# Medium Term Financial Plan

Budget Impact Assessments

2016-17

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### Impact Assessment Form and Action Table 2014 - 2016

(Expand the boxes as appropriate, please see guidance (www.somerset.gov.uk/impactassessment) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

### **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?				
Proposed New Policy or Service	Change to Policy or Service	·	Service Review or SCC Change	
No	No	Getset Early Help Service – Proposed MTFP Savings 2016 -17	Children's Improvement Programme Priority 7, Embedding Early Help	
What are you completing the Impact MTEP Decision P16-001 Pre-Right to 5				

What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?

MTFP Decision R16-001 Pre-Birth to 5 Strategy; Early Help & the getset service

### **Section 1 – Description** of what is being impact assessed

This Impact Assessment refers to the MTFP proposal for the getset Early Help service to realise savings of £160k (3.7%) from the Children's Centre budget of £4.288m. This Impact Assessment provides an overview of the services offered and the client base for those services. The savings will be achieved via structural changes to the management of the commissioning, operational delivery and business elements of the service and not on staff that provide the direct delivery of the service and therefore there is no significant effect on clients and communities receiving those services. There will be no change to the Early Help offer that Somerset County Council provides as a result of these savings.

The getset service has developed this proposal to restructure the management team in order to realise savings for the 2016/17 financial year to a total of £284k. getset provides early help preventative services to children and families through a range of needs from needing a little short term assistance to more intensive help over a longer period of time. This range of help is split into areas known as; universal (which everyone can access), some additional needs and complex levels of needs. The service is predominantly delivered from Children's Centres and on an individual 'face to face' basis in people's homes.

This proposal to re-engineer the management structure ensures that there will be no change to service delivery in 2016/17. The savings will be made by the reduction of management and support posts and the creation of more suitable roles to ensure the

structure of the service is fit of purpose.

The new management structure for the service will look to stimulate the voluntary and community sector (VCS) capability to help deliver the universal offer and assist with the delivery of additional needs levels of this service. It is also planned to explore co-commissioning with Public Health colleagues as they develop their commissioning strategy for Health Visiting and School Nursing services, also at universal and additional levels of need.

The level three, complex needs element of the service will also remain unaffected by this proposal. It is hoped to change the dynamic of Children's Centre services as SCC looks to develop greater community involvement and self-help whilst also enhancing support for complex needs.

Early Help service delivery in Somerset is complemented by the provision of early help by schools and other educational establishments at universal and additional need levels.

This Impact Assessment demonstrates that these changes will have no detrimental effect on a range of clients many of whom are vulnerable.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

**Service Users**: The range of Protected Characteristics is listed below to help outline the present engagement the service has with these groups and there will be no change to this. Therefore, the effect of these changes for 2016/17 will only impact on those management posts directly involved with no negative impact on practitioners and service users.

The service users accessing the getset service have a wide range of need from the universal provision accessible to all (with no or very little requirement for support from the service; this may be signposting to other organisations or helping people to help themselves) through to a range of complicated needs that require a lot of face to face support over a period of time possibly as long as a year.

### **Protected Characteristics:**

**Age:** the service is designed to support children, young people and families including young parents and pregnant teenagers. Children's Centre members of staff help families with children in the age range 0-5 years with both everyday (universal) and some (additional) needs. The service also provides help for families with children with much more complicated needs to 19 years of age and 25 years where clients have identified Special Educational Needs.

**Disability:** getset does not provide a specific service for disabled children, young people and families however; within the criteria shown above it will signpost, support and help as part of its core offer.

**Gender Reassignment:** No specific service, subject to the core offer a service will be provided.

**Marriage and Civil Partnership:** The service will be provided according to the above criteria and core offer.

**Pregnancy and Maternity:** Pregnant and post natal women are subject to the core universal offer and any additional support as required.

**Race:** The core offer at universal, additional and complex needs are all subject to considerations of race particularly accessibility to services via translation support. Support in terms of English language development is also facilitated.

**Religion or Belief**: No specific service however cognisant of needs.

Sex: No specific service

Sexual Orientation: No specific service

**Carers:** No specific service, however the service clients would include carers and they would be signposted and or supported as appropriate.

**Rurality:** The service is provided not just from town centre hubs or Children's Centres but from wherever users are most likely to access the service. This is particularly the case for universal and additional needs where a lot of the activity is delivered in groups. Complex need services are provided via some group work but most is delivered in client's own homes.

The long term strategic plan seeks to develop the VCS in its capability to deliver Universal and Additional needs services at existing community venues and therefore more readily accessible to clients.

**Military Status**: The getset service has strong links with organisations such as Navy Command, Royal Navy Royal Marines Welfare who represents several military establishments in Somerset. There is also direct delivery to military families by the getset service.

**Low income:** The targeted client base for getset services are predominantly in receipt of low incomes and this is the area the service will develop to ensure a contribution to 'narrowing the gap' in attainment and health and well-being.

**Wider community:** As above. The direct delivery of the getset service will become more targeted at those with complex needs however; the Service will seek to stimulate communities and the VCS to provide self-help, signposting and support at universal and additional needs levels. The Early Help remit is also being clarified and refreshed within the Somerset partnership of statutory agencies to enhance the offer available to communities within the County.

**Specific Interest Groups:** It is anticipated that there will be a developing issue of individuals and families seeking assistance as refugees within the County. The getset service will respond to this according to need as outlined above.

