

### **Equality Impact Assessment Proposals Considered in July 2012**

EIA No: AS10g / AS11g

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.

Review of non residential care charging policy for adult social		
care		
Charging for 24 hour, night sleep in, night waking and Extra		
Care overnight care		
At August 2012 2 individuals received 24 hour care, 16 sleep in care,		
11 waking night care and 31 lived in Extra Care		
Some individuals who are assessed as being able to do so will pay		
more for their services		
Supports the development of personalised service provision in adult		
social care		
Ensures policy fits with national guidance		
Ensures equity and fairness		
Supports the development of alternatives to residential care –		
promoting continued independence		
Carol Valentine		
28.9.12		

Approval by Senior Manager		
Name: Carol Valentine		
Signature		
Date	28.9.12	

#### **Potential Impact**

Group	Details of Impact	Possible Solutions & Mitigating Actions
Age	The majority of social care users are over 65	Individuals will contribute based on assessment of their income and ability to contribute
	- Some individuals may be required to contribute more	No one will be left with disposable income of less that DWP minimum income guarantee plus 25%
		Anyone who feels they have to refuse care because of the impact of the additional cost will be assessed and support provided to meet eligible need
Disability	Social care users have critical or substantial need generally associated with their disability.	Individuals will contribute based on assessment of their income and ability to contribute
	- Some individuals may be required to contribute more	No one will be left with disposable income of less that DWP minimum income guarantee plus 25%
	AP,	Anyone who feels they have to refuse care because of the impact of the additional cost will be assessed and support provided to meet eligible need
Gender	More users of social care are female	Individuals will contribute based on assessment of their income and
	- Some individuals may be required to contribute more	ability to contribute
, (O)		No one will be left with disposable income of less that DWP minimum income guarantee plus 25%
		Anyone who feels they have to refuse care because of the impact of the additional cost will be assessed and support provided to meet eligible need
Race	No impact	
Religion or Belief	No impact	
Marriage and Civil	No impact	
Partnership		

Pregnancy	No impact	
and Maternity		
Gender	No impact	
Reassignment		
Community	No impact	
Safety		
Sexual	No impact	
Orientation		
Poverty	Many individuals who receive social	Individuals will contribute based
	care support are on fixed incomes such	on assessment of their income and
	as pensions or state benefits	ability to contribute
	Some individuals may be required to	No one will be left with disposable
	contribute more	income of less that DWP minimum
		income guarantee plus 25%
		Anyone who feels they have to
		refuse care because of the impact
		of the additional cost will be
	(	assessed and support provided to
		meet eligible need
		Potential impact of changes to
		housing and state benefits will be
		taken into account in individual
		financial assessments
Staff	No impact	



# SOUTHAMPTON CITY COUNCIL®

#### **Draft Equality Impact Assessment:**

EIA No: AS10h/11h

### **EQUALITY IMPACT ASSESSMENT Proposals considered in July 2012**

**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.

Portfolio	Proposal:
Reference No.	Review of Non Residential Charging Policy for Adult Social Care
AS10h / AS11h	Increase in income from clients due to increase in benefits.
Volumes (number of customers) and	In August 2012 2109 individuals were being charged for non residential care. This includes people with disabilities and illnesses, those with mental health issues, people with learning disabilities and people with
profile	substance misuse problems.
prome	Substance inibuse prosicins.
Staffing and	
budget	
Summary of	Some individuals who are assessed as being able to do so will pay more
impact and	for their services as their income will have risen
Issues	
Potential	Supports the development of personalised service provision in adult
Positive Impact	social care
	Ensures policy fits with national guidance
	Ensures equity and fairness
1),	

Responsible Service Manager:		
Date:		
Approval by Senio	or Manager	
Name:		
Signature:		
Date:		

Group	Details of impact	Possible Solutions/ Mitigating Actions
Age	The majority of social care users are over 65	Individuals will contribute based on
	- Some individuals may be required to	assessment of their income and ability
	contribute more	to contribute
		No one will be left with disposable
		income of less that DWP minimum
		income guarantee plus 25%
		Anyone who feels they have to
		refuse care because of the impact o
		the additional cost will be assessed
		and support provided to meet
		eligible need
Disability		Individuals will contribute based on
	Social care users have critical or substantial	assessment of their income and ability
	need generally associated with their disability.	to contribute
	- Some individuals may be required to	No one will be left with disposable
	contribute more	income of less that DWP minimum
		income guarantee plus 25%
		Anyone who feels they have to refuse
		care because of the impact of the
	, 113	additional cost will be assessed and
		support provided to meet eligible need
Gender	More users of social care are female	Individuals will contribute based on
	- Some individuals may be required to	assessment of their income and ability
	contribute more	to contribute
		No one will be left with disposable
		income of less that DWP minimum
	11.	income guarantee plus 25%
	/ /	Anyone who feels they have to refuse
	1	care because of the impact of the
		additional cost will be assessed and
Race	No impact	support provided to meet eligible need
Nace	No impact	
Religion/	No impact	
Belief		
Marriage and	No impact	
Civil		
Partnership		9
Pregnancy	No impact	
and maternity		
Gender	No impact	
reassignment	No.	
Community	No impact	
Safety	No. in contrast	
Sexual	No impact	
Orientation		

Poverty	Many individuals who receive social care support are on fixed incomes such as pensions or state benefits  Some individuals may be required to contribute more	Individuals will contribute based on assessment of their income and ability to contribute  No one will be left with disposable income of less that DWP minimum income guarantee plus 25%  Anyone who feels they have to refuse care because of the impact of the additional cost will be assessed and support provided to meet eligible need  Potential impact of changes to housing and state benefits will be taken into account in individual financial assessments
Staff	No impact	





EIA No: AS12a

**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.

Portfolio	Undertake cuts in the Supporting People programme, resulting in		
Reference No.	service reductions:		
AS12a	Supporting People housing related support to drug and alcohol users		
Volumes (number of customers) and profile	At least 70 individuals at any one time receive housing related support from this service. This is often short-term interventions for individuals who have been through other drug rehabilitation services and are now living in the community. Also, a number of formerly homeless people are supported, to help maintain their accommodation and prevent 'sliding back' into higher drug and alcohol use.		
Staffing and budget	Budget £198k pa. Society of St James provide the service (following a tender). Proposal will end the budget in full.		
Summary of impact and Issues	Reduced support to help people with chaotic and addictive behaviours settle back into and/or continue to live successfully in the community. Support includes help with tenancies and maintaining accommodation; support with budgeting; signposting; help with employment. The risk is that the loss of this support could lead to fewer people sustaining long-term drug-free/reduced lifestyles, presenting problems for drug services in future years. DAT budget is also subject to reductions from 2013/14, reducing the opportunity to shift resources to support drug users. There no scope for additional support to alcohol users – who make up to 50% of users of the service, but homelessness support services already have knowledge of many of this group, and specialist training will continue to be provided to support workers.		
Potential			
Positive Impact			

Date: Tuesday, 23 <sup>rd</sup> October 2012  Approval by Senior Manager		
Signature:		
Date:		



Group	Details of impact	Possible Solutions/ Mitigating Actions
Age	Users are of all age groups from 18 upwards. The majority of users are aged 21 to 50, but with some older alcohol users. Support for resettlement will reduce potentially placing individuals at risk of homelessness should they be unable to manage their tenancy. Possibility that many may increase their drug use again, leading to more work for drug services.	Continued specialist training for support workers in homelessness services and floating support services will help to meet some tenancy related issues. Before the contract ends, the service will be asked to handover on-going casework to floating support services, who will make decisions on their capacity to manage this group's needs.
Disability	Service provided across all groups – people with disabilities and those without. Some individuals will have diagnosed mental health problems, which could be exacerbated if they risk homelessness again. Support for resettlement will reduce potentially placing individuals at risk of homelessness should they be unable to manage their tenancy. Possibility that many may increase their drug use again, leading to more work for drug services.	Continued specialist training for support workers in homelessness services and floating support services will help to meet some tenancy related issues. Before the contract ends, the service will be asked to handover on-going casework to floating support services, who will make decisions on their capacity to manage this group's needs.
Gender	Service open to both sexes. Higher proportion of males access the service reflecting the demographics of problematic drug use. The availability of the service in people's homes increases the potential accessibility to women – which may have been reduced by the requirement to attend open sessions/day centres for specific drug services. The ending of this support will reduce this access. Possibility that many may increase their drug use again, leading to more work for drug services.  Users of all races use the service, although white people have a slightly higher use than the demographic profile suggests.	Continued specialist training for support workers in homelessness services and floating support services will help to meet some tenancy related issues. Before the contract ends, the service will be asked to handover on-going casework to floating support services, who will make decisions on their capacity to manage this group's needs.  Continued specialist training for support workers in homelessness services and floating support services will help to meet some
Religion/ Belief	Users of all religions and beliefs use the service. Support workers provide support to help people	tenancy related issues. Before the contract ends, the service will be asked to handover on-going casework to floating support services, who will make decisions on their capacity to manage this group's needs.  No specific action to be taken.

