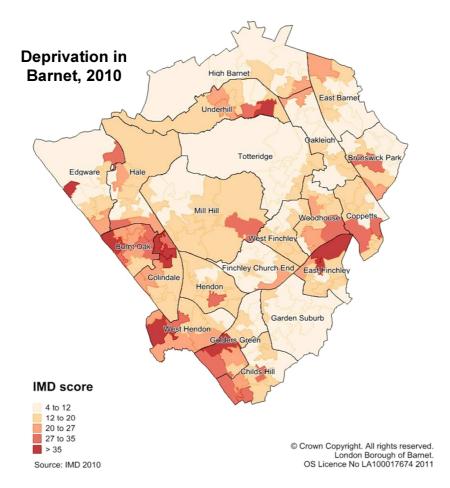
The groups will continue to work closely together to encourage and maintain the excellent work to promote and maintain community cohesion in the Borough and promote the peaceful co-existence of the borough's community and faith groups.

Deprivation

The 2010 update to the Index of Multiple Deprivation², ranks 176th out of the 326 local authorities in England and Wales for deprivation – just slightly below the average (163; the authority ranked 1 is the most deprived). This is 48 places higher than 2007 (128th) and 17 places lower than 2004 (193rd).

Within Barnet, the 2010 figures show the west of the borough still has higher levels of deprivation in Colindale, West Hendon and Burnt Oak. These areas also include large scale regeneration projects. Under this index the Strawberry Vale estate in East Finchley is identified as the most deprived area of the Borough and falls within the 11% most deprived in the country.

² The deprivation figures for 2010 can be found at the following address <u>http://www.communities.gov.uk/publications/corporate/statistics/indices2010</u>



Health, wellbeing and lifestyle

The 2011 census data suggests that the lifestyles of Barnet residents are typical of an Outer London borough. Marital status, occupation and health data all closely match the average Outer London borough profile. 47.2% (64,204) of Barnet residents aged 16 and over are married and 8.2% (28,889) of residents live in a lone parent family.

Self-reported health has improved across all parts of Barnet since 2001. 14.0% of Barnet residents suffer from a long term health problem or disability that limits their day-to-day activity. Of those people of working age 10% are affected daily by a long term illness or disability.

Barnet has a highly educated population and the occupations of Barnet residents match this profile. 40.3% of the population (aged over 16) are educated to degree level or higher which is above the London average (37.7%). Working residents tend to be in higher management roles in industries such as public service and health and a large proportion are self-employed.

These figures support data from the ONS on Business Demography that suggest Barnet has a high level of entrepreneurialism. This was demonstrated by an above average number of business start-ups (3,735 in 2013). However, Barnet also has an above average level of business failures (2,845 in 2012); the second highest in London. Only 53.4% of Barnet businesses currently survive more than 3 years,

compared to 54.8% for Greater London and 57.1% for England. This is addressed in Entrepreneurial Barnet which aims to make the Barnet the best place for a small business in London.

According to the latest Annual Population Survey (June 2013 – June 2014), 168,300 (71.9%) of Barnet's working age population are currently employed, which is slightly higher than the London average of 71.8%. Breaking this down by ward, according to data from the 2011 Census, the wards with the highest levels of employment were East Finchley and West Finchley. The lowest rates of employment were in Colindale, Burnt Oak and West Hendon.

A safe and cohesive community

Feeling safe and accepted are important features of a cohesive community. Survey data suggests that the majority of people in Barnet feel safe in their local area. 72% of residents feel safe walking alone in the dark and 94% of residents report that they feel safe in their local community during the day. Barnet has cohesive communities; with 84% of residents agreeing that people from different backgrounds get on well together in Barnet. 78% of residents also feel that the police in Barnet can be relied on to be there when you need them.

Within Barnet, 22% of residents report being worried about anti-social behaviour (ASB) in their local area, whilst 72% of residents report being satisfied with the way that the Barnet police and the Local Authority are dealing with ASB in their area. For the 12 month period ending 25th February 2014, Barnet police received 11,798 calls regarding anti-social behaviour (ASB), which equated to 32 calls per 1,000 residents. This is the 8th lowest rate of ASB calls within London. This data, along with data on hate crime and national trends, especially around feelings to one particular community, provide a key tool to analysing areas where there may be a risk of increased community tension

Adults and Communities

Equality Impact Assessment

Questionnaire EIA 1 (relates to Saving E1)

Please refer to the guidance before completing this form.

1. Details of function, policy, procedure or service:			
Title of what is being assessed: Commu	nity Offer		
Is it a new or revised function, policy, pr	ocedure or service? New proposal		
Department and Section: Adults and Co	mmunities		
Date assessment completed: December	2013 – UPDATED 1 October 2014		
2. Names and roles of officers comp	pleting this assessment:		
Lead officer	Karen Jackson		
Stakeholder groups	holder groups Service users and their carers		
Representative from internalJon Dickinsonstakeholders			
Representative from external Public Consultation 2013/2014 stakeholders Public Consultation 2013/2014			
Equalities Network rep Emily Bowler			
Performance Management rep	Performance Management rep Claire Bailey		
HR rep (for employment related issues)	N/A		

3. Full description of function, policy, procedure or service:

Please describe the aims and objectives of the function, policy, procedure or service *Please include - why is it needed, what are the outcomes to be achieved, who is it aimed at? Who is likely to benefit? How have needs based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership and carers been taken account of? Identify the ways people can find out about and benefit from the proposals. Consider any processes they need to go through or criteria that we apply to determine eligibility.*

This project covers a range of actions which will refocus the Adult Social Care offer by providing communitybased options which promote independence and choice, in line with national personalisation policy and the expectations of the Care Bill. These options include:

- 1. We will ensure that residents, service users and carers can access clear information and advice at the first point of contact. This will include the provision of independent advice and support. Where appropriate people will be signposted to community alternatives.
- 2. We will continue to develop community based options which promote independence, including:
 - Increased offer of short-term Reablement as a means of promoting people's independence at home rather than long term home care visits or moving into residential care
 - Increased use of telecare as alternative to home are visits
 - Increased use of occupational therapy assessments, telecare, aids and equipment to support residents to live at home as an alternative to traditional care, or home care visits
 - Use of a range of community-based respite care models to support carers, without necessarily moving the service user into a respite residential care placement
- 3. We will increase the use of Direct Payments which will give service users and their carers maximum choice and control to use the full range of community-based services provided by all sectors
- 4. We will use the annual reviews of existing packages of care to consider these community-based options and reduce dependency on traditional care. Any changes for individuals will be based on an assessment of their needs, which they will be fully involved in, and their views will be taken into account. We will not make any changes that do not meet these assessed needs. We will seek to ascertain the "Ordinary Residence" of those clients who are in residential placements out of borough before exploring any changes to their support plans.

Through these measures, we expect to minimise the use of traditional care and long term residential placements.

Social workers work with the following user groups, all of whom would be impacted by the changes:

- Older adults
- Younger adults with disabilities and sensory impairments
- People with learning disabilities
- People with mental health needs
- Carers of people from the above groups

Although we see these changes as a positive next step in our promotion of personalisation, and an important move towards the expected requirements of the Care Bill, we recognise some risks and some potentially difficult impacts for some people:

- Residents who have been in traditional residential placements for a long period may find a move to a community-based service difficult.

- The success of the changes will depend on their being a suitable range of services available for all user groups.
 This is particularly challenging for younger adults with disabilities
- Carers may feel that the reduced use of residential placements put increased pressure on them
- People remaining in their own homes supported through the use of equipment and adaptations as opposed to home care visits may feel more isolated.

This equality impact assessment considers these impacts on the above user groups and the social care staff who work with these sections of the community. Where necessary actions to mitigate have been identified in Sections 4 and 14.

4. How are the equality strands affected? *Please detail the effects on each equality strand, and any mitigating action you have taken so far. Please include any relevant data. If you do not have relevant data please explain why.*

Equality Strand	Affected?	Explain how affected	What action has been taken already to mitigate this? What action do you plan to take to mitigate this?
1. Age	Yes 🔀 / No 🗌	Very Elderly frail adults may prefer and feel safer living within a residential placement rather than in the community with support. Elderly people supported through the use of equipment and adaptations as opposed to home care visits may feel more isolated.	Each customer will have their case individually reviewed and assessed as to their needs. Changes to support plans will only be made following negotiation and agreement with the service user. Risk assessments will be done to mitigate risks. Those carrying out assessments and support planning will consider social needs and identify other ways in which these needs can be met.

2.	Disability	Yes 🖂 / No 🗌	Customers with physical	As above
			disability, learning disability or	
			mental health problems who	
			have special needs may need	
			additional support to live in the	
			community. Feelings of safety,	
			as described above, and	
			increased isolation may also	
			apply.	
3.	Gender	Yes 🗌 / No 🔀	No specific impact identified.	As above
	reassignment			
4.	Pregnancy and	Yes 🗌 / No 🔀	No specific impact identified	
	maternity		from these proposals	
5.	Race / Ethnicity	Yes 🖂 / No 🗌	Customers will need assurance	Contract monitoring with home
			that culturally-appropriate	care providers will ensure that
			community support and care	equalities issues are addressed.
			services are available -for	The assessment and support
			example home carers who	planning process, which fully
			have an understanding of their	involves the service user, will
			cultural background and are	identify particular needs.
			able if needed to speak their	identity particular needs.
			language if English is not their	Staff workforce development and
			first language.	training arrangements will ensure
				that staff understand and are
				able to respond to diverse needs.
				The increased use of Direct
				Payments will enable people to
				choose and control their own
				service arrangements
6.	Religion or belief	Yes 🔀 / No 🗌	As above.	As above
7.	Gender / sex	Yes 🖂 / No 🗌	No specific impact identified.	Each customer will have their
	•			case individually assessed and
				reviewed (as for older people,
				above)
8.	Sexual orientation	Yes 🖂 / No 🗌	No specific impact identified.	As above
0.		Yes 🗌 / No 🔀	No specific impact identified.	As above
9.	Marital Status			
10.	Carers	Yes 🔀 / No 🗌	Carers may feel that they are	We will continue to carry out
	(discriminated by		under more strain than if the	carers assessments to identify the
			cared-for person was using	needs of the carer and the impact

association)	traditional services.	of the service users support plan
		on them. Risks assessments will
		be done as part of the overall
		assessment of the customer
		We will explore alternative,
		community-based options for
		respite. Carers may receive a
		Direct Payment, enabling them to
		choose and control respite
		support.

5. What are the number, types and severity of disabilities in play in this case?

This case is relevant to 7,490 service users and 2,179 carers*. These figures can be broken-down as follows:

4,771 Older adults, of which:

3,795 older adults with physical disabilities and sensory impairments

99 older adults with learning disabilities

702 older adults with mental health needs

794 Younger adults with physical disabilities and sensory impairments

752 Younger adults with learning disabilities

1,173 Younger adults with mental health needs

At March 2013 1,088 of these service users were in temporary or permanent residential / nursing care placements.

As at 19/08/2013, **235** service users were recorded as having been provided with **residential / nursing placements lasting 1 year or more**, 161 of these clients suffer from dementia or frailty.**

2,179 Carers (based on the number of carers assessed / reviewed in 12/13) of which:

1,669 care for older adults

248 care for younger adults with physical disabilities and sensory impairments

171 care for younger adults with learning disabilities

86 care for younger adults with mental health needs

(it is not possible to provide a breakdown to show whether these carers are themselves older people or people with disabilities or mental health problems)

* Figures as per 2012/13 EOY statutory returns

** Figures as per bespoke 'infoview' report 19/08/2013

6. What are the actions that could reduce the impact on people with disability?

The council's existing disability policies and procedures aim to promote equality of opportunity and eliminate discrimination on the basis of disability.

Any consideration of changes to support plans will be covered as part of their annual review, and will take all aspects of their needs into account.

We will reduce the impact on people with a disability through:

- Increased choice and control, with tailored brokerage options to enable people to access suitable services to meet their needs;
- Improved information and advice;
- Development work with 3rd sector/community services.
- All staff carrying out assessments and support planning with users and carers will ensure that any potential impact of social isolation is considered as part of the process and will seek to identify ways of ensuring people's needs for social contact are addressed through other means, e.g. accessing universal services, use of lunch clubs, re-connecting with family and friends, etc.
- Carers assessments will be offered to all carers where a user's care package is being changed. Changes to the way respite is offered will be developed with carers as part of their support plan.

7. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

Maintaining high quality social work services will be a key part of the development of these proposals. Customer satisfaction is currently monitored through the Complaints and Representations process and surveys, such as the national Annual Adult Social Care Survey and Carers Survey.

8. How does the proposal enhance Barnet's reputation as a good place to work and live?

These proposals are in line with the local and national Personalisation agenda, which aims to promote people's independence, choice and control. They will place the council in a strong position to implement the expected requirements arising from the Care Bill. Although some individuals currently using traditional support and care services may initially feel some concern about change, the new Community Offer will ensure that Adults and Communities is able to provide a sustainable range of support and care services for the most vulnerable Barnet residents.

9. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

The proposals all support the personalisation agenda which promotes individual choice and control. Individuals' diverse needs will be supported through Direct Payments and tailored brokerage support.

10. What measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? *Include information about the groups of people affected by this proposal. Include how frequently will the monitoring be conducted and who will be made aware of the analysis and outcomes? Include these measures in the Equality Improvement Plan (section 14)*

Existing monitoring of customer satisfaction (see 7 above) and of service user and carer outcomes will continue to be monitored on monthly, quarterly and annual bases as at present.

11. How will the new proposals enable the council to promote good relations between different communities? Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.

As we seek to support people to live in the community, stronger links will be made within the large and diverse sections of the communities in Barnet.

12. How have residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? *Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community.*

A major Barnet-wide consultation process has been undertaken. Individuals affected by the proposals will be fully involved in any potential change to their own support and care services through their annual review process. Where there is a service provider already involved, they will also be included in discussions.

Overall Assessment

13. Overall impact		
Positive Impact	Negative Impact or Impact Not Known ³	No Impact
14. Scale of Impact		
Positive impact:	Negative Impact or Impact Not Known	
Minimal 🛛 Significant 🗌	Minimal Significant	

³ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

15. Outcome			
No change to decision	Adjustment needed to	Continue with decision	If significant negative
	decision	(despite adverse impact / missed opportunity)	impact - Stop / rethink

16. Please give full explanation for how the overall assessment and outcome was decided

This is an EIA of a change in the Social Care offer, which is a move from a Dependency model to an Enabling offer. This offer will enable people to live in the community based on their assessed need.

- Offer of information and advice signposting to community alternatives
- Reablement offer increased to support independence of residents at home rather than care home admission
- Increased use of telecare as alternative to care calls
- Increased use of occupational therapy assessments, telecare, aids and equipment to support residents to live at home
- Reduce the use of long term residential placements
- Review all existing packages of care OP/PD focusing on FACS eligibility, reablement, use of telecare, equipment and occupational therapy assessments to reduce dependency on traditional care, such as home care visits

1. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsib le	By when	UPDATE October 2014
Service users, carers and staff	Develop	Written communication	Jon	January 2014 and	Briefings to staff were
understand the proposed changes	communication plan	was sent to all affected	Dickinson	then on-going	completed during early
and feel supported		staff to ensure that they			2014 to update them on
		understand the proposals			the work of the newly
		and are able to offer full			established Community
		support to service users			Offer team ⁱ⁴ . It is also
					discussed regularly at the

⁴ The Community Offer Team was established in early 2014 which will look to increase the use of enablement and short-term support, improve the Occupational Therapy offer, increase the use of community resources and seek to provide carers with flexible support to care for people in their own homes, thus avoiding costly residential care.

Purpose:

- To assess, monitor and support individuals to live independently in their communities, through creative use of community resources.
- To maximise and utilise improved information and advice, innovative support planning techniques, innovations in technology, and direct payments to maximise independence for customers and carers with eligible care needs.

Equality Objective	Action	Target	Officer responsib le	By when	UPDATE October 2014
		and carers. We will continue to ensure that staff supports service users and carers through any changes.			Management Team meeting. Services and carers are informed services available through their annual review.
Service users and carers from Partnership Boards and the public to be consulted and engaged with the Community Offer	We have made presentations to each of the Partnership boards Public consultation events have been held. These were open to any residents, carers, service users and providers.	We will continue to ensure that service users, carers, Barnet residents and providers are aware of the changes.	Jon Dickinson	January 2014 and then ongoing	Presentations were completed in early 2014. As part of the Care Act implementation plan, we will be delivering further update on the work plan of the newly established Community Offer Team to Partnership Boards during Spring 2015.

1 st Authorised signature (Lead Officer)	2 nd Authorised Signature (Member of SMT) – Mathew Kendall
Date:	Date:

Adults and Communities

Equality Impact Assessment

Questionnaire EIA 2 (relates to Savings E2 + E8)

Please refer to the guidance before completing this form.

14. Details of function, policy, procedure or service:			
Title of what is being assessed: Reduction in Short T	erm Floating Support investment		
Is it a new or revised function, policy, procedure or s	service? Revised		
Department and Section: Adults and Communities,	Commissioning		
Date assessment completed: October 2014 Updated	d 1 October 2014		
15. Names and roles of officers completing this assessment:			
Lead officer Sue Tomlin			
Stakeholder groups Service users			
Representative from internal stakeholders	N/A		
Representative from external stakeholders N/A			
AC Equalities Network rep	Sue Tomlin		
Performance Management rep Sandeep Patel			
HR rep (for employment related issues)			

16. Full description of function, policy, procedure or service:

This service has now been re-procured with effect from 1st July 2014.

Monitoring of outcomes of the revised service by equalities groups is now being undertaken through contract monitoring and the associated performance framework.

Current contracts for short term floating support are delivered by Outreach Barnet (generic) [contract value: £1,328,063] and One Housing (mental health) [contract value: £276,340]. Both end on 31/03/14.

The current budget envelope for both contracts totals: £1,604,403

Adults and Communities hold the budget and manage the contracts but for the Outreach Barnet contract other delivery units within the council have allocated quotas for provision for their specific client groups (for example, childrens and families and housing needs) and are key stakeholders in determining future commissioning.

Adults and Communities will be running a competitive procurement to recommission a single generic short term floating support, funded through money currently invested in the two existing floating support contracts. The procurement is underway with the new contract commencing by October 2014.

The proposed saving is a 25% reduction in the value of the re-commissioned floating support contract [Budget available for re-commission following reduction: £1,203,302]

This would generate a full year saving of: £401,101

This is an important prevention service and has a high value for the various stakeholders. There is likely to be more demand for services for the following reasons:

- New welfare benefits and other housing changes (legislation and housing market)
- Increasing need for support for people placed temporarily or housed out of borough- short term interventions to help people settle, make new links or re-establish links
- Ageing population
- Increase in the number of residents with complex needs

Delivery Units across the council with agreed quotas have been engaged with developing the specification for the new contract. A decreased value could potentially impact on the provision that directly benefits their clients, but this will be mitigated through a competitive tender process that delivers better value for money and visibility of better outcomes.

The table on the following page summarises the floating support services that are currently operating:

	Outreach Barnet		One Housing
Service purpose	To provide housing related support to vulnerable people; to maintain people's independence and tenancy within their home, develop independent living skills and link them into appropriate universal services		Housing related floating support for homeless people in temporary housing. The service provides service to vulnerable people to live independently in the accommodation or to gain access to accommodation
Service description	Generic Floating Support		Mental Health Floating Support
Lead Provider	Notting Hill Housing		One Housing
Sub-contractors	Genesis Housing and Homeless Barnet	Action in	N / A
Contract Date	May 2010 – March 2014		April 2003 – March 2014
Annual contract value	£1,328,063 pa		£276,340 pa
	Pooled budget		
	Adults and Communities:	49.60%	
	Children's Service:	27.12%	
	Health:	4.92%	
	Housing:	8.35%	
Support hours per week	1260		Varies, dependent on needs of customer
Quotas	Drug problem –	20	None
	Homeless families in need –	60	
	Older people –	80	
	Young People leaving care -	40	
Capacity	526 service users supported at a time	any one	100 service users supported at any one time
Hours input	Average of 2.5 hours per week		Varies, dependent on needs of customer
Service user profile	Vulnerable adults		Primary group: people with mental health problems.
			Single homeless with support needs
			All ages

Custom and a second state of		Veriable
Customer's needs level	Low level which can be met through short	Variable
	term support. Customers must be willing	
	to engage with the service	
Duration of support	Short term – three to six months. Longer	Up to 2 years, but aim to have a 50%
	term support subject to individual and	throughput so aim for 9 months 1
	agreement.	year support. This also depends on
		need as the provider we will do short term support and one-off support if
		needed.
Tenures	Service works with all housing tenures	Works with all housing tenures; client
	including people preparing to move from	must be resident in Barnet
	supported housing, residential care and	
	hospital.	
Charging	Free service to all customers	Free service to all customers
Access/operating times	Premises in Barnet. Monday to Friday	Monday to Friday 9am - 5pm (but
	9am to 5pm	provider works on weekends or late
		nights if needed, depending on
		customer's needs
Referral sources	Self-referrals	Social Services
Referral sources	Self-referrais	Self referrals via Barnet Housing Needs
	Social Care Direct	Community Mental Health Team
		GPs
	Children's and Family services	Probation services
		Drug services Primary Care Mental Health Teams
	Mental health teams	
	Voluntary agencies (e.g. BCIL, Solace)	Community Support and Rehab Team
		BDAS
	Housing (Barnet Homes)	
		Early Intervention and Prevention Team
	Prison services:	Right to Control Team
Staffing	Notting Hill - 2 Team Leaders, 14 staff	1 Senior Manager, 1 Team Manager and 5 Support Officers
	Genesis - 2 Team Leaders, 14 staff	
		Each support officer is responsible
	HAB - 1 Team Leader, 7 staff	for 20 customers each
	Volunteers are also used	
Customers	People aged 16 or over who are single or	See service user profile above.
	a member of a larger household and who:	
	- Have housing related support needs	
	and are:	
	- homeless, or	
	- failing to manage and at rick of	
	 failing to manage and at risk of 	

	losing their home, or	
	- moving on to more independent	
	living, e.g. from a family home or	
	- registered care home or supported	
	housing and are unlikely to sustain	
	their independence without support	
	- are vulnerable:	
	- Families, particularly those	
	experiencing complex problems	
	- Carers	
	- Primary need group categories	
	Customers who are likely to benefit	
	from this service.	
	Service aims	Service outcomes
Service aims / outcomes	Reducing homelessness and the use of	Avoid causing harm to others
	temporary accommodation	_
	Reducing the number of working age	Better manage mental health
	people claiming out of work benefits	
	Reducing the number of young people	Better manage physical health
	who are not in education, employment	
	and training	
	Reducing offending and re-offending	Better manage self-harm
	Increasing the numbers of drug users in	Better manage substance misuse
	effective treatment	
	Enabling older people to stay	Comply with statutory orders and
	independent	processes
	Increasing the number of people with	Greater choice and/or involvement
	learning disabilities in employment	and/or control
	Increasing the number of people with	Participate in
	mental illness who find and maintain	leisure/cultural/faith/informal learning
	settled accommodation	activities
		Maintain accommodation and avoid
		eviction
		Maximise income, including correct

benefits
Minimise harm/risk of harm from others
Obtain/participate in paid work
Participate in training and/or education
Participate in work-
like/voluntary/unpaid work
Qualifications in training or education
Reduce overall debt
Secure/obtain settled accommodation

Equality Strand	Affected?	Explain how affected	What action has been taken already to mitigate this? What action do you plan to take to mitigate this?
11. Age	Yes 🔀 / No 🗌	Negative impact 37% of clients supported are older people with support needs. The proposals will limit support to a period of 4 – 6 months, some older people may require a longer period of support.	 Offset reduced service by increasing capacity and throughput – which will be achieved through: targeted focused support of 4 months – 6 months for generic floating support – exceptions in excess. NB not mental health scheme where support available for @ 9 months Use of telephone triage Use of drop in More on line For older people ensure links made with new community lead services such as ageing well and the voluntary sector day opportunities programmes. Clients can re approach the service for further periods of

12. Disability	Yes 🛛 / No 🗌	Negative impact Table 1.0 below shows number of people with disabilities supported during 2012/13. A 25% reduction in the overall service could mean less people can be supported. The mental health floating support service would also be reduced by a pro rata amount.	The reduction in funding is offset against the increased capacity through the reduction in the support period and by more targeted outcomes based support planning. The average duration of support to mental health clients is currently 7 months the proposals for more targeted support. In addition combination of the services in one contract will mean that mental health clients are also supported through the generic service. Mental health floating support
			could be protected so that the majority of savings are made against the generic floating support service although @26% of customers of the generic service have mental health needs.
13. Gender reassignment	Yes 🔀 / No 🗌	Possible minimal impact Client record data shows low numbers of people ascribing as trans gender however a change to the service will apply equally to all customers.	See measures to offset budget reduction through increase in capacity describes in box 1 above.
14. Pregnancy and maternity	Yes 🔀 / No 🗌	Negative impact The service provides floating support for a teenage parent housing scheme. A change in the service will affect all customers because of the limitation of support to 4 – 6 months	See measures to offset budget reduction through increase in capacity describes in box 1 above

	Yes 🖂 / No 🗌	Negative impact	See measures to offset budget
15. Race / Ethnicity		People from BME groups are more likely to become homeless. A change in the service will affect all customers.	reduction through increase in capacity describes in box 1 above. The specification and contract will require the provider (s) to address any specific housing and support needs of the BME community including translation and interpreting.
16. Religion or belief	Yes 🔀 / No 🗌	Possible minimal impact The number of users affected are expected to be low. For these people, the limit of support to 4-6 months will	See measures to offset budget reduction through increase in capacity describes in box 1 above.
		have an impact	The specification and contract will require the provider (s) to address any specific religious or cultural needs.
17. Gender / sex	Yes 🔀 / No 🗌	Possible minimal impact The number of users affected are expected to be low. For these people, the limit of support to 4-6 months will have an impact	See measures to offset budget reduction through increase in capacity describes in box 1 above.
18. Sexual orientation	Yes 🔀 / No 🗌	Possible minimal impact The number of users affected are expected to be low. For these people, the limit of support to 4-6 months will have an impact	See measures to offset budget reduction through increase in capacity describes in box 1 above.
19. Marital Status	Yes 🛛/ No 🗌	Possible minimal impact The number of users affected are expected to be low. For these people, the limit of support to 4-6 months will have an impact	See measures to offset budget reduction through increase in capacity describes in box 1 above.

