

Equality and Safety Impact Assessment

The **public sector Equality Duty** (Section 149 of the Equality Act) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people carrying out their activities.

The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The Council’s Equality and Safety Impact Assessment (ESIA) includes an assessment of the community safety impact assessment to comply with section 17 of the Crime and Disorder Act and will enable the council to better understand the potential impact of the budget proposals and consider mitigating action.

Name or Brief Description of Proposal	HASC 15 Impact on Learning Disability (LD) Package Spend.
Brief Service Profile (including number of customers)	<p>Southampton City Council (SCC) provides funded care for 807 people with a learning disability (LD) at a total cost of £19.515m per annum. Whilst there have been work streams which have successfully reduced the cost of care for individual clients on the caseload through a range of methods including review, negotiation, procurement, and resettlement over the past two years, pressure on this budget arising from the cost of new care packages arranged over the same period is such that the overall cost of care for people with learning disabilities has seen a net increase of 1.7% during this period.</p> <p>Conversely, the Continuing Healthcare (CHC) team within Southampton City Clinical Commissioning Group (SCCCG) has a track record for successfully reducing the cost of continuing healthcare, having reduced expenditure within this service area by £2.2m (10.8%) over the last two years. This has been achieved through a combination of the establishment of financial targets for operational teams and the alignment of business as usual/operational processes towards the achievement of these targets, a focus on quality and best value in the review process, performance management, invoice interrogation, and close work with finance business partners.</p>
Summary of Impact and Issues	It is therefore proposed that an effective way to reduce the cost of SCC-funded LD care is to apply the working methods and business processes employed by the CHC team towards the business of SCC-funded care for people with learning disabilities and to do this at pace by

	<p>integrating the SCC LD team into the structure of the CHC team.</p> <p>The proposed integration would also create an opportunity for the CHC team to further accelerate and improve the quality of its own business processes (particularly where the achievement of CHC objectives is dependent on and sometimes delayed whilst awaiting social work assessment).</p> <p>There is a high degree of similarity within the profiles of each team’s caseload and indeed, there is regular movement of clients back and forth between the organisations as well as a proportion of clients which are CCG/SCC joint funded.</p> <p>There is substantial potential for a range of clinical and care benefits to be delivered by integrating the management of these two caseloads as well including overall pathway improvement through the system (including the use of a single assessment where applicable), producing a better quality experience for clients engaging with the integrated care management service.</p> <p>The pooling of budgets and savings targets in this service area would also reduce incentives for the excessive focus of time and resource on establishing organisational responsibility for care cost and enable a stronger focus on providing the right care at the right price for each client (high quality, cost effective care).</p>
<p>Potential Positive Impacts</p>	<p>An integrated LD team in Southampton, under a single management structure, applying an integrated “normal business” approach that embeds the pursuit of high quality <u>and</u> cost effective care will allow the delivery of significant savings. An integrated LD team in Southampton can deliver a wide range of positive impacts for the individuals, their carers and the professionals who are involved directly or indirectly in their care package.</p> <p>The following is not an exhaustive list but shows some of the potential positive impacts in addition to financial savings:</p> <ul style="list-style-type: none"> • This proposal is consistent with the Better Care objectives, the overall SCC vision described above and as a significant step towards deeper integration of health and social care in the city. • It will deliver improved client and family experience

	<p>(including transition of children).</p> <ul style="list-style-type: none"> In relation to the LD service provider market, a fully integrated team will have significantly stronger purchasing power and influence. In focusing on specific cohort of clients, there is strong potential for learning that can influence and shape the onward integration of health and social care in the city.
Responsible Service Manager	Mike Cooke
Date	07.01.16

Approved by Senior Manager	Carol Alstrom Associate Director of Quality / Deputy Chief Nurse Integrated Commissioning Unit
Date	27.01.2016

Potential Impact

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
Age	Fear of change, perceived loss of established case management or other familiar structures/contact networks/routines. Potentially increased anxiety and deterioration of circumstances.	Develop robust training and communication approaches so individuals and families have a full understanding of the positive benefits of integrated LD health and social care team.
Disability	No identified or directly related negative impact at this stage of the development. Possible positive impact by supporting increased delivery of high quality, cost effective care and support. .	N/A
Gender Reassignment	No identified or directly related negative impact at this stage of the development. Possible positive impact by supporting increased delivery of high quality, cost effective care and support.	N/A
Marriage and Civil Partnership	No identified or directly related negative impact at this stage of the development. Possible positive impact by supporting	N/A

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	increased delivery of high quality, cost effective care and support.	
Pregnancy and Maternity	No identified or directly related negative impact at this stage of the development. Possible positive impact by supporting increased delivery of high quality, cost effective care and support.	N/A
Race	No identified or directly related negative impact at this stage of the development. Possible positive impact by supporting increased delivery of high quality, cost effective care and support.	N/A
Religion or Belief	No identified or directly related negative impact at this stage of the development. Possible positive impact by supporting increased delivery of high quality, cost effective care and support.	N/A
Sex	No identified or directly related negative impact at this stage of the development. Possible positive impact by supporting increased delivery of high quality, cost effective care and support.	N/A
Sexual Orientation	No identified or directly related negative impact at this stage of the development. Possible positive impact by supporting increased delivery of high quality, cost effective care and support.	N/A
Community Safety	No identified or directly related negative impact at this stage of the development. Possible positive impact by supporting increased delivery of high quality, cost effective care and support.	N/A
Poverty	No identified or directly related negative impact at this stage of	N/A

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
	the development. Possible positive impact by supporting increased delivery of high quality, cost effect care and support.	
Other Significant Impacts	Potential disruption to normal delivery to service users during or immediately after integration. Potential for changes to be confusing for some service users and families initially and during period of transition.	Ensure a robust project plan including communications team involvement. Possibly include service user and provider market engagement events to support robust communication of rationale for change and management of expectation.

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