Marriage and Civil Partnership	Couples access the service, even where only one has a specific drug use issue.	Continued specialist training for support workers in homelessness services and floating support services will help to meet some tenancy related issues. Before the contract ends, the service will be asked to handover on-going casework to floating support services, who will make decisions on their capacity to manage this group's needs.
Pregnancy	Few pregnant women access the service,	No specific action to be taken.
and maternity	although their needs can be accommodated.	
Gender	People who have had their gender reassigned or	No specific action to be taken.
reassignment	those pre-operation etc can use the service	
Community Safety	Fewer support services for drug users could result in increased offences, as there is less support	Continued specialist training for
Salety	available at the time needed by the user. The fact	support workers in homelessness services and floating support
	that this service works with people in their own	services and noating support services will help to meet some
	homes could increase issues in some parts of the	tenancy related issues. Before the
	city, if drug use increases as a result of the	contract ends, the service will be
	reduction in service.	asked to handover on-going
	reduction in service.	casework to floating support
	( [ ] )	services, who will make decisions on
	1 // 4	their capacity to manage this group's
		needs. Probation Service to be
	01	involved in discussions.
Sexual	People of all sexual orientations can access the	No specific action to be taken.
Orientation	service.	State Country   Country of Article - State Advisor (1997)   Andrew Country of Article Country (1997)
Poverty	Users accessing are often receiving benefits. The service helps with benefit and income maximisation while the individual is at home.	Continued specialist training for support workers in homelessness services and floating support
	There is specific support to help people back into	services will help to meet some
	employment that will no longer be available,	tenancy related issues. Before the
-	reducing access to work.	contract ends, the service will be
		asked to handover on-going
	YY'	casework to floating support
		services, who will make decisions on
		their capacity to manage this group's needs.
Staff	None.	No action required.
Jidii	None.	ivo action required.



**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.

Portfolio	Undertake cuts in the Supporting People programme, resulting in		
Reference No.	service reductions:		
AS12b	Supporting People housing related support to people with mental		
	health problems		
Volumes Over 250 people with mental health problems who are living in			
(number of	community receive support from the Supporting People programme. 138		
customers) and	of these live in supported housing schemes. All the contracts initial three		
profile	year period ends in August 2013. There is the potential to reduce the		
	units of accommodation and support available by taking out void		
	accommodation and helping some people to move on more quickly – ie		
	demand is lower than the current capacity. In the longer term this could		
	impact on moves from residential care to the community (with some		
.//	possible impacting on the care budget), some savings (e.g. £100K full		
	year) could be achieved without serious impact, through negotiations		
6/			
	and possibly tendering of one service.		
Staffing and	Total budget - £1 million pa. all contracts provided by voluntary sector		
budget	agencies after tendering. Proposals will reduce the budget by £100K pa.		
Summary of	Reduced support to help people with mental health problems live and		
impact and	settle back into and/or continue to live successfully in the community.		
Issues	Support includes help with tenancies and maintaining accommodation;		
	support with budgeting; signposting; help with employment. However,		
	the majority of the accommodation will remain available, and floating		
	support services will be impacted by only a very small amount.		
Potential	Reduction of voids, and decision could reduce relatively poor		
Positive Impact	accommodation standards of a small number of units, by focusing on		
	ending agreements first on these units. There is also a need to focus on		
	providing better quality housing, including self-contained		
	accommodation, which will be taken forward at the same time.		

Responsible Service Manager: Matthew Waters  Date: Tuesday, 25 <sup>th</sup> September 2012		
Name:		
Signature:		
Date:	25	

Group	Details of impact	Possible Solutions/ Mitigating
		Actions
Age	Users are of all age groups from 18 upwards up to $60$ , with the largest group aged $30 - 55$ .	No specific action suggested.
Disability	Service provided across all groups – people with disabilities and those without.	No specific action to be taken.  Adapted accommodation will not be taken out of contracts, increasing the percentage accessible by disabled people. Limited impact on others with a disability as the biggest change is the reduction in void (ie empty) units.
Gender	Service open to both sexes. More males are in accommodation than females – figure of more than 2:1. There is a need for more self-contained accommodation to be available to this group, which could make it a better choice for women.	Ability to access remains equal across the sexes. However, focus on increasing the availability of self-contained housing would benefit both sexes.
Race	Users of all races use the service, although white people have a slightly higher use than the demographic profile suggests.	No specific action to be taken. Accommodation location will be one aspect of decision-making to reduce voids, so that accommodation used by racial groups will not be affected
Religion/ Belief	Users of all religions and beliefs use the service. Support workers provide support to help people to practice their beliefs.	No specific action to be taken.
Marriage and Civil Partnership	Couples access the service, particularly from their own homes, via floating support.	No specific action to be taken. Floating support not subject to significant change – and will pick up any individuals move-on from supported housing.
Pregnancy and maternity	Few pregnant women access the service, although their needs can be accommodated.	No specific action to be taken. Support from floating services can work with pregnant women at home and within other support services, where necessary.
Gender	People who have had their gender reassigned or	No specific action to be taken.
reassignment	those pre-operation etc can use the service	
Community Safety	Fewer support services for some individuals with mental health problems could result in offences, as there is less support available at the time needed by the user.	Probation Service to be involved in discussions re: addresses to be lost – but as the main impact is on reducing voids, impact will be limited.
Sexual Orientation	People of all sexual orientations can access the service	No specific action to be taken.
Poverty	Users accessing are often receiving benefits. The service helps with benefit and income maximisation.	No specific action to be taken. All services to continue to focus on maximising benefits.





**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.

Portfolio	Undertake cuts in the Supporting People programme, resulting in	
Reference No.	service reductions:	
AS12c	Supporting People housing related support to single people who are homeless	
Volumes	Services for single homeless people and ex-offenders were tendered and	
(number of	new contracts started in April 2012. One service closes for refurbishment	
customers) and profile	in September 2012 (Bellevue Road) with a view to opening in 2014 with a central government grant of several million pounds. The homelessness services have been significantly reduced in size with the focus on the most vulnerable and chaotic individuals – 140 low-level support units were taken out of the commissioning model (200 units if Bellevue Road is included). This model of services has enabled these efficiencies to be achieved however, increases in single homelessness often lag behind economic changes. Access to the services is managed by the City Council's Street Homeless Prevention Team, who also have responsibility for diverting people from these services.  Potential to withdraw funding from refurbished Bellevue Road (this will revert to student housing, and will have no positive impact on the Council's work) - potential saving of £110K pa.  End Intensive Outreach funding within Homelessness Department	
	(currently vacant post) - £45K pa, but impact on intensive homelessness prevention work.  Services for single homeless people have helped the city reduce street homelessness in recent years (to below 6 – although some people with no recourse to public funds have raised this figure recently). In recent years, the focus of support has been on preventing homelessness and diverting people from accommodation-based support, and moving people on from accommodation services, freeing support and bedspaces for others.	
Staffing and	Total budget - £2 million pa. all contracts provided by voluntary sector	
budget	agencies after tendering. Proposals will reduce funding by £155K pa.	
Summary of	Reduced support to help single people who are homeless live and settle	

impact and Issues	back into the community. Support includes help with tenancies and maintaining accommodation; support with budgeting; signposting; help with employment. However, the majority of the accommodation will remain available, and floating support services will help to manage the impact. The ability of the Homelessness team to manage more complex cases and help divert single people from services will be reduced by the removal of this post.
Potential Positive Impact	Considering if Bellevue Road as new accommodation could be kept, with other units being reduced to match the change in resources.  Consideration is also being given to using Bellevue Road for young people's accommodation – replacing some existing units for this group.