20. Carers (discriminated by association)	Yes 🔀 / No 🗌	Positive Impact- Specific outcomes to address the needs of carers are being included in the specification.	reduction thro capacity descr	to offset budget ough increase in ibes in box 1 above
			will have speci around suppor their househol require close v with Barnet Ca other carer or consider carer personalised a	working specifically arers Centre and ganisations. It will s' needs and pproaches to ix of support for the
18. What are the num	ber, types and severit	y of disabilities in play in this o	case?	
Summary of floating sup	port client record dat	a 2012/13		
needs). Table 1 below shows the	number of service use	ices and customers are not FAC ers supported during 2012/13. ⁻ k and show other types of need	These are the categ	ories under the
Table 1.0 Primary Clien	t Group		Frequency	%
Older people with supp	ort needs		67	9%
Older people with demo	entia & mental health	problems	10	1%
Frail elderly			19	3%
Mental health problem:	S		82	11%
Learning disabilities		5	1%	
Physical or sensory disability		60	8%	
Single homeless with su	Single homeless with support needs		8	1%
Alcohol misuse problem	Alcohol misuse problems		7	1%
Drug misuse problems				I I

Offenders/at risk of offending	4	1%
Young people at risk	14	2%
Young people leaving care	7	1%
People with HIV/AIDS	1	0%
Homeless families with support needs	34	5%
Teenage parents	5	1%
Gypsies and travellers with support needs	1	0%
People at risk of domestic violence	19	3%
Generic/Complex needs	399	53%
Total:	746	100%

Further analysis of the age profile of customers shows the high proportion of people over 60 receiving the service:

Table 2.0 Age		
16- 17	1.00%	
18 - 59	72.7%	
60 - 80+	26.3%	
80+	11.1%	

19. What are the actions that could reduce the impact on people with disability?

The provider(s) will be required to offer a revised service by increasing throughput and capacity through:

- Targeted focused support for 4 6 months for generic floating support (may be extended in exceptional circumstances). NB: the mental health scheme will provide support for around 9 months
- Use of telephone triage
- Use of drop in
- More use of on line support

For older people links will be made with new community led services such as neighbourhood services and ageing well.

20. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

Satisfaction surveys carried out during the life of the current contract with the market, wider stakeholders and service users show a high level of satisfaction with the service. The conclusion from recent consultation is that satisfaction should not be adversely affected as overall service levels (capacity and throughput) will be maintained.

Transition to a new service will be planned with the current service providers to ensure that services and satisfaction is maintained.

21. How does the proposal enhance Barnet's reputation as a good place to work and live?

There could be some external negativity about further disinvestment in prevention services but the money available for recommissioning floating support is actually significantly higher than other key prevention services that have been or will shortly be commissioned.

Achieving efficiencies in the service but maintaining service levels should enhance the Councils reputation.

22. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

Achieving efficiencies in the service but maintaining service levels should enhance the Councils reputation and confidence in the council and service providers. The provider (s) will continue to address any specific housing and support needs of the BME community including translation and interpreting and cultural support needs.

23. What measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? *Include information about the groups of people affected by this proposal. Include how frequently will the monitoring be conducted and who will be made aware of the analysis and outcomes? Include these measures in the Equality Improvement Plan (section 14)*

Through:

- Service specification development co-production with providers and service users
- Regular contract monitoring including quarterly with key stakeholders
- Annual service reviews

24. How will the new proposals enable the council to promote good relations between different communities? Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.

Table 3.0 below shows the ethnic origins of customers of the service:

White	485	65%
Mixed	47	7%
Asian	70	9%
Black	109	14%

Other	26	4%
Refused to disclose	9	1%
Total	746	100%

This is consistent with housing data and the higher level of white households correlates with the higher proportion of older people receiving the service. The specification and contract will require the provider (s) to address any specific housing and support needs of the BME community including translation and interpreting.

Housing related floating support is an important part of resettlement and establishing connections within communities.

25. How have residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community.

Stakeholder feedback on the proposals is currently being analysed will be available shortly.

The outcome of the face to face consultation and focus groups held with customers and stakeholders was largely positive. Reservations about the reduction from 6 to 3 months (generic) informed the re-modelling to 4 months for the generic contract.

Overall Assessment

26. Overall impact		
Positive Impact	Negative Impact or	No Impact
	Impact Not Known ⁵	
27. Scale of Impact		
Positive impact:	Negative Impact or	
	Impact Not Known	
Minimal	Minimal 🛛	
Significant	Significant	

28. Outcome			
No change to decision	Adjustment needed to	Continue with decision	If significant negative
	decision	(despite adverse impact / missed opportunity)	impact - Stop / rethink
\boxtimes			

29. Please give full explanation for how the overall assessment and outcome was decided

This is a key preventative service, reducing future financial impact on council services / and those of partners. The 25% reduction protects this type of provision that potentially will be more in demand as a result of external pressures, for example welfare reform.

Disinvestment could potentially impact on other areas, as other services could need to pick up the support including possible increase in costs of temporary accommodation.

Modelling of the shorter periods of support shows that the overall capacity of the service will not be affected.

⁵ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

Delivery Units with agreed quotas have been engaged in developing the specification for the new contract. A decreased value could potentially impact on the provision that directly benefits their clients, but this will be mitigated through the competitive tender process that delivers better value for money and visibility of outcomes.

30. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Monitor outcomes of the revised service by equalities groups	Ensure specification includes statement of expectations	Review equality impact on the outcomes of the floating support contracts by equality strands	Commissioning project manager and senior category manager	After 3 months of contract start date
Stakeholder feedback	Review stakeholder feedback	Review equality impact on the outcomes of the floating support contracts by equality strands	Senior category manager	Quarterly

1 st Authorised signature (Lead Officer)	2 nd Authorised Signature (Member of SMT) – Mathew Kendall
Date:	Date:

Adults and Communities

Equality Impact Assessment

Questionnaire EIA 3 (savings E3)

Please refer to the guidance before completing this form.

31. Details of function, policy, procedure or service:				
	Title of what is being assessed: Increased investment in carers support to reduce funded care			
Is it a new or revised function, policy, p	rocedure or service? Yes revised			
Department and Section: Prevention an	d Wellbeing, Adults and Communities			
Date assessment completed: 25 Septem	iber 2014			
32. Names and roles of officers com	pleting this assessment:			
Lead officer	Andrea Breen			
Stakeholder groups	Delivery Unit Staff, service users, Carers and Lead Provider for Carers			
	Services			
Representative from internal	Carers Project Manager			
stakeholders				
Representative from external	To include:			
stakeholders	Lead Provider for Carers Services- centre manager			
	Carers Strategy Partnership Board and Carers Forum			
Equalities Network rep	Emily Bowler / Lesley Holland			
Performance Management rep	Sandeep Patel			
HR rep (for employment related	n/a			
issues)				
33. Full description of function, policy, procedure or service:				

Please describe the aims and objectives of the function, policy, procedure or service *Please include - why is it needed, what are the outcomes to be achieved, who is it aimed at? Who is likely to benefit? How have needs based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership and carers been taken account of? Identify the ways people can find out about and benefit from the proposals. Consider any processes they need to go through or criteria that we apply to determine eligibility.*

Carers are a critical resource and enabler in supporting vulnerable people to live in their homes and communities. Ensuring that carers are properly identified and their individual needs and outcomes assessed are important components of promoting the wellbeing of those they care for, as well as for themselves. The plan reflects the importance of identifying carers early in their caring journey, making sure they are well signposted to support that will enable them to continue in their roles. The council will improve the way in which it promotes the range of preventative services already available to carers, and make sure that what is available is of good quality and meets carers outcomes.

The council's corporate plan and Health and Wellbeing strategy further describes the role of the council as facilitating people to manage their own health and wellbeing. There is a focus on the role of social capital i.e. people using their own social and community networks to do this, rather than relying on statutory health and social care services. Working closely with public health and having an integrated approach across health and social care are key enablers to making this prevention approach work for all residents.

Legislative changes through the Care Act to be implemented in April 2015 also means that the role of carers and the way in which the council assesses and supports them, will change. Therefore the policies and procedures will need to be reviewed and updated to make sure they are fit for purpose and compliant with legislation.

The duty for local authorities to undertake a carer's assessment will be 'on the appearance of need' which is similar to that for the people they care for. This removes the existing requirement that the carer must be providing "a substantial amount of care on a regular basis". This will mean many more carers are able to access an assessment, and the assessment process will also need to be updated alongside those who are service users.

The duty to meet a carer's needs is a new entitlement to support for carers. This replaces the existing discretionary power for local authorities to provide services to carers, with a requirement based on meeting eligible needs. The key conditions for a carer's entitlement is that they have assessed eligible needs for care and support and that the person for whom they care is ordinarily resident in the local authority area (or present there but of no settled residence). Again, this means that there will be changes in the way that the services are arranged.

Given what we know about the growth in the population and the needs arising from this, we must manage demand for services more effectively and ensure that we have a range of preventative approaches in place. We must work closely with public health, community health services, voluntary and community sector and with residents in developing how this will work now and in the longer term.

The Delivery Unit will review what is already in place to support carers in their caring role. This includes those services commissioned by the Delivery Unit targeted to support groups of carers, any other services commissioned by the council which supports carers, and other mainstream, secondary and /or specialist resources and services which may be led by the voluntary sector and/or CCG.

We will also review the ways in which we offering direct support to carers and those they care for through respite care and replacement care and direct payments. Updating our business processes and operational guidance for

staff and making this more transparent will assist in fairer allocation of resources where we will also be more flexible in how we can support carers to meet their own outcomes through better access to preventative services.

This approach will enable the Delivery Unit to make recommendations and improvements where necessary, identify any further equality impacts, and consider investment proposals going forward

Providing effective information, advice and signposting about how someone can look after their own health and wellbeing, as well as those they look after is a key enabler for prevention to work, and will benefit all carers. The provision of information and advice is also enshrined as a duty in the Care Act. The shift to supporting carers to access a range of services rather than rely on provision of traditional services arranged through the council, is based on the assumption that carers will be enabled to access more services because they are better informed about what is available. This Equalities Impact should address how carers and those working with carers can access appropriate and good quality information about services to support carers.

There are significant developments across the council to improve how people access information including the new My Account, council web portal and database of voluntary sector organisations. This has included co design workshops with residents. Where people are not able to access on line information, they will be able to access alternatives e.g. print copies, telephone and face to face support, accessible materials and trusted information points such as libraries and community groups. Building on community assets, local faith and community groups and those specifically working with carers coordinated through the Lead Provider for carers services, also ensures that information is inclusive and reaches all groups of people.

Staff from the Delivery Unit working directly with carers, key agency partners and the Lead Provider for Carers services will be trained so that they know what is available to support carers, and identify their needs and outcomes early and that assessments and support plans reflect this. A communications and engagement plan will be developed. It will consider feedback from the Call for Evidence which ran from 18 March 2014 to 30 June 2014.

This equalities impact addresses the impact on carers, and those working with carers.

34.	How are the equality strands affected? Please detail the effects on each equality strand, and any mitigating
	action you have taken so far. Please include any relevant data. If you do not have relevant data please
	explain why.

Equality Strand	Affected?	Explain how affected	What action has been taken already to mitigate this? What action do you plan to take to mitigate this?
21. Age	Yes 🔀 / No 🗌	Carers are diverse in terms of age including parent carers and older carers. This policy does not affect young carers. There are large numbers of older carers (aged 65 and over) and	To assess carers needs and ensure robust assessments and support plans in place for carers, as well as service users.
		this will increase (check). Moving towards a model where people access	Training programmes are run through commissioned provider (Age UK) and Ageing Well Programme to enhance digital

		information and advice on line rather than face to face, or where they are responsible for arranging their own services, there may be some carers who might be impacted. There is an assumption that many carers will be skilled and confident in using on line applications.	inclusion. Community Navigators in place to support carers providing information and advice. A review of what supports are available to support people to navigate through systems will be done.
			For some carers, direct face to face contact will continue and be appropriate and be assessed on an individual basis.
			We will continue to monitor the impact on age of those using carers services through the Lead Provider contract monitoring.
			Also achieved through internal regular reporting and monitoring of those carers receiving services/direct payments through the Council.
			It will also be reviewed in our Equality Meetings.
22. Disability	Yes 🔀 / No 🗌	Some carers with their own needs might need additional support and services.	To assess carers needs and ensure robust assessments and support plans in place for carers, as well as service users.
			We will continue to monitor the impact on disability of those using carers services through the Lead Provider contract monitoring. This is already regularly recorded and monitored.
			Also achieved through internal regular reporting and monitoring of those carers receiving services/direct payments through

			the Council. It will also be reviewed in our
			Equality Meetings.
23. Gender reassignment	Yes 🛛 / No 🗌	As above	As above
24. Pregnancy and maternity	Yes 🔀 / No 🗌	As above	Working closely with Family Services where needed
25. Race / Ethnicity	Yes 🔀 / No 🗌	There are some hidden groups of carers which include those who may not identify themselves as carers, and who may not present to statutory services relying on their own	To assess carers needs and ensure robust assessments and support plans in place for carers, as well as service users.
		informal networks. Carers will need assurance that community support services have an understanding of their	We will continue to monitor the impact on race/ethnicity of those using carers services. There are BMER support services in place, or being developed.
		cultural background and are able if needed to speak their language if English is not their first language	Also achieved through internal regular reporting and monitoring of those carers receiving services/direct payments through the Council.
			To review through engagement plan.
26. Religion or belief	Yes 🔀 / No 🗌	Some carers may not identify themselves as carers and may not present to statutory services instead relying on their own networks.	To assess carers needs and ensure robust assessments and support plans in place for carers, as well as service users.
			We will continue to monitor the impact on religion or belief throughout the life of the contract for the Lead Provider for

			Carers.
			Also achieved through internal regular reporting and monitoring of those carers receiving services/direct payments through the Council.
27. Gender / sex	Yes 🔀 / No 🗌	The majority of carers are women; however male carers may be a hidden group who may not identify themselves as carers.	To assess carers needs and ensure robust assessments and support plans in place for carers, as well as service users.
			We will continue to monitor the impact on gender/sex throughout the life of the contract for the Lead Provider for Carers.
			Also achieved through internal regular reporting and monitoring of those carers receiving services/direct payments through the Council.
28. Sexual orientation	Yes 🔀 / No 🗌		As above
29. Marital Status	Yes 🔀 / No 🗌		As above
30. Other key groups?	Yes 🔀 / No 🗌	Young Carers	Young carers services are delivered through Barnet Young Carers service with Family Services responsible for equality and performance monitoring. Therefore it is outside of the scope of this EIA.

35. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

Those service users and carers who are currently using more traditional forms of respite may be dissatisfied with any proposed changes in the way in which they are supported, as they may have established and positive relationships with particular individuals and organisations. This may result in increase in complaints, refusal and/or reluctance to work with new and different organisations, or indeed not want to take on more responsibility to manage their own health and wellbeing. There may be some increased anxiety associated with proposed changes, and thereby inadvertently increased level of support might be needed.

In the last carers survey in 2012/13 (these are done every 2 years with the next due in November 2014) the key messages were:

- Barnet's carers were more satisfied with the services and support they received than on average across other comparable London boroughs.
- 63% of carers in Barnet, that sought information about social services, reported that it was easy to find the information they required; 2% fewer than the average for other similar local authorities and 3% fewer than in the previous carer's survey.

Therefore, the findings of the 2014 survey will provide further information about other changes in how support services are arranged and delivered.

Maintaining good standards of carer assessments and support plans will be regularly monitored through staff supervision and internal quality assurance mechanisms (e.g. overseen by Quality Group chaired by the Delivery Unit Director). Satisfaction with social work services is currently monitored via the Complaints and Representation process. Resident Perception Surveys with information about customer satisfaction of adult social care services will also be reviewed.

36. How does the proposal enhance Barnet's reputation as a good place to work and live?

By more effectively promoting what is available for carers and how to access it, it will improve people's knowledge of what is available. It also highlights that carers are an important and valued resource for the council and its partners. Finally it makes clear a vision for supporting carers and what the commissioning intentions will be more widely, and that they are based on services that 'work' with clear outcomes and are value for money.

If the council is able to provide good quality carers services which are equitably allocated in a transparent way, where people can live in their own communities with their carers, this will be seen as positive place to live. If there was however a noticeable drop in the quality of carers services there would be a negative perception regarding the boroughs reputation and in particular the impact on the most vulnerable groups within our society.

37. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

Ensuring that the communications and engagement plan specifically targets diverse communities through channels which they are comfortable with and use regularly. This might be through faith and community groups and leaders. Also, by having a clear feedback system so that there are on-going dialogues and mechanisms in place, rather than the risk of any council business being perceived as having a one-off and tokenistic engagement activity. By being open and transparent about any challenges and difficulties, will also help in building and sustaining relationships with diverse communities.

If the impact of the carers assessment and provision of services is effectively rationed / or significantly and adversely changed across the groups with protected characteristics, then there could be a perception that those who are more vulnerable by reason of age, disability or having additional/different needs by virtue of race of or religion will be disproportionally disadvantaged. In these circumstances trust in how the council conducts its business could be diminished.

Audits of social care practice within the Delivery Unit, and regular and robust contract monitoring of commissioned Carers services, feedback from any complaints and representations, survey outcomes will also mitigate risks of impacts on different demographic characteristics (service users and staff).

38. What measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? Include information about the groups of people affected by this proposal. Include how frequently will the monitoring be conducted and who will be made aware of the analysis and outcomes? Include these measures in the Equality Improvement Plan (section 15)

The borough has over 32,000 carers with over 6000 providing over 50 hours of care a week. This is the second highest number of carers in the London region. The number of carers providing over 50 hours of care has increased by a third since 2001. In 2013/14 Adults and Communities assessed 1968 carers, and most (1408 carers) received information and advice, with 540 carers receiving services directly through the council.

Year	Separately	Jointly	Declined	Total
2011/12	355	2,080	30	2,465
2012/13	265	1,915	10	2,185
2013/14	429	1,519	20	1,968

The changing profile of carers is important to consider with factors such as having older and ageing carers with their own needs; increasing expectation of carers to do more; decreasing numbers of those available to care; and carers who are of working age and supporting them to continue in their caring role. Consideration of these factors will be vitally important in managing demand and services must be able to respond to these challenges.

In 2013/14 Adults and Communities assessed 1968 carers. Of these, 1519 were assessed jointly with the person they cared for and 429 had a separate assessment.

Of those carers who were assessed, most (1408 carers) received information and advice, and 540 carers received services. Services are defined as where a carer received a one off Direct Payment, contingency/emergency plan or a carers break.

This activity compares to 2012/13 where 2,185 carers were provided with assessments or a review of current

service provisions. Of these, most (1725) received information and advice, with 455 receiving services.

In 2011/12, more carers were assessed (2465 carers) with 605 people receiving services and the remainder receiving information and advice.

Performance and management information is regularly collected and reported as per Corporate requirements, and will review the equality elements detailed in section 4 of this report. The Adults and Communities Business Plan and Senior Management Team also review regularly carers activity and outcomes, and will be able to monitor any changes that arise.

Monitoring of trends and changes in surveys, complaints and representations will be done, as well as feedback through contract monitoring with the Lead Provider of carers services. The Carers Partnership Board and Carers Forum are also mechanisms to monitor and engage with.

Feedback from Delivery Unit staff about how new assessments and support plans will be obtained.

39. How will the new proposals enable the council to promote good relations between different communities? Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.

New proposals will be more transparent and accessible, so that staff and carers will be better informed about what to expect, and how they can be supported in their caring role. This may help develop better relationships based on clearer expectations and outcomes.

40. How have residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community.

From 2009 Barnet had a multi-agency carer's strategy 'Carers at the heart of families and communities' 2009-2012. This was refreshed in 2012 and a further Carer's Strategy Action Plan for 2014/15 is due to be finalised in June 2014. This Action Plan also reflects the priorities of the Health and Wellbeing Strategy. The key priorities are:

- Early recognition and support for carers
- Information and advice offer for carers
- Supporting carers to fulfil their employment potential
- Carers as expert partners in care

The Carers Strategy is overseen by the Carers Strategy Partnership Board (CSPB). The Board comprises of carers, council officers, voluntary organisations and Healthwatch Barnet. The Carers Forum is an open forum which is led by carers for carers, which informs the Carers Strategy and has representation at the Partnership Boards.

Following agreement of the detailed activities of the Savings Plan (which are currently being scoped), the following activities will take place:

- Engagement events at the Carers Forum; Carers Partnership Board and other Partnership Boards
- On line consultation
- Learning from changes to other parts of the carers offer included communicating with the Partnership Boards openly about decision making and rationale behind changes in any commissioning activity.
- Engagement and consultation at an individual level with service users and carers will also be undertaken as part their assessment and review

Overall Assessment

41. 0	verall impact		
	Positive Impact	Negative Impact or	No Impact
		Impact Not Known ⁶	
	\boxtimes		
42. S	cale of Impact		
	Positive impact:	Negative Impact or	
		Impact Not Known	
	Minimal X	Minimal	
	Significant	Significant	

43. Outcome			
No change to decision	Adjustment needed to	Continue with decision	If significant negative
	decision	(despite adverse impact /	impact - Stop / rethink
		missed opportunity)	

44. Please give full explanation for how the overall assessment and outcome was decided

This is an Equality Impact Assessment of a change in Carers practice and policy which promotes the more effective use of prevention carers services to reduce funded care. It describes a move to an Enablement offer for carers, with staff and carers having a better knowledge and access to a range of commissioned carers services and non-commissioned services in the community and voluntary sector.

