

## 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.

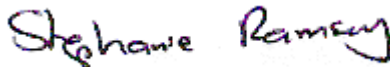
The Equality Duty supports good decision making – it encourages public bodies to be more efficient and effective by understanding how different people will be affected by their activities, so that their policies and services are appropriate and accessible to all and meet different people’s needs. The 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 BHH

<p><b>Name or Brief Description of Proposal</b></p>	<p>A proposal to offer rehabilitation and reablement services to people in an integrated and more flexible way; moving resources to prioritise support at home or in the local community.</p>
<p><b>Brief Service Profile (including number of customers)</b></p>	<p>This proposal is a key element in the Southampton Better Care Plan ambition to achieve an integrated health and social care crisis response, rehabilitation, reablement and hospital discharge service.</p> <p>We want to provide a “seamless” service to help people:-</p> <ul style="list-style-type: none"> <li>• Avoid unplanned or unnecessary admissions to hospital;</li> <li>• Only stay in hospital for as long as they medically need to;</li> <li>• Recover more quickly following treatment (support services for recovery are called rehabilitation services); and</li> <li>• Learn/ relearn daily living skills to better manage any on-going illness or condition (support services for living with long-term illness/condition are called reablement services).</li> </ul> <p>We need to make better use of our resources (staff and money) to help us to do this.</p> <p>National research has indicated that people are more likely to regain good health if they receive care within their own home</p>

	<p>or close to their communities, so we want to prioritise this.</p> <p>The proposal is that Southampton City Council and Solent NHS Trust staff who work in rehabilitation, reablement, crisis response and hospital discharge services would be brought together into a single integrated team with a single management structure. We would allocate a smaller amount of our budget to fixed resources (for example under-used beds at Brownhill House), and more resources to support alternative rehabilitation and reablement for people at home and/or in the local community. These alternatives would enable more people to be supported and include, for example, specialist Domiciliary Care support and supported accommodation in Extra Care Housing. This more flexible way of offering rehabilitation and reablement services would make the most efficient use of the available resources and target them to achieve more.</p>
<p><b>Summary of Impact and Issues</b></p>	<p>Our health and social care services are under pressure as more people are living longer, and the number of people with long-term health conditions is also increasing. Older people with long-term conditions are the most likely to be in hospital frequently because of an acute period of ill health.</p> <p>Southampton has:-</p> <ul style="list-style-type: none"> <li>• 86,000 people (32% of our population) known to be living with long-term health conditions;</li> <li>• above the national rate for unplanned admissions into hospital for older people;</li> <li>• above the national rate for delayed days for patient discharge i.e. blocked beds;</li> <li>• a higher proportion of older people who rely on input from social care than is the case nationally (5.3% compared to 3.8%);</li> <li>• a higher rate of admissions of older people to residential and nursing care than nationally.</li> </ul> <p>Services are not working collectively to make the most efficient use of the available resources and target them to achieve more. We have evidenced that some services are under-used e.g. rehabilitation and reablement beds at Brownhill House (BH).</p> <p>Southampton City Council provides 25 beds in BH for people who do not need medical care, but need rehabilitation and</p>

	<p>reablement services. The maximum length of stay at BH is usually six weeks. <b>246</b> people used the rehabilitation and reablement services at BH in 2014/15, and the cost of these services was £800,000. Occupancy rates at BH in more recent periods have been as low as 43%.</p> <p>We are proposing that we should allocate a smaller amount of our budget to fixed resources (for example under-used beds at BH), and more resources to support alternative rehabilitation and reablement for people at home and/or in the local community. Under this proposal, from an agreed date, anyone needing rehabilitation or reablement services would be able to choose from a range of suitable alternatives rather than being offered a stay at BH. If this proposal were to be implemented, and these services were no longer available at BH, it is likely that the building would also close.</p> <p>Other services at BH would be affected if the building closed:-</p> <ul style="list-style-type: none"> <li>• The City Council also funds 12 beds at BH for people needing respite care. We have evidenced that these beds are under-used, and the service would not be viable if the rehabilitation and reablement beds were closed.</li> <li>• Southampton Care Association (SCA) provides Day Services at BH for older people with high physical dependency needs. A total of 70 people use the Day Services across the week (Monday – Friday) and are taken to the Services in specialist transport provided by SCA. The Day Services would continue but would need to re-locate to another suitable building.</li> </ul> <p>This proposal, if implemented, would lead to a reduction of potentially 41 Full Time Equivalent posts at BH.</p>
<p><b>Potential Positive Impacts</b></p>	<p>People would be able to experience a more seamless rehabilitation and reablement service from a single integrated health and social care staff team, providing care and support in a joined up way. The services would be built around the whole person, and put the person at the heart of decisions about their own care. It would be a system working with people, to help</p>

	<p>them regain good health and stay independent for as long as possible.</p> <p>More people could avoid unplanned admission to hospital, be discharged effectively and have targeted support to recover and maximise their independence in their home or local community, because resources would be used more flexibly and responsively.</p>
<b>Responsible Service Manager</b>	Donna Chapman, Associate Director Integrated Commissioning Unit
<b>Date</b>	August 27 <sup>th</sup> 2015