The second secon	
Responsible Service Manager	: Matthew Waters
Date: Tuesday, 25 <sup>th</sup> Septembe	er 2012
Approval by Senior Manager	
Name:	
Signature:	
Date:	, ) / ,

Crour	Datails of impact	Descible Solutions / Mitigatine Actions
Group	Details of impact	Possible Solutions/ Mitigating Actions
Age	Users are of all age groups from 18 upwards to 60. The largest concentration is for single people aged 25-45. Other specific services are available for people aged 16-21, including care leavers.	No specific action suggested.
Disability	Service provided across all groups – people with disabilities and those without.	No specific action to be taken. Adapted accommodation will not be taken out of contracts, increasing the percentage accessible by disabled people.
Gender	Service open to both sexes. More men than women use the single people services – a ratio of approximately 3:1. However, the number of single women becoming homeless is increasing, and more women-only units are being made available.	No specific action to be taken. Ability to access remains equal across the sexes. Within the accommodation units remaining, women-only units are available.
Race	Users of all races use the service, although white people have a slightly higher use than the demographic profile suggests.	No specific action to be taken. Accommodation location will be one aspect of decision-making.
Religion/ Belief	Users of all religions and beliefs use the service. Support workers provide support to help people to practice their beliefs.	No specific action to be taken.
Marriage and Civil Partnership	Couples access the service, particularly from their own homes, via floating support.	No specific action to be taken. Floating support not subject to significant change – and will pick up any individuals moving-on from supported housing.
Pregnancy and maternity	Few pregnant women access the service, although their needs can be accommodated.	No specific action to be taken. Support from floating services can work with pregnant women at home and other support services, where necessary.
Gender reassignment	People who have had their gender reassigned or those pre-operation etc can use the service	No specific action to be taken.
Community Safety	Reducing outreach provision could mean fewer cases of single homelessness being prevented. This would increase pressure on services, and could result in increased homelessness which in turn can increase crime both by and to people sleeping rough.	Probation Service to be involved in discussions re: addresses to be lost. Street Homeless Prevention Team work directly with street sleepers and engage and look at long-term solutions. Accommodation access is prioritised on those with greatest needs.
Sexual Orientation	People of all sexual orientations can access the service	No specific action to be taken.
Poverty	Users are often receiving benefits. The services help with benefit and income maximisation. Impact of these proposals will be limited	No specific action to be taken. All services to continue to focus on maximising benefits.
		Post is currently vacant.



EIA No: AS12d /AS12f

**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.

Undertake cuts in the Supporting People programme, resulting in service		
reductions:		
To reduce Supporting People housing related support to women fleeing		
domestic violence by confirming a reduction in bed spaces, and ending		
Supporting People funded outreach support		
The Council has commissioned 23 bed spaces from two suppliers, with		
one contract also including an outreach post. Since providing these		
contracts, further outreach work has been commissioned from a		
separate agency by other areas of the Council, and one house (providing		
three bed spaces) has been removed due to housing management		
decisions. These three bed spaces were to be replaced, but the proposal		
is for these not to be replaced (reducing the total bed spaces to 20) and		
for some other units to be replaced in full by higher quality		
accommodation.		
Budget £300k pa. Services provided by Stonham (part of Home Group)		
and Raglan HA.		
The reduction of three bed spaces has technically already been		
accounted for. The original Stonham contract (from the end of 2008) was		
for 15 bed spaces (all shared). A reduction in numbers was agreed		
previously as Stonham ended the agreement on a proportion of the		
shared housing and entered into a separate agreement for self-contained		
accommodation at the start of 2011/12. This reduced the total number		
of available places by three bed spaces. It was a housing management		
decision to end the lease agreement on the properties at this time, as		
void levels were high and the accommodation provided was not of a		
significantly high standard. The reduction of three bed spaces has not		
added to waiting times, but any reduction beyond this would have an		
impact on the ability of services to meet needs.		
Supporting People had been working with Stonham to identify new self-		
contained housing to replace the three bed spaces.		
More recently the discussions have centred on finding more self-		
contained accommodation or better (i.e. higher quality) shared		

accommodation to replace all the existing shared housing. This
accommodation would be easier to manage both from a housing
management and a Supporting People angle producing more savings to
this budget. The city has good links with neighbouring authorities
enabling help to be provided for women who need to leave the city (and
providing for women moving to the city because they cannot stay in their
home area). Access is monitored and the services are a key part of the
Homelessness Team's response to needs.
The Outreach Service is effectively provided by another provider
(through corporate grants process – this service commenced more
recently than the SP funding). The reduction in SP monies will be enacted
mid 2013, allowing time for negotiations and the change to be managed.
This will focus SP resources on support in accommodation only for this
group. The role of the Stonham outreach worker will be covered by
existing accommodation based staff – helping women to resettle.

Responsible Service	e Manager: Matthew Waters	
Date: Tuesday, 25 <sup>t</sup>	h September 2012	
Approval by Senio	r Manager	
Name:	OK)	
Signature:		
Date:		

POTENTIAL I	Details of impact	Possible Solutions/ Mitigating Actions
	Users are of all age groups from 18 upwards.	Void levels have reduced since the three
Age	Age ranges show no significantly higher use by	bed spaces were removed. Access is still
	a particular age group, but use by those aged	good for women fleeing domestic
	above 60 is limited.	violence.
Disability.		No specific action to be taken.
Disability	Service provided across all groups – people with disabilities and those without.	Accommodation that remains and that
	with disabilities and those without.	which will replace current units in future
		will be better suited to people with
		disabilities.
Gender	Sonvice anon to woman only	Void levels have reduced since the three
Gender	Service open to women only.	bed spaces were removed. Access is still
		good for women fleeing domestic
		violence.
Dava	Users of all races use the service.	No specific action to be taken. Void
Race	Users of all races use the service.	levels have reduced since the three bed
		spaces were removed. Access is still
		good for women fleeing domestic
		violence. The move to provide more
		self-contained units better protects
		women from a range of races.
Religion/	Users of all religions and beliefs use the	No specific action to be taken.
Belief	service. Support workers provide support to	No specific action to be taken.
bellet	help people to practice their beliefs.	
	help people to practice their beliefs.	
Marriage and	Couples cannot access the service. No change.	No specific action to be taken.
Civil		
Partnership		
Pregnancy	Few pregnant women access the service,	No specific action to be taken. Void
and maternity	although their needs can be accommodated.	levels have reduced since the three bed
		spaces were removed. Access is still
		good for women fleeing domestic
_		violence, including pregnant women –
		the change to more self-contained
		housing works particularly well for
		pregnant women and those with small
		children.
Gender	People who have had their gender reassigned	No specific action to be taken. Void
reassignment	from male to female can use the service	levels have reduced since the three bed
		spaces were removed. Access is still
		good for women fleeing domestic
		violence.
Community	End of outreach contract will have only limited	No specific action to be taken. Women
Safety	impact as much from the SP services is	will be supported in moving from staff
	focused on women moving on from	working within the accommodation
	accommodation. This will be managed from	services. The reduction in outreach
	remaining staffing within the service.	could have an impact on the ability of
	Annual An	some women to manage their tenancies

		<ul> <li>but links with other agencies will help to identify those most at risk.</li> </ul>
Sexual	People of all sexual orientations can access the	No specific action to be taken. Void
Orientation	service	levels have reduced since the three bed spaces were removed. Access is still good for women fleeing domestic violence.
Poverty	Users accessing are often receiving benefits. The service helps with benefit and income maximisation.	No specific action to be taken. Women will continue to be supported to maximise benefits.
Staff	None.	No action required



EIA No: AS12e & AS12g

Portfolio	Undertake cuts in the Supporting People programme, resulting in	
Reference No.	service reductions:	
AS12e	Supporting People housing related support to older people in	
AS12g	sheltered housing and provide more support to older people in the	
Annua (1970)	community.	
Volumes	Over 3500 older people have traditionally been supported to live in	
(number of	sheltered housing schemes across the city. In most schemes people with	
customers) and	all abilities and needs are expected to receive support from Wardens and	
profile	other support workers – regardless of their actual needs.	
	Since 2010, changes to in-house provision have reduced support to older	
	people who have no need for support and have provided more resources	
	to older people in the community. In addition, a changed definition of	
	sheltered and non-sheltered accommodation has enabled people to	
	make better choices on the accommodation they move to and also the	
	level of support they receive.	
	The experience on in-house services is that support can be better	
	targeted, it can be raised to meet actual needs, it can be reduced where	
	there are no needs, and providing teams in localities is a more efficient	
	way of supporting this group. The in-house services are able to provide	
	dedicated resources for managing activities within schemes, promoting activity and engagement for residents and neighbours from the local	
	community.	
	Identifying older people with support needs in the community requires	
	good relationships to be developed wit a range of community based	
	organisations. In-house, the 60-plus service (also paid for by Supporting	
OK	People) has been successful in managing this.	
	There is a need to support similar moves with RSLs in the city. To focus	
	support only on those who need it within the accommodation.	
Staffing and	Total budget - £1.525 million pa. Proposals will reduce funding by £75K in	
budget	2013/14 and by a total of £200K pa from 2014/15	
Summary of	In 2013/14 the proposal is to support current landlords/support	
impact and	providers to begin changes to support provision. This will include more	
Issues	mobile wardens and a greater focus of support on those with needs –	
	and reducing support on those without needs. This will require concerted	
	publicity campaigns and consultation to advise residents of changes to	
	services – already begun by a number of providers. In 2014/15, the pace	
	of change will be increased, possibly enacted through tendering, which	
	may need to include in-house sheltered support services. More older	
	people in the community will be supported, and provision in sheltered	
	housing schemes will better reflect actual needs. The city's allocation	

	process may need to change to reflect this provision, including a greater emphasis on high levels of support in extra care services etc. Support is likely to continue for over 3,000 older people in the city.	
Potential	Better and more targeted support for those who need it, including those	
Positive Impact	in the community. More support to older people in extra care settings.	
-	More resources to support activities promoting healthy living.	