This offer will enable people to live in the community based on their assessed need, with carers who are appropriately supported in their caring role.

- Improved carers identification, assessment and support plan pathways through updated procedures for staff
- Updated Carers Policy for staff and residents

⁶ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

- Effective information and advice ensuring the new Information Catalogue/directory is used to signpost to community alternatives
- Promotion of 'Carers Offer' including increased use of telecare and assistive technology to support
 residents to live at home, and give carers peace of mind, and to seek alternatives to the reliance on
 traditional forms of care and respite
- Better supporting planning including the need to meet respite and emergency needs

There will be active promotion of preventative supports and services for carer alongside the support available for the cared for person. This reflects the legislative changes of the Care Act with regards to prevention, information and advice duties; and duties to assess and provide services to carers in their own right. It also reflects the wider council priorities.

45. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Service users and staff understand the proposed changes and feel supported	Develop communication and engagement plan	Written communication to be sent to all affected staff. Targeted training for staff where needed; attendance at team meetings.	Carers Lead	Summer 2015
Carers from Partnership Boards to be consulted and engaged with the Carers Offer	Presentation to each of the Partnership boards	Written communication to be sent	Carers Lead	Summer 2015

1 st Authorised signature (Lead Officer)	2 nd Authorised Signature (Delivery Unit management team member)
Date:	Date:

Adults and Communities

Equality Impact Assessment

Questionnaire EIA 4

(relates to saving - E4 FOR 15/16)

Please refer to the guidance before completing this form.

46. Details of function, policy, proceed	lure or service:
	partnership working with leisure services and community resources we
	d reducing dependence on specialist day care provision
	a reading dependence on specialist day care provision
Is it a new or revised function, policy, pro	ocedure or service? Revised – extension of existing activity
Department and Section: Adults and Cor	nmunities
Date assessment completed: 31 st Octobe	er 2013, update 6 th October 2014
47. Names and roles of officers comp	leting this assessment:
Lead officer	Karen Jackson
Stakeholder groups	Users, carers,
Representative from internal	Karen Morrell, Learning Disability Service
stakeholders	
Representative from external	Day Opportunity providers, Leisure Services, BCIL
stakeholders	
Equalities Network rep	Emily Bowler / Lesley Holland
Performance Management rep	Sandeep Patel
HR rep (for employment related	N/A
issues)	

48. Full description of function, policy, procedure or service:

Please describe the aims and objectives of the function, policy, procedure or service *Please include - why is it needed, what are the outcomes to be achieved, who is it aimed at? Who is likely to benefit? How have needs based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership and carers been taken account of? Identify the ways people can find out about and benefit from the proposals. Consider any processes they need to go through or criteria that we apply to determine eligibility.*

By developing both specialist leisure opportunities and ensuring accessible mainstream opportunities are available, we will be providing an alternative offer to traditional day services for individuals with a learning disability. We will support the use direct payments so that people have more flexibility in the support they require and increase the use of community activities

-	action you have taken so far. Please include any relevant data. If you do not have relevant data please				
Equality Strand	Affected?	Explain how affected	What action has been taken already to mitigate this? What action do you plan to take to mitigate this?		
31. Age	Yes 🗌 / No 🔀				
32. Disability	Yes 🛛 / No 🗌	Service users There are currently around 573 adults with a learning disability in receipt of day services	As part of the review and/or support planning process alternative leisure opportunities and community based activities can be explored but decisions will be based on choice.		
33. Gender reassignment	Yes 🗌 / No 🔀				
34. Pregnancy and maternity	Yes 🗌 / No 🔀				
35. Race / Ethnicity	Yes 🔀 / No 🗌		As part of the review and/or support planning process alternative leisure/ community opportunities can be explored but decisions will be based on choice to ensure that options are culturally appropriate		
36. Religion or belief	Yes 🔀 / No 🗌		As part of the review and/or support planning process alternative leisure opportunities can be explored but decisions will be based on choice to ensure that options are culturally appropriate		
37. Gender / sex	Yes 🗌 / No 🔀				
38. Sexual orientation	Yes 🗌 / No 🔀				
39. Marital Status	Yes 🗌 / No 🔀				
40. Carers (discriminated by association)	Yes 🔀 / No 🗌	Carers may initially be concerned about individuals being offered community provisions rather than the	Carers will be involved in the review and planning process and consideration will be given to the needs of the carers as part a		

	traditional day services	carers assessment
	provisions	

50. What are the number, types and severity of disabilities in play in this case?

There are approximately 573 adults with a learning disability in receipt of day services with a variety of needs and levels of disability.

51. What are the actions that could reduce the impact on people with disability?

We will work with local leisure provision to support disability awareness and the consideration of reasonable adjustments to provision. We will identify partners who would be interested in working alongside leisure services to plan/provide leisure sessions. We will work with the organisation, (BCIL), which offers creative support planning to ensure that alternative community provisions are considered in line with needs and wishes.

52. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

Opportunities will be based on choice and personal interest and will enable individuals to access universal services which is likely to increase community engagement and participation, reduce social isolation and increase satisfaction

53. How does the proposal enhance Barnet's reputation as a good place to work and live?

The aim is to enable people with a learning disability to have the choice to access leisure and community services as a Barnet citizen in the same way as the remainder of the population does, and promotes social inclusion and our equalities responsibilities.

54. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

By providing an opportunity for greater social inclusion and access to culturally appropriate leisure and community services for people with a learning disability, Barnet's diverse communities will be confident that their needs are being met.

55. What measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? Include information about the groups of people affected by this proposal. Include how frequently will the monitoring be conducted and who will be made aware of the analysis and outcomes? Include these measures in the Equality Improvement Plan (section 14)

Regular liaison meetings between Adults and Communities and providers of leisure and community services will take place as part of the planned development to monitor progress. User engagement and satisfaction measures will be built into the project. Service users' annual reviews will also monitor outcomes. Monitoring of BCIL contract will allow us to ensure that creative support planning is helping people to have more community integration

56. How will the new proposals enable the council to promote good relations between different communities? Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.

Proposals will enable adults with a learning disability to access leisure and community services in the same way as the rest of the population. Access to leisure services also forms part of the prevention and well-being agenda and are a positive opportunity to improve health inequalities within the learning disability population such as obesity.

57. How have residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community.

Consultation will be on an individual basis as part of the annual review process and individuals will be offered the appropriate support to engage with this according to their needs.

Overall Assessment

58.	Overall impact		
	Positive Impact	Negative Impact or	No Impact
		Impact Not Known ⁷	
	\boxtimes		
59.	Scale of Impact		
	Positive impact:	Negative Impact or	
		Impact Not Known	
	Minimal 🛛 🖂	Minimal Significant	
	Significant		

60. Outcome			
No change to decision	Adjustment needed to	Continue with decision	If significant negative
	decision	(despite adverse impact / missed opportunity)	impact - Stop / rethink
\boxtimes			

61. Please give full explanation for how the overall assessment and outcome was decided

The aim of the prevention and well-being agenda and the Valuing People Now strategy is to support people to live healthy lifestyles, as part of the local community and have access to mainstream/universal services. Developing improved access to leisure and community services supports these initiatives as well as giving individuals increased choice with the potential for improved outcomes that represent value for money when compared to the cost of commissioning traditional day care services. This also supports Barnet's strategic equalities objective to support families and individuals – promoting independence, learning and well-being and

⁷ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

the reduction of gap in life expectancy and health across the borough

62. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Access to appropriate services for all vulnerable people	Develop new services in partnership with leisure and community providers		Karen Morrell	On-going

uthorised Signature (Member of SMT) – Mathew Kendall
update 6 th October 2014

Adults and Communities

Equality Impact Assessment

Questionnaire EIA 5 (relates to Saving E5)

Please refer to the guidance before completing this form.

63. Details of function, policy, procedure or service:

Title of what is being assessed:

Savings through sharing funding arrangements with MHT

Individuals who have received treatment under the mental health act on a section 3 at the point of discharge are subject to section 117 aftercare. There is an agreement currently that anyone subject to S117 will automatically be jointly funded between health and social care. The proposed changes would not impact on the Council's ability to provide these services.

Is it a new or revised function, policy, procedure or service? revised

Department and Section: Adults and Communities Delivery Unit, Commissioning

Date assessment completed: December 2013 updated 6th October 2014

64. Names and roles of officers com	64. Names and roles of officers completing this assessment:		
Lead officer	Karen Morrell		
Stakeholder groups	LBB, CCG		
Representative from internal stakeholders			
Representative from external stakeholders	Lead continuing health care officer		
Equalities Network rep	Emily Bowler / Lesley Holland		
Performance Management rep	Sandeep Patel		
HR rep (for employment related issues)			

65. Full description of function, policy, procedure or service:

Please describe the aims and objectives of the function, policy, procedure or service *Please include - why is it needed, what are the outcomes to be achieved, who is it aimed at? Who is likely to benefit? How have needs based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership and carers been taken account of? Identify the ways people can find out about and benefit from the proposals. Consider any processes they need to go through or criteria that we apply to determine eligibility.*

People who have been subject to section 3 of the mental health Act have a right to after care which will support them to stay mentally well and help to prevent a relapse in their mental health conditions. It is important that people are supported in an appropriate way and one which promotes people staying in the community and prevents admission in to acute services.

This approach enables mental health services to re-focus the service on recovery, enablement and social inclusion rather than a professionalised model of care.

This saving assumes that new models of mental health services being introduced will result in less people requiring on-going support to manage their care and support needs and therefore facilitate changes staffing model in Mental Health Trust.

This approach ensures that the pressure for in-patient units and the pressure on beds is reduced.

Equality Strand	Affected?	Explain how affected	What action has been taken already
			to mitigate this? What action do you plan to take to mitigate this?
41. Age	Yes 🗌 / No 🔀		
42. Disability	Yes 🔀 / No 🗌	Positive impact People with a mental health condition will be supported to remain in the community and support them to access home and community based models of care.	Each identified individual will have a CPA and review which support them to remain well in the community
43. Gender reassignment	Yes 🗌 / No 🔀		
44. Pregnancy and maternity	Yes 🗌 / No 🔀		
45. Race / Ethnicity	Yes 🛛 / No 🗌	Positive impact For some people, after care provisions will include ones which reflect a particular race/ethnicity need and this will be reflected in their support plans	Individual reviews will consider cultural needs and this will be considered as part of their support plan in partnership with the individual and/or their carers
46. Religion or belief	Yes 🔀 / No 🗌	Positive impact People can be placed in culturally specific services which will promote their independence.	Individual reviews will consider cultural needs and this will be considered as part of their support plan in partnership with the individual and/or their carers
47. Gender / sex	Yes 🗌 / No 🔀		
48. Sexual orientation	Yes 🗌 / No 🔀		
49. Marital Status	Yes 🗌 / No 🔀		
50. Carers (discriminated by association)	Yes 🔀 / No 🗌	Impact not known Carers may be concerned about individuals after care and how this is funded	Carers will be involved in the review and planning process

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67.	What are the number, types and severity of disabilities in play in this case?
•	
68.	What are the actions that could reduce the impact on people with disability?
	r care services will be utilised to ensure that individual needs and outcomes are considered and met by any
prop	oosed service as part of a thorough assessment/CPA/review process.
69.	What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of
	residents?
	ple will receive the right support to meet their individual needs in the community and prevent a relapse in
	r mental health which may result in admission to hospital, aftercare can promote recovery, social inclusion
and	enablement
70.	How does the proposal enhance Barnet's reputation as a good place to work and live?
The	aim is to support people to remain well and in the community
71.	How will members of Barnet's diverse communities feel more confident about the council and the
	manner in which it conducts its business?
	ugh discussion and engagement with individuals and their families to develop support plans, individual needs
will k	be considered and planned for in relationship to after-care provision.
72.	What measures and methods have been designed to monitor the application of the policy or service, the
	achievement of intended outcomes and the identification of any unintended or adverse impact? <i>Include</i>
	information about the groups of people affected by this proposal. Include how frequently will the monitoring be conducted and who will be made aware of the analysis and outcomes? Include these
	monitoring be conducted and who will be made dware of the analysis and outcomes? Include these measures in the Equality Improvement Plan (section 14)
Socia	al workers will work proactively with individuals, their cares and commissioned providers to ensure needs are
	erstood and clear plans are in place to deliver good quality, cost effective support. The borough, mental
	th trust and the CCG will work together to ensure that appropriate 117 provisions are commissioned for
	viduals and that the services work in a way to support people to remain well in the community

73.	How will the new proposals enable the council to promote good relations between different			
	communities? Include whether proposals bring different groups of people together, does the proposal have			
	the potential to lead to resentment between different groups of people and how might you be able to			
	compensate for perceptions of differential treatment or whether implications are explained.			

All support plans consider community inclusion and local networks to ensure that individuals feel engaged and supported.

74. How have residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community.

Consultation will be on an individual basis as part of the annual review/CPA process and individuals will be offered the appropriate support to remain in the community.

Overall Assessment

75.	Overall impact		
Positive Impact		Negative Impact or Impact Not Known ⁸	No Impact
	\boxtimes		
76.	Scale of Impact		
	Positive impact:	Negative Impact or Impact Not Known	
	Minimal 🗌 Significant 🔀	Minimal Significant	

77. Outcome			
No change to decision	Adjustment needed to	Continue with decision	If significant negative
	decision	(despite adverse impact / missed opportunity)	impact - Stop / rethink
\boxtimes			

78. Please give full explanation for how the overall assessment and outcome was decided

The local authority aims to support people with a mental health issue wherever possible to remain in the community, this can be achieved if the focus is on community support which promotes a personalisation, recovery and enablement model. Section 117 services should concentrate on this approach and if successful will prevent people from needing in-patient/acute care.

⁸ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

79. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Service users and staff understand the commitment to supporting individuals to remain in the community	Discussion at individual review	All individuals have a CPA, person centred after care plan	Allocated Worker	Embedded practice
Ensure that diversity of individual need and gaps in local provision are considered and investment is made to commission a model of support which supports enablement and social inclusion	Unmet need to be identified and passed to the commissioning team and individual needs are discussed as part of individual support planning	Service remodelling is considered and all individuals have a personalised after care plan	Allocated worker, head of service and commissioning lead	Annual

1 st Authorised signature (Lead Officer)	2 nd Authorised Signature (Member of SMT) – Mathew Kendall	
Date:	Date: up-dated 6 th October 2014	

Equality Analysis (EqA)

Questionnaire – EIA 6 relates to saving E6

Please refer to the guidance before completing this form.

edure or service:				
ced back office staffing costs				
procedure or service? Yes revised				
and Wellbeing, Adults and Communities				
2014 (draft v1 0)				
npleting this assessment:				
Andrea Breen				
Delivery Unit Staff				
To include: Heads of Service: Joint Commissioning Unit; Care Quality; Business Improvement; Financial Assessments				
Trade Unions				
Emily Bowler / Lesley Holland				
n/a				
HR rep (for employment related tbc issues)				

Please describe the aims and objectives of the function, policy, procedure or service Please include - why is it needed, what are the outcomes to be achieved, who is it aimed at? Who is likely to benefit? How have needs based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership and carers been taken account of? Identify the ways people can find out about and benefit from the proposals. Consider any processes they need to go through or criteria that we apply to determine eligibility.

This equalities impact assessment addresses the impact on staff and those using services arranged for by Adults and Communities.

The Saving plan relates to reduced expenditure on back office staffing functions. Scoping as to the details of the Savings Plan is still underway, but it will impact on the following service areas in the delivery Unit:

- Prevention and Wellbeing: Customer Care (including business support), performance, and prevention and carers
- Financial Assessments
- Care Quality : Quality and Purchasing, contract monitoring
- Joint Commissioning Unit
- Business Improvement.

Some aspects of the Savings Plan rely on the successful implementation of the new IT system (electronic case management and information systems) and this will be in place from April 2015, with clear project implementation dates yet to be finalised.

The Savings plan will be realised if there is no active recruitment to existing vacant roles, some of which have been vacant for a period of time. After reviewing these posts, some may be deleted. This may impact on some of the day to day business requirements and delivery of key tasks, and impact on people having increased workload. It may also be outside of their skills set and job profile. A functional review of those roles and teams is likely to result in some organisational redesign in some of the above service areas.

The Delivery Unit experienced a restructure in 2013 and some staff may feel that further changes may not be necessary. However the last restructure largely focused on frontline teams and delivery; with only some small changes to the back office functions.

Further consultation with HR and the unions will be done, once it is known exactly how many staff are affected. It will also need to take account of other similar staff consultation across the council.

The impact of the significant change programmes including the Care Act and health and social care integration have yet to be fully determined in terms of the level of staffing required to meet business requirements. Staff may require some additional skills and knowledge training in using systems, and there is likely to be a transition in culture as people move away from dependency on some traditional forms of back office functions and form, towards a more self- service and workflow system of transactions.

83. How are the equality strands affected? Please detail the effects on each equality strand, and any mitigating action you have taken so far. Please include any relevant data. If you do not have relevant data please explain why.

Equality Strond	Affected 2	Fuelein have affected	What action has been taken
Equality Strand	Affected?	Explain how affected	What action has been taken already to mitigate this? What action do you plan to take to mitigate this?
51. Age	Yes 🔀 / No 🗌	Staff are diverse in terms of age.	Organisational Change policy will be adhered to.
		Moving towards a model where there is more and improved self-service e.g. using electronic systems for reporting and managing	Analysis of those staff affected and at risk will be done. Scoping of those at risk roles is underway and not yet completed.
		information means that there is less demand for traditional forms of business interactions, and the number of people required to do such tasks.	For some service users in contact with the Delivery Unit direct face to face contact will continue and be appropriate; and this channel of engagement will still be offered albeit at a reduced and
		There is an assumption that staff will be skilled and confident in using on line	targeted level.
		applications and systems.	We will continue to monitor the impact on age of those staff employed in back office roles through working with and monitoring of HR data.
			It will also be reviewed in our Equality Meetings.
52. Disability	Yes 🛛 / No 🗌	An analysis of those roles at risk to be done in respect of disability.	Adhering to HR policy and procedures; Organisational Change procedures
			That service user and carers assessments reflect individual needs and consideration has taken place as to how they wish

			to be communicated with.
			to be communicated with.
			It will also be reviewed in our
			Equality Meetings.
52 6 1	Yes 🖂 / No 🗌	As above	As above
53. Gender			
reassignment			
54. Pregnancy and	Yes 🔀 / No 🗌	As above	As above
maternity			
,			
55. Race / Ethnicity	Yes 🔀 / No 🗌	As above	As above
56. Religion or belief	Yes 🛛 / No 🗌	As above	As above
56. Religion of beller			
F7 Condex (con	Yes 🖂 / No 🗌	Analysis of HR data to be done.	As above
57. Gender / sex			
	Yes 🛛 / No 🗌	As above	As above
58. Sexual orientation			
	Yes 🖂 / No 🗌	As above	As above
59. Marital Status			AS above
60. Other key groups?	Yes 🔀 / No 🗌		Possibly those groups of people
			who do not have formal
			qualifications.

84. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

The shift towards a self-service approach to delivering some of the back office functions and more use of computerised systems means that is likely to be reduced direct contact with the public. This may impact on the satisfaction of some of those using the services and those working in it, as some people enjoy the contact they have directly with staff members and this interaction will be reduced. Some residents are more skilled and engaged in self service activities, and will be less affected; whereas others may feel excluded and unable to ask for help when they need it.

There may also be a positive impact with an increase in customer satisfaction as a less bureaucratic approach is more transparent and streamlined, and will increase accountability. By improving the way in which people access the 'front door' and other customer care services (e.g. financial assessments) will mean that people will know where to go and their queries are met more quickly.

85. How does the proposal enhance Barnet's reputation as a good place to work and live?

Some of the staff affected may also live in Barnet and therefore, changes to their employment circumstances may be viewed negatively. There are also other consultations across the council which involve reducing staff expenditure, and the number of redundancies could be perceived to increase within a relatively short space of time, thereby impacting on the reputation of the council as a good employer.

If the council is able to continue to provide good quality social care services which promote people living in their own communities with their carers, this will be seen as positive place to live. Changes and reduction in frontline services to those in need tend to impact more negatively than changes to the back office which could be understood as the council aiming to be better organising, streamlined and efficient. However if there were negative reports about the quality of social care services there would be a negative perception regarding the reputation of the borough, and in particular the impact on the most vulnerable groups within our society.

86. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

Ensuring that staff consultation is undertaken in a fair and transparent way which takes account of individual and protected characteristics will be important, so that the relationship with some communities is not adversely affected.

The Delivery Unit will need to be clear about how they continue to meet the needs of diverse communities and continue to use a range of engagement activities to do this.

87. What measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? Include information about the groups of people affected by this proposal. Include how frequently will the monitoring be conducted and who will be made aware of the analysis and outcomes? Include these measures in the Equality Improvement Plan (section 15)

An analysis of the workforce is being carried out so that relevant plans to address any particular protected characteristics and profiles can be developed.

Organisational Change policy will be used and the full range of supports will be made available to any staff identified as 'at risk'.

There is work underway with the Leadership Team to clearly understand the functions across the identified service areas with back office roles. This will review where there are increasing demands (e.g. due to legislation) and pressures, where there may be duplication of functions, and where some roles may be better aligned. Feedback from previous staff consultation in the Delivery Unit and reviews of service areas will be obtained and inform the Saving Plan proposals.

88. How will the new proposals enable the council to promote good relations between different communities? Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.

Clear communication about how people can access information and advice about services is needed for all residents, including who to contact when they need it and operating a 'no wrong door' approach is needed to promote good relations especially as some people may have relied on or need direct face to face contact.

The new proposals will be more transparent and accessible, so that staff and all customers will be better informed about what to expect, and how they can be supported by the services they receive. This is likely to help develop better relationships based on clearer expectations and outcomes.

89. How have residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? *Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community.*

Consultation about staff changes has not happened with the community. The impact of reduced back office functions is unlikely to be felt by the majority of service users who will continue to receive direct service support. However, some service users and carers do have interactions with back office staff who are sometimes considered their 'go to person'.

Specific Staff consultation will be required.

Overall Assessment

90. Overall impact		
Positive Impact	Negative Impact or	No Impact
	Impact Not Known ⁹	
91. Scale of Impact		
Positive impact:	Negative Impact or	
	Impact Not Known	
Minimal	Minimal	
Significant	Significant	

92. Outcome			
No change to decision	Adjustment needed to	Continue with decision	If significant negative
	decision	(despite adverse impact /	impact - Stop / rethink
		missed opportunity)	
_		\square	

93. Please give full explanation for how the overall assessment and outcome was decided

This is an Equality Impact Assessment of a reduction in expenditure of back office staffing costs.

There have been relatively minor changes in the way back office and support functions are arranged in the Delivery Unit over the past few years. We now need to review the skills and capacity we have in the Delivery Unit to meet our core business requirements, to ensure that we can meet the new and increasing demands on the service going forward. We must also manage our resources within a decreasing budget and balance this with minimising the impact on frontline services.

The implementation of new and improved IT systems (case record management) and other back office activities (e.g. Integra), means that there will be likely changes in the way people work, skills they need and changes in

⁹ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

level of productivity.

The changes in legislation (Care Act) also means that the Delivery Unit must meet its new duties, and the ways in which we may have arranged our functions may no longer be the most cost effective in terms of staff and resources, nor meet increasing demand. Following further modelling work regarding the impact of the changes described, there will be some organisational redesign work within the Delivery Unit and subsequent specific staff consultation and separate Equality Impact Assessment will be done.

Senior managers will robustly manage existing and new vacancies to ensure that there is a coordinated approach so that core business requirements are met and that risk is managed effectively while overseeing spend on agency usage.

94. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Manage risk of freezing existing vacant posts and new vacant posts	Hold regular review meetings with HR		Adults Senior Management Team	April 2015
Service users and staff understand the proposed changes and feel supported	Specific Staff consultation with appropriate communication and engagement plan	Written communication to be sent to all affected staff. Targeted sessions for staff where needed; 1:1 support.	Head of Prevention and Wellbeing	May 2015
As savings proposals develop, to undertake an employee equality impact assessment	Undertake employee equality impact assessment		Head of Prevention and Wellbeing	May 2015

1 st Authorised signature (Lead Officer)	2 nd Authorised Signature (Delivery Unit management team member)
Date:	Date:

Adults and Communities

Equality Impact Assessment

Questionnaire – EIA 7 (relates to Saving E7)

Please refer to the guidance before completing this form.

95. Details of function, policy, procedure or service:			
<i>Title of what is being assessed:</i> A savings on residential/nursing ca	Iternatives to residential care – new build housing for wheelchair users to make re		
Is it a new or revised function, po	s it a new or revised function, policy, procedure or service? Proposed new service		
Department and Section: Adults a	and Communities - Commissioning		
Date assessment completed: UPI	DATED 1 October 2014		
96. Names and roles of officers completing this assessment:			
Lead officer	Sue Tomlin		
Stakeholder groups	Service users		
Representative from internal stakeholders	N/A		
Representative from external stakeholders	N/A		
AC Equalities Network rep	Sue Tomlin		
Performance Management rep	Sandeep Patel		
HR rep (for employment related issues)			
97. Full description of function, policy, procedure or service:			

Please describe the aims and objectives of the function, policy, procedure or service

Please include - why is it needed, what are the outcomes to be achieved, who is it aimed at? Who is likely to benefit? How have needs based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership and carers been taken account of? Identify the ways people can find out about and benefit from the proposals. Consider any processes they need to go through or criteria that we apply to determine eligibility.

Following a bid by Adults and Communities for new housing provision through the housing capital programme Barnet Homes new build programme includes 25 properties for wheelchair users. 5 of these properties will be included in the first phase of their development programme and these are projected to go on site in January 2015 and will be ready for people to take up the tenancies from quarter 4 (2015/16). The projected saving is critically dependent upon the timely identification by the social work team of appropriate clients in residential care or diverting from residential care.

98.	How are the equality strands affected? Please detail the effects on each equality strand, and any mitigating
	action you have taken so far. Please include any relevant data. If you do not have relevant data please
	explain why.

Equality Strand	Affected?	Explain how affected	What action has been taken already to mitigate this? What action do you plan to take to mitigate this?
61. Age	Yes 🔀 / No 🗌	Positive impact - This new build accommodation option will offer an alternative to residential care for younger people who are wheelchair users with complex needs. It will enable them to live in independent housing in secure tenancies.	This scheme establishes a supply of accommodation that meets unmet need
62. Disability	Yes 🔀 / No 🗌	Positive impact- Fully wheelchair accessible housing.	This scheme establishes a supply of accommodation that meets unmet need
63. Gender reassignment	Yes 🔀 / No 🗌	Positive impact- This supports a personalised approach to accommodation and support. Independent units rather than residential care can offer 1:1 personalised support	Customers will be able to use their personal budgets to purchase care and support.
64. Pregnancy and maternity	Yes 🗌 / No 🔀	n/a	n/a
65. Race / Ethnicity	Yes 🔀 / No 🗌	Positive impact- This supports a personalised approach to accommodation and support. Independent units rather than residential care can offer 1:1 personalised support	Customers will be able to use their personal budgets to purchase care and support.
66. Religion or belief	Yes 🛛 / No 🗌	n/a	n/a

67. Gender / sex	Yes 🔀 / No 🗌	Positive impact- This supports a personalised approach to	Customers will be able to use their personal budgets to
		accommodation and support.	purchase care and support.
		Independent units rather than	
		residential care can offer 1:1	
		personalised support.	
68. Sexual orientation	Yes 🛛 / No 🗌	Positive impact- This supports	Customers will be able to use
oo. sexual offentation		a personalised approach to	their personal budgets to
		accommodation and support.	purchase care and support.
		Independent units rather than	
		residential care can offer 1:1	
		personalised support	
69. Marital Status	Yes 🛛 / No 🗌	Positive impact- This supports	Customers will be able to use
		a personalised approach to	their personal budgets to
		accommodation and support.	purchase care and support.
		Living in ordinary housing will	
		enable couples to live together	
		Independent units rather than	
		residential care can offer 1:1	
		personalised support	
70. Carers	Yes 🛛 / No 🗌	Positive impact- Living in	Carers plans will be included in
(discriminated by		ordinary housing in the	the support planning process.
association)		community will encourage	
,		carers to play an active role in	
		support to reduce dependency	
		on formal care arrangements.	
		This contributes to emotional	
		wellbeing and reduces	
		loneliness however carers'	
		needs have to be considered	
		further.	

99. What are the number, types and severity of disabilities in play in this case?

		Resid	lential Care	Nursing Care
Placements		LA Staffed	Independent Residential Care	Registered Homes
	18-64	0	35	19
Physical Disability	65+	0	324	160
	Total	0	359	179
	18-64	0	61	4
Mental Health	65+	0	145	50
	Total	0	206	54
	18-64	1	195	0
Learning Disabilities	65+	1	35	1
	Total	2	230	1
Substance Misuse &	18-64	0	2	1
Other Vulnerable People	65+	0	17	11
	Total	0	19	12
Permanent admissions	to residential	and nursing c	are	
Older adults		2008/09	2009/10	2012/13
Residential care	All 65+	149	149	154
Nursing care	All 65+	79	89	89
Younger adults		2008/09	2009/10	2012/13
	18-64 LD	6	4	6
	18-64 MH	5	12	6
Residential care	18-64 PSI	3	5	4
	18-64 Other	0	1	1

Number of Service Users in permanent residential and nursing care placements as at 31st March 2013

	18-64 LD	0	0	0	
	18-64 MH	0	0	1	
Nursing care	18-64 PSI	6	5	3	
	18-64 Other	0	0	0	

100. What are the actions that could reduce the impact on people with disability?

The new build accommodation will be developed with the needs of specific service users in mind particularly people with complex conditions and also young people with physical disabilities preventing the need for high cost out of area placements.

It will also assist vulnerable people settle down faster and increase the chance of enabling them to contribute to their community and to enable the customer to remain within their own home should their health deteriorate further.

101. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

This will be high quality new build housing owned by the council and managed by Barnet Homes. Achieving new homes is a high priority for the council and Barnet Homes and allocation of these homes to service users moving on from or avoiding residential care should have a positive impact.

102. How does the proposal enhance Barnet's reputation as a good place to work and live?

See 6 and 7 above – an increase in housing options for wheelchair users will enhance the council's reputation.

103. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

The new housing provision will show the council's commitment to addressing housing, care and support needs by supporting the individual's independence choice and control and providing appropriate housing for people with disabilities. It will result in a reduction in support costs and residential placements.

104. What measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? Include information about the groups of people affected by this proposal. Include how frequently will the monitoring be conducted and who will be made aware of the analysis and outcomes? Include these measures in the Equality Improvement Plan (section 14)

Key review points will include the point at which potential tenants are identified. The application of the change will be monitored through: lettings statistics; impact on support plans; individual outcomes; and care and support budgets.

105. How will the new proposals enable the council to promote good relations between different communities? Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.

The wheelchair units will be part of small infill developments of general needs housing. The unit type and mix will allow different demographic groups to live together in the community.

106. How have residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community.

No specific consultation on this proposal has occurred at this stage but the next phase of the project will be to identify individual clients and engage with them on the housing proposals. Formal planning consultation has been undertaken on the developments. Planning permission is in place.

Overall Assessment

107. Overall impact		
Positive Impact	Negative Impact or	No Impact
	Impact Not Known ¹⁰	
\boxtimes		
108. Scale of Impact		
Positive impact:	Negative Impact or	
	Impact Not Known	
Minimal 🗌	Minimal	
Significant 🛛	Significant	

109. Outcome			
No change to decision	Adjustment needed to	Continue with decision	If significant negative
	decision	(despite adverse impact /	impact - Stop / rethink
		missed opportunity)	

110. Please give full explanation for how the overall assessment and outcome was decided

This is a positive housing development for the delivery unit and residents of Barnet.

These developments are aimed at people with disabilities who may otherwise need to consider residential or nursing care admission. This will give our customers another independent living option in high quality new build housing within their community.

¹⁰ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

111. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Ensure equity in the nominations to the scheme	Include key review points of the equality impact in the project plan.	Review equality impact at the care & support specification development and nomination stages.	Sue Tomlin with ASC	October 2014

1 st Authorised signature (Lead Officer)	2 nd Authorised Signature (Member of SMT) – Mathew Kendall
Date:	Date:

Adults and Communities

Equality Impact Assessment

Questionnaire EIA 8 (relates to Saving E8)

Please refer to the guidance before completing this form.

112. Details of function, policy, procedure or service:			
Title of what is being assessed: Procuren	itle of what is being assessed: Procurement of support and care services		
Is it a new or revised function, policy, pro	ocedure or service? New proposal		
Department and Section: Adults and Con	nmunities, Care Quality		
Date assessment completed: December	2013		
113. Names and roles of officers comp	leting this assessment:		
Lead officer	Marie Bailey / Enid Coleman		
Stakeholder groups	Providers		
Representative from internal stakeholders			
Representative from external stakeholders			
ASCH Equalities Network rep	Jessica Slater		
Performance Management rep	Sandeep Patel		
HR rep (for employment related issues)			
114. Full description of function, policy, procedure or service:			

Please describe the aims and objectives of the function, policy, procedure or service

Please include - why is it needed, what are the outcomes to be achieved, who is it aimed at? Who is likely to benefit? How have needs based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership and carers been taken account of? Identify the ways people can find out about and benefit from the proposals. Consider any processes they need to go through or criteria that we apply to determine eligibility.

The project will ensure smarter procurement, delivered through: better use of data; improved contracts; lean approach to care sourcing; and improved scrutiny of areas of high spend.

The above will be done through a number of procurement activities -

- Undertaking vendor reviews, cross referencing invoices against commercials to validate correctness of invoices and that the Authority is paying the correct rate (this is separate from an Accounts Payable Recovery Audit)
- Carrying out an audit of the Deceased List reviewing the deceased list against supplier billing post death, ensuring SWIFT is immediately updated. Where appropriate this will be followed by challenge and the recovery of incorrect payments
- Reviewing provision of residential care for people with complex needs ensuring that there is an
 appropriate range of services, which have not always been commissioned in the past. This will allow us to
 deliver a broader selection of services to meet individual needs.
- Reviewing the requirements for home delivered meal requirements as the current contract comes to term, with a view to reducing costs and increased choice and control.
- Auditing and recovering suppliers over payments for example where there are unclaimed VAT/credits and duplicate payments
- Revising our Community Equipment contract by joining a Framework Agreement led by Kensington and Chelsea with Mediquip
- Revising the hourly rate of care with Dimensions this enables service users to remain with their current provider, giving continuity of care

We do not anticipate any change for the Customer through the above activities. The activities would contribute to the Department being as cost efficient as possible and would therefore have a positive impact on customers overall.

115. How is the equality strands affected? Please detail the effects on each equality strand, and any mitigating action you have taken so far. Please include any relevant data. If you do not have relevant data please explain why.

Equality Strand	Affected?	Explain how affected	What action has been taken already to mitigate this? What action do you plan to take to mitigate this?
71. Age	Yes 🗌 / No 🔀		
72. Disability	Yes 🔀 / No 🗌	The changes will enable users of Dimensions to maintain their current provider	It is expected that existing Service and HR equality procedures would continue to apply

73. Gender reassignment	Yes 🗌 / No 🔀		
74. Pregnancy and maternity	Yes 🗌 / No 🔀		
75. Race / Ethnicity	Yes 🗌 / No 🔀		
76. Religion or belief	Yes 🗌 / No 🔀		
77. Gender / sex	Yes 🗌 / No 🔀		
78. Sexual orientation	Yes 🗌 / No 🔀		
79. Marital Status	Yes 🗌 / No 🔀		
80. Carers (discriminated by association)	Yes 🔀 / No 🗌	Carers of people using the Dimensions service should benefit from the continuity of service.	It is expected that existing Service and HR equality procedures would continue to apply

116. What are the number, types and severity of disabilities in play in this case?

These changes are concerned with the support and care services that we provide for all adult social care service users and their carers, although, we do not expect the changes to have a direct impact on them.

In 2012-13 we provided support and care for 7,539 people, as follows:

Younger Adults:

Physical disability	794
Mental Health	1,173
Learning disability	752
Substance misuse	34
Other vulnerable people	15
<u>Older Adults:</u>	
Physical disability	3,795
Mental Health	702
Learning disability	99
Substance misuse	6
Other vulnerable people	169

117. What are the actions that could reduce the impact on people with disability?

The councils existing disability policies and procedures aim to promote equality of opportunity and eliminate discrimination on the basis of disability, such policies will continue.

118. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

In relation to the Dimensions service we anticipate a positive impact, as the service will continue to be provided to these customers.

In relation to residential care, we expect the proposals to provide more choice for customers, so should increase customer satisfaction.

We will continue to monitor satisfaction with Adults and Communities via the Complaints and Representation process and surveys that are carried out by the department.

119. How does the proposal enhance Barnet's reputation as a good place to work and live?

If the council is able to provide good social work services through the mechanism of reduced unit costs this will help to maintain staffing levels at an appropriate level and demonstrate a value for money approach to this important service area

120. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

If the procurement activities produce greater value for money for the council, the outcome for members of all sections of the community should be beneficial.

121. What measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? Include information about the groups of people affected by this proposal. Include how frequently will the monitoring be conducted and who will be made aware of the analysis and outcomes? Include these measures in the Equality Improvement Plan (section 14)

The complaints and compliments process, along with Surveys such as the annual Adult Social Care Survey gives opportunities for feedback on all sections of Adults and Communities.

We are also in the process of establishing a Quality Assurance Framework, which will ensure that the experience of residents, service users and carers is a key focus in all of our work.

122. How will the new proposals enable the council to promote good relations between different communities? Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.

The proposals should not directly impact on intercommunity relationships.

123. How have residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community.

No general consultation has taken place or is planned because we do not expect these changes to have any direct impact on residents as individuals. We are consulting and negotiating with specific service providers as we progress each element of these procurement changes.

Overall Assessment

124. Overall impact	4. Overall impact				
Positive Impact	Negative Impact or Impact Not Known ¹¹	No Impact			
\boxtimes					
125. Scale of Impact					
Positive impact:	Negative Impact or Impact Not Known				
Minimal 🛛 🖾 Significant 🗌	Minimal Significant				

126. Outcome					
No change to decision	Adjustment needed to	Continue with decision	If significant negative		
	decision	(despite adverse impact / missed opportunity)	impact - Stop / rethink		
\boxtimes					

127. Please give full explanation for how the overall assessment and outcome was decided

In the main, the procurement changes outlined are expected to have very minimal or no direct impact on residents, service users or carers, as they are related to back-office transactions. We anticipate a positive impact for people using the Dimensions service as they will be assured of service continuity.

The activities aim to gain greater value for money for the Council through procurement activity.

¹¹ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

128. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Review of Equalities Impact will be carried out at key points in each procurement activity	Review points and targets to be established for each procurement activity	Targets to be established for each procurement activity	Category Managers	April 2014 and on- going

1 st Authorised signature (Lead Officer)	2 nd Authorised Signature (Member of SMT) –
Date:	Date:

Adults and Communities

Equality Analysis (EqA)

EIA 9 Changes to the Front Door, Eligibility, Assessment and Support Planning Process and Procedures

Please refer to the guidance before completing this form.

129. Details of function, policy, proceed	lure or service:
Title of what is being assessed: Changes and Procedures	to the Front Door, Eligibility, Assessment and Support Planning Process
Is it a new or revised function, policy, profunctions.	ocedure or service? Revised Service incorporating revised procedures and
Department and Section: Adults and Cor	nmunities Delivery Unit
Date assessment completed: 26 th Januar	y 2015
130. Names and roles of officers comp	leting this assessment:
Lead officer	Jon Dickinson and Karen Jackson
Stakeholder groups	All Adults and Communities Delivery Unit staff
	Barnet residents
Representative from internal	Community Offer Team
stakeholders	Karen Morrell
Representative from external	Housing and Care 21
stakeholders	Service users and potential service users
	Carers user group
Delivery Unit Equalities Network rep	Emily Bowler / Jenna Patel / Lesley Holland
Performance Management rep	Sandeep Patel
HR rep (for employment related issues)	N/A

131. Full description of function, policy, procedure or service:

Please describe the aims and objectives of the function, policy, procedure or service *Please include - why is it needed, what are the outcomes to be achieved, who is it aimed at? Who is likely to benefit? How have needs based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership and carers been taken account of? Identify the ways people can find out about and benefit from the proposals. Consider any processes they need to go through or criteria that we apply to determine eligibility.*

The Front Door, Eligibility, Assessment and Support Planning (FDEASP) project was set up to review the council's first point of contact or 'Front Door' service. This includes Social Care Direct (SCD), the Enablement service as provided by Housing and Care 21 (HC21) and any contact which comes through the council's main contact centre. The project aims to deliver a new service model which will improve the efficiency of the service and the experience of Adult Social Care for our residents. From April 1st 2015 the project aims to:

- Enable the 'Front Door' team to be able to resolve as much as possible at the first point of contact, thus improving customer service and ensuring people get the service first time;
- Enhance the provision of information and advice so that people are better able to find the services and support they want, and can exercise greater choice and control;
- Work to the principle of 'Once and Done', reducing the number of handoffs and call-backs our residents experience before they receive a decision or a service is put in place;
- Provide qualified staff at the Front Door who can provide a quick response to urgent situations and provide instant expert advice to call handlers;
- Reduce the volume of work that is inappropriately passed to the Locality teams;
- Design a set of Assessment, Support Planning and Review tools and processes to cover the whole customer journey in line with the requirements of the Care Act 2014;
- Strengthen the current enablement service as provided by Housing and Care 21 (HC21) by introducing Occupational Therapists to assess referrals and review requirements for ongoing care, so that people's need for long term support can be reduced, and their independence maximised, wherever possible.

In addition the FDEASP project will deliver policies and processes surrounding the Eligibility, Assessment and Support Planning processes which will enable the Adults and Communities Delivery Unit to comply with the requirements of the Care Act 2014. The revised policies and processes will also help to manage demand more effectively and efficiently and to capitalise on the improvements introduced by Mosaic, the new case management system which will replace SWIFT.

The project will deliver the following benefits:

- Provide the authority and Barnet residents with clear and robust policies and procedures for the efficient and effective delivery of Barnet's Adults and Communities Front Door and Enablement services;
- Better management of demand, supporting people to identify how best to manage their own needs wherever appropriate;
- An improved customer journey; reducing the elapsed time from contact to service delivery and reducing the number of hand-offs and call backs our residents experience;
- Increase personalisation, choice and control for our residents including the option to 'self-serve' where appropriate;
- Better value and efficiency from the current enablement contract;

- Improved customer service
- A suite of policies, processes and tools ensuring that LBB complies with its new duties under the Care Act;
- Minimised risk of legal challenge.

Overall this project is designed to be inclusive and aims to benefit all people regardless of age, race, disability, gender, ethnicity, sexual orientation and religion. However, it is important to identify the impact of the move towards self-service (online or via telephone) on the equality strands.

132.	2. How are the equality strands affected? Please detail the effects on each equality strand, and any mitigating			
	action you have taken so far. Please include any relevant data. If you do not have relevant data please			
	explain why.			

Equality Strand	Affected?	Explain how affected	What action has been taken already to mitigate this? What action do you plan to take to mitigate this?
81. Age	Yes x/ No 🗌	The service is available to adults (>16). In 2013/14 Social Care Direct (SCD) received a total of 9,140 new contacts. Of the 7,539 individuals who received services 63.8% ¹² were older adults. Any individual contacting Adult Social Care will be directed through the 'Front Door' which will include Social Care Direct (SCD), the Enablement service and any contact which comes through the council's main call centre. All services will be available to be contacted via telephone, email, referral from another professional or via online self- assessment. The improvements to the service will mean a reduced elapsed time between initial contact and assessment,	This project is designed to be inclusive and aims to benefit Older Adults. By offering a choice of contact routes (i.e. telephone, email, post, fax, and online self- assessment) older adults will have the option to engage with the service in the way which best suits them. Whilst there will be a gradual transition towards a self-serve approach, individuals will always be given the option to contact the council by telephone and speak to a trained member of staff. The Front Door will continue to retain an enhanced workforce with the relevant Equality and Diversity training so as to be sufficiently skilled to carry out tasks in a culturally sensitive, dignified and respectful manner.

¹² Data supplied by Performance and Information Team. 'Front Door Model 2013-14 Activity'.