**Employees/Trade Unions:** Staff directly affected by this re-engineering of the management structure are being briefed and consulted together with their respective Unions throughout the process on an individual basis.

**Internal Services:** In order to focus and preserve the capability of the getset service all opportunities will also be sought to place non service delivery activity elsewhere within SCC whilst seeking savings and efficiencies. This would include the removal of facilities management responsibilities from the service where appropriate.

**Partners**: Priority 7, 'Embedding Early Help' concerns all of SCC statutory partners developing and embedding preventative services. This activity will help to strengthen Early Help as it will be delivered by a wider range of practitioners across the partnership.

Suppliers: No change.

Contract or commissioned service: At present Clowns and Homestart are commissioned to assist with service delivery in West Somerset due to its rurality. The restructure of the service management will allow the scope the VCS capacity and capability in Somerset to deliver early help with a view to establishing greater use of the VCS at universal and additional levels of need.

### **Section 2B** – People who are **delivering** the policy or service

The getset service is delivered by a range of public facing practitioners and business/administrative support. Family Support Workers (FSWs) provide group activity as well as face to face targeted support work for families with the greatest need. FSWs are supervised by Early Help Officers and managed by Service Managers

who are responsible for each of the five Borough/District Council areas. There are also Play Workers and Deputy Early Help Officers who mainly work within the less targeted areas of the service. Each area has a small team of administrative and business support that cover a range of activities from reception duties to data collection. There is a small administrative central team to support service delivery and commissioning.

### **Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

The reach of Children's Centres and staffing ratios are calculated using a formula based on a combination of Income Deprivation Affecting Children Index (IDACI), Index of Multiple Deprivation (IMD) and the Joint Strategic Needs Assessment (JSNA). These proposals concern the central management structure and are designed to strengthen the commissioning capacity of the service. This enhanced capacity will be required to scope and stimulate the market (VCS) and work with the Public Health Commissioning Team to identify potential efficiencies in the possible joint commissioning of Health Visiting, School Nursing and getset universal and additional needs services.

Therefore, whilst management within the service will be reduced there will be no impact on service delivery whilst improving the structural capacity and ability to commission the external provision of early help services. This will enable a consultation process to be developed with partners (statutory and others), staff and service users in order to shape any required changes to the service going forward.

### getset Service Users and their demographics January 2016

### universal level 1 and additional level 2 (children aged 0-4 years)

getset know about all children aged 0-4 living in Somerset from data shared by health. Of these 70% are registered to the getset service.

In the last year 8561 families have been seen by the universal service. This is represents 40% of the total number of households with a child aged 0-4 years.

In addition to this, getset have collaborative agreements with childcare providers. Across Somerset 98% of children aged 3 and 4 take up 'Early Years Entitlement' places and 80% of eligible 2 year olds take up 'Funding for 2 Year Olds'.

getset target work for the following groups: teen parents, those taking up' Funding for 2 year olds', and those living in the most deprived areas.

### In the last year:

- 65% of teenage parent households were seen by getset
- 52% of households taking up 'Funding for 2 year olds' were seen by getset
- 40% of children living in most deprived areas were seen by getset

Work with those from a minority ethnic background is in line with the population of these groups in Somerset.

### Additional level 2 Family Support (children aged 0-4 years)

In the last year, 2012 children were referred to getset for level 2 work. There are currently 789 cases open.

### Complex level 3 (children and young people aged 0-19 years)

In the last year, 1359 children and young people were referred to getset for level 3 work. There are currently 665 cases open.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

### **Community Safety**

These proposals will have no impact on Level 3 of the service aimed at children, young people and families with complex needs that require longer term face to face work with Family Support Workers. Level 3 is at present funded via the DCLG Troubled Families Programme, Payment by Results scheme (PbR). One of the areas of activated expected within this programme concerns those that commit anti-social behaviour. There is no plan at present to change this arrangement. It is this Level that will predominantly deal with issues of community safety involving families with intergenerational and entrenched issues including anti-social behaviour.

### **Equality**

As referred to above under the listed Protected Characteristics, this proposal to reengineer the management structure to enhance commissioning seeks to improve equality and diversity by the delivery of preventative services closer to communities and indeed from and by communities and where appropriate involving VCS groups who focus on the needs of minority groups e.g. disability. The Service is customer focussed and this will continue to be the case as the service is developed. getset will remain cognisant of equalities legislations and ensure that any groups or individuals engaged to provide early help services at whatever tier are aware of and own policies and practices that enhance equal opportunities and seek to narrow the gaps between those that have a protected characteristics and others within the population. This would include ensuring that buildings used for service delivery are accessible and services themselves are flexible and able to meet a range of needs including those who have protected characteristics.

### **Health and Safety**

There is no indication that this proposal will change the levels risk to SCC employees, volunteers, service users, visitors, members of the public or contractors.

### **Health and Wellbeing**

This proposal fully supports the priorities of the Health and Wellbeing Strategy. The re-engineered management team is designed to develop community resilience and will fully support Priority 1, 'People, families and communities take responsibility for their own health and wellbeing' and Priority 2, 'Families and communities are thriving and resilient' in that SCC will seek to stimulate the VCS and communities to self-help and support issues concerning preventative 'early help' This is particularly relevant to narrowing the gap in health and well-being as well as general aspiration and attainment. The focus remains on children, young people and families and includes young parents. The management structure proposed seeks to enhance an

already effective relationship between social care early help and preventative services provided via Public Health commissioning of Health Visitors and School Nurses.