Responsible Service Manager: Matthew Waters	
Date: Tuesday, 25 <sup>th</sup> Septemb	er 2012
Approval by Senior Manager	
Name:	
Signature:	
Date:	

Group	Details of impact	Possible Solutions/ Mitigating Actions
Age	Users are of all age groups from 60 upwards, although in reality, many schemes now work with people aged 50+ to help manage void issues.	No specific action suggested. Proposal will better target support to those who need it, and provide more support for older people remaining in their own homes in the
Disability	Services provided across all groups – people with disabilities and those without. A higher number of people with disabilities live in sheltered housing. Support need assessments identify those with support needs and support will be focused on these individuals	community.  Adapted accommodation will not be taken out of contracts. People with disabilities and support needs will continue to receive support, and this will be better matched to meeting specifically identified needs.
Gender	Services open to both sexes. Residents reflect the local population (by age group).	No specific action to be taken. Ability to access remains equal across the sexes. Support will only be changed foe those with no needs and should better reflect actual needs.
Race	Users of all races use the services.	No specific action to be taken. Ability to access remains equal across the sexes. Some schemes focus on the needs of specific races and groups, and these will continue. There is then potential that more people from minority ethnic communities
Religion/ Belief	Users of all religions and beliefs use the service. Support workers provide support to help people to practice their beliefs.	will be supported in their own homes.  No specific action to be taken. Religious beliefs are supported across schemes where appropriate and requested. Activities should reflect these needs.
Marriage and Civil Partnership	Couples access the services.	No specific action to be taken. Ability to access is not affected.
Pregnancy and maternity	Due to age restrictions, no pregnant women access the services.	No specific action to be taken.
Gender reassignment	People who have had their gender reassigned or those pre-operation etc can use the service	No specific action to be taken. Ability to access is not affected.
Community Safety	Greater level of support to older people in the community may mean a greater range of issues will be identified, supporting people who wish to remain at home.	No specific action to be taken. Service changes are expected to help more older people in the community.
Sexual Orientation	People of all sexual orientations can access the service	No specific action to be taken. Ability to access is not affected.
Poverty	Users accessing are often receiving benefits. The service helps with benefit and income maximisation.	All services to continue to focus on maximising benefits. Greater potential for people not in sheltered housing to have access to support.
Staff	None.	No action required.





**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.

Portfolio	Advice and Information / Day Care contracts	
Reference No.	To end payment for the advice service to Older People managed by	
AS13a	Age Concern Southampton	
Volumes	The contract funds Age Concern's advice line to personal and phone	
(number of	callers, and gives advice and support about many aspects of ageing,	
customers) and	services and support. It acts as a signposting agent to other services and	
profile	acts to divert people away from adult social care services, where	
	possible. This results in less traffic for advice within adult social care.	
	possible. This results in less traffic for advice within addit social care.	
	Over 650 face to face meetings with Older People were held by the	
	service in the past year. The service also provides telephone advice and	
	information made available on web etc.	
Staffing and	Total budget - £18,600. To end the contract in full from year 2013/14	
budget		
Summary of	In 2013/14 the proposal is to end all support for the local Age Concern	
impact and	Southampton helpline.	
Issues	The overall impact would be to reduce advice to older people in the	
	community, and is likely to result in older people either not receiving	
	good quality advice – and perhaps not recognising their entitlement to	
	support and other services – or approaching other agencies for this	
	advice. This would include Health and Adult Social Care Contact Team.	
	This may lead to assessments of need being undertaken, when then Age Concern service may have been able to promote self-help.	
	It was expected that this service would form part of a wider review of	
	advice and information services in the city that would have considered	
	the future services the city would want to prioritise to divert people from	
	higher cost services. The loss of funding in 2013/14 will mean the	
	opportunity to provide comprehensive services will be reduced.	
	apparation of the contract of	

Responsible Service Manager: Matthew Waters			
Date: Tuesday, 2 <sup>nd</sup> Oc	tober 2012		
Approval by Senior N	lanager		
Name:	And the second of the second o		
Signature:			_
Date:	1		

Group	Details of impact	Possible Solutions/ Mitigating
		Actions
Age	Users are all from the age of 50 upwards. Access	Other services are likely to see an
Ü	to advice on issues from benefits to support will	increase in advice calls from older
	be reduced, leading to many either failing to seek	people. We will work with Age
	advice, contacting other agencies (increasing the	Concern to analyse the key areas of
	pressure on these), or increasing the traffic to	advice calls in the past year, so that
	SCC health and Adult Social Care contact team.	agencies can gear themselves up in
	Failure to get good advice early on could increase	these areas.
	risks to older people	6
Disability	A higher number of older people have disabilities	Other services are likely to see an
Disability	than other age groups, so the impact is likely to	increase in advice calls from older
	be greater. Access to advice on issues from	people with disabilities. We will wor
	benefits to support will be reduced, leading to	with Age Concern to analyse the key
	many either failing to seek advice, contacting	areas of advice calls in the past year
	other agencies (increasing the pressure on these),	so that agencies can gear themselve
		up in these areas.
	or increasing the traffic to SCC health and Adult	up in these areas.
	Social Care contact team. Failure to get good	
	advice early on could increase risks to older	
	people with disabilities.	Other services are likely to see an
Gender	Service is open to both sexes. There are more	Other services are likely to see an
	older women than older men so the impact is	increase in advice calls from older
	likely to be greater on this group.	people, including a higher number of
		women. We will work with Age
		Concern to analyse the key areas of
		advice calls in the past year, so that
	. // ) .	agencies can gear themselves up in
***		these areas.
Race	Users of all races use the service.	No specific action to be taken. Othe
		services are likely to see an increase
		in advice calls from older people,
		representing all communities. We
		will work with Age Concern to
		analyse the key areas of advice calls
		in the past year, so that agencies ca
		gear themselves up in these areas.
Religion/	Users of all religions and beliefs use the service.	No specific action to be taken. Othe
Belief		services are likely to see an increase
Section Control of Con		in advice calls from older people,
	A.	representing all religions and beliefs
		We will work with Age Concern to
		analyse the key areas of advice calls
		in the past year, so that agencies ca
		gear themselves up in these areas.
	Couples access the convice	No specific action to be taken. Other
Marriage and		
Marriage and	Couples access the service.	The same of the sa
Civil	Couples access the service.	services are likely to see an increase
	Couples access the service.	The second secon

	T	T
g:		areas of advice calls in the past year,
		so that agencies can gear themselves
		up in these areas.
Pregnancy	Due to age restrictions, no pregnant women	No specific action to be taken.
and maternity	access the services.	
Gender	People who have had their gender reassigned or	No specific action to be taken.
reassignment	those pre-operation etc can use the service	
Community	Reduction in the availability of advice to older	Other services are likely to see an
Safety	people in the community may mean a range of	increase in advice calls from older
	issues not being addressed. This could result in a	people. We will work with Age
	lack of signposting to other agencies potentially	Concern to analyse the key areas of
	putting some older people at risk.	advice calls in the past year, so that
		agencies can gear themselves up in
		these areas. Will focus on
		community safety issues via
		Homesafe service, to identify if there
		are community safety issues to
		address.
Sexual	People of all sexual orientations can access the	No specific action to be taken. Other
Orientation	service	services are likely to see an increase
		in advice calls from older people. We
	. ) \	will work with Age Concern to
		analyse the key areas of advice calls
		in the past year, so that agencies can
		gear themselves up in these areas.
Poverty	Users accessing are often receiving benefits. The	Reduction in the availability of
	service helps with benefit and income	advice to older people in the
	maximisation. Reduction in the availability of	community may mean a range of
	advice to older people in the community may	issues not being addressed. This
	mean a range of issues not being addressed. This	could result in a lack of signposting
	could result in a lack of signposting to other	to other agencies potentially putting
	agencies potentially putting some older people at	
	risk.	TO SERVICE AND ADDRESS OF THE PROPERTY OF THE
		1
		maximisation).
Staff	None.	
Staff	could result in a lack of signposting to other agencies potentially putting some older people at risk.	to other agencies potentially pu some older people at risk of increased poverty or not having issues addressed (e.g. benefit



**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.

Portfolio	Advice and Information / Day Care contracts:	
Reference No.	To reduce the Older Person's day care budget by £40K pa from	
AS13b	April 2013	
Volumes	Day care provision of 530 sessions per week, currently supporting over	
(number of	400 individuals. Provided at five different venues across the city,	
customers) and	including sessions at weekends. Key needs met are reducing isolation and	
profile	providing respite care during the day for carers.	
Staffing and	Day care provision of 530 sessions per week, currently supporting over	
budget	400 individuals. Provided at five different venues across the city,	
	including sessions at weekends. Key needs met are reducing isolation and	
	providing respite care during the day for carers. Total budget £1 million	
	pa. Services provided by SCA and Age Concern.	
Summary of	Proposal to reduce day care by 4% (following considerable reductions in	
impact and Issues	previous years). Day care is the response to specific identified needs in	
U.D.	the city. Recent changes included rationalising access by reassessing	
1),	clients with limited needs, and increasing access at weekends at a	
number of centres and one Sunday session (for dementia). Access o		
	Sundays has had limited success. Proposal would be to reduce	
	void/unused sessions, and further rationalise provision, including	
	reconsidering the Sunday session (focused on respite). The current	
	services are strongly supported by the service users. The reductions will	
	be enacted at the same time as charging proposals are resulting in	
	increased costs to some individuals.	
	Contraction physical subsecutions and the Contraction of State (Contraction Contraction Co	
:	At the same time, we are progressing conversations with providers	
	regarding the future of day care services from 2014, with a view to	
	L	

	potential tendering of the services during 2013.	
Potential positive impacts	The proposal to rationalise access should make the services more responsive to actual needs.	