	1	Γ	
		provision of Information and Advice or receipt of service, as appropriate. While the service will offer older adults the option to 'self- serve' via the internet, staff will remain available to speak to individuals who either do not have access to internet or e- mail, or who are less comfortable using these means of communication. Having this option available will also benefit older adults with hearing impairments for whom telephone communication may present a challenge.	The equalities policy is integrated in the management process, including evaluation of employment practice and service delivery. The new service will include explicit requirements fully covering the council's duties under equalities legislation. It will be the council's responsibility to ensure that this is monitored with positive outcomes.
		By providing access to Adult Social Care via the 'Front Door' and expanding the remit of this service to offer older adults greater choice regarding how they contact the service, this proposal will have a positive impact in regard to the 'Age' characteristic. In addition,	There are number of activities London Borough of Barnet (LBB) is engaged in to help reduce inequalities to accessing services. There are community based services which will continue to bridge the gap from community to Barnet services.
		reducing the turnaround time from initial contact to receipt of service, reducing the number of hand-offs or call backs, and offering a more efficient service generally will benefit the older adults group.	LBB has re-commissioned BCIL from April 1 st 2015 to provide information and advice advocacy, which will be Care Act compliant to Barnet Residents. Under the Care Act, we will have a duty to ensure that services are accessible for all.
			Complaints are monitored and corrective action taken as necessary.
82. Disability	Yes x / No 🗌	There are 11,448 people living in Barnet who have a limiting long term illness and 4,044 total populations aged 65 and	The Front Door service has in place an equalities policy which is integrated into the management of the service, including

83. Gender reassignment Yes \ Y				
83. Gender reassignment Yes / No x Individuals living in Barnet who reassignment to contact SCD. Staff Staff working as part of the Front Door team have received the received services, of which 765 had a learning disability and further 1,225 individuals presented with a sensory impairment, substance abuse issue, mental health problems or other vulnerable issue. Individuals with physical disabilities, learning disability or mental health problems need additional support to access services. The provision of Information, large font, braille, BSL etc.). Staff will also have access to specialist advice from their colleagues within the Learning Disabilities, wental health and Older People/Physical Disabilities teams. This will enable Social Care Direct and the integrated information, large font, braille, BSL etc.). 83. Gender reassignment Yes / No x Individuals living in Barnet who are on the journey for gender creassignment to contact SCD. Staff			over predicted to have	evaluation of employment
83. Gender reassignment Yes / No X // Yes // Yes // No X // Yes // No X // Yes // No X // Yes			dementia.	practice and service delivery.
 had a learning disability and a further 1,225 individuals presented with a sensory impairment, substance abuse issue, mental health problem or other vulnerable issue. Individuals with disabilities, learning disability or mental health problems may need additional support to access services. The provise from their colleagues within the Learning disabilities (easy read information, large font, braille, BSL etc.). to individuals with a range of bised discusses and the needs of people? Physical disabilities, substance abuse issues, mental health problems may need additional support to access services. The provise of the read service additional support to access services. The provised disabilities (easy read information, large font, braille, BSL etc.). service to respond appropriately to individuals bilities, substance abuse issues, mental health concerns or any other pertinent issues. In addition, LBB has re-commissioned BCLI from April 1st 2015 to provide information and advice advocacy, which will be advice advocacy, which will be advice advocacy, which will be information in easy-read. sender reassignment Yes / No X Matividuals living in Barnet whar are on the journey for gender reassignment may experience feelings of isolation and/or be more heatiant to context Social 			In 2013/14 7,440 individuals	Staff working as part of the Front
83. Gender Yes Yes Nox Individuals living in Barnet what are more the substance abuse in such and the substance abuse is such and the substance abuse is such a cuturally sensitive, dignified and respectful manner. Individuals with physical disabilities in a cuturally sensitive, dignified and respectful manner. 83. Gender Yes Nox Individuals living in Barnet what on the superinder for and the asy previous of the superinder for and the asy previous of the superinder for and additional support to access services. The provision of Information and Advice will continue to need to be tailored to meet the needs of people with disabilities (easy read information, large font, braille, BSL etc.). Staff will also have access to consistence abuse issues, mental health problem or appropriately to individuals with a range of physical disabilities (easy read information, large font, braille, BSL etc.). 83. Gender Yes / No x Individuals living in Barnet what are nonitored and corrective action taken as necessary. 83. Gender Yes / No x Individuals living in Barnet what are on the journey for gender reassignment may experience feelings of isolation and/or be more hesitant to contact SCD. Staff			received services, of which 765	Door team have received the
 Base Gender reassignment Yes / No X Individuals living in Barnet whare an the journey to gender will be reassing the specific processing processing the specific processing the specifi			had a learning disability and a	relevant equality and diversity
83. Gender reassignment Yes No x Individuals living in Barnet Wis respond to individuals with disabilities – there will cor ther vulnerable issue. respond to individuals with disabilities – there will continue to need to be tailored to meet the needs of people with disabilities (earning disabilities, substance abuse information, large font, braille, BSL etc.). Staff will also have access to specialist advice from their colleagues within the Learning Disabilities, Mental Health and Older People/Physical Disabilities teams. This will enable Social Care Direct and the integrated with disabilities (easy read information, large font, braille, BSL etc.). 83. Gender reassignment Yes No x Individuals living in Barnet MK are on the journey for gender reassignment may experience feelings of isolation and/or be more hesitant to condition and/or be more hesitant to condition and/or be more hesitant to condition for solariant services to respond appropriately of the service action taken as necessary.			further 1,275 individuals	induction and training, equipping
83. Gender reassignment Yes / No x Individuals living in Barnet We disabilities, learning of gender reassignment disabilities, learning disabilities, learning disabilities, learning disabilities, learning disabilities, learning disabilities, disabilities, disabilities, learning disabilities, learning disab			presented with a sensory	them with the skills needed to
83. Gender reassignment Yes / No x Individuals living in Barnet Wisproced Individuals living in Barnet Wisproced Is to responsibility of the secret Science Council Science 83. Gender reassignment Yes / No x Individuals living in Barnet Wisproced It is the responsibility of the secret Science It is the responsibility of the service Science			impairment, substance abuse	respond to individuals with
 Individuals with physical disability or mental health problems may need additional support to access to specialist advice from their colleagues within the Learning access services. The provision of Information and Advice will continue to need to be tailored to meet the needs of people with disabilities (easy read information, large font, braille, BSL etc.). BSL etc.). BSL			issue, mental health problem	disabilities in a culturally
 Base individuals with physical disabilities, learning disabilities, learning disabilities, mental health problems may need additional support to access services. The provision of Information and Advice will continue to need to be tailored to meet the needs of people with disabilities (easy read information, large font, braille, BSL etc.). BSL etc.). BSL etc.). BSL etc.). Individuals living in Barret who reasing meet addities – there will be information in easy-read. Sender reassignment Yes / No x Individuals living in Barret who receive action taken as necessary. Individuals living in Barret who receive action taken as necessary. 			or other vulnerable issue.	sensitive, dignified and respectful
83. Gender reassignment Yes / No x/ Individuals living in Barnet ware on the journey for gender contact SCD. Staff specialist advice from their colleagues within the Learning Disabilities, Mental Health and Dis			Individuals with physical	manner.
83. Gender reassignment Yes / No x Individuals living in Barnet whar on the journey for gender cassignment may experience feelings of isolation and/or be may experience feelings of isolation and/or b			disabilities, learning disability	Staff will also have access to
access services. The provision of Information and Advice will continue to need to be tailored to meet the needs of people with disabilities (leasy read information, large font, braille, BSL etc.). Disabilities, Mental Health and Older People/Physical Disabilities teams. This will enable Social Care Direct and the integrated service to respond appropriately to individuals with a range of physical disabilities, learning disabilities, substance abuse issues, mental health concerns or any other pertinent issues. In addition, LBB has re-commissioned BCLL from April 1 st 2015 to provide information and advice advocary, which will be Care Act, we will have a duty to ensure that services are accessible for all, for e.g. for people with learning disabilities – there will be information in easy-read. 83. Gender reassignment Yes / No x Individuals living in Barnet whar on the journey for gender cassignment may experience feelings of isolation and/or be more hesitant to contact Social It is the responsibility of the service to build a positive and trusting relationship with Barnet residents who contact SCD. Staff			or mental health problems may	specialist advice from their
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83. Gender reassignment Yes / No x Individuals living in Barnet who are on the journey for gender reassignment may experience feelings of isolation and/or be more hesitant to contact Social 2015 to provide information and advice advocacy, which will be Care Act compliant to Barnet Residents. Under the Care Act, we will have a duty to ensure that services are accessible for all, for e.g. for people with learning disabilities – there will be information in easy-read. 83. Gender reassignment Yes / No x Individuals living in Barnet who are on the journey for gender reassignment may experience feelings of isolation and/or be more hesitant to contact Social It is the responsibility of the service to build a positive and trusting relationship with Barnet residents who contact SCD. Staff				
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83. Gender Yes / No x Individuals living in Barnet who are on the journey for gender reassignment may experience feelings of isolation and/or be more hesitant to contact Social It is the responsibility of the service to build a positive and trusting relationship with Barnet residents who contact SCD. Staff				Complaints are monitored and
83. Gender Yes / No x Individuals living in Barnet who are on the journey for gender It is the responsibility of the service to build a positive and trusting relationship with Barnet reassignment Feelings of isolation and/or be more hesitant to contact Social It is the responsibility of the service to build a positive and trusting relationship with Barnet				corrective action taken as
are on the journey for gender reassignment may experience feelings of isolation and/or be more hesitant to contact Social service to build a positive and trusting relationship with Barnet residents who contact SCD. Staff				necessary.
are on the journey for gender reassignment may experience feelings of isolation and/or be more hesitant to contact Social service to build a positive and trusting relationship with Barnet residents who contact SCD. Staff	92 Condor	Yes / No x	Individuals living in Barnet who	It is the responsibility of the
reassignment may experience feelings of isolation and/or be more hesitant to contact Social			are on the journey for gender	
feelings of isolation and/or be more hesitant to contact Social residents who contact SCD. Staff	i cassigninent			·
more nesitant to contact Social working as part of the Front Door				÷ .
			more nesitant to contact Social	working as part of the Front Door

Services. Dependent on their individual needs, it may therefore take some individuals longer to feel confident in approaching the service. However, by adopting a holistic approach and focussing on the well-being of the individual concerned, the new 'Front Door' should be viewed as an inclusive service and accessible to all individuals, including those on the journey for gender reassignment.	service have the relevant equality and diversity induction and training to enable them to carry out tasks in a culturally sensitive dignified and respectful manner and has the ability to respond to diverse needs. The equalities policy is integrated in the management process, including evaluation of employment practice and service delivery. The new service will include explicit requirements fully
SCD staff will need to ensure they have the right skills/knowledge to meet the needs of people with gender reassignment.	covering the council's duties under equalities legislation. It will be the council's responsibility to ensure that this is monitored with positive outcomes.
	There are number of activities London Borough of Barnet (LBB) is engaged in to help reduce inequalities to accessing services. There are community based services which will continue to bridge the gap from community to Barnet services.
	LBB has re-commissioned BCIL from April 1 st 2015 to provide information and advice advocacy, which will be care act compliant to Barnet Residents. Under the Care Act, we will have a duty to ensure that services are accessible for all.
	Complaints are monitored and corrective action taken as necessary.

84. Pregnancy and maternity	Yes 🗌 / No 🗌	N/a	N/a
	Yes / No Yes x / No Yes x / No	N/aThere are over 10,000 people from Black, Asian and minority ethnic (BAME) communities living in Barnet with a range of language and cultural needs.People from BAME communities continue to receive poorer treatment 	It is the responsibility of the service to build a positive and trusting relationship with Barnet residents who contact SCD. High quality Information and Advice (IA) will be available to individuals from BAME communities, including independent IA and IA available in different languages. In addition, the Front Door will be able to organise for a translator or interpreter to support individuals from BAME communities from whom English is not their mother tongue. Staff have also received the relevant equality and diversity induction and training and are sufficiently skilled to carry out tasks in a manner which is culturally sensitive, dignified and respectful. The equalities policy is integrated in the management process, including evaluation of employment practice and service delivery. The new service will include explicit requirements fully covering the council's duties
		people from BAME communities positively if service users are not able to be fully engaged with the new approach since English may not be their mother tongue or they	explicit requirements fully
		do not fully understand the process if it is lost in translation.	There are number of activities London Borough of Barnet (LBB) is engaged in to help reduce inequalities to accessing services. There are community based services which will continue to

			bridge the gap from community to Barnet services. Meeting the needs of residents from BAME Communities is high on the agenda for Barnet Council; given the diversity of the population and this will continued to be tackled.
			Complaints are monitored and corrective action taken as necessary.
86. Religion or belief	Yes 🗌 / No 🗌	As above	As above
87. Gender / sex	Yes 🗌 / No 🗌	N/A	N/A
88. Sexual orientation	Yes 🗌 / No 🗌	N/A	N/A
89. Marital Status	Yes 🗌 / No 🗌	N/A	N/A
90. Other key groups?	Yes x / No	Carers have been identified by the Care Act as a particularly vulnerable group requiring particular attention. This includes young carers – children and young people who may be caring for an older family member.	LBB is developing clear assessment, planning and review processes to cater for the expected increase in demand for these services brought about and required by the Care Act 2014.

133. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

The general population in Barnet is very diverse in terms of faith, ethnicity, culture, language, gender and sexuality. Providers are expected to develop a diverse workforce including volunteer base, and be part of networks which promote sensitive and appropriate service delivery. Providers will be expected to demonstrate a commitment to ensuring that their services meet the diverse needs of their target client group.

The impact of delivery will be positive towards all equality strands (thus taking account of the Barnet population as a whole) and it will be the duty of the council to ensure that it is monitored accordingly.

LBB and SCD are also working closely with vulnerable service users and residents and have stated their commitment in continuing to do so. The council has clear actions to mitigate the small risk of these proposals negatively impacting on our residents through continued work in the community and links with Barnet Centre for Independent Living (BCIL).

The proposals are designed to improve the experience of our residents when contacting Adult Social Services by reducing the number of hand-offs and call-backs and reducing the elapsed time between contacting the service and receiving either a decision regarding services, targeted Information and Advice, or starting a service. Where change is perceived as negative safeguards are in place, as detailed above, and we therefore expect the proposals to have a positive impact for all Barnet residents.

134. How does the proposal enhance Barnet's reputation as a good place to work and live?

This project will deliver new service models for the Front Door and enablement services as well as policies and business processes to enable the Adults and Communities Delivery Unit to comply with the Care Act.

The Front Door service will build on and expand the range of ways by which residents and professionals can contact the service, including online 'self-service', telephone, email, fax and postal contact. These options offer our residents choice and personalisation in the way they interact with our services. Staff working as part of the Front Door service will be trained to provide services in a way which is respectful of all differences in faith, gender, ethnicity, religion, culture, language, sexuality, disability and age and to enable people to improve and enhance their independence, as well as helping individuals to access services appropriately.

Barnet residents will also feel more confident in the service as enquiries will be handled faster, more effectively and with fewer hand-offs. Individuals will therefore be directed to the appropriate part of the service first time and experience less delay in receiving an assessment, support plan, receiving tailored Information and Advice or starting a service.

135. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

Barnet's diverse communities can feel more confident about the council and the manner in which it conducts its business because the service will achieve essential efficiencies whilst maintaining high levels of customer service. In addition the service will provide better targeted Information and Advice, available in a range of formats and language and through independent sources, in order to better meet the needs and preferences of our diverse communities.

Furthermore it is supported in the Corporate Plan which sets out our strategic equalities objective:

'Our commitment is that citizens will be treated equally, with understanding and respect; have equal opportunity with other citizens; and receive quality services provided to best value principles.'

There are six main equalities objectives and each Delivery Unit also has its own equalities objectives.

The Corporate Plan describes how considering equalities is part of everything we do. It is embedded in the decisions we make as an organization and is fully integrated into the council's business planning process. The council's established approach to assessing the equality analysis of outcomes to changes in policy functions and activities support this. Policies, functions and activities are analysed for their equalities impacts and risks. These considerations will provide factual and specific information and assess the impact of those facts on different groups of people, including disabled people.

136. What measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? Include information about the groups of people affected by this proposal. Include how frequently will the monitoring be conducted and who will be made aware of the analysis and outcomes? Include these measures in the Equality Improvement Plan (section 15)

Further changes will be required to existing processes, procedures and tools to drive efficiencies, improve the customer journey and ensure the Council meets its duties to meet the needs of diverse and Black Asian minority ethnic communities under the terms of the Care Act.

The council are also focussing on promoting independence for individuals to remain in the community for as long as possible through an increased use of a targeted and effective enablement service.

This document will be reviewed every year and a monitoring process will be embedded to understand further adverse impact, if any, on key communities.

Service specification development - co-production with providers and service users
 Regular contract monitoring – including quarterly with key stakeholders
 Annual reviews

137. How will the new proposals enable the council to promote good relations between different communities? Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.

The proposal does not have the potential to lead to resentment between different groups of people; it will be the service's responsibility to engage with the diversity of Barnet's population and Barnet Councils duty to ensure that its delivery against the equality strands are monitored accordingly.

138. How have residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? *Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section*

of the community.

The Care Act project have produced a public consultation and the results of this have been shared with, and informed, the production of the FDEASP service re-design proposals.

Staff have been consulted throughout the development of the proposal, and have fed back the concerns and queries of our residents received during regular contact.

Staff directly affected by the expansion of the Front Door will be taking part in a consultation exercise before any staff moves take place.

Carers have also been engaged through carers' user groups, where they have been invited to comment on proposed changes to services.

Engagement levels have been high throughout the development of these proposals and the service re-design will positively impact all of our residents by handling their queries more effectively and efficiently to provide the highest level of service to all our residents.

Overall Assessment

139. Overall impact	39. Overall impact				
Positive Impact	Negative Impact or Impact Not Known ¹³	No Impact			
x					
140. Scale of Impact					
Positive impact:	Negative Impact or Impact Not Known				
Minimal	Minimal				
Significant x	Significant				

141. Outcome			
No change to decision	Adjustment needed to	Continue with decision	If significant negative
	decision	(despite adverse impact /	impact - Stop / rethink
		missed opportunity)	
Х			

142. Please give full explanation for how the overall assessment and outcome was decided

The assessment was completed with reference to key project documents such as the Project Initiation Document and the Project Outline Business Case.

The outcome was decided following

¹³ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

143. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Monitor outcomes of the revised service by equalities groups	Ensure specification includes statement of expectations	Review equality impact on the outcomes of the Front Door service and enablement support services by equality strands		
Users feedback	Review feedback	Review equality impact on the outcomes of the Front Door services and enablement support services by equality strands		

1 st Authorised signature (Lead Officer)	2 nd Authorised Signature (Delivery Unit management team member)	
Date:	Date:	

Adults and Communities

Equality Impact Assessment

Questionnaire EIA 10 - (relates to saving E10)

Please refer to the guidance before completing this form.

144. Details of function, policy, procedure or service:			
ting people who live out of borough to settle in their chosen area			
procedure or service? Revised – this is the extension of on- going work with			
ommunities			
er 2013 – updated Oct 2014			
npleting this assessment:			
Karen Jackson			
Users, carers, residential providers			
Karen Morrell, Learning Disability Service			
Local residential/Supported Living Providers, CCG			
Emily Bowler / Lesley Holland			
Sandeep Patel			
N/A			

Please describe the aims and objectives of the function, policy, procedure or service *Please include - why is it needed, what are the outcomes to be achieved, who is it aimed at? Who is likely to benefit? How have needs based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership and carers been taken account of? Identify the ways people can find out about and benefit from the proposals. Consider any processes they need to go through or criteria that we apply to determine eligibility.*

Consideration will be given to those adults with a learning disability living in supported living and in their own homes out of borough and individuals who meet the requirements of the ordinary resident rules. The Move On Team, part of the Learning Disability Service consisting of social work and community nurse staff has been set up specifically to review, plan for individuals who live out of borough both in residential and supported living placements.

If people live within their own homes either in a supported living scheme or their own properties with a tenancy they, (with agreement), can become the responsibility of the area in which they live. This then gives individuals rights to local provision and funding.

147. How are the equality strands affected? Please detail the effects on each equality strand, and any mitigating action you have taken so far. Please include any relevant data. If you do not have relevant data please explain why.

Equality Strand	Affected?	Explain how affected	What action has been taken already to mitigate this? What action do you plan to take to mitigate this?
91. Age	Yes 🗌 / No 🔀		
92. Disability	Yes 🔀 / No 🗌	Service users There is a cohort of people with a learning disability who have their own tenancies who live out of borough	Each person will be reviewed by the Move On Team to determine whether they wish to remain in the area they have settled in
93. Gender reassignment	Yes 🗌 / No 🔀		
94. Pregnancy and maternity	Yes 🗌 / No 🔀		
95. Race / Ethnicity	Yes 🔀 / No 🗌	Service users	

		Service users can choose to live in an area where there is a community which better meets their cultural needs	Individual reviews will consider cultural needs and should an individual choose to live in a particular area this will be considered as part of their support plan in partnership with the individual and/or their carers
96. Religion or belief	Yes 🔀 / No 🗌	Service users There are a number of adults out of borough in culturally specific services, particularly from the Jewish Community	Individual reviews will consider cultural needs and should an individual choose to remain in an out of borough area this will be considered as part of their support plan, in partnership with the individual and/or their carers
97. Gender / sex	Yes 🗌 / No 🔀		
98. Sexual orientation	Yes 🗌 / No 🔀		
99. Marital Status	Yes 🗌 / No 🔀		
100. Carers (discriminated by association)	Yes🔀 / No 🗌	Service users Carers may be concerned about individuals permanently settling out of borough	Service users Carers will be involved in the review and planning process

148. What are the number, types and severity of disabilities in play in this case?

There are adults with a learning disability placed out of the borough in their own tenancies. People will be reviewed to see if they are expected to permanently settle in the local area, some will meet the requirements of the ordinary resident rules.

149. What are the actions that could reduce the impact on people with disability?

A permanent move to the out of borough area will only be considered subsequent to the reviewing process. Barnet will liaise with the local authority in which the resident resides to ensure that there is a clear handover of responsibility for on-going support

150. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

Whilst there is likely to be some concern raised by addressing whether an individual's funding responsibility should transfer to the new area the aim will be to support the person to be settled in their own home and receive support locally and increase the support they get to make local connections which, it is anticipated, will increase satisfaction.

151. How does the proposal enhance Barnet's reputation as a good place to work and live?

The aim is to strengthen local connections and links for the individual and reflects Barnet's commitment to support people to be settled in their own homes and receive local support relevant to their needs.

152. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

Through discussion and engagement with individuals and their families

153. What measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? *Include information about the groups of people affected by this proposal. Include how frequently will the monitoring be conducted and who will be made aware of the analysis and outcomes? Include these measures in the Equality Improvement Plan (section 14)*

The Move On team will work proactively with individuals, their carers and receiving Authorities to ensure needs are understood and clear plans are in place to deliver good quality, cost effective support. There will be a review of their needs prior to responsibility being transferred to the receiving Authority, the team will liaise with the provider, individual and the local support team to review agreed plans and ensure that individual is settle and are having their needs met effectively before Barnet withdraw their involvement.

154. How will the new proposals enable the council to promote good relations between different communities? Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.

All individuals who are part of this project will have their support plans reviewed to ensure that it is appropriate for them to be considered as permanently settled in the area in which they live and ensure consideration has been given to community inclusion and local networks so that individuals feels engaged and supported in their local area.

155. How have residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? *Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community.*

Consultation will be on an individual basis as part of an up to date review and individuals will be offered the appropriate support to engage with this according to their needs.

Overall Assessment

156. Overall impact		
Positive Impact	Negative Impact or Impact Not Known ¹⁴	No Impact
\boxtimes		
157. Scale of Impact		
Positive impact:	Negative Impact or Impact Not Known	
Minimal 🗌 Significant 🔀	Minimal 🗌 Significant	

158. Outcome			
No change to decision	Adjustment needed to decision	Continue with decision (despite adverse impact / missed opportunity)	If significant negative impact - Stop / rethink
\boxtimes			

159. Please give full explanation for how the overall assessment and outcome was decided

The local authority aims to support people to live in the area of their choice and get the right support locally. The authority in which they live are in a better position to know and understand local resources and provide specialised local support to the person. Some people have resided in out of borough areas for considerable amounts of time and have built up their own networks, friendship, support groups and have become settled in the area, it is right to support people to remain in their own home if they have made this choice. Winterbourne view highlights the need for people to be supported within their own community, for some people this may mean moving back in to Barnet but as highlighted some people will have settled in out of borough areas.

¹⁴ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

160. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Service users and staff understand the proposed changes to support and funding and feel supported with a permanent move	Discussion at individual review	All individuals out of borough have an annual review	Allocated Worker	Embedded practice
Ensure that diversity of individual need are being met in the area in which they live	Discussion at the individual's review	All individuals who are permanently settled out of borough have an up to date review and support plan	Allocated worker	Prior to transfer to another authority

1 st Authorised signature (Lead Officer)	2 nd Authorised Signature (Member of SMT) – Mathew Kendall
Date:	Date: updated 6 th October 2014

Children's Service

EIA 11: Updated Initial Residents and Service Users Equality Impact Assessment Education and Skills Alternative Delivery Model

161. Details of function, policy, procedure or service:

Title of what is being assessed: Outline Business Case (OBC): Education and Skills Alternative Delivery Model

Is it a new or revised function, policy, procedure or service?

The aim of the project is to implement a revised delivery model for Education and Skills services that will realise the objectives of:

- Achieving the budget savings target set by the Council
- Maintaining Barnet's excellent education offer
- Maintaining an excellent relationship between the Council and schools

Department and Section: Education and Skills

Date assessment completed: 16 June 2014.

Reviewed and updated August 2014 (appendix to draft OBC – CELS Committee Sept 2014). Reviewed and updated December 2014 (appendix to final OBC – CELS Committee January 2015).

162. Names and roles of officers completing this assessment:		
Lead officer	Val White, Lead Commissioner	
Other groups		

mitigating	163. How are the following equality strands affected? Please detail the effects on each equality strand, and any mitigating action you have taken / required. Please include any relevant data. If you do not have relevant data please explain why / plans to capture data		
Equality Strand	Affected?	Explain how affected	What action has been taken / or is planned to mitigate impact?