<b>Approved by Senior Manager</b>	Stephanie Ramsey, Director of Quality and Integration Integrated Commissioning Unit
<b>Signature</b>	
<b>Date</b>	August 27 <sup>th</sup> 2015

### Potential Impact

Impact Assessment	Details of Impact	Possible Solutions & Mitigating Actions
<b>Age</b>	<p>All clients who stay at BH for any period are over 65 years of age.</p> <p>Impacts:- : No care /support at BH – need alternatives.  : No respite care at BH – need alternatives.</p>	<p>Care/support provided in own home (Domiciliary Care Framework Contract), in supported accommodation (e.g. Extra Care Housing), or local residential care/nursing home for short period. Other options e.g. for Direct Payments, and telehealth/care, may also maximise choice and flexibility.</p>
	<p>All Day Services clients are over 55 years of age.</p> <p>Impacts of Day Services at a new venue:- : unfamiliar building; : not able to attend with same group? : change to transport method/ time?</p>	<p>Request additional support from Southampton Care Association to help quickly familiarise clients with new venue.</p> <p>Whole Service moving – people able to retain friendship groups.</p> <p>Specialist transport provided by SCA in Contract. Contract states – no transport to venue in</p>

		excess of 50 minutes duration as now.
	<p>Impacts for BH staff over 55 years of age:-</p> <ul style="list-style-type: none"> <li>: Alternative workplace;</li> <li>: Up to 41 full time equivalent posts potentially at risk of redundancy;</li> <li>: Disproportionate impact to re-train/find other employment opportunities?</li> </ul>	<p>SCC/CCG redeployment and redundancy policies will be applied.</p> <p>University Hospital Services also supporting and considering identifying ring-fenced employment opportunities within services to mitigate risk of redundancies.</p>
	<p>Impacts for Day Services staff over 55 years of age:-</p> <ul style="list-style-type: none"> <li>: Alternate workplace – increased travel time and/or costs?</li> </ul>	<p>The City Council would work closely with SCA to facilitate a re-location to an alternative suitable venue and within the same locality if possible.</p>
<b>Disability</b>	<p>Impact for BH clients:-</p> <ul style="list-style-type: none"> <li>: “physical support” = 89% of clients’ primary recorded need.</li> </ul> <p>(People who have been assessed as lacking mental capacity are outside of the BH admission criteria.)</p>	<p>Care/support provided in own home (Domiciliary Care Framework Contract), in supported accommodation (e.g. Extra Care Housing), or local residential care/nursing home for short period.</p> <p>Other options e.g. for Direct Payments, and telehealth/care, may also maximise choice and flexibility.</p>
	<p>Impact for Day Services clients:-</p> <ul style="list-style-type: none"> <li>: High physical dependency = 100% of clients’ recorded need.</li> </ul>	<p>The City Council would work closely with SCA to facilitate a re-location to an alternative suitable venue – accessible, parking etc. within the same locality if possible.</p>
	<p>Impact for BH staff:-</p> <ul style="list-style-type: none"> <li>: Alternative workplace</li> </ul>	<p>SCC/CCG required to make “reasonable adjustments”. SCC/CCG redeployment and redundancy policies will be applied.</p> <p>University Hospital Services also supporting and considering identifying ring-fenced employment opportunities within services to mitigate risk of redundancies.</p>

	Impact for SCA staff:- : Alternative workplace	The City Council would work closely with SCA to facilitate a re-location to an alternative suitable venue – accessible, parking etc. within the same locality if possible.
<b>Gender Reassignment</b>	None identified	
<b>Marriage and Civil Partnership</b>	None identified	
<b>Pregnancy and Maternity</b>	Staff:	SCC/CCG employment, redeployment and redundancy policies will be applied.  SCA staffing policies will apply.
<b>Race</b>	Culturally appropriate services from additional providers.	All service Providers on Domiciliary Care Framework Contract, and who accept care placements from the City Council are required to meet legislation in respect of equalities issues.
<b>Religion or Belief</b>	Culturally appropriate services from additional providers.  Alternative venue is inappropriate for some e.g. church venue.	All service Providers on Domiciliary Care Framework Contract, and who accept care placements from the City Council are required to meet legislation in respect of equalities issues.  The City Council would work closely with SCA to facilitate a re-location to an alternative suitable venue taking into account cultural /religious choice.
<b>Sex</b>	None identified	
<b>Sexual Orientation</b>	None identified	
<b>Community Safety</b>	None identified	
<b>Poverty</b>	Staff: potential for increased travel costs?	SCC/CCG employment, redeployment and redundancy policies will be applied.  SCA staffing policies will apply.

<p><b>Other Significant Impacts</b></p>	<p>Part-time staff able to access re-training opportunities?</p> <p>Number of staff who are Non-drivers – impact on job redeployment?</p> <p>Number of staff who are employed as Night Workers – impact on job redeployment?</p>	<p>SCC/CCG employment, redeployment and redundancy policies will be applied.</p> <p>University Hospital Services also supporting and considering identifying ring-fenced employment opportunities within services to mitigate risk of redundancies.</p>
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