Responsible Service Manager : N	Natthew Waters
Date: Tuesday, 2 <sup>nd</sup> October 2012	
Approval by Senior Manager	
Name:	
Signature:	
Date:	

POTENTIAL	IMPACT	-
Group	Details of impact	Possible Solutions/ Mitigating Actions
Age	Users are all from the age of 60 upwards. Users tend to be frail, some have dementia. Risks are based on the inability of the service to expand to meet increasing needs in the future, which could risk increased pressure on carers, and possibly lead to increased hospital admissions and higher use of residential settings.	Rationalising access and sessions provided will reduce access slightly, but will firstly focus services on the hours of greatest use. The core access criteria will not change, and there will be a move to increase knowledge of day care among care managers to be used as respite.
Disability	A higher number of older people have disabilities than other age groups, so the impact is likely to be greater. In addition, physical frailties, dementia and other issues are common among users. Transport is required for most users, with some spending a long time being transported. Rationalising provision will have the aim of providing day care closer to home for users, where possible.	Rationalising access and sessions provided will reduce access slightly, but will firstly focus services on the hours of greatest use. The core access criteria will not change, and there will be a move to increase knowledge of day care among care managers to be used as respite. Transport to and from day care will continue with a view to keeping travelling distance and time to a minimum for all users.
Gender	Service is open to both sexes. There are more older women than older men so the impact is likely to be greater on this group.	Rationalising access and sessions provided will reduce access slightly, but will firstly focus services on the hours of greatest use. The core access criteria will not change, and there will be a move to increase knowledge of day care among care managers to be used as respite and to reduce social isolation.
Race	Users of all races use the service. There are specific sessions for some races (BME groups), and interpreters are used for some users (e.g. Chinese speakers).	No specific action to be taken. Specific sessions for some racial groups will not be changed or altered.
Religion/ Belief	Users of all religions and beliefs use the service.	No specific action to be taken.
Marriage and Civil Partnership	No couples access the service, although provision is often used to release the partner and main carer to have respite.	Rationalising access and sessions provided will reduce access slightly, but will firstly focus services on the hours of greatest use. The core access criteria will not change, and there will be a move to increase knowledge of day care among care managers to be used as respite.
Pregnancy and maternity	Due to age restrictions, no pregnant women access the services.	No specific action to be taken.
Gender reassignment	People who have had their gender reassigned or those pre-operation etc can use the service	No specific action to be taken.

Community Safety	Access to day care reduces social isolation of users, and enables other issues to be identified and managed.	Rationalising access and sessions provided will reduce access slightly, but will firstly focus services on the hours of greatest use. The core access criteria will not change, and there will be a move to increase knowledge of day care among care managers to be used as respite and to reduce social isolation. Users facing community safety issues will be referred to SCA's Homesafe service.
Sexual Orientation	People of all sexual orientations can access the service	No specific action to be taken.
Poverty	Many individuals receiving day care are I poverty and are socially isolated. The intention is not to change access to the service. The rationalisation of services affects weekends only, and is normally focused on respite provision.	Rationalising access and sessions provided will reduce access slightly, but will firstly focus services on the hours of greatest use. The core access criteria will not change, and there will be a move to increase knowledge of day care among care managers to be used as respite and to reduce social isolation.
Staff	None.	No action required.

# SOUTHAMPTON CITY COUNCIL®

#### **Draft Equality Impact Assessment:**

EIA No: AS14

# **EQUALITY IMPACT ASSESSMENT Proposals considered in July 2012**

**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.

Portfolio	Reducing contract values to provide specific support for HIV/AIDS	
Reference No.		
AS 14		
Volumes	SCC offers no specific services to people with HIV/AIDS, but the two	
(number of	services currently commissioned (Groundswell and Positive Action) are	
customers) and profile	small but essentially provided peer support to adults and young people transitioning into adult service, advice & information, HIV awareness	
	training to front line workers across statutory and voluntary services and advocacy and support to attend appointments with clinicians or other	
	services. The services work very closely with the Specialist Nurse HIV	
	services, and receive referrals from there and SCC. Through this working relationship the Young Peoples Peer Support work was developed and	
	the Specialist Nurses have been tasked with rolling the project out across	
OV	Hampshire as it is seen as best practice.	
V/V	Approximately 150 people are worked with directly each year – with	
	higher numbers receiving basic advice and information support.	
Staffing and	The DoH grant for 2012/13 is £154K. Of this, £66K is used for the two	
budget	contracts.	
Summary of	The likely impacts are:	
impact and Issues	<ul> <li>More people approaching both health and adult social care services for information, advice and assessment.</li> </ul>	
	<ul> <li>Only sexual health advice available with limited benefits and other welfare related advice available in the community. This may prompt both reduced access to benefits and possible approaches to adult social care for advice.</li> </ul>	
	<ul> <li>The loss of support networks for people in the community making it harder to ensure good sexual health advice is provided at the most appropriate venues.</li> </ul>	

	<ul> <li>Poorer outcomes for people with HIV, both socially, emotionally and financially.</li> <li>Loss of significant cost savings due to: missed hospital appointments, onward transmission to babies, increased hospital admissions, increased resistance to medication.</li> </ul>
Potential Positive Impact	

Responsible Serv	ice Manager : Matthew Waters	
Date: 23 <sup>rd</sup> Octobe	er 2012	
Approval by Seni	or Manager	
Name:	Stephanie Ramsey	CKY
Signature:		UD,
Date:		OQ.

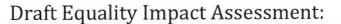
Group	Details of impact	Possible Solutions/ Mitigating Actions
Age	The highest rate of infection is between the ages 15 and 59. For this age group, the incidence of HIV has increased by 50% between 2005 and 2010 to 1.7 per 1,000 population. Reduction in support and info ration could place this group at greater risk. Less work with those at risk could lead to risks increasing, increasing level so depressions and other issues for those diagnosed, and less info ration to families could lead to family disagreements and breakdowns. Loss of networks presents a risk of reduced access to good quality information.	Half of resource remains and will continue to be used to provide information and to support people with HIV and families. However, resources will be tight so the successful agency will be asked to consider more ways of working with other advice services to increase their knowledge and response. Specific training is being developed for staff at nursing and care homes in the anticipation of people with HIV living into old age – this work may need to be funded through other training resources.
Disability	HIV infection is prevalent for people both with and without disabilities. The development of HIV infection of itself does not increase disability but increases the likelihood of some issues developing. Loss of networks presents a risk of reduced access to good quality information.	Half of resource remains and will continue to be used to provide information and to support people with HIV and families. However, resources will be tight so the successful agency will be asked to consider more ways of working with other advice services, including disability-specific services to increase their knowledge and response.
Gender	Both men and women are vulnerable to this issue. Loss of networks presents a risk of reduced access to good quality information.	Half of resource remains and will continue to be used to provide information and to support people with HIV and families. However, resources will be tight so the successful agency will be asked to consider more ways of working with other advice services to increase their knowledge and response.
Race	Increases include issues for all races, although some black migrant populations are at higher risk. The current services run sessions and peer support groups for different race groups to help increase support and information. Significant reduction could place these groups at higher risk. Loss of networks presents a risk of reduced access to good quality information.	Half of resource remains and will continue to be used to provide information and to support people with HIV and families. However, resources will be tight so the successful agency will be asked to consider more ways of working with other advice services to increase their knowledge and response.
Religion/ Belief	People of all religions are vulnerable to this issue. Loss of networks presents a risk of reduced access to good quality information.	Half of resource remains and will continue to be used to provide information and to support people with HIV and families. However,