101. Age	Yes 🔀	Data for children and young people shows:	The key mitigation is
	No	Age group 5 -10 years 28,881	the involvement of head teachers in
		Age group 11- 16 years 25,416	procurement process
		There are more primary school aged children in Barnet than secondary school age children	to ensure that needs of all pupils are addressed and
		The total 5 – 16 year old children and young people both male and female is 54,297.	consultation with schools, governors and parents to
		Source GLA 2013 Round Demographic Projections, 2014	ensure that key concerns are identified and considered.
102. Disabil	Yes 🔀	Data for children and young people shows:	The key mitigation is;
ity	No	Disability:	 Involvement of head teachers in
		•The national averages indicate that in Barnet the 5 to 9 and 10 to 14 age cohorts have the highest number of disabled children, followed by the 15 to 19 age cohort. Whilst the 0 to 4 age cohort has the least number of disabled children.	procurement process to ensure that needs of all pupils are addressed.
		•This corresponds with Barnet's Disabled Children's Register where 32% are aged 5-9, 29% are aged 10-14, 27% are aged 15-19 and only 12% are aged 4 and under.	 Rigorous approach to development of service
		•There are approximately three times more males than females on Barnet Disabled Children's Register.	specifications and KPIs to ensure that the
		•The most frequently occurring needs on the Disabled Children's Register are speech, language and communication needs affecting 33% of all registered children. The other most frequently occurring disabilities are autistic spectrum disorders (affecting 23%); moderate learning difficulties (affecting 18%) and severe learning difficulties (affecting 17%).	 ensure that the needs of pupils with SEN are addressed Consultation with parents of children with SEN to understand their
		Source: Source: GLA 2012 Round Demographic Projections	concerns and how this can be addressed in any
		SEN:	procurement process.
		In the School Census completed in January 2013 a total of 52,824 pupils were on Barnet's school rolls. Of these, 11,471 children were classed as have Special Educational Needs (SEN). This represents approximately 22% of the total school roll population. Disabled pupils are most likely classified as SEN within schools (Special Educational Needs and Disability).	process.
		•There are more boys than girls with SEN across all age	

103. Gu	ende	Yes 🗌 No 🔀	assessment process to develop Education, Health and Care plans for eligible children with special educational needs aged 0-25. Current arrangements to assess and deliver services to support eligible children require cooperation across social care, local authority education services, schools, health and other organisations. Developing an alternative delivery model for education services including SEN services may add to this complexity. However, the current arrangements are managed through agreed processes and decision making arrangements between organisations and services these will continue to apply. Data for children and young people shows: Female: •Age group 5 -10 years 14,013 •Age group 11- 16 years 12,315 Male: •Age group 5 -10 years 14,868	There is no evidence to suggest that one gender group will be more affected than the other; however there is a differential in pupils with SEN based on gender.
			 Within Barnet, the highest numbers of children on the school rolls with SEN are concentrated within the Burnt Oak, Colindale and Underhill wards Source: Schools Census, February 2013 The Children and Families Act 2014 introduces a new requirement for councils to develop a coordinated 	
			•Children with statements of SEN attending out of borough schools tend to be in the older age cohorts - 45% are aged 15-19 and 37% are aged 10-14.	
			•Girls are less likely to have statements of SEN and more likely to receive School Action support. Of the 4,499 girls with SEN, 9% are statemented and 63% receive School Action support. In comparison, 15% of boys with SEN are statemented and 54% receive School Action support.	
			•There are more children aged 5-9 and 10-14 with SEN in comparison to the younger and older age cohorts. Of all children with SEN on the schools roll, 39% are aged 5-9 and 40% are aged 10-14.	
			cohorts and SEN type. Overall, 61% of children with SEN are male.	

		•Age group 11- 16 years 13,101		with children with
		Source GLA 2013 Round Demographic Projections, 2014 sought and will		SEN have been sought and will be considered as part of
		There are more boys than girls with SEN across all age cohorts and SEN type. Overall, 61% of children with SEN are male.		the decision making process and any procurement
		Girls are less likely to have statement likely to receive School Action suppor with SEN, 9% are statemented and 63 Action support. In comparison, 15% of statemented and 54% receive School Source: Schools Census, February 201	rt. Of the 4,499 girls 3% receive School of boys with SEN are Action support.	process.
104. Religi on	Yes	Christianity is the most common relig 38.7%, although this is proportionate at 51%. The second highest group are religion at 21.3% which is comparativ and England. Barnet has the largest J London (16.6% compared to 2.1% in 1 The proportion of Barnet's secondary affiliation is broken down:	ely lower than London e those who have no vely less than London Jewish population in London).	
		Religious Affiliation - Seco	ondary Schools	
		None	69.6	d I
		Jewish	8.7	4
		Church of England	4.3	9
		Catholic	17.4	4
		The proportion of Barnet's primary school religious affiliation is broken down:		
		Religious Affiliation - Prim	ary Schools	
		None	57.6%	
		Jewish	14.1%	
		Church of England	16.3%	

		Source Profile of children and young people in Barnet April 2014. The breakdown of religion in school does not accord with the breakdown of religion in the wider Barnet population; however this may be due to data collection reasons. There is no evidence to show that the proposal will adversely impact on a particular religious group more than any other or those without a stated religion.	
105. Sexual orientatio n	Yes 🗌 / No	Data is unavailable at this point. There is no evidence to show that the proposals will adversely impact on people based on their sexual orientation.	
106. Gende r reassignm ent	Yes 🗌 / No	Data is unavailable at this point. There is no evidence to show that the proposals will adversely impact on people based on gender reassignment.	
107. Marit al Status	Yes 🗌 / No	As the services mainly support children and young people, marital status is less likely to be of relevance. The services include education welfare services, which support and take enforcement action against parents whose children are not attending school. Information on the family background, including lone parents, is taken into account when making decisions on appropriate action. Decisions to prosecute parents will remain the responsibility of the local authority.	Rigorous approach to development of service specifications and KPIs to ensure that the needs of parents are taken into account when determining any enforcement action.
108. Other key groups?	Yes 🗌 / No		

1. What measures and methods could be designed to monitor the impact of the new policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? Include how frequently monitoring could be conducted and who will be made aware of the analysis and outcomes

This Equalities Impact Assessment has been reviewed and updated for this stage (updated Outline Business Case). The completion of a more detailed Equalities Impact Assessment will be a fundamental component of the project's decision-making in the next phase in accordance with the LBB Policy and processes.

Equalities should form a key component of any specifications for the alternative delivery model to ensure that

those with protected characteristics are protected through the process and this should form a component of any evaluation process.

In addition, a clear set of measureable outcomes and key performance indicators will be developed to ensure outcomes are achieved. Risks are also being reviewed on a regular basis and action taken to mitigate these risks and potential impacts.

Initial Assessment

2.	Overall impact		
	Positive Impact	Negative Impact or Impact Not Known ¹⁵	No Impact
	\boxtimes		
3.	Scale of Impact		
	Positive impact:	Negative Impact or Impact Not Known	
	Minimal 🔀 Significant 🗌	Minimal Significant	

The recommended model of a joint venture is likely to maintain and improve levels of service delivery through its capacity and potential to grow services for schools and others to purchase. Through attracting commercial expertise and infrastructure, it is anticipated that sufficient growth could be achieved without the need for service reductions.

The development of a Full Business Case at the next stage will enable a full assessment of the impact. Mitigating action to address any resident concern in relation to the quality of non-traded services will form part of the procurement and contractual negotiations.

4. Outcome			
No change to decision	Adjustment needed to decision	Continue with decision (despite adverse impact / missed opportunity)	If significant negative impact - Stop / rethink
\boxtimes			

¹⁵ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

5. Please give a full explanation for how the initial assessment and outcome was decided

In seeking to identify and implement an Alternative Delivery Model for the Education and Skills Delivery Unit the Council is seeking to reduce the cost of delivering services and also improve outcomes and performance of the services.

Milestone 1: Draft OBC – September 2014 CELS Committee

At this stage of the project (early Assessment phase) the new Delivery Model is not known and therefore it is not possible to fully assess the impact (in line with the LBB processes this cannot be completed until the new model is known). Given what is known at the moment and the objectives of the project any impact is anticipated to be positive due to the desire to improve the performance of services, which given the nature of these services such as Special Educational Needs would have a positive impact on those with Disabilities (and due to the over representation in the cohort males).

There is anticipated to be no negative impact on any protected characteristics due to there being no anticipated reduction in service nor any anticipated fundamental change in the mechanism of service delivery and therefore it is anticipated that all those who currently access/receive services will still do so under the alternative delivery model.

Milestone 2: Updated OBC – January 2015 CELS Committee

CELS committee in September 2014 decided to further develop the options appraisal on four potential delivery models - In-house, Schools-led social enterprise, Joint venture with schools having a commissioning role and Joint venture with schools having an ownership role.

Alongside consultation with schools, a resident consultation and three focus groups (including a group of parents of children with SEN) have been undertaken in order to gain the views of residents and service users. Their views have been taken into consideration in the analysis and options appraisal which can be seen in the updated OBC. As part of the decision making process the council will fully consider and give due regard to the responses to the consultations and this Equalities Impact Assessment. The consultation noted that there is an appetite to improve services however there are some concerns all of the models (excluding the in-house option) could put more pressure on schools and possible impact on quality, alongside the worry around the motivation of a third party provider and the possible impact on service provision. In addition there were queries raised on the appropriateness of services for SEN and vulnerable pupils being offered by an organisation other than the council, since these are core services requiring knowledge and accountability. These concerns have been taken into consideration during the decision making for the preferred option.

The Initial Residents and Service Users Equality Impact Assessment has been reviewed and updated to take into account the further analysis and development of the potential models which has taken place. A summary of the potential impact for all four models is noted below.

SUMMARY OF POTENTIAL KEY OUTCOMES / IMPACTS
It is anticipated that although there would be some potential growth and changes in services, it is highly likely that there will need to be service reductions in order to deliver the required service savings.
It is anticipated that there would be some growth and changes in services however depending on the ability of the business to grow its income sufficiently or quickly enough to offset any of the savings required by the council, it is likely that there would need to be some service reduction.
It is anticipated that through growth in services and attracting income, this model would maintain and improve service delivery. It is not anticipated that service reductions would be required.
It is anticipated that through growth in services and attracting income, this model would maintain and improve service delivery. It is not anticipated that service reductions would be required

It is anticipated that for the preferred Joint Venture model any impact would be positive due to the desire to improve the performance of services. There is anticipated to be no negative impact on any protected characteristics due to there being no anticipated reduction in service and therefore it is anticipated that those who currently access/receive services will still do so under the alternative delivery model. However until the next stage when the Business Case is produced, the procurement process is underway and the detailed service specifications are agreed, the impact is not certain.

This EIA will be updated in the next project phase (Business Case stage). The procurement process during the next stage will enable a full assessment of the impact and identification of any mitigating actions required.

Children's Service EIA 11 Updated Employees Equality Impact Assessment

Project: Education and Skills Alternative Delivery Model [This document remains live with information being added at each critical milestone]

Project Owner:	Schools, Skills and Learning Lead Commissioner
Date process started:	9 December 2013
Date process ended:	ТВС
This EIA is being undertaken because it is:	 outlined within the equality scheme relevance assessment table part of a project proposal submission to the programmer management board a result of organisation change other – please specify:

EIA Contents

- 1 Introduction
- Any Anticipated Equalities Issues at each milestone and identified mitigation 2.
- 3. Monitoring Summary
- 4. Project Milestone Outcomes, Analysis and Actions
- Briefing, Sharing and Learning 5.

1. Introduction

1.1 It is recognised that a significant transformation of services is likely to have an impact upon staff. This impact will be monitored through the completion of an Employee Equalities Impact Assessment; this is a "live" document and will be updated at key milestones throughout the lifespan of the project. The employee data contained within this report remains relevant at this time; however the data will be updated at the next milestone.

As part of the public sector Equality Duty, section 149 of the Equality Act 2010, the Authority is required to give due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people when carrying out activities.

This EIA will be used to understand the impacts on groups of staff over the period of the Education & Skills project as well as being used as a baseline for any future decision making.

1.2 Aims and objectives of the Education and Skills Alternative Delivery Model

A project has been commissioned to assess the best way of delivering Education and Skills services in the future. This must take into account significant savings pressures, maintain the strength of our relationship with schools and maintain or improve the excellent education offer in Barnet.

In order to fully explore available options the project has examined ways in which schools can take control or ownership of part or all of the system and has also considered any benefits of working with a third party provider.

The aim of the project is to implement a revised delivery model for Education and Skills services that will realise the objectives of:

- Achieving the budget savings target set by the Council
- Maintaining Barnet's excellent education offer
- Maintaining an excellent relationship between the Council and schools

The approach through the assessment phase is:

- **To assess potential delivery models against criteria**, incorporating feedback from consultation in order to identify a recommended model.
- To develop any procurement documentation required to deliver the recommended model.
- **To deliver an Outline Business Case (OBC)** which provides detailed analysis and appraisal of potential models, including recommendations.
- **To deliver a final Outline Business Case (OBC)** providing detailed analysis and an appraisal of the preferred option.
- **To develop the recommended model to Full Business Case (FBC)** including complete financial case and implementation plan.

The services in the project scope are:

School improvement

- Statutory local authority duties to monitor, support and challenge schools
- Narrow the gap service (DSG funded)

Special educational needs (subject to changes being implemented by the Children and Families Act 2014 from 1st September 2014)

- SEN placements & performance team
- SEN Early Support Programme
- SEN Transport commissioning and assessment
- Educational psychology team (part traded)
- SEN placements (DSG funded)
- SEN specialist support service (DSG funded)

Admissions and sufficiency of school places

- Pupil place planning
- Admissions Service (DSG funded)

Vulnerable pupils

• Education welfare service (part traded)

Post 16 learning

- 14 19 service to ensure sufficiency and breadth of supply
- Monitoring, tracking and supporting participation

Traded services within Education and Skills

- Catering service
- Governor clerking service
- Barnet Partnership for School Improvement
- Newly Qualified Teachers
- Educational psychology (part)
- Education Welfare Service (part)
- North London Schools International Network (NLSIN)

Draft Outline Business Case – CELS Committee – September 2014.

An initial Employees Equality Impact Assessment was presented alongside the Draft Outline Business Case to CELS committee in September 2014.

The following options were considered and evaluated in the Draft Outline Business Case:

- Model A: In-house
- Model B: Outsource
- Model C: Local Authority Trading Company (LATC)
- Model D: Schools-led social enterprise
- Model E: Joint venture with schools having a commissioning role
- Model F: Joint venture with schools having an ownership role

The project team recommended to CELS Committee in September that the three partnership options (social enterprise, joint venture with schools taking an ownership role and joint venture with schools taking a commissioning role) could potentially meet the project objectives and have attracted a reasonable degree of support from schools. The committee decided that the following four models should be considered in the next stage.

Model: In-house Model: Schools-led social enterprise Model: Joint venture with schools having a commissioning role Model: Joint venture with schools having an ownership role

Updated Outline Business Case – CELS Committee – January 2015.

Further work has been undertaken and the four models (In-house, Schools-led social enterprise, Joint venture with schools having a commissioning role and Joint venture with schools having an ownership role) have been reviewed and evaluated in the Updated Outline Business Case which will be presented to CELS committee in January 2015.

The outline business contains the results of consultation with residents, schools and the market together with financial modelling of the options. It recommends that the council pursue a Joint Venture model as the best model to meet the project objectives.

The Joint Venture model focuses on the growth of services which would limit the possibility of staffing reductions, staff will be protected by TUPE and is likely to have a positive impact with regards to increase in training opportunities and employee development alongside the development of services. However, it is clear that any workforce changes could have both a positive or negative impact, especially on the female workforce. Overall, the impact is expected to be positive however it cannot be known with any certainty at this stage. There will be greater clarity on the actual impacts on employees through the procurement process at the stage of contract award, following competitive dialogue. The development of a Full Business Case (FBC) will enable a full assessment of the impact and identification of any mitigating actions required.

1.2 Description of the critical milestones

Key milestones for the project							
Key dates / milestones	Date						
CELS Committee – Approval of OBC	12 th Jan 2015						
Commence process to establish new model	13 th Jan 2015						
Issue OJEU	Jan 2015						
Bidders Day	Feb 2015						
PQQ evaluation and moderation	Feb 2015						
Dialogue	March – June 2015						
P&R Committee - report	20 th July 2015 (TBC)						
CELS Committee – Approval of FBC	28 th July 2015 (TBC)						
Commence formal TUPE consultation	29 th July 2015						
Evaluation and moderation	August 2015						
Preferred bidder selected	August 2015						
Mobilisation	October 2015						

1.3 Key Stakeholders

Key Stakeholders:

Members of the Children, Education, Libraries and Safeguarding Committee Lead Commissioner for Schools, Skills and Learning (Sponsor) Director for Education and Skills (Senior Supplier) Education and Skills Management team Strategic Commissioning Board BPSI Steering Group (Heads) Head teachers/schools Education and Skills Staff Trade Unions Residents/Parents

The project has followed a consultation and engagement plan in developing the outline business case.

Staff and Trade Unions have been communicated with, predominantly in the form of information sharing, briefings, updates, questions and answer sessions and follow up documentation.

Once the delivery model is decided upon the appropriate legislation will be followed which will include

consultation under the councils collective agreement with the trade unions and supporting staff briefings.

2. Any Anticipated Equalities Issues at each milestone and identified mitigation

2.1 Milestone 1: Draft OBC to CELS committee September 2014:

For the current stage of project scoping and democratic process, no staff will be affected and there is no known detriment to any group.

A full EIA will be produced at Full Business Case stage. Staff will be consulted as part of the process and equality issues/risks will be considered as part of this. As the proposals develop any impact will become clear and mitigating actions will be put in place.

2.2 Milestone 2: Updated OBC to CELS committee January 2015:

At this stage of project, with regards to the preferred option of a Joint Venture model, it is viewed that overall the impact would be positive (see section 4 for further detail).

This EIA will be updated in the next project phase (at Full Business Case stage). Staff will be consulted as part of the process and equality issues/risks will be considered as part of this. As the proposals develop any impact will become clear and mitigating actions will be put in place.

3. Monitoring Summary

3.1 Table 1- Employee EIA Profile of the Project

(This profile is in accordance with the requirements of the Equality Act 2010 and the Council will collect this information so far as we hold it)

All numbers replaced by an 'X' have been aggregated to protect personal identification

Critical Milestones

		Total Data	Total LBB Data				ect ation stone Data	Mi ne E8	ame ilesto 2 &S ata	3	ne estone S Data	Name Miles e 4 E&S	ton
		Ö	% of LBB	No.	% of service	No.	% change	No.	% change	No.	% change		
Number of employees		20	2010		2010		336						
	Female	1320	65.7	311	93.0								
Gender	Male	687	34.2	25	7.0	1							
	Unknown	3	0.2										
Date of	1993-1986	200	10.0	14	0.4								
Birth	1985-1976	435	21.6	44	13.0								
(age)	1975-1966	535	26.6	87	25.8								
	1965-1951	738	36.7	174	51.7								

	1950-1941	96	5.0	17	5.0						
	1940 and earlier	4	0.2	0	0						
	Unknown	2	0.1								
	White			178	52.9	1					
	British	861	42.8	170	52.5						
	Irish	56	2.8								
	Other White	205	10.2								
	Mixed	200	10.2	x	x	1					
	White and Black			~	~						
	Caribbean	103	5.1								
	White and Black	0	0								
	African	16	0.8								
	White and Asian	0	0								
	Other Mixed										
E 4h min	Asian and Asian			31	9.2						
Ethnic	Asian and Asian British			31	9.2						
Group	Indian	106	5.3								
	Pakistani	106	5.3 0.7								
	Bangladeshi	14	0.7								
	Other Asian	22	1.1								
	Black or Black		1.1	73	21.7	-					
	British	0	0								
	Caribbean	185	9.2								
	African	24	1.2								
	Other Black										
	Chinese or Other			х	х						
	Ethnic Group										
	Chinese	13	0.7								
	Other Ethnic Group	39	1.9								
	Physical co-	0	0								
	ordination (such as										
	manual dexterity,										
	muscular control,										
	cerebral palsy)										
	Hearing (such as:	5	0.3								
	deaf, partially deaf or										
	hard of hearing) Vision (such as blind	2	0.1								
	or fractional/partial	2	0.1								
	sight. Does not include										
	people whose visual										
	problems can be										
Disability	corrected by										
	glasses/contact										
	lenses)										
	Speech (such as	0	0								
	impairments that can										
	cause communication										
	problems)	7	0.4		-	<u> </u>					
	Reduced physical	7	0.4	х	x						
	capacity (such as inability to lift, carry or										
	otherwise move										
	everyday objects,										
	debilitating pain and										
	lack of strength,										
	breath, energy or										
L		I	1	Î	1	I	1	1	1	1	1

	stansing asthree	1	1	1			1	1			1
	stamina, asthma,										
	angina or diabetes) Severe disfigurement	0	0			<u> </u>					
	-		_								
	Learning difficulties	3	0.2	х	х						
	(such as dyslexia)										
	Mental illness	5	0.3								
	(substantial and lasting										
	more than a year)	_									
	Mobility (such as	5	0.3								
	wheelchair user,										
	artificial lower limb(s),										
	walking aids, rheumatism or arthritis)										
	Other Disability	27	1.34	x	x						
	-			^	^						
	No Disability	168	84.0								
	Not Stated	8 268	13.3								
	NOT Stated	200	13.3								
	Transsexual/Transge			1						1	
Gender	nder (people whose										
Identity	gender identity is										
· · · · ·	different from the										
	gender they were										
	assigned at birth)										
						1			1		•
Pregnancy	Pregnant										
and	Maternity Leave										
Maternity	(current)										
	Maternity Leave (in										
	last 12 months)										
			1			1	1	1	1	1	1
	Christian	851	42.3	163							
	Buddhist	9	0.5	Х							
	Hindu	89	4.4	22							
	Jain	4	0.2								
	Jewish	51	2.5	10							
	Muslim	65	3.2	15							
Religion or	Sikh	6	0.3	х				Ì			1
Belief	Other religions	66	3.3	24	1	1		1			1
	No religion	298	14.8	49							1
	Not stated	165	8.2	51							
	No form returned	30	1.5	1							
	Atheist	36	1.8					1			
	Agnostic	25	1.2					1			
	Humanist	0	0								
	Not Assigned	315	15.7	1				1			
				1	1	1	1	1	1	I	1
	Heterosexual	124	61.7	191	48.5						
		1									
Sexual	Bisexual	8	0.4								1
Orientation	Lesbian or Gay	27	1.3	х	Х			Ì			1
	Prefer not to say	345	17.2	x	Х	1				1	
	Not assigned	389	19.4		1	1				ł	
N	Ŭ Ŭ	-	1		1	1	1	1	1	I	
Marriage and civil	Married	491	24.4	117	34.8						
partnership	Single	409	20.4	50	14.9						
Partiersnip	Widowed	0	0								

	Divorced	35	1.7	х	Х			
	In Civil partnership	0	0					
	Cohabitating	21	1.0					
	Separated	0	0					
	Unknown	105	52.4					
		4						
	Not Assigned	0	0					
Dulant								
Relevant and related	Formal							
grievances	Upheld							
gricvances	Dismissed							

3.2 Evidence

3.3 List below available data and research that will be used to determine impact on different equality groups

HR data provided from CORE HR (August 2014). Staff/Stakeholder feedback.

The employee data contained within this report remains relevant at this time; however the data will be updated at the next milestone. For the Full Business Case we shall work with HR to ensure that the equalities data is enhanced.

3.4 Evidence gaps

Maternity Leave is not held centrally and will be shared from local records where necessary and as the process continues.

The project is still in the assessment stage, once a final delivery model is confirmed and further work is completed, the evidence gaps will become clearer.

3.5 Solution, please explain how you will fill any evidence gaps?

An update to this 'live' EIA will be completed at the key milestones, the next iteration is required after a delivery model has been decided; this will then establish whether further evidence should be gathered.

4. Project Milestone Outcomes, Analysis and Actions

4.1 Summary of the outcomes at each milestone

Milestone 1: Draft OBC to CELS committee September 2014:

This is an initial analysis of the EIA for the Education and Skills ADM project and provides baseline figures. As the project develops the EIA will need to be re-assessed.

A Service Users EIA profile has also been completed.

The equality data above is the information available which details the protected characteristics of staff within the Education and Skills cohort, including Barnet staff who are employed in the schools meals service.

As the proposals include the Barnet schools meals service and Special Educational Needs, additional consideration needs to be made as to how these services will operate and whether this will impact on, for example, the take-up of free school meals.

Children's, Education, Libraries and Safeguarding Committee will determine which options the council should explore and at this stage a detailed EIA will be undertaken on the staffing implications of the following services; School improvement, Special educational needs, Admissions and sufficiency of school places, Vulnerable pupils, Post 16 learning and Traded services within Education and Skills.