### **Privacy**

There is no impact on privacy as a result of this management structure re-engineering.

### **Sustainability**

There is no impact on sustainability as a result of this management structure reengineering.

#### Risk

This proposal concerns an internal structural change and a reduction of managers. There is no impact on practitioners or service users.

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

This proposal is designed to mitigate the risk that a budget reduction could cause. Therefore there are no reductions in practitioners providing the face to face service with clients. Savings are identified from; a reduction in management posts, a reduction in support staff that are not client facing and infrastructure that creates cost with minimal positive affect on service delivery including the running costs of buildings, facilities management and vehicles.

The risk assessment combined score is at 4 and therefore should be reviewed at 6 months of the plan being implemented.

I therefore assess the risk as minor and recommend that this proposal is accepted to ensure that the service has a management structure that is fit for purpose to effectively commission early help services.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

Briefings and consultation will take place with managers who are directly affected and their respective Trades Unions throughout the process of implementing this proposal if agreed.

This Equality Impact assessment will accompany the MTFP Non Key Decision papers and they will be published together.

Completed by:	Trevor Simpson Strategic Commissioner
Date	18 <sup>th</sup> January 2016
Signed off by:	Julian Wooster
Date	18 <sup>th</sup> January 2016
Compliance sign off Date	18 <sup>th</sup> January 2016
To be reviewed by: (officer name)	Trevor Simpson
Review date:	End of 2016/17

Version	Date	

	Equality Im	pact Assessment Issu	es and Action Tal	ble	
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
	d MTFP savings have no effects s Equalities Impact Assessmer		service users and	therefore there is no	effect on the Protected
Age:					
Disability					
Gender Reassignment	T	T			
Marriage and Civil Part	nership 	<u> </u>	1	1	
Drawnanay and Matauri	4				
Pregnancy and Materni	ity 		T		
Race (including ethnicity	l or national origin, colour, natic	l pnality and Gypsies and	Travellers)		
Daligian and Daliaf					
Religion and Belief					
Sex	Sov				
Sexual Orientation		1	1		
Other (including caring r	esponsibilities, rurality, low inco	ome, Military Status etc	)		

Healt	th and Safety, Sustainability,	Community Safety Imp	act Assessment	Issues and Action	Table
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
	Health	and Safety Issues and	Action Table		
This proposal and related MTFP savings have no effect on practitioners and or service users and therefore there is no effect on the following categories; Health & Safety, Sustainability, Community Safety and Privacy.					
	Sust	tainability Issues and A	Action Table		
As above					
Community Safety Issues and Action Table					
As above					
Privacy Issues and Action Table					
As above					

### **Equality Impact Assessment Form and Action Table 2015**

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

### **Baroness Thornton, March 2010**

What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		MTFP R16-002		
Version	1.1	Date	2	23.12.15

### Section 1 – Description of what is being impact assessed

A Medium Term Financial Plan (MTFP) proposal has been developed to deliver savings by re-organising the way in which the Mental Health Social Work Service for adults is managed. The proposal also looks at a number of ways to improve how the Mental Health Social Care budget is managed to ensure that it is used effectively. This impact assessment is assessing the implications should a decision be taken to return the management function of this service, which includes hosting of the service and staff group, to Somerset County Council (SCC), as per the MTFP proposal.

The Mental Health Social Work Service is delivered by a group of Mental Health Social Workers (MHSWs) and Approved Mental Health Professionals (AMHPs) who are employed by SCC and provide social work to people whose primary needs relate to their mental health, Asperger's Syndrome and / or dementia.

Some years ago SCC and Somerset Partnership NHS Foundation Trust (SOMPAR) formed integrated community mental health teams, in which SCC commissioned SOMPAR to manage the Mental Health Social Work Service and this arrangement continues to date. In practical terms this means that the Mental Health Social Workers and Approved Mental Health Practitioners are located within the same teams and offices as clinical mental health staff. This supports multi-agency working, sharing of information and coordinated care for customers (individuals accessing support from the service). At present Mental Health Social Work Service staff and the service that they deliver are hosted and managed by SOMPAR, whilst the AMHP service is only hosted by SOMPAR, but is managed by SCC.

The proposal also outlines a number of other measures to improve value for money and budget management within the Mental Health Social Care budget. It is not anticipated at present that these will impact upon customers as their care and support will continue to be provided in a manner that takes into consideration their personal needs and outcomes. However, in ensuring that SCC complies with section 22 of the Care Act 2014, there are likely to be implications for Somerset Clinical Commissioning Group and these are outlined further in Section 3.

## **Section 2A** – People or communities that are **targeted or could be affected** (taking particular note of the Protected Characteristic listed in action table)

\*\* Throughout this section, reference is made to data that is held by Somerset County Council (SCC) about people who are known to the Mental Health Social Work Service. This data comes from the customer information management system called AIS and was extracted in October 2015. It has been identified that this data does not represent a fully accurate or up to date picture of provision as it has not been taken from the primary database (held by SOMPAR) that is used by the Mental Health Social Work Service on a daily basis. It should therefore be treated with caution. Further work is required in partnership with SOMPAR to develop a more accurate picture using data from their IT systems and this Impact Assessment will then be reviewed to reflect this. This will take place following the decision by SCC Cabinet to agree the proposal and will be done in partnership with SOMPAR and other relevant stakeholders.