Marriage and Civil Partnership	The projects work with families affected by HIV, including the partners of individuals diagnosed. There is a risk that reduced access to counselling, peer support and advice could lead to increased divorce rates. Loss of networks presents a risk of reduced access to good quality information.	resources will be tight so the successful agency will be asked to consider more ways of working with other advice services and also to specific religious groups, to increase their knowledge and response.  Half of resource remains and will continue to be used to provide information and to support people with HIV and families. However, resources will be tight so the successful agency will be asked to consider more ways of working with other advice services to increase their knowledge and response. The sexual health teams will be asked for advice on information and support to families where one member has
Pregnancy and maternity	There is a significant risk that women who are HIV+ (and particularly who are pre-diagnosis) may give birth to babies with HIV, which would have significant cost implications for the Health Services. Loss of networks presents a risk of reduced access to good quality information.	been diagnosed with HIV.  Half of resource remains and will continue to be used to provide information and to support people with HIV and families. However, resources will be tight so the successful agency will be asked to consider more ways of working with other advice services to increase their knowledge and response. The sexual health teams will be asked for advice on information and support
Gender reassignment	No additional impact.	to women with HIV.
Community Safety	No additional impact.	
Sexual Orientation	Although all groups can be affected by AIDS, and there has been an increase in infection among heterosexuals, including women, the focus is still on homosexual men. There is significant risk that good quality information and support will be limited. Loss of networks presents a risk of reduced access to good quality information.	Half of resource remains and will continue to be used to provide information and to support people with HIV and families. However, resources will be tight so the successful agency will be asked to consider more ways of working with other advice services to increase their knowledge and response. The sexual health teams will be asked for advice on information and support.
Poverty	People with HIV can still face discrimination in the workplace. The current contracts provide both employment and benefits/income advice. There is a risk that some of the specialist knowledge could be lost, reducing access to both	Half of resource remains and will continue to be used to provide information and to support people with HIV and families. However, resources will be tight so the

	employment and benefits. Loss of networks presents a risk of reduced access to good quality information.	successful agency will be asked to consider more ways of working with other advice services to increase their knowledge and response in these areas. However, the additional impact on advice services needs to be considered.
Staff	No additional impact.	







EIA No: AS15



# **EQUALITY IMPACT ASSESSMENT Proposals considered in July 2012**

**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.

Portfolio	Drug Action Team - Reducing the commissioning budget to	
Reference No.	purchase services for drug users	
AS15		
Volumes	The 105k is the LA contribution to the section 75 agreement with	
(number of	Southampton CCG. It contributes to the purchase of a range of services; it	
customers) and	is not used to purchase a specific service. Other elements of the section	
profile	75 are a contribution of 400k from the CCG and 1.9million from a	
	national grant. SCC is the lead commissioners for drug services.	
	The range of services include, care planned treatment, LA responsibilities	
	under the NHS and Community care Act, substitute Prescribing, advice	
	and information, carers support, service user involvement and advocacy,	
N	drug detox	
Staffing and	The section 75 budget also funds 2 members of commissioning staff and	
budget	an admin post, all SCC employees, who lead on commissioning these	
	services. The commissioning managers' salaries are grades 12 and 9 and	
	the staffing element of the budget is 110K.	
Summary of	We are about to go out to re-tender drug services as a result of a	
impact and	strategic review. The aim is to improve service quality and outcomes. The	
Issues	reduction has impact in that it reduces the amount of service that we can	
(),	commission. It may also impact more on services for carers and service	
	user input because priority will have to be given to high end services.	
	The impact needs to be considered against other service reductions in	
	supporting People and Children's services as service reductions and	
	closure of services in these areas will place additional pressure on drug	
	services and drug service budgets. The reduction reduces the LA investment in drug services to nil despite responsibilities under the NHS	
	and community care act - these responsibilities will need to be picked up	
	by funding within the Public Health budget, if agreed.	
Potential	by furnaling within the rubile fleath budget, it agreed.	
Positive Impact		

Responsible Service Manager : Caro	le Binns
Date: 21/10/12	
Approval by Senior Manager	
Name:	
Signature:	
Date:	

Group	MPACT Details of impact	Possible Solutions/ Mitigating Actions
Age	The DAT have recently taken on responsibility for commissioning services for young people from 14 upwards, to enable a seamless pathway between children and adults. The local strategy is to place a greater emphasis on young people. This reduction, along with the reductions in children's services, will mean reduced service provision for the younger age group and reduced capacity for any preventative treatment.	Competitive tender to achieve best value and quality for available budget in both children and adult services. Focus on younger adults within the service specification.
Disability	The reduction will have consequences across all sectors of the community. There will be reduced scope for commissioning the range of quality of services which are ideal. This may impact more on some disability groups who already have issues relating to access and who are not well represented in services.  Reduced investment can require a greater focus on 'block' services rather than individually tailored services, as these are often lower unit cost. This impacts disproportionately on people who have more complex needs which make it more difficult to access services at certain times and locations.	Competitive tender to achieve best value and quality for available budget Specification to ensure diversity is addressed by new provider Maximum use of personalisation/Direct Budgets and referral to community care funding where Faire Access to Care (FACS) applies.  Contract monitoring and data capture which ensures all parts of the community can access services
Gender	The reduction will impact on both men and women but women often have a range of additional needs in relation to their caring and family responsibilities. The impact across a range of services, including carers support, and reduced ability to commission flexible services may impact more on women.  Reduced investment can require a greater focus on 'block' services rather than individually tailored services, as these are often lower unit cost. This impacts disproportionately on people who have more complex needs and who also have caring and family responsibilities which make it more difficult to access services at certain times and locations.	Competitive tender to achieve best value and quality for available budget Maximum use of personalisation/Direct Budgets and referral to community care funding where Faire Access to Care (FACS) applies.  Contract monitoring and data capture which ensures all parts of the community can access services  Joint work with children and families  Specification to ensure gender specific issues are considered in style of provision.
Race	There is no specific impact for people of a particular race. However, there will be less potential for smaller and more specialist elements of care to be included in the final service specification as this tends to add to costs.	As above Specification to include requirements with regards to ensuring service is accessible to people with cultural and religious requirements Contract monitoring to ensure compliance
		compliance
Religion/ Belief	as above	compliance

Civil		
Partnership Pregnancy	Women who are pregnant or who have children	Joint work with children and families
and maternity	are often reluctant to approach statuary services due to the fear of child protection proceedings. The current funding arrangements include a joint post across children and adult services in order to proactively engage women in these situations. Reduced investment may put specialist posts like this at risk, as a considerable amount of the post time is taken in networking and promotional activities and remaining funding will need to be targeted on case holding activities in order to meet national targets.	Joint work with children and families
Gender	People who suffer stigma and discrimination in a	Specification to ensure diversity is
Community Safety	variety of settings may be reluctant to access standard services and, as reduced investment can require a greater focus on 'block' services rather than individually tailored services, this may impact disproportionately on people who have more complex and diverse needs and who would benefit from a more individualised service.  A reduction in drug treatment services may impact negatively on community safety and crime rates as it is well documented that substance misuse is a significant contributor to crime and anti-social behaviour. The impact will be seen in the night-time economy where savings in other areas mean that initiatives such as the Ice Bus, Street Pastors and safe and Sound are also at risk. The DAT has been approached to pick up	addressed by new provider Maximum use of personalisation/Direct Budgets and referral to community care funding where Faire Access to Care (FACS) applies. Contract monitoring and data capture which ensures all parts of the community can access services  Joint work with police, probation and other partners to assess impact DAT partnership to oversee joint work and opportunities to share resources
	funding in these areas.  Their may also be impact on more prolific	
	offending – to finance drug use.	
Sexual Orientation	No specific issues - Similar issues to other groups suffering discrimination due to diversity issues.	Specification to ensure diversity is addressed by new provider Maximum use of personalisation/Direct Budgets and referral to community care funding where Faire Access to Care (FACS) applies.
Poverty	No specific impact though any reduction in services may impact on the number of individuals achieving recovery and abstinence – people who have drug problems have considerable issues around poverty which treatment addresses.	New service specification to focus on recovery including employment issues
Staff	Impact will primarily be on commissioned services.	

EIA No: CS1



# **Equality Impact Assessment Proposals Considered in November 2012**

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.

Portfolio	Early Years and Children's Centres	
Reference No.	To reduce staffing as a result of a restructuring of the city's 14 Children's	
CS1	Centres. The new model will cluster children's centres into two hubs, one	
	east and one west. From September 2013, all vulnerable 2, 3 and 4 year	
	olds will be eligible for Early Years provision and some of the work	
2.	currently undertaken to support them and their families will happen in a	
	different way.	
	Children's Centre reduction include:	
	1. Contract under spend - £40,000	
	2. Reduction in nursery nurse provision- £44,400.	
	3. Reduction in breastfeeding Contract- £10,000.	
	4. Alignment of public health into SCC removes the need to contribute	
	to a public health data post - £5,000	
	5. Cease toy library provision in 13 centres - £42,600 (one centre directly	
4	provides library).	
	6. Reduction in Every Child a Talker initiative - £25,000	
< /	7. Reduction in citywide development budget spend - £30,000	
	8. Reduce childminder start up costs- £20,000.	
. ( ) "	9 Fund childcare respite through 2 year old funding resulting in an	
	£86,500 saving.	
	10. Cease provision of refreshments for parent training /courses/events	
1 1 10	resulting in a saving of £33,000k.	
	11. Reduce equipment purchase/replacement by £33,000.	
	12. Income for crèches - £20,000	
	13. Reduction of staff 18.08 FTE - £235k	
	14. Income from use of buildings - £20,000	
	15. Reduce health workers - £125,000	
	15. Income from Early Years places - £166,200	
Volumes	The city's 14 Children's Centres provide a range of universal and targeted	
(numbers of	provision for families with children minus 9 months to 5m years of age.	
customers) and	Southampton's under 5's population is currently 16,322 (PCT data base	
Profile	April 2012), an increase of 36.1% since 2003-2004.	
	Half of Southampton's Children's Centres are based in the 0-30% most	

deprived areas nationally according to the Index of Multiple Deprivation (IMD). These city areas are knows as full core offer Children's Centres.