The councils overall workforce is;

- 66.17% female
- 42.64% of both female and male are over 50 years of age.
- 74.43% of the workforce are white, black and black British

Initial analysis of the Education and Skills equality data indicates;

- 93% of the workforce is female
- 55% of females only are over 50 years of age
- 75% of the workforce is white, black and black British

Given the current make-up of the workforce, whichever option is chosen, the change will have a bigger impact on women than men. The statistics show that 93% of the workforce is female and due regard will be paid to the requirements of the Public Sector Equality Duty. It cannot though be avoided that any changes will affect the female workforce whether this be a positive or negative impact. Mitigation for such effects will be drawn up at a later stage when more detail on the proposals are known and a decision is made to progress from the OBC.

There is no data available on maternity or sexual orientation transgender.

It is essential that the Managing Change Policy is followed and in a legally compliant manner, including with consideration of all aspects of the Equality Act 2010 and other relevant legislation.

Overall, at this stage of the project the new Delivery Model is not known and therefore it is not possible to fully assess the impact (in line with the LBB processes this cannot be completed until the Full Business Case is developed when the new model is known).

Milestone 2: Updated OBC to CELS committee January 2015:

As noted in milestone 1 above, given the current make-up of the workforce, whichever option is chosen, the change will have a bigger impact on women than men, whether positive or negative. The statistics show that 93% of the Education and Skills Delivery Unit workforce is female and due regard will be paid to the requirements of the Public Sector Equality Duty. Mitigation includes the continued involvement of staff and TUs during the next stage. Further mitigation will be drawn up at a later stage when more detail on the proposals are known and a decision is made to progress from the OBC to FBC.

In order to assist decision making, a summary of the expected high level employee outcomes / impacts of the four models can be seen in the table below.

Consultation and Engagement has taken place with the four key stakeholder groups: schools; the market; employees and trades unions; and residents and service users.

It is recognised that all four of the options under consideration constitute a significant change that will have an impact on employees. There have been a number of briefing meetings with employees as the outline business case has developed. During November 2014, a further series of meetings were held to allow employees to explore the implications of the four remaining options and also to suggest potential opportunities for improvement. Additional meetings have also taken place with the recognised trades union representatives. Whilst representatives have been keen to support the retention of services inhouse, they have also engaged positively in discussions about other models to ensure that issues that may affect their members' interests have been given proper consideration.

Overall it can be seen that there are potential impacts from all four models. The project board are recommending to the CELS Committee that a Joint Venture model is the best model to meet the project objectives and has attracted a reasonable degree of support from schools. As can be seen in the table below, the Joint Venture model focuses on the growth of services which would limit the possibility of staffing reductions, staff will be protected by TUPE and is likely to have a positive impact with regards to increase in training opportunities and employee development alongside the development of services. However, it is clear that any workforce changes could have both a positive or negative impact, especially on the female workforce.

Overall, the impact is expected to be positive however it cannot be known with any certainty at this stage. There will be greater clarity on the actual impacts on employees through the procurement process at the stage of contract award, following competitive dialogue. The development of a Full Business Case (FBC) will enable a full assessment of the impact and identification of any mitigating actions required.

MODEL	SUMMARY OF POTENTIAL KEY OUTCOMES / IMPACTS
Model A: In house	 Staff would remain as local authority employees and be subject to the council's terms and conditions. Staff would go through a major transformation programme including cultural step-change, performance management and business improvement. Potential reduction in staffing requirement through the transformation process, either through efficiencies or service reductions. There is also the potential for an increase in staffing in some service areas as the service
	would aim to grow services and increase income
Model B: Schools- led social enterprise	• Staff would be transferred to the 'new' company', employees would transfer on their terms and conditions under the TUPE.
	• Opportunity for investment in upskilling, employee development, asset and systems update.
	• Potential reduction in staffing requirement through the transformation process however there is also the potential for an increase in staffing in some service areas as the enterprise would aim to grow services and increase income
Model C: Joint venture with schools	 Staff would be transferred to the 'new' company', employees would transfer on their terms and conditions under the TUPE.
having a commissioning role	• Opportunity for investment in upskilling, employee development, asset and systems update.
	• It is envisaged that there would be no reduction to overall staffing levels and there could be a potential for an increase in staffing as the aim of the model would be to grow services and increase income. However there could be a potential change in service structure and jobs through the transformation process.
Model D: Joint	• Staff would be transferred to the 'new' company', employees would transfer
venture with schools	on their terms and conditions under the TUPE.
having an ownership	• Opportunity for investment in upskilling, employee development, asset and
role	systems update.
	• It is envisaged that there would be no reduction to overall staffing levels and there could be a notantial for an increase in staffing as the aim of the model
	there could be a potential for an increase in staffing as the aim of the model would be to grow services and increase income. However there could be a
	potential change in service structure and jobs through the transformation

	process	

4.1.1 Milestone 1: Draft OBC to CELS committee September 2014

An updated Employee EIA will accompany the final OBC on detailed options in January 2015 to the CELS Committee.

4.1.2 Milestone 2: Updated OBC to CELS committee January 2015

The initial employee EIA has been updated since the first draft OBC and initial employee EIA was approved at CELS Committee in September 2014.

An updated Employee EIA will be produced in the next stage and will accompany the Business Case in July 2015 to the CELS Committee with specific detail on the impact on employees.

4.2 Actions proposed

4.2.1 Milestone 1: Draft OBC to CELS committee September 2014

Equalities should form a key component of any specifications for the alternative delivery model and will form a component of any evaluation process. Post OBC a more detailed equalities analysis will be produced.

4.2.2 Milestone 2: Updated OBC to CELS committee January 2015

Post the updated OBC to CELS committee in January 2015, a more detailed equalities analysis will be produced and will be used to inform project decisions and the procurement process.

Sections 5 and 6 have been removed from the EIA as they are not appropriate at this stage of the project. If these sections are appropriate in the next stage of the project then they will be completed.

Children's Service

EIA 12: Initial Equality Analysis (EIA)

Special educational needs transport savings

Resident/Service User

164. Details of function, policy, procedure or service:

Title of what is being assessed: Special educational needs transport savings - savings through reduction in spend on transport costs

Brief description of what is being assessed

The council plans to save £500,000 from its total home to school transport budget of £4.718m.

The council's policy for the provision of travel assistance for children and young people includes arrangements for children and young adults with special educational needs, disabilities and mobility difficulties. We are reviewing this policy in the light of government guidance on home to school transport and the need to provide this service more efficiently at a lower cost taking full account of the personalisation agenda and promoting choice and independence wherever possible. We need to make efficiencies as part of our response to the financial pressures faced by the council and because we want to deliver a more efficient service that enables better outcomes for the children concerned and for Barnet as a whole.

The focus of the review

The council must provide free transport for pupils of compulsory school age if the nearest suitable school is beyond statutory walking distance. This is beyond 2 miles if the child is younger than 8 years old or beyond 3 miles if the child is between 8 and 16 years old.

The council must also make transport arrangements for all children who cannot reasonably be expected to walk to school because of their mobility problems or because of associated health issues related to their special educational needs or disabilities.

The council is not intending to make changes to the eligibility criteria set out in its SEN Travel Assistance Policy. We believe we can make the £500,000 savings through a mixture of efficiencies in route planning and contract tendering, placing more children locally so that transport is not required and, in particular, by working with parents to better plan the arrangements for their child's journeys to school. The majority of travel assistance offered to date has been on council organised buses and taxis. While such assistance will continue in the future in appropriate cases, we plan to work more closely with parents and carers to develop alternative and more flexible approaches which may offer more efficient and effective ways of delivering the service.

Statutory guidance issued by the Department for Education in 2014 encourages Local Authorities to:

- Develop sustainable transport arrangements this means that the method of transport improves the physical well-being of those children and young people who use them, and/or the environmental wellbeing of Barnet
- Introduce approaches that train and support young people to become independent travellers, so developing "skills for life"
- Enable families to have more control over transport arrangements through the use of Personal Budgets
- Work collaboratively with school leaders
- Improve and extend their discussions with parents of children and young adults with SEN and disabilities,

about home to school transport and how it is arranged

We propose to make these savings by:

- Enabling children with SEN to attend schools closer to where they live
- Reviewing the application of the eligibility criteria, making sure that our decision making on eligibility for home to school transport is fair, and consistent with the policy and government guidance
- Promoting a personalisation agenda, choice flexibility and independence wherever possible, and extending and improving our approaches to independent travel training taking account of mobility and capacity
- Extending the use of Personal Budgets for transport, where the child or young person is eligible
- Making better use of public transport for children and young people with SEN and disabilities wherever possible
- Working in partnership with parents/carers and promoting their involvement in their children's transport needs

This may mean that some children and young people, who might previously have been transported to their school or college by bus or taxi, may be offered other forms of travel assistance. This is in accordance with promoting personalised budgets and independence, where possible. Eligibility criteria and any changes to travel assistance will be discussed on an individual basis with the individual and/or their carer.

Assessment of Impact

The data we have analysed suggests that the majority of the 865 service users will continue to receive the same level and type of service as now. We have identified approximately 148 cases in which the type of travel assistance offered may change. These will be discussed and agreed on an individual basis.

The initial review suggests up to 60 pupils could be moved onto public transport following a period of Independent Travel Training, which will provide a useful life skill and promote independence. Currently, 22 parents take advantage of Personal Budgets to arrange their own transport in a way which best meets the families' needs. This is becoming more popular, and we anticipate an additional 40 will wish to take advantage of this new facility over the coming year.

Currently, there are 129 Year 6 SEN students and 144 Year 11 SEN students. On average 50% (64) of Year 6 students and 40% Year 11 students (57) have SEN Transport. We currently have 117 SEN Year 3 students of whom 50% (58) use transport. Approximately 30% of these live more than 2 miles but less than 3 miles from their designated school, so 19 are no longer automatically eligible for transport but may be eligible on grounds of their special needs. An initial survey suggests that the application of the existing policy may result in a reduction of 15% (27) in eligible places. It is important to note that this is part of the normal application of the existing policy and therefore, although it contributes to the budget reduction, it is not a change in the level of service that users should be anticipating. Similarly, we have 7 pupils currently receiving sole transport in taxis who are now ready to move to shared transport which will reduce the requirement for expensive taxi routes.

Currently, we provide transport to approximately 28 new pupils each year to Acorn Assessment centre. These routes are shared with Oakleigh and Colindale. Traditionally, discretion has been exercised to provide transport for these children although it is not required by law or in accordance with the existing policy. We have assumed that demand from September 2015 could be reduced by 14 places, by not offering new children transport automatically. Existing users would continue to access the service.

Most of the anticipated changes are therefore positive, in that they promote the independence of children, young people and their families. However, it is recognised that change may be perceived to have a negative impact in the short term. This is part of a culture change necessary so that buses and taxis provided by or through Passenger Transport Services are not seen as the default approach and an on-going entitlement, and we move to an approach which promotes carer/parental involvement, choice, flexibility and independence wherever possible.

The efficiencies may also have an impact on service providers (those offering the services through bus routes, taxi contracts, use of escorts etc. as the volume of needs may change following assessment of the individual needs of pupils and the contract values may decline, particularly in the light of reducing costs for transport operators.

Is it a new or revised function, policy, procedure or service? No

Department and Section: Children's Services, Education and Skills and Street Scene, Passenger Transport Services

Date assessment completed: 28th January 2015

165. Names and roles of people com	pleting this assessment:
Lead officer	David Monger, SEN Consultant, Education & Skills
Other groups	Sean Connolly, Bernard McGreevy, Passenger Transport Services
3. Employee Profile of the Project	Will the proposal affect employees? YES/ NO
	If no please explain why.
	The council provides part of the transport operation directly through PTS and contracts out a significant proportion to external providers. Any reduction in routes required can therefore be accommodated within a changing balance of contracts tendered. There is currently a requirement for around 145 escorts. 70 are directly employed and the remainder are commissioned through agencies. Any reductions in this requirement will therefore not affect Barnet employees.
	If yes, please seek assistance from HR to complete the employee EIA.
	DO NOT DELETE THIS SECTION

How are the following equality strands affected? *Please detail the effect on each equality strand, and any mitigating action you have taken / required. Please include any relevant data. If you do not have relevant data please explain why / plans to capture data*

Equality Strand	Affected?	Explain how affected	Indicate what action has been taken / or is planned to mitigate impact?
109. Age	Yes 🛛 / No 🗌	The data we have analysed suggests that the majority of the 865 service users will	These will be discussed and agreed on an individual basis.

		continue to receive the same level and type of service as now. We have identified approximately 148 cases in which the type of travel assistance offered may change.	
110. Disability	Yes 🛛 / No 🗌	All 865 users have a statement of SEN or an EHCP.	Changes to the type of travel assistance provided will be determined by an assessment of each individual's needs and the promotion of their future well being, e.g. their ability to travel independently.
111. Gender reassignment	Yes 🗌 / No 🗌		
112. Pregnancy and maternity	Yes 🗌 / No 🗌		
113. Race / Ethnicity	Yes 🗌 / No 🗌		
114. Religion or belief	Yes 🔀 / No 🗌	Occasionally, where no additional cost is incurred, we may agree to vary pick up and drop off times for individual children to allow particular religious observances. The drive for efficiencies in route planning may reduce the scope for this.	The potential impact of the change will be communicated to schools so that those affected have time to plan alternative arrangements.
115. Gender / sex	Yes 🗌 / No 🗌		
116. Sexual orientation	Yes 🗌 / No 📃		
117. Marital Status	Yes 🗌 / No 🗌		
118. Other key groups?	Yes 🗌 / No 🗌		
Carers People with mental health issues Some families and	Yes 🗌 / No 🗌	Please indicate if Young, Parent	
lone parents	Yes 🗌 / No 🗌	or Adult carer.	

People with a low income		
Unemployed people	Yes 🔄 / No 📃	
Young people not in employment education or	Yes 🗌 / No 🗌	
training	Yes 🗌 / No 🗌	
	Yes 🗌 / No 🗌	

5. Please outline what data sources, measures and methods could be designed to monitor the impact of the new policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact?

Include how frequently monitoring could be conducted and who will be made aware of the analysis and outcomes

Data on the type of assistance offered is collected on assessment and is monitored monthly. As identified above, we have set targets for achieving a shift from the existing prevalence of directly provided transport to more flexible options and performance will be monitored against the achievement of these. We will also monitor the rate of applications for travel assistance approved and the number of appeals to identify any trends suggesting unintended or adverse impacts.

6. Initial Assessment of Overall Impa	ct	
Positive Impact	Negative Impact or Impact Not Known ¹⁶	No Impact

¹⁶ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

7. Scale of Impact		
Positive impact:	Negative Impact or Impact Not Known	
Minimal Significant	Minimal 🔀 Significant 🗌	

8. Outcome			
No change to decision	Adjustment needed to	Continue with decision	If significant negative
	decision	(despite adverse impact / missed opportunity)	impact - Stop / rethink

9. Please give a full explanation for how the initial assessment and outcome was decided. .

The review of SEN transport is currently the subject of a major review. The project will deliver proposals for a passenger transport service that meets both current and anticipated future levels of demand. The first workstream of the project, Managing Demand, has researched in detail the application of home to school transport eligibility criteria and the potential of alternative approaches. This work has provided the data upon which this Equalities Impact Assessment has drawn.

Although most of the anticipated changes outlined above are positive, in that they promote the independence of children, young people and their families, the decision to suggest the scale of impact as minimally negative is based on the assumption that, in the short term, there may be some user resistance to the change from the traditional pattern of transport provided in buses and taxis.

Equality Analysis (EqA)

Children's Service

EIA 13 Early years Review

Please refer to the guidance before completing this form.

Title of what is being assessed: Early Years Review Full Business Case			
Is it a new or revised function, policy, procedure or service? Service			
Department and Section: Family Service	S		
Date assessment completed: October 2			
·			
167. Names and roles of officers comp	•		
Lead officer	James Mass, Lead Commissioner Family and Community Well-being		
Stakeholder groups	Internal Family Services staff, service users and residents, schools,		
	health visitors, community midwives, job centre plus, Barnet and		
	Southgate College and a range of voluntary and community		
	organisations have key relationships with children's centres across		
	Barnet		
Representative from internal	James Mass – Lead Commissioner Family and Community Well-being		
stakeholders			
Representative from external			
stakeholders			
Delivery Unit Equalities Network rep	Elaine Tuck		
Performance Management rep			
HR rep (for employment related			
issues)			

168. Full description of function, policy, procedure or service:

Context

Following a thorough review that has included significant engagement with residents, front line staff and a range of other stakeholders, the full business case (FBC) builds on the recommendations made in the outline business case (OBC), detailing how the new early years model should be developed. At OBC stage an equalities impact assessment was completed and has been updated for the FBC. There have not been considerable changes as the recommendations made as part of the outline business case, and subsequently the public consultation.

Due to economic challenges facing the British government, councils have had their funding cut since 2010 and will continue to see a reduction in funding. For Barnet, this will mean a further £72 million reduction by 2020.

Moreover, the number of children aged between 0 - 4 in the borough is set to increase from 26,074 in 2013 to 27,637 in 2018, putting increasing pressure on services in areas of high growth and meaning more demand for early years services.

Why is it needed?

The early years of childhood development present the best early intervention opportunity across the public sector to improve outcomes for local residents and reduce the financial burden on the state.

To achieve our vision of supporting more vulnerable families at the earliest stage, whilst reducing the base budget by £700k, there is a requirement for whole system change. Salami slicing of the 'as is' service there would involve a significant reduction in front-line services and mean the benefits of service transformation would not be achieved.

The current early year's system in Barnet is the complex result of many years of incremental change. In reviewing this system it is apparent that whilst there are many strengths – including a dedicated and passionate work force – that success is often despite rather than because of the system.

In order to improve early year services and ensure they are cost effective a new model of early years services needs to be developed. The key focus of the review is to improve early intervention and support for the most vulnerable families.

What are the outcomes to be achieved? What are the aims and objectives?

The early years model proposed has been designed to achieve the following outcomes;

- Identification of and support for the most vulnerable families.
- School readiness for all children in Barnet.
- Positive health outcomes for all children in Barnet.
- Sufficiency of high quality childcare places for children in Barnet.
- Reduce the number of adults with young children who want to return to work but are unable to.

To achieve these outcomes the new early years model will be based on the following strategic objectives;

- A more flexible model of support
- More targeted support for children under five and their families
- A more collaborative model
- A family based approach
- Increasing the involvement of parents and communities in children's centres
- Ensuring sufficient high quality early education in Barnet

Who is it aimed at? Who is likely to benefit?

The new model for early years is aimed at the estimated 26,757 (based on Greater London Assembly figures for 2014) children from 0-5 and their all families in Barnet. Projections developed by the Greater London Assembly (GLA) are based on the 2011 census have projected an increase in this number of children to 27,637 in 2018.

A key strategic aim of the new early years model is to improve the targeting of the most vulnerable families in the borough. Ensuring we focus resources on those who most require support will mean these groups of people are most likely to benefit from the new model.

How have needs based on age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, marriage and civil partnership and carers been taken account of?

The overall focus of the early years' service will continue to focus on need. The objective of the new early year's model is to improve identification and support of vulnerable families with more resource targeted on those who really need support. Having a targeted approach based on the need of each family rather than specific characteristics should therefore not discriminate against who is deemed to require extra support through early year's services.

To understand the above needs of children, parents and families in Barnet, detailed data has been collected and analysed. This task has been undertaken to ensure the council fully understands the users of children's centres across the borough.

A range of data sources has been used, including

- GLA population projections
- 2011 Census this data has been used for the purposes of this EIA
- 2013 Barnet Childcare Sufficiency Assessment (CSA)
- 2012 Hempsalls report LBB commissioned Hempsall's research organisation to undertake an evaluation of children's centres
- A range of data sets from children's centres, social care and family focus.

The consultation report outlines where respondents with different characteristics have given significantly different feedback to the general response.

Combined, this data has helped identify if particular groups are not engaging with or accessing services and need targeting – feeding into business as usual work in family services. Section 4 below will discuss how each of the equality strands is likely affected by the new commission.

The early years model outlined in the FBC is not prescriptive in regard to the support, advice and information offered from each of our children's centres. This level of detail will be developed through implementation and involve consideration of local need and how to ensure services offered meet these needs.

Identify the ways people can find out about and benefit from the proposals.

The OBC outlined the benefits of the changes, which were then publically consulted on through the early years review. There was broad agreement in regard to the aims and vision of the new early years model as well as the majority of the proposed changes.

Public engagement and consultation will continue throughout the implementation and more detailed design following Children's, Education, Libraries and Safeguarding Committee decision on 28 October 2014. This will allow parents the chance to understand the changes in more detail and help shape the new early years model.

Consider any processes they need to go through or criteria that we apply to determine eligibility.

Whilst there is a recommendation to focus on targeted work, universal access will continue for some sessions as they are important to help identify potentially vulnerable families.

It was made clear through the consultation that although there was broad agreement with a more targeted model, services should not be only for those from a deprived background and anyone who identifies a need should be supported. This is currently, and will continue to be, the early years approach, focusing on supporting families where there is a need, regardless of their background or characteristics.

Eligibility for targeted services is determined through a range of means; including self-referral, referral from health (including GP's, Health Visitor's, Community Midwives) or referrals from local authority services such as through the Common Assessment Framework process or Intense Family Focus team.

Note: In the document below, the consultation referred to as the 'early years questionnaire' was the questionnaire targeted at families who use or have children of the right age to use services, whilst the 'citizen's panel questionnaire' was aimed at a broad cross section of the demographics in Barnet.