The Mental Health Social Work Service is provided to people in Somerset who require specialist social care and support in relation to their mental health needs. For the purpose of this document people accessing support from the service are referred to as 'customers'. There are two parts to the service:

- Social care This provides a range of social care duties including providing assessments of people's social care needs and where appropriate working with people with eligible needs to provide care and support to maintain and / or improve their wellbeing and independence. This is provided to people who are aged 18 and over and according to data held by SCC it is estimated to be approximately 784 people\*\*
- Approved Mental Health Professionals (AMHP) service This service is delivered
  by social workers who are qualified to assess people under the Mental Health Act
  1983 (amended 2007). These assessments are undertaken when it is believed
  that someone may need to be detained in hospital in order to be assessed or
  receive the care and support that they require. The service is delivered to people
  of all ages in Somerset, although the majority of these are aged 18+.

The MTFP proposal is seeking to deliver savings by bringing the management responsibility for the service back to SCC – as noted above, at present SOMPAR delivers this management function on behalf of SCC. Should the proposal be accepted, a new service model will be developed and until this takes place it is not possible to confirm exactly what the impacts of the changes will be, although it is possible to anticipate what these might entail (see Section 4). As outlined above this impact assessment will be updated following the decision by SCC Cabinet to agree the proposal.

The Mental Health Social Work Service delivers care and support on an individual and personalised basis and it recognises and respects individuals' identities and lifestyle choices. Irrespective of whether the proposal is agreed or not, this will continue to be the case. In relation to the impacts outlined in Section 4, as well as looking at data that is held on the SCC database (AIS)\*\* about people being supported by the Mental Health Social Work Service, the following considerations need to be made in relation to how groups of individuals with shared protected characteristics may be impacted by the changes.

### <u>Age</u>

As outlined in the Positive Mental Health Strategy for Somerset:

- With a predicted 63% increase in the number of older people over 65 in Somerset over the next 20 years maintaining the mental health and wellbeing of older people is a very high priority for the county. Mental health conditions have been found to be present in:
  - 40% of older people who attend their GP
  - 50% of older adult patients in inpatient facilities in general hospitals
  - 60% of residents of care homes
- Depression in older people is common and often unrecognised
- The connections between physical and mental health is particularly pertinent with the older age group
- For working age adults, and for employers the importance of workplace mental health has both individual and social benefits; with this group also juggling parenting and caring responsibilities

The Mental Health Social Work Service primarily supports people aged 18+ and is structured by age, with 'Adults' teams supporting people aged 18-64 years old and 'Older People' teams supporting people aged 65 + years old. The exceptions to this are:

- If an individual is supported by an Adults team due to a functional mental health condition, they will often stay supported by that team even after they turn 65 years old, rather than be transferred to the Older People's team.
- The Approved Mental Health Professionals (AMHP) Service which assesses individuals of all ages, although the majority of these are aged 18+.

According to data held by SCC on AIS\*\*, the age of customers being supported by the service are as follows:

- Children and young people assessed by the AMHP Service are not recorded on AIS
- 2.8% are aged 18 25 years old
- 31.5% are aged 26 64 years old
- 65.7% are aged 65 + years old

However, the data also indicates that 56.1% of customers were supported by an Adults team (compared to 34.3% of customers who are aged 18-64 years) and 43.9% were supported by an Older People's team (compared to 65.7% of customers who are aged 65 + years). This may be due to the fact that if an individual is supported by an Adults team due to a functional mental health condition, they will often stay supported by that team even after they turn 65 years old, rather than be transferred to the Older People team.

Other age related factors to consider are:

- The number of 18-25 year olds accessing the service would appear to be low compared to the other age groups
- Adults' teams generally support people with functional mental health conditions, whilst Older People teams support more people with organic conditions such as dementia. This does not easily allow for flexibility within the service to respond to changing demand, fluctuating staff resources (which might result from sickness, maternity leave, recruitment difficulties etc.) or consistently meet the needs of people with both functional and organic mental health conditions

- Young people accessing Children and Adolescents Mental Health Services (CAMHS) often experience difficulties in transitioning to adult services for a variety of reasons
- At present there are currently no dedicated mental health staffing resources allocated specifically to supporting young people through transitions, as exists in Learning Disability Services
- Individuals' experiences of their health condition are likely to some degree to be influenced by their age and so will require care and support that acknowledges and addresses this. For example, someone with early onset dementia in their 40s, who may be working, married and a parent, is likely to be impacted very differently to someone with dementia in their 70s who has poor physical health, lives with their spouse and is retired.

### Disability

As outlined in the Positive Mental Health Strategy for Somerset:

- Disabled people experience considerably higher levels of health inequality than the general population; this is often exacerbated by low income
- Studies have shown that disabled people have higher levels of depression than
  the general population. This is likely to be linked both to the social challenges
  which disability brings, such as maintaining employment and managing daily life
  as well as the particular challenges from the condition, which may include chronic
  pain or discomfort, medication etc.
- The prevalence of mental health conditions among people with certain disabilities / health conditions is often higher than the general population and the population with these conditions is rising e.g. learning disabilities, with the population projected to increase by 4.15% for all age groups and by 15.74% for those aged 65 and over
- Addressing the emotional and mental health needs of people with other disabilities / health conditions can often be overlooked and services are not always responsive to meet the needs of people with more than one health condition

In relation to the Mental Health Social Work Service, at present disability is only recorded routinely on AIS where an individual has a hearing or visual impairment and this only accounts for 2% of customers\*\*. However, by the nature of the service it can be assumed that a far larger proportion of customers have a disability, although many may not identify themselves as such. In addition, when AIS data is examined further it is possible to identify that a larger proportion of customers are likely to have a disability, given that the list of 'primary support reasons' i.e. the primary reason that they are accessing care and support from the team, include the following:

- Dementia
- Mental Health Support
- Physical & Sensory Disability & Frailty

The group of customers accessing the Mental Health Social Work Service will have a range of mental health conditions, as well as dementia and / or Asperger's Syndrome. It is acknowledged that a number of these conditions such as anxiety and Asperger's Syndrome can impact upon the way that individuals' respond to change and as a result change can impact upon an individual's health and wellbeing and cause feelings such as distress, anxiety and worry. For some individuals, this may be to a level that significantly

impacts on other areas of their lives.