Based on the Income Deprivation Affecting Children Index (IDACI) 2010, 55% of the City's children live in the 30% most deprived Super Output Areas nationally.

Children's centres seek to reduce inequalities in a range of outcomes for children including obesity rates, low birth weight, numbers of babies breastfed, numbers of mothers smoking during pregnancy, numbers of normal deliveries, Foundation Stage results at the end of Year R.

In Southampton there has been a narrowing of the inequalites gap, for example obesity rates (which are poor nationally) and Foundation Stage Results which show a year on year improvement and a narrowing of the gap between Southampton and the rest of England.

Since inspection was introduced, four centres in the City have been inspected by Ofsted. All are in the 0-30% most deprived areas. Three were judged 'Outstanding' and one 'Good'. In summary, Children's Centres in 2011-2012 had:

- 12,127 registered contacts with children under 5, an increase of 8.4% on the previous year. 7,611 of these contacts were with children in 0-30% most deprived areas of the City.
- 13,476 registered contacts with parents of which 8,151 were with parents living in the 0-30% most deprived areas
- 3,842 contacts with fathers, an increase on previous years.

Early longitudinal research indicates that children under 5 in the City with at least 50 contacts with Children's Centres who take up their full entitlement to 3 and 4 year old pre school provision, are 4% more likely to achieve the national target outcome at the end of the Foundation Stage.

## Staffing and budget

#### Summary of Impact and Issues

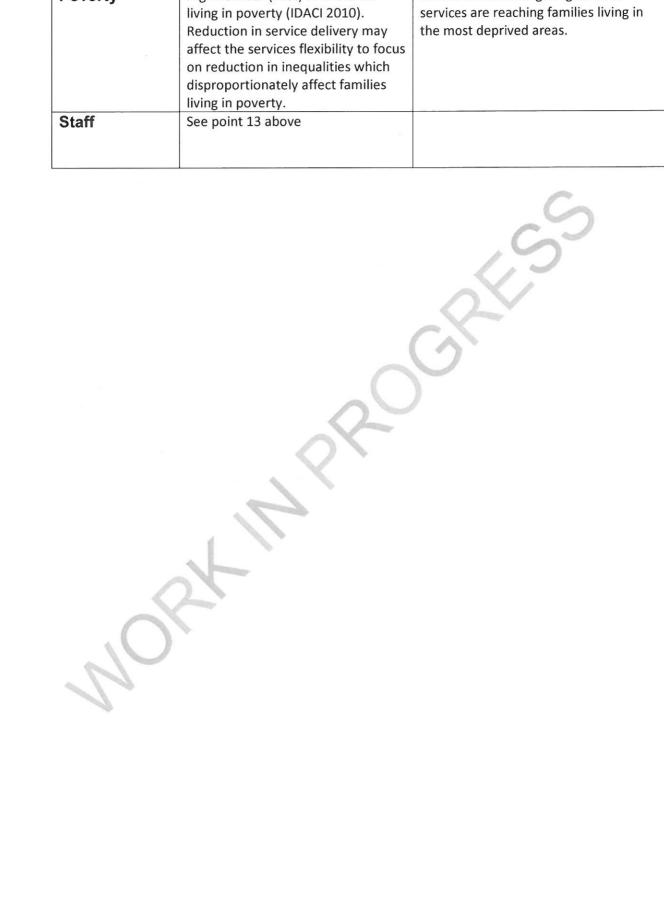
- 1&2 .Agreed with NHS Solent Foundation Trust and achieved as a result of increased NHS spending on health visiting and related services.
- 3. Breastfeeding contract is currently being retendered for a reduced amount (from £60,000 to £50,000) which will not impact on direct service delivery to families.
- Public health service is transferring to SCC.
- 5. The toy library service engages with a number of families. In considering this service reduction it is noted that it is not a key element of meeting the criteria for the government's revised core purpose for children's centres which focuses on targeted support for those families in greatest need. Consideration has been given to providing this service using volunteers but there are legal issues relating to ownership of stock (owned by current service provider) and the City Council cannot coordinate the service immediately following de commissioning.
- 6. The Every Child a Talker initiative, designed to impact on the 50% of under 5s experiencing some language delay, is now embedded in

	Early Years settings and Children's Centres so the work is sustainable within a reduced budget.  7. The Children Centre programme has been operational for a significant number of years. This reduces the need for a larger budget. In addition, some development money has been secured from the Children's Improvement Board and through the Payment by Results trial.  8. Support is available to childminders under the new tow year old programme.  9. Children's centres will lose some flexibility in the ability to directly fund respite for families. This will be replaced by new resource for the statutory entitlement to 15 hours per week free childcare for disadvantaged 2 year olds from September 2013. Alleviating the impact of this reduction. Children known to Social Care already access places through the childminder community network. In 2011-12, 147 children were supported and 89 children have been supported from 1 April to August 2012.  10. Promotes and supports healthy eating for children and families. Centres will seek voluntary contributions from parents or sponsorship for this.  11. Reduce budget to replace essential equipment and monitor standard of provision. This will need monitoring.  12. Achieved by use of parents for some play sessions and income from other bodies to fund crèches for parents accessing training sessions. Monitor impact over the coming year.  13. Reduction of staff based on new delivery model. This will be a complex exercise over a period of time, but will lead to a more consistent and equitable staffing structure. May result in redundancies  14.A new income line, to encourage the broader use of the Centres  15. The current family support model commissioned from health is to be restructured over the next six months but an ultimate saving of £125,000 minimum full year costs.
Potential	More cost neutral partnership work with Public Health and NHS Solent
Positive Impacts	Foundation Trust. Ability to use other initiatives such as remodelling of Centres and new two year old statutory duty to offset the impact of reductions. The staffing reductions are likely to lead to redundancies.
Responsible	Lesley Hobbs
Service Manager	
Date	19 October 2012
Approval by Senio	or Manager
Name:	Alison Alexander
Signature	
Oignature	I

#### **Potential Impact**

Group	Details of Impact	Possible Solutions & Mitigating
		Actions
Age	The proposed reductions could result in a reduction in families attending 'front door services' which support the engagement and identification of families in greatest need. For example the toy library service had 5,806 registered contacts in 2011-2012	Children's centres services will need to work to ensure effective targeting for those families in greatest need of support. Through continuing close and effective working with partner agencies such as Health and Job Centre Plus to ensure that families in need of additional support are identified and their support needs assessed and provided for.  The growth in places for the most vulnerable 2 year olds, along with places for 3 and 4 year olds will result in more children having access to professional support and potentially lessen the need for access to Children Centre Services
Disability	None	
Gender	The adult take up of services is predominantly women, many of whom are lone parents. Many of these women live in the most deprived areas, experience post natal depression and might be subject to domestic violence.	Any service reduction needs to be proportionate to areas of highest need and women at risk in other areas.
Race	None	
Religion or Belief	Impact if BME or some white groups (e.g. Polish) cease to access services.	Ensure effective targeting and assessment.
Marriage and Civil Partnership		
Pregnancy and Maternity	Some impact on pregnant women	Ensure effective targeting for families during pregnancy in greatest need.
Gender Reassignment	None	
Community Safety	This service aims to achieve better long term outcomes for children which can include anti social behaviour activity and a subsequent possible spiral into criminal activity.	Ensure continuing focus on targeted parenting support. Integration in the medium term of all City parenting services for parents of 0-19 year olds will ensure that those with the highest needs receive a service
Sexual Orientation		

Poverty	High number (55%) of under 5s	Ensure effective targeting so that
	living in poverty (IDACI 2010).	services are reaching families living in
	Reduction in service delivery may	the most deprived areas.
	affect the services flexibility to focus	
36	on reduction in inequalities which	
	disproportionately affect families	
	living in poverty.	
Staff	See point 13 above	
	803 2	