169. How are the equality strands affected?				
Equality Strand	Affected?	Explain how affected	What action has been taken already to mitigate this? What action do you plan to take to mitigate this?	
119. Age		In 2014 there is an estimated 26,757	The new early years	

	Yes 🔀 / No 🗌	children under the age of five in Barnet. The service provides services to children between the age of 0-5, their parents and pregnant women. It is envisaged that the new early year's model will not change the scope of the early year's services from children between 0-5 and their families. Whilst services may be offered from a different locality, the extent of services is not expected to change. The early years review targeted questionnaire had a higher percentage of responses between 25 and 44 (67%) whilst the citizen's panel questionnaire covered all ages in Barnet so all views have been considered.	model will ensure there is flexibility in the service to meet changing demand and offer support to parents of all ages.
120. Disability	Yes 🗌 / No 🔀	The early years review targeted questionnaire had 10 respondents (3.5%) with a disability, lower than the citizen's panel questionnaire response of 76 (12.5%) which reflects the demographic breakdown of the borough. It is still projected that there will be no negative impact on children and families and this will be kept under review during implementation.	Implementation of the new early years model will ensure accessibility of services for people with disabilities. The new early years model will include key links to the Inclusion and Skills.
121. Gender reassignment	Yes 🗌 / No 🔀	The council has collected no information on gender re-assignment in regard to this project as there is expected to be no impact.	If there are any issues raised as part of implementation, or on- going service delivery this will be included in our needs analysis.
122. Pregnancy and maternity	Yes 🛛 / No 🗌	In the 2013 CSA 7% of the respondents – across Barnet – stated that they were, or had a partner who was, currently expecting a baby. As part of the early years targeted questionnaire 13% of respondents were on maternity leave (35) and 3% (9) pregnant. As with age, the scope of early year's	Ensure integration benefits both ante-natal and post natal care through improved links between professionals and ensuring clear clinical support and management.

r				
			services will not change as part of the new early years model, although the	
			location of some services may change.	
			A key objective of the early years	
			review is to improve identification of	
			risk factors through maternity,	
			therefore it is anticipated that the	
			changes will have a positive impact.	
123.	Race / Ethnicity		In 2011 out of the 26,264 children in	The detail of the new
125.		Yes 🖂 / No 🗌	Barnet, there were;	early year's model will be
				informed by local data
				and knowledge to ensure
			• White 11.072	services meet the needs
			 White – 11,972 BAME – 14, 292 	of people with different
			• DAIVIE - 14, 272	racial / ethnic
				backgrounds.
			The response rate as part of the	
			early years review questionnaire	
			was 13% Asian, 6% Black, 4%	
			Mixed Race, 56% White with	Improved recording of
			19% prefering not to say. The	data on families will help
			Citizen's panel survey	inform service
				development.
			respondents were broken down	
			as 76% white, 13% Asian, 5%	
			black and 2% mixed race.	Improved recording of
			Demonstrating that responses	data on families will help
			were reflective of the racial and	inform service
			ethnic diversity in the borough.	development and
			These is an interval in the state of the	targeting of groups who
			There is no identified differential	
			impact based on race/ethnicity as	are not accessing
			services will continue to deliver to all	services.
			ethnicities and support will targeted to	
			those are in most need of support.	
			A key part of the people analysis	
			A key part of the needs analysis	
			included number of BAME and EAL	
			pupils and as part of the	
			implementation of the new model	
			monitoring of race/ethnicity will	
			continue and if any groups are	
			identified as under accessing support	
			will targeted as necessary.	
			As part of the needs analysis the	
			, a part of the fields analysis the	

		number of Black, Asian, Minority	
		Ethnic (BAME) in Nursery and	
		reception classes was analysed. In	
		regard to the centres with a significant	
		reduction in opening hours the number	
		of BAME children was lower than	
		average for St Margaret's (184) and	
		Stonegrove children's centres (235)	
		and higher than average for Hampden	
		Way children's centre reach area (404).	
		The average per reach area was 353.	
		The number of children with English as	
		an additional language (EAL) was also	
		part of the needs analysis undertaken	
		as part of the review. In regard to the	
		centres with a significant reduction in	
		opening hours the number of children	
		with EAL was lower than average for St	
		Margaret's (156) and Stonegrove	
		children's centre (124) but slightly	
		higher than average in Hampden Way's	
		children centre reach area (275).).	
		The average per reach area was 252.	
124. Religion or		The early years review consultation	The implementation of
belief	Yes 🗌 / No 🔀	had a response rate of 40% Christian,	the new early years
		10% no religion, 8% Muslim, 7%	model will be informed by
		Jewish, 5% other and 16% preferred	local data and knowledge
		not to say.	to ensure support those
			with needs regardless of
			religious beliefs.
		There is no identified differential	Improved recording of
		impact based on religion or belief as	data on families will help
		services will continue to deliver to all	inform service
		religion and beliefs and support will	development and
		targeted to those are in most need of	
		support.	targeting of groups who
			are not accessing services.
125. Gender / sex		In 2011 out of the 26,264 under-fives,	Service delivery will
	Yes 🖂 / No 🗌	there were;	continue to target fathers
			who are less likely to
			attend services by
		• Males – 13,423	offering specialist services

		• Females – 12,841	such as dads groups.
		However, in terms of the gender/sex of parents accessing services fathers have been identified as group of people who are under accessing and not represented. This was clear in the responses rate of the early years questionnaire, where	
		only 8% of respondents (22) were male.	
126. Sexual orientation	Yes 🗌 / No 🔀	The council has collected no information on gender re-assignment in regard to this project as there is expected to be no impact.	N/A
127. Marital Status	Yes 🛛 / No 🗌	The needs analysis has considered the number of children under 5 in a lone parent household. The incidence of lone parent households with dependent children in 2011 in Barnet was 11,763.	When implementing the changes the needs analysis will be received, ensuring where there is a need for support for lone parents there are available services at a suitable location.
		The needs analysis included lone parents with children under 5 and children in out-of-work benefit households (lone parents).	A key outcome the review aims to improve is to reduce the number of adults with young
		In regard to the centres with a significant reduction in opening hours the sum of Children in out-of-work benefit households (Lone Parents) is below average for the St Margaret's (480) and Stonegrove (440), but higher in Hampden Way reach area (605). The average for each reach are was 515.	children who want to return to work but are unable too.
128. Unemployed parents	Yes 🖂 / No 🗌	Other groups which could be impacted on through the changes are	A key outcome the review aims to improve is to reduce the number of

unemployed	parents.	adults with young children who want to
considered th the local area information o they have chi	alysis undertaken le level of JSA claimants in . Although this loes not consider whether ldren under 5 or not, it d as an indicator of need ea.	return to work but are unable too, therefore the changes should have a positive impact on this group. Getting parents back to work is a key requirement of the children's centre offer.
significant red the claimant lower than av Margaret's (3 (244), but slig Hampden Wa	he centres with a duction in opening hours rate for 16-64 year olds is rerage in regard to St 45) and Stonegrove htly higher than any reach area (294). The ach reach area is 358.	The needs analysis undertaken will be used in conjunction with local knowledge to ensure effective support for unemployed parents at a suitable location.

170. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

Overall, the new early years model is expected to have a positive impact on satisfaction rates among residents through improved early intervention and improved service delivery and efficiency.

The early years review questionnaire response showed that;

• 95% of respondents value the advice and information offered in children's centres, 85% child health support, 78% community midwife support and 76% one-to-one support.

In terms of current satisfaction ratings;

• Only one in ten parents surveyed through the recent childcare market research were unsatisfied with childcare provision in Barnet.

The Hempsalls report which surveyed 367 past and present service users found;

- 82 per cent of respondents said they had experienced positive outcomes from using Children's Centre's
- 49 per cent thought that parenting advice and support had a positive impact at children's centres

There is a potential that a continued increase in targeted support, with a focus on those with the most need, may reduce the amount of universal services which have been on offer at Children's Centres. This is likely to be

minimal, as universal services are key to identifying need and supporting parents.

Overall the new early years model should increase satisfaction ratings by delivering a more joined up service with improved early intervention and service delivery and efficiency.

171. How does the proposal enhance Barnet's reputation as a good place to work and live?

Due to reductions in the budget, the council is faced with making difficult decisions in terms of making savings and how to target resources efficiently to best meet the needs of Barnet residents.

The proposals will enhance Barnet's reputation as a good place to work by creating an improved early year's model in which staff will have a clearer direction and more flexibility in their work with the ability to focus on supporting those with the most need. Workforce analysis as part of the health visitor and school nurses review and on-going staff engagement will help ensure that staff concerns are taken into account.

A priority outcome for the early years review as a whole is to reduce the number of adults with young children who want to return to work but are unable to. This should improve the borough as a good place to work and live by removing barriers to employment for families.

The proposals will enhance Barnet's reputation as a good place to live by continuing to support young children and families to improve life chances for children in Barnet. This will be achieved through improved family support and ensuring underachieving childcare settings get the support they need, meaning all children receive a high quality early education.

172. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

Clear communication, consultation and engagement has taken place and will continue to take place through the implementation of the early years review to help ensure the views of Barnet's diverse communities are taken into account. As outlined above the early years consultation effectively engaged with a wide range of residents in the borough, ensuring all communities had a view.

As part of the decision making process councillors will fully consider and give due regard to responses to consultation, and to this Equalities Impact Assessment, as part of a clear and transparent decision-making process to try and ensure that all citizens feel confident about the manner in which the council is conducting its business.

A key strategic aim of the new early years model is to improve the targeting of the most vulnerable families in the borough and several of the recommendations detailed above in section 6 will increase support and the flexibility of this support provided to the most vulnerable families in the borough. This will include considering Barnet's diverse community's needs, ensuring early years services support people who need the support most across a range of communities.

173. What measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact?

The full business case sets out some clear high level outcomes and measures for the new early years model. These are based on achieving the following high level outcomes;

- Identification of and support for the most vulnerable families.
- School readiness for all children in Barnet.
- Positive health outcomes for all children in Barnet.
- Sufficiency of high quality childcare places for children in Barnet.
- Reduce the number of adults with young children who want to return to work but are unable to.

174. How will the new proposals enable the council to promote good relations between different communities?

Through implementation and on-going service delivery there will be continued engagement to understand relationships between different communities and ensure through the service offered they are supported effectively.

A wide range of people attend Children's Centres and the new early years commission will not change the diversity of communities accessing early years services.

A key strategic aim of the new early years model is to improve the targeting of the most vulnerable families in the borough. This approach is to ensure we focus resources on those who most require support.

175. How have residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal?

As outlined in specific sections above the early years review targeted residents from a range of backgrounds. A range of methods to ensure residents with different needs could feed into the review. This included;

- Providing each children's centre with a set of consultation documents and questionnaires.
- Arranging a set of 10 drop-in sessions across different children's centres or local venues to support families to complete the questionnaire, answer further questions or take verbal feedback if this was the preferred method of communication.
- The early years review questionnaire was made available on Engage Barnet
- The Innovation Unit were commissioned to undertake a range of workshops, 5 with targeted families who regularly used children's centres

The demographics of respondents to both the early years review questionnaire and the citizen's panel questionnaire was wide, including people with different backgrounds and characteristics. The workshops were aimed at targeted families to ensure the people who rely on the services the most could feed into the review in a way they felt comfortable with.

As part of the CSA and Hempsalls report a variety of telephone and online surveys, interviews and focus groups were conducted with a wide range of parents and children with different needs as well as children's centres and child-minders. Their feedback and the findings from both of these pieces of research have influenced and formed a crucial and central part of the early years review outline business case and accompanying recommendations.

Overall Assessment

176. Overall impact		
Positive Impact	Negative Impact or Impact Not Known ¹⁷	No Impact
\boxtimes		
177. Scale of Impact		
Positive impact:	Negative Impact or Impact Not Known	
Minimal 🔀 Significant 🗌	Minimal Significant	

178. Outcome			
No change to decision	Adjustment needed to	Continue with decision	If significant negative
	decision	(despite adverse impact / missed opportunity)	impact - Stop / rethink
\square			

179. Please give full explanation for how the overall assessment and outcome was decided

It is proposed that the changes will have a positive impact on younger children, adults with young children, pregnant women and lone parents. This is because the proposal is to have a more strategic approach to children's centres to ensure they focus on those most in need of support.

Some centres will have reduced opening hours, which may have a small negative impact on users of those centres, however some services will still be available at those centres and other venues in the locality will continue to offer services. The review has focused on ensuring that the council continue to offer support to families in need, supporting people with different characteristics in a flexible and appropriate manner. The impact on particular groups will be monitoring during the implementation and delivery of the proposal.

The review proposes a new model that provides a more coherent and strategically managed offer where resources can be more flexibly moved to the areas of greatest need.

¹⁷ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

The review also focuses resources on those who are in need of most support from early year's services regardless of disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage or civil partnership.

Street Scene

EIA 14: Initial Equality Analysis (EIA)

Resident/Service User Street Cleansing Optimisation

180. Details of project, policy, procedu	are or service change:		
Title: Street Cleansing Optimisation			
Brief description of what is being assess	sed:		
Options to optimise the street cleansing	service across the borough, taking into account resident and staff views,		
service knowledge and priorities, data a	nalysis results on street conditions and pilot scheme results to ensure		
service efficiencies are achieved whilst n	naintaining maximum street cleanliness.		
Department and Section: Greenstreets			
Date assessment completed: Oct 14			
181. Names and roles of people comp	leting this assessment:		
Lead officer	Dave Ward		
Other contributors	Karen Reid		
3. User Profile			
Will the proposal affect employees?	NO		
If yes, please seek assistance from HR to complete the employee EIA.			
Who is affected by the proposal? All residents and users across the borough			
What data is used/available to support	support Data dashboard, and results from Residents focus groups, pilot scheme		
the assessment?	and road condition surveys and specific data analysis		

How are the following equality strands affected? *Please detail the effect on each equality strand, and any mitigating action you have taken / required. Please include any relevant data. If you do not have relevant data please explain why / plans to capture data*

Equality Strand	Affected?	If yes, and impact negative explain how affected	Indicate what action is required or has been taken to mitigate adverse impact?
129. Age	Yes 🗌 / No 🔀	No negative impact on Equality strand	N/A

130. Disability	Yes 🗌 / No 🔀	No negative impact on Equality strand	N/A
131. Gender reassignment	Yes 🗌 / No 🔀	No negative impact on Equality strand	N/A
132. Pregnancy and maternity	Yes 🗌 / No 🔀	No negative impact on Equality strand	N/A
133. Race / Ethnicity	Yes 🗌 / No 🔀	No negative impact on Equality strand	N/A
134. Religion or belief	Yes 🗌 / No 🔀	No negative impact on Equality strand	N/A
135. Gender / sex	Yes 🗌 / No 🔀	No negative impact on Equality strand	
136. Sexual orientation	Yes 🗌 / No 🔀	No negative impact on Equality strand	N/A
137. Marital Status	Yes 🗌 / No 🔀	No negative impact on Equality strand	N/A
138. Other key groups?	Yes 🗌 / No 🔀	No other user groups will be adversely affected.	
Carers (Please indicate if Young, Parent or Adult carer).	Yes 🗌 / No 🔀		
People with mental health issues	Yes 🗌 / No 🔀		
Some families and lone parents	Yes 🗌 / No 🔀		
People with a low income Unemployed	Yes 🗌 / No 🔀		
people Young people not in employment education or	Yes 🗌 / No 🔀		
training	Yes 🗌 / No 🔀		

5. Please outline what data sources, measures and methods could be designed to monitor the impact of the new policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact?

Include how frequently monitoring could be conducted and who will be made aware of the analysis and outcomes

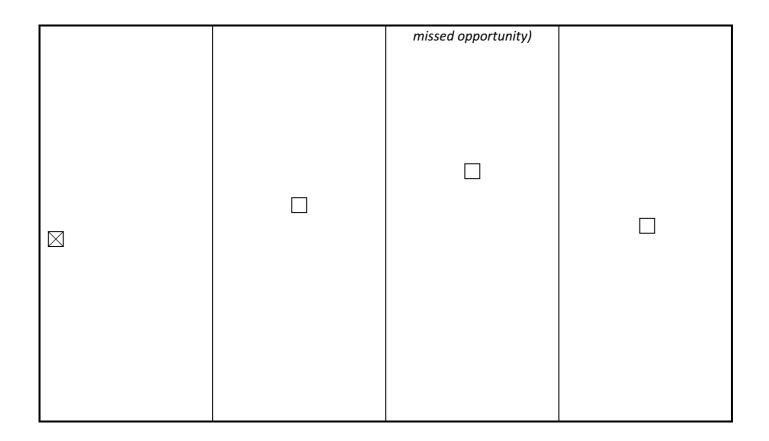
It is not expected that any equality groups or service users will be adversely affected by any proposed offers. However, staff focus groups are planned to capture feedback and opinions from operational staff and on-going data analysis of street conditions and service specific software reviews will highlight changes in performance and delivery thereby alerting service to adverse impacts if they arise.

A full EIA will be carried out as part of a second phase when HR input will be incorporated for the staff restructure element.

6. Initial Assessment of Overall Impact				
Positive Impact	Negative Impact or Impact Not Known ¹⁸	No Impact		
7. Scale of Impact				
Positive impact:	Negative Impact or Impact Not Known	·		
Minimal Significant	Minimal Significant			

8. Outcome			
No change to decision	Adjustment needed to decision	Continue with decision (despite adverse impact /	If significant negative impact - Stop / rethink

¹⁸ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.



9. Summary/Conclusion of overall assessment outcome

(to be transferred to Full Equality Impact Assessment)

It is not expected that any equality groups or service users will be adversely affected by any proposed offers. However, any outcomes from staff or resident focus groups and on-going data analysis of street conditions and service specific software reviews highlighting changes in delivery will be reviewed as part of the full EIA in due course.

Equality Impact Analysis (EqIA) 15

Revised Council Tax Support scheme

1. Details of function, policy, procedure or service:			
Title of what is being assessed: Revised (Council Tax Support scheme		
Is it a new or revised function, policy, pro	ocedure or service? Revised policy		
Department and Section: Finance, Comn	Department and Section: Finance, Commissioning Group		
Date assessment completed: November 2014			
2. Names and roles of officers completing this assessment:			
Lead officer Jonathan Wooldridge			
Other groups			

3. How are the following equality strands affected? Please detail the effects on each equality strand, and any mitigating action you have taken / required. Please include any relevant data. If you do not have relevant data please explain why / plans to capture data			
Equality Strand	Affected?	Explain how affected	What action has been taken / or
			is planned to mitigate impact?
1. Age	Yes 🔀 / No 🗌	Working age claimants will be affected by the change in policy. The Government have protected Pension Credit Age claimants from any change, so will still receive the full support as if Council Tax benefit had remained. Working Age claimants could see an increase in the amount of council tax they are required to pay. The largest number of people affected by this feature fall in the age range 31 to 50 and are therefore more likely than other age groups to have families and dependent children. The additional burden of this feature may have a particular impact on those who are already financially stretched, leading to the possibility of hardship that impacts on their children. This may have a consequential impact	Through all of the Government's welfare reforms, it is intended that citizens will be better off in work than in receipt of benefits. Accordingly anyone affected by the additional contribution they have to make will be encouraged to seek employment to maximise their income wherever possible. Support to do this is available through the Job Centre Plus, Job Coaches from which work closely with the Revenues and Benefits staff.

			on Children's Services.	
		Yes 🔀 / No 🗌	No wider impact than previously	In order to mitigate against the
2.	Disability		impacted, but people with particular disabilities that prevent them from taking advantage of support to find work are more likely to be impacted by a range of welfare reforms.	increased impact, resources will continue to be available to support the most vulnerable and this may be met through a discretionary council tax support scheme.
			The extent of the impact by amending the scheme to 15 or 20% from 8.5% will increase the burden.	Disability benefits are currently disregarded when calculating income. It is proposed that this continues under all of the options
			The exact number of disabled claimants is not known but out of 29689 households receiving CTS there are around 414 receiving some form of disability benefit or premium with their Council Tax Support. This does not include claimants who are on a passported benefit. The number of disabled people receiving a passported benefit is not known as in most cases this information is not currently collected under the present scheme.	proposed.
3.	Gender reassignment	Yes 🗌 / No 🔀	There is no data to suggest that this group is affected.	Residents from any group can apply to council's Discretionary Funds
4.	Pregnancy and maternity	Yes 🔀 / No 🗌	People who are in advanced stages of pregnancy or receiving maternity allowance are affected for a temporary period because they will have a finite income and will be unable to increase this income by working.	In order to mitigate against this, resources will continue to be available to support the most vulnerable and this may be met through a discretionary council tax support scheme.
5.	Race / Ethnicity	Yes 🗌 / No 🔀	There is no data to suggest that this group is affected as we do not ask people's ethnicity as part of the CTS claim process. We	In order to mitigate against this, resources will continue to be available to support the most vulnerable and this may be met

Y			
		know that in Barnet people from some ethnicities are more likely than others to have a low income or fall into arrears on priority debts. This includes Black Africans, Pakistanis and Bangladeshis. In the consultation over half of non-white groups chose to keep CTS at 8.5% whilst only a third of white groups did the same (Citizens Panel weighted survey). Whilst no distinction has been made on the grounds of race on contributions from working age claimants, the nature of the contribution is such that the larger the Council Tax liability, the larger families, who may live in larger and therefore higher banded properties, will be expected to contribute a larger monetary sum (but the same percentage) towards their Council Tax liability. Based on national data ¹⁹ , families of Indian, Pakistani and Bangladeshi origin are on average significantly larger than others (2.5 – 3.5 children compared with an average of 2.1 for all other races) and are therefore likely to be acked to	through a discretionary council tax support scheme.
		therefore likely to be asked to contribute more	
6. Religion or belief	Yes 🗌 / No 🔀	There is no data to suggest that this group is affected as we do not ask people's religion as part of the CTS claim process. The Citizens Panel consultation did not ask people their religion or belief. Whilst no distinction has been made on the grounds of	In order to mitigate against this, resources will continue to be available to support the most vulnerable and this may be met through a discretionary council tax support scheme.

¹⁹ LFS household data sets October-December 2004 to April-June 2008, weighted proportions

		religion or belief on contributions from working age claimants, the nature of the contribution is such that the larger the Council Tax liability, the larger the contribution. Data from elsewhere ²⁰ shows that households of Muslim, Hindu and Sikh families are significantly larger than average (3.2-3.7 people compared with an average of 2.3) and these families may be amongst those asked to contribute more.	
7. Gender / sex	Yes 🔀 / No 🗌	A reduction in the maximum support would be applied to everyone receiving Council Tax Support but around 60% of the total number of people affected would be women in line with the current Council Tax claimant population. Furthermore 1/3 of households claiming Council Tax Support are lone parents of which 95% are women. There were no significant differences in the responses from different genders.	In order to mitigate against this, resources will continue to be available to support the most vulnerable and this may be met through a discretionary council tax support scheme. In relation to lone parents, the current scheme disregards child benefit as income. It is proposed that this continues in all the proposed options.
8. Sexual orientation	Yes 🗌 / No 🔀	There is no data to suggest that this group is affected. The Citizens Panel consultation did not ask people their sexual orientation	Residents from any group can apply to council's Discretionary Funds
9. Marital Status	Yes 🗌 / No 🔀	Not affected. The maximum contribution of 91.5, 85, or 80 per cent would apply to households whether single, married, civil partnered, or co-habiting. The maximum support would be	Where a single person is the sole liable person for Council Tax they receive a statutory 25% discount in their liability which lowers the amount they would have to pay.

²⁰ 2001 Census, Manchester area; Manchester City Council

		applied to the council tax support award to all claimants. It may be assumed in some cases that single residents maybe more likely to be affected because they would only have one income. However where a single person is the only resident they receive a statutory 25% discount in their Council Tax liability which lowers the amount they would have to pay. Marital status however doesn't preclude residents from living alone or vice versa. The Citizens Panel consultation did not ask people if they were married			
10. Other key groups?	Yes 🔀 / No 🗌	Changes to Council Tax Support impact on low and fixed income groups as this one of the eligibility criteria. There are a number of groups who may be more likely to have a low or fixed income and are not able to increase their income through work and salary progression. This includes those with caring responsibilities or those that are prevented from working as a result of their health or disability.	For the most vulnerable, other support from discretionary council tax support will be available.		

4. What measures and methods could be designed to monitor the impact of the new policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? Include how frequently monitoring could be conducted and who will be made aware of the analysis and outcomes

This EIA will be reviewed when a decision has been made about which option will be implemented.

Housing Benefit collect data gender, age, information about disability benefit of head of household and their partner. We know who is currently receiving Council Tax Support and their characteristics as above. Housing Benefit do not collect data on the other protected characteristics as this is not considered essential for the purposes of making a claim. It is proposed that the Council Tax claimant cohort is monitored annually to understand whether the make up of this group has changed and whether any particular group has disproportionately fallen into arrears.

Statistics regarding collection rates are considered by a partnership welfare reform steering board and as part of other government returns.

5. Overall impact		
5. Overall impact		
Positive Impact	Negative Impact or	No Impact
	Impact Not Known ²¹	
6. Scale of Impact		
Positive impact:	Negative Impact or	
	Impact Not Known	
Minimal	Minimal 🛛	
Significant	Significant	

7. Outcome								
No change to decision	Adjustment	needed	to	Continue with	decision	lf	significant	negative
	decision			(despite adverse missed opportunit		im;	pact - Stop / r	ethink

8. Please give a full explanation for how the initial assessment and outcome was decided

The scale of the impact is recorded as minimal. It is proposed to monitor the impact of the change and to revise this assessment according to the data.

The number of residents affected by the change is approx. 22,000 households. These have already been burdened when the support was reduced to 91.5%. This is being proposed to be reduced to 85% or 80%, so whilst the change in not insignificant, the overall average impact could amount to £1 to £2 per week. The impact on affected residents will be the same group of residents, but the percentage of the level of maximum support may change. We know this group have a low income, are working age, 60% of them are women and 1/3 are single parents. We don't collect full information on all the protected characteristics as this is not required to process a claim. We also know that the current CTS claimants were more likely to say that they favoured keeping the level of Council Tax Support at 8.5% (according to the Online web survey).

Section 13a (1) (C) of the Local Government Finance Act 1992 allows councils to reduce the amount of council tax payable for a liable household. It can be used for individual cases or to determine specific classes for a local discount.

Other welfare reforms are hitting some groups such as large families, low income families, lone parents and disabled people– and together with increases in cost of living this is having a cumulative impact on people's income. Therefore even small changes in contributions could 'tip the balance' in people's ability to pay. Therefore

²¹ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

all three options are considered to have a minimal negative impact of groups with the protected characteristics.