### Gender reassignment

As outlined in the Positive Mental Health Strategy for Somerset:

- Being a transgender person can have enormous mental and emotional health implications and specialist support, including peer led specialist support is needed for individuals, families and professionals.
- Due to the relatively small numbers of people and the diversity of need, services and support are best developed in collaboration, available locally but developed regionally and nationally.

In relation to the Mental Health Social Work Service, at present information about gender reassignment is not currently recorded routinely on AIS\*\*.

### Marriage and civil partnership

In relation to the Mental Health Social Work Service, at present information about customers' marital status is collected and recorded on AIS\*\*

Marital Status	MH Customers (%)	Somerset population (%)
Divorced	3.3	9.1
Married	20.9	47.6
Separated	1.3	2.7
Single	19.8	34
Widowed	17.9	6.6
With partner	1.7	-
Not recorded	35.2	-
TOTAL	100	100

#### This data shows that:

- Improvements are required in relation to the recording of marital status on AIS
- Where data is recorded, there is a significantly higher than average proportion of people who are widowed accessing the service than the general population

### Pregnancy and maternity

As outlined in the Positive Mental Health Strategy for Somerset:

- Mental health conditions at the time of new motherhood can cause enormous distress and can interfere with the adjustment to motherhood and the care of the baby
- Poorly managed, perinatal mental health conditions can have lasting effects on maternal self-esteem, partner and family relationships as well as the mental health and social adjustment of the child
- The roles of health and social care professionals are very important in supporting women during pregnancy and during the first year of the baby's life
- Acute serious perinatal illness often requires inpatient care. The separation of
  mother and infant can interfere with the early development of mother-infant
  attachment and relationship. Separation can also cause great maternal distress
  and may interfere with treatment of the mother as well as preventing breastfeeding

- and bonding which may have long standing effects on both child and mother
- The design and delivery of specialist services is challenging in rural areas; however, support for commissioners is available from the National Mental Health Commissioning Panel

In relation to the Mental Health Social Work Service, at present information about pregnancy and maternity is not currently recorded routinely on AIS\*\*.

### Race / Ethnicity

As outlined in the Positive Mental Health Strategy for Somerset:

- People from black and minority ethnic groups are at greater risk of some mental health conditions than the general population. Nationally, Black Caribbean, Black African and Other Black groups have lower than average rates of mental health referrals from GPs and community mental health teams and are over 40% more likely than the general population to be referred to mental health services through the criminal justice system
- Within some communities the stigma of mental health means that it is not talked about and is therefore hidden. This is often the case within Gypsy and Traveller communities, who will talk about 'stress and 'nerves' and the Chinese and Asian communities who are reluctant to talk about mental health
- Where race equality is combined with other protected characteristics (for example age, low income or disability) the impact multiplies

The data below shows the ethnicity of customers of the Mental Health Social Work Service (as recorded on AIS\*\*) in comparison to the general Somerset population:

Ethnicity	SCC	Somerset
	Customers (%)	population (%)
White British	91.3	94.6
White Irish/ Gypsy or Irish Traveller and Other White	1.9	3.3
Mixed / multiple ethnic groups	0.5	0.8
Asian / Asian British	0	0.9
Black / African / Caribbean / Black British	0.1	0.2
Other ethnic group	0.4	0.1
Prefer not say / not recorded	5.7	0

From the data, it is likely that non-White British individuals are under-represented in accessing the Mental Health Social Work Service, both when compared to the Somerset population, but also when we take into consideration the higher level of needs in relation to mental health within certain black and minority ethnic groups.

### Religion / belief

The data below shows the religion / belief of customers of the Mental Health Social Work Service (as recorded on AIS\*\*) in comparison to the general Somerset population:

Religion / belief	SCC Customers (%)	Somerset population (%)
Christian	12.4	64

Buddhist	0	0.3
Hindu	0	0.1
Jewish	0	0.1
Muslim	0	0.3
Sikh	0	-
Other religion	0.3	0.6
No religion	2	26.6
Prefer not to say / not recorded	-	8
Not recorded / Unknown	85.3	-

From the data above it is noted that there is poor recording of customers' religion / belief on AIS\*\*. This is not to say that the Service does not capture / record this information, but that it has not been transferred to the SCC database.

### Sex

As outlined in the Positive Mental Health Strategy for Somerset:

- Men: The striking statistic is the proportion of men who take their own life (75% of completed suicides are men). This is part of a complex picture within which men access health services less frequently, have poorer health outcomes than women; and on average die younger
- Women: A quarter of women will experience domestic abuse in their lifetime and research suggests between 35 to 75% of abused women experience depression or anxiety disorders. Estimates suggest that 50-60% of women within mental health services have experienced domestic violence and 70% of female psychiatric inpatients and 80% of those in secure settings have histories of physical or sexual abuse

According to data held by SCC on AIS\*\*, the sex of customers being supported by the service varies across age groups.

Sex	All SCC Customers (%)	0 - 25 years (%)	26 - 64 years (%)	65 + years (%)	Somerset population (%)
Male	57.8	40.9	60	33.6	48.8
Female	42.2	59.1	40	66.4	51.2

It is acknowledged at a national level that men traditionally access mental health services less than women and so the data above would suggest that there is a positive trend in Somerset in relation to men being provided a service. The decrease in the proportion of customers who are men in the 65+ year age group is likely to account for the higher proportion of women than men who have dementia — 64.6% of people in the UK with dementia are women (Alzheimer's Society, 2014).

### Sexual orientation

As outlined in the Positive Mental Health Strategy for Somerset:

 People are at higher risk of a range of mental health problems as a direct result of discrimination, the challenges of 'coming out'; the stress of concealed identity and of living with 'assumed norms'.  Discrimination often creates a barrier to receiving appropriate care and treatment and can impact profoundly on mental and emotional health, including risk from self-harm, particularly among young people who are coming to terms with their identity or those from communities or families where there will be rejection or censure.

Data from AIS\*\* in relation to sexual orientation is incomplete, with it not being recorded for 99.9% of customers. This is not to say that the Service does not capture / record this information, but that it has not been transferred to the SCC database.

### Other - Carers and families

It is nationally acknowledged that carers are more likely to experience poorer outcomes than the general population in a number of areas of their lives, including health and wellbeing, finances, relationships and employment. This can be evidenced through research undertaken by Carers UK (2015) that found:

- 82% of carers report that caring has had a negative impact on their health
- 74% of carers find it difficult to get a good night's sleep
- 47% struggle to maintain a balanced diet
- 41% have experienced an injury or their physical health has suffered as a result of caring
- 84% report feeling more stressed, 78% report feeling more anxious and 55% report that they have suffered from depression as a result of their caring role
- 62% report that they are struggling to make ends meet and that they are cutting back on seeing friends or family to save money
- 61% report that they are concerned about the impact of caring on relationships with their friends and family over the next year
- 51% of carers have given up work to care

There are a range of local services which support carers in their caring roles, and the service being considered involves carers and family members when developing and implementing care and support plans for customers.

### Section 2B – People who are delivering the policy or service

The proposal will impact upon staff who are employed by SCC as Mental Health Social Workers and Approved Mental Health Professionals (AMHPs). They are currently based across Somerset in integrated community mental health teams and managed / hosted by SOMPAR. More information can be found in Section 4 in relation to this group and the anticipated implications that this proposal will have for them.

## **Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

Evidence has been sourced via a number of mechanisms:

HM Government (2011) No Health without Mental Health, A cross-government mental health outcomes strategy for people of all ages <a href="https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/213761/dh">https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/213761/dh</a> 124058.pdf

Carers UK (2015) State of Caring report

www.carersuk.org/for-professionals/policy/policy-library/state-of-caring-2015

Positive Mental Health Strategy for Somerset, 2014 - 2019 www.somersetintelligence.org.uk/mental-health.html

Public Health England – Mental Health, Dementia and Neurology profiles <a href="http://fingertips.phe.org.uk/profile-group/mental-health">http://fingertips.phe.org.uk/profile-group/mental-health</a>

Alzheimer's Society (2014) Dementia UK <a href="https://www.alzheimers.org.uk/site/scripts/download">https://www.alzheimers.org.uk/site/scripts/download</a> info.php?fileID=2323

Somerset Intelligence Network www.somersetintelligence.org.uk/

In addition, data that SCC holds about people currently accessing the Mental Health Social Work Service has been analysed to inform this assessment. On the basis that the data may allow for individuals to be identified, it is not appropriate to provide the full data set within this document.

### Other organisations

In addition to the above considerations, there is also a need to highlight the potential impact on other organisations in relation to the MTFP proposal and this information will need to be considered accordingly within the implementation plan should the MTFP proposal be agreed.

As well as the management reorganisation, one of the options being considered to deliver the efficiencies required is to strengthen the focus on section 22 of the Care Act which prohibits local authorities providing or arranging for care and support that should be met by the NHS, unless in specific circumstances. In practical terms this means that if someone has health and social care needs, the local authority is only permitted to pay for any care and support relating to their eligible social care needs, but not their health needs. In accordance with this, it has been identified locally that work is required to ensure that for the purposes of funding only, there should be a review of local policies and processes to ensure that each organisation takes full funding responsibility for meeting individuals' needs accordingly. It is anticipated that the impact of this may result in efficiencies for SCC, although increase the demand upon health budgets. This will need to be addressed through joint commissioning arrangements between Somerset CCG and SCC.

**Section 4 – Conclusions** drawn about the equalities impact (positive or negative) of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

The MTFP proposal is seeking to deliver savings by bringing the management responsibility for the Mental Health Social Work Service back to SCC – as noted above, at present SOMPAR delivers this on behalf of SCC. Should the proposal be accepted, a new service model will be developed. However, until this takes place it is not possible to provide detailed information about the exact scale and nature of the impacts of the proposal, although it is possible to anticipate what these might entail. The following section provides a conclusion of the impacts currently identified in relation to the Mental Health Social Work Service and this will be reviewed and updated, subject to the Cabinet decision, as the proposal progresses in the planning and implementation stages.

### **Somerset Partnership NHS Foundation Trust**

SCC has sought feedback from SOMPAR in terms of the proposal and impacts that they anticipate. Their response is summarised below and will be used to inform the review of the impact assessment as outlined above. It should be noted that this impact assessment document relates to the Mental Health Social Work Service, although some of the points below from SOMPAR are also in reference to the health element of the Community Mental Health Teams (in which the Mental Health Social Work Service is currently located). In summary, SOMPAR have reported the following as potential implications:

- The viability of maintaining the level of patient services for mental health
- Re-allocation of care coordinators / managers creating difficulties for customers, carers and staff and requiring a re-balance of workloads
- Roles, responsibilities, processes and policies for health and social care staff / services will need to be reviewed, re-allocated and / or redesigned with a need to ensure alignment and coordination between health and social care – potential implications identified include increased duplication, confusion, bureaucracy and workloads
- Reduced opportunity for multi-disciplinary working and professional peer support and diminished knowledge bases within staff groups
- Sharing of information between health and social care staff / services will need to be addressed
- A potential need for the reorganisation of community mental health teams due to reduced staff numbers and potential for reduced flexibility within these to manage sickness / annual leave
- Staff retention problems
- Referral pathways into services and alignment of access to services, e.g. operating hours, will need to be reviewed and redesigned

Should a decision be taken to proceed with this proposal, the feedback provided by SOMPAR will be used to inform the update of this impact assessment and will also be used to inform the development of a new service model and how it interfaces and works alongside SOMPAR mental health services. In addition, SOMPAR have stated that they will also undertake their own formal impact assessment in relation to their services and the two organisations will work together to coordinate and align workstreams wherever possible to ensure that best outcomes for customers.

### Impacts for groups with protected characteristics

Should the proposal be agreed and implemented it will be important to consider the following issues in order to minimise the impact of the changes, whilst also ensuring that people are supported appropriately to access the Mental Health Social Work Service and have their eligible needs met:

### Age

- Support for young people transitioning in to the service from children's' services
- How the service and teams are structured and distributed to appropriately meet demand from customers of different ages
- The skills, experience and knowledge of staff to appropriately meet the needs of customers of different ages

### Disability

- Where the prospect of change may have a potentially negative impact on an
  individual in terms of how they consider, prepare and respond to change, the
  service will need to ensure that all change is planned and communicated with
  individuals in ways that are personalised to them, take into consideration their
  needs and respond to them accordingly. This will need to be done on an individual
  basis.
- Communication methods, particularly where people have visual and / or hearing impairments – both in relation to communicating any changes in service, and also long term ongoing provision
- Access requirements and the need for reasonable adjustments where people are accessing the service in community settings
- Improved identification of disability to ensure that the care and support being delivered is appropriate to individuals' needs
- The skills, experience and knowledge of staff to appropriately identify and address the needs of customers in relation to their disabilities, and how these may in turn impact upon their quality of life and achievement of life outcomes
- The skills, experience and knowledge of staff to identify and address the physical needs of people with mental health conditions, and how these interplay with their emotional and mental health
- The knowledge of staff about the various cultures and communities that people
  may be a part of as a result of their disability e.g. deaf culture and how these form
  part of individuals' identities and lives
- How the service and teams are structured and distributed to appropriately meet demand from customers with differing types of conditions that would be supported by the Mental Health Social Work Service e.g. functional mental health conditions, dementia, Asperger's Syndrome etc.

### Gender reassignment

- Improved identification and / or recording of gender identity issues to ensure that the care and support being provided is appropriate to individuals' needs
- The skills, experience and knowledge of staff to appropriately identify and address the needs of customers in relation to their gender identity, and how these may in turn impact upon their quality of life and achievement of life outcomes
- The knowledge of staff about the various cultures and communities that people
  may be a part of as a result of their gender identity and how these form part of
  individuals' identities and lives

### Marriage and civil partnership

 At present there are no specific considerations that have been identified in relation to marriage or civil partnership which need to be addressed should the proposal be agreed and implemented

### Pregnancy and maternity

 Care pathways and joint working arrangements with Children's Services to ensure that mothers are supported accordingly by the Mental Health Social Work Service in relation to their mental health and Children's Services in relation to parenting and the wellbeing of their children  The skills, experience and knowledge of staff to appropriately identify and address the needs of women who are soon to be / new mothers, and to support them appropriately in relation to their mental health

### Race / Ethnicity

- The skills, experience and knowledge of staff to appropriately identify and address the needs of customers in relation to their race / ethnicity, and how these may in turn impact upon their quality of life and achievement of life outcomes
- The knowledge of staff about the various cultures and communities that people may be a part of and how these form part of individuals' identities and lives
- Improving the accessibility of the service for people from different ethnic groups and ensuring that it is culturally sensitive, including communications (especially where English may not be the first language), matching staff to customers where appropriate, acknowledgement of the stigma / lack of understanding relating to mental health within certain communities which can act as a barrier to seeking / accessing support etc.