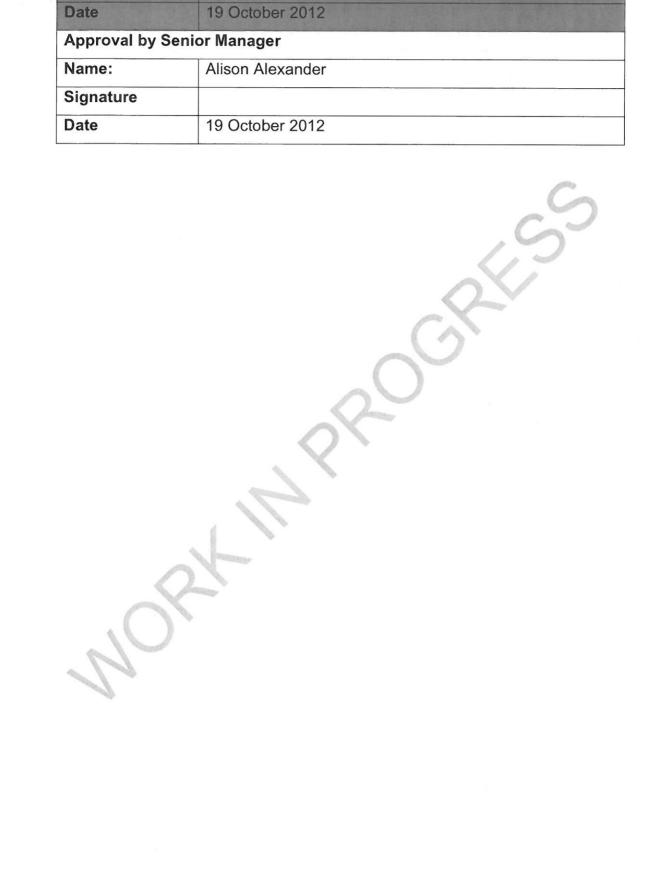
## **Equality Impact Assessment Proposals Considered in November 2012**

EIA No: CS2

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.

Portfolio	Learning Support (Statutory) Home to School
Reference No.	Transport
CS2	To be delivered through the roll out of the personalisation of
	transport by families programme.
Volumes	Home to school transport is provided to help ensure that children
(numbers of	who are entitled to receive travel assistance at getting from home to
customers) and	their school to support regular attendance receive appropriate help.
Profile	This proposal relates principally to children who receive help with
	home to school transport arrangements on grounds of disability or
	special educational need.
Staffing and	
budget	
Summary of	The proposal should have no negative impact upon service users. It
Impact and	should result in an improved service that offers value for money and
Issues	positive outcomes. The proposals enable families to receive a
	personal budget to transport children to school. Any family that
	believes that they would be disadvantaged would not need to take
	up the opportunities. The majority of families may feel that the
( )	proposals are sufficiently attractive to encourage their participation.
	For those families who choose to benefit from greater control over
. 131	home to school transport arrangements that increases flexibility to
	open up access to before and after school activities. The proposal
-	can only be delivered through a voluntary scheme. So the savings
	may not be deliverable at a fully predictable level in year one. If the
	take-up for the service is high it is also likely that it might result in
	redundancy for some School Escorts.
Potential	The positive impacts of this proposal relate to offering families
Positive Impacts	greater financial support for helping their children get to school
	safely and securely, and could help to ensure that they then have
	greater flexibility in accessing out of school activities before and
	after the school day.
Responsible	Tim Davis

ager	500
19 October 2012	
Senior Manager	
Alison Alexander	
19 October 2012	
	Senior Manager  Alison Alexander



#### **Potential Impact**

Group	Details of Impact	Possible Solutions & Mitigating Actions
Age	There should be no negative impact as	Not applicable.
Age	the proposal is entirely voluntary.	Not applicable.
	the proposaris entirely voluntary.	
Disability	There should be no negative impact as	Not applicable.
,	the proposal is entirely voluntary.	3
Gender	There should be no negative impact as	Not applicable.
	the proposal is entirely voluntary.	Co
Race	There should be no negative impact as	Not applicable.
Nace	the proposal is entirely voluntary.	Not applicable.
	the proposaris entirely voluntary.	(,)
Religion or	There should be no negative impact as	Not applicable.
Belief	the proposal is entirely voluntary.	
	(	7,
Marriage and	There should be no negative impact as	Not applicable.
Civil	the proposal is entirely voluntary.	
Partnership		
Pregnancy	There should be no negative impact as	Not applicable.
and Maternity	the proposal is entirely voluntary.	
Gender	There should be no negative impact as	Not applicable.
Reassignment	the proposal is entirely voluntary.	
Community	There should be no negative impact as	Not applicable.
Safety	the proposal is entirely voluntary.	W. F.
Sexual	There should be no negative impact as	Not applicable.
Orientation	the proposal is entirely voluntary.	
Poverty	There should be no negative impact as	Not applicable.
	the proposal is entirely voluntary.	
Staff	The key potential negative impact of	This is an inherent risk in the
. ( )	the proposal is that a high take-up	proposal that cannot be
	would reduce the need for contracted	mitigated for. As the scheme
	transport, and other transport support	is not compulsory there should
110	such as School Escorts. This would	be no negative impact upon
	result in redundancy for staff	service users.
	employed in these roles.	



# **Equality Impact Assessment Proposals Considered in November 2012**

EIA No: CS3

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.

Portfolio	Learning Support (Statutory) Locality Management
Reference No.	Reduction by in the number of managers working in Prevention
CS3	Services
Volumes	These are management posts only. There is a paper setting out in
(numbers of	detail the new model for delivery of Children's Centres that
customers) and	incorporates Family Centre work and Family and parenting for all
Profile	ages. This entails the deletion of all the current posts and the
1 170 170 170 170 170 170	creation of 2 Team manager posts at Grade 12, managing new
	Children & Family Centres in either the East or West of the City and
	one Grade 11 responsible for Early Years and Childcare development
	and quality. (CS1)
	With regard to the Families and Communities, all Play and Youth
	Work direct delivery will cease (CS14) and the Family workers who
	are also managed within this team will be aligned with the family
4	workers in Children's centres (CS1). The play and youth posts will no
	longer be required. Therefore the 2 management posts that support
	them are no longer required. One post is already vacant.
Staffing and	4.4 Team Managers (TMs) Childrens Centres (CS1)
budget	One Service Manager Early Years and Childcare and Childrens
	Centres (CS1)
	Two Team Manager- Families and Community (CS14)
Summary of	In Early Years and Childcare the reduction in managers will reflect
Impact and	the proposed restructuring and streamlining of the Children's
Issues	Centres.
	This proposal is about reductions in service management, based on
	other proposals to reduce volume of services or service redesign.
	The reduction in managers in Early Years and Children's Centres
	reflects plans to manage child care provision across the two
	localities.
	The remaining 2 Team Managers G12 & one G11 report directly to
	the Senior Manager making the need for a Service Manager
	unnecessary.
	All the posts in this proposal are management and should not

Potential Reduction in costs		impact on customer services. They reflect the savings set out is Co
Positive Impacts  Greater clarity and consistency will be provided by streamlinit service into two hubs.  Responsible Service Manager  Date  19 October 2012  Approval by Senior Manager  Name: Signature  Date  19 October 2012		and CS1. They are likely to lead to compulsory redundancies.  Reduction in costs
Responsible Service Manager  Date  19 October 2012  Approval by Senior Manager  Name: Alison Alexander  Signature  Date  19 October 2012	acitiva Impacta	Greater clarity and consistency will be provided by streamlining the
Date 19 October 2012  Approval by Senior Manager  Name: Alison Alexander  Signature  Date 19 October 2012		AND AND THE CONTROL OF THE CONTROL O
Date 19 October 2012  Approval by Senior Manager  Name: Alison Alexander  Signature  Date 19 October 2012	esponsible	Lesley Hobbs
Approval by Senior Manager  Name: Alison Alexander  Signature  Date 19 October 2012	ervice Manager	
Name: Alison Alexander  Signature  Date 19 October 2012	ate	19 October 2012
Signature  Date  19 October 2012	pproval by Senio	r Manager
Date 19 October 2012	ame:	Alison Alexander
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#### **Potential Impact**

Group	Details of Impact	Possible Solutions & Mitigating Actions
Age	0-5(for EY&CC posts)	New Children's Centre model will ensure a sustainable
	Managerial posts only	delivery model
	5 - 18 for Families and Youth post	***
		In line with new staffing levels
	Managerial posts only	proposed for Play and Youth
Disability	None	
Gender	None	
Race	None	9
Religion or Belief	None	Service delivery at front line will not be affected
Marriage and	None	Service delivery at front line
Civil		will not be affected
Partnership		< <u>/</u>
Pregnancy and Maternity	None	
Gender	None	Service delivery at front line
Reassignment		will not be affected
Community Safety	None	
Sexual Orientation	None	
Poverty	None	Service delivery at front line will not be affected
Other	None	Advisory Boards are being kept
significant		informed of the model being
impact		work on including developing a
	2	closer community involvement.
Staff		