### Religion / belief

- Improved identification / recording of customer's religions / beliefs to ensure that the care and support being provided is appropriate to individuals' needs
- The skills, experience and knowledge of staff to appropriately identify and address the needs of customers in relation to their religions / beliefs, and how these may in turn impact upon their quality of life and achievement of life outcomes
- The knowledge of staff about the various cultures and communities that people may be a part of and how these form part of individuals' identities and lives
- Improving the accessibility of the service for people with different religions and ensuring that it is culturally sensitive

### <u>Sex</u>

• Ongoing monitoring of the service to ensure that it is being accessed by men and women in numbers that represent the needs of the population

### Sexual orientation

- Improved identification / recording of customers' sexual orientation to ensure that the care and support being provided is appropriate to individuals' needs
- The skills, experience and knowledge of staff to appropriately identify and address the needs of customers in relation to their sexual orientation, and how these may in turn impact upon their quality of life and achievement of life outcomes
- The knowledge of staff about the various cultures and communities that people may be a part of and how these form part of individuals' identity and lives

### Other - Carers and families

- Identifying and supporting carers and family members as valued partners in care and taking into account their role and needs when supporting customers
- Ensuring that there are clear care pathways in place for carers to be referred for carers' assessments and support
- Ensure that where appropriate changes to the service are communicated in a clear and timely manner with carers and family members, as well as customers,

 especially when they hold Lasting Power of Attorney for health and welfare of the customer

### Potential impacts for SCC staff delivering the Mental Health Social Work Service

Subject to the MTFP proposal being agreed, a new service model will be developed in conjunction with staff and until it is agreed, it is not possible to fully articulate the implications. However, the following is anticipated:

### Redundancies

There is no intention to make any redundancies of SCC staff as part of this proposal.

### Terms and conditions

All staff are currently employed by SCC and so TUPE arrangements will not apply. Job descriptions will remain the same. However, there is a small number of staff in non-standard SCC jobs who will be consulted with on an individual basis. Unions are aware of the proposal and will be kept fully informed of progress.

### Location

It is likely that there will be changes to office locations and IT arrangements for staff.

### <u>Duties and responsibilities</u>

The service will deliver social care functions in line with the Care Act and SCC policies and procedures, whilst working in partnership with SOMPAR to deliver the best outcomes possible for individuals requiring care and support in relation to their mental health. It has also been noted by both SCC and SOMPAR that work would be required to redefine and clarify the functions of health and social care services, and staff, respectively. The implications of this would need to be considered within the development and implementation of a new service model.

### **HR Support**

Resources within SCC HR to support the implementation of the proposal are being addressed within the department and they will be represented within the governance structure overseeing the implementation of the project.

### <u>Risks</u>

To date it has been identified that the main risk associated with the proposal in relation to HR and the workforce is as follows:

An adverse impact upon morale within the staff group

Wherever possible, this will be mitigated through ensuring that there are open communication routes between staff, management and commissioners to ensure that continuous feedback can be provided and issues addressed at the earliest point possible.

### Potential impacts for the service as a whole and all customers

### Level of care and support from the Mental Health Social Work Service

The Mental Health Social Work Service delivers a number of statutory functions and SCC is committed to maintaining service provision and the level of care and support that is available to people with needs in relation to their mental health. It is important to note that this proposal does not seek to reduce this. As a result of changing the management arrangements, it is recognised that the way in which the service is delivered will change and as a result, some customers may experience changes to the way in which they receive the service. These are outlined in this section.

Overall, it is anticipated that implementation of the proposal will place SCC in a better position to meet customers' needs, as well as meeting its statutory duties within the Care Act. This will in part be through increasing the accessibility for people to the Mental Health Social Work Service. At present people can only access specialist support if they meet the integrated community mental health teams' eligibility which is set using health based criteria. As a result if someone has low health needs, but high social care needs in relation to their mental health there is a risk that they are currently not able to access the service. Implementation of the proposal would address this and ensure that people are supported before their needs escalate. In addition, the proposal will assist in standardising implementation of the Care Act and relevant duties across all SCC Adult Social Care teams, ensuring that customers receive the same standard of care and support irrespective of which social care team they access.

### <u>Level of care and support from the health element of the integrated Community Mental</u> Health Teams

At present the Mental Health Social Work Service forms one of two parts to the integrated community mental health teams. The other part consists of clinical staff who provide health-based support and care to people who need specialist mental health care. SOMPAR have provided feedback about the implications that they anticipate that the proposal will have should the management of the Mental Health Social Work Service return to SCC and these can be found earlier in Section 4, as well as the actions required to address them.

### Integrated provision of health and social care

At present health and social work staff work together within integrated mental health teams in which they are co-located, use the same IT systems and report to the same management structures (the only exception to this is the AMHP service which already reports in to SCC structures). Should the management of the Mental Health Social Work Service return to SCC, social work staff are likely to move to other offices, use different IT systems and report to different management structures. Whilst this will not affect the level of social work provision for customers, there is potential for this to impact on how this is integrated / coordinated with health care and support. This is likely to include areas such as communication between professionals, communication between professionals and customers, sharing of information, routes through services i.e. care pathways, points of access, coordinated assessments etc.

It should be noted at this point, that so long as the appropriate mechanisms including governance, policies and processes are in place, coordinated care in terms of the experience of the customer does not necessarily require staff being co-located, if planned and delivered appropriately. In addressing this through the development of a new service

model, consideration must be given to the following areas, which will need to be jointly agreed with SOMPAR to ensure that health and social care are working together to deliver the best quality care for customers:

- Multi-disciplinary working to bring together the different professionals supporting individuals
- Shared access to IT systems and information
- Coordinated case allocation
- Clear operating procedures
- Jointly agreed care pathways and referral routes, including processes and policies
- Boundary documents that clearly outline the roles, responsibilities and duties of different services / organisations
- Jointly agreed funding processes and policies
- Communication between health and social care professionals, as well as between professionals and customers

### Care coordinators / managers

At present, people accessing care and support from the integrated mental health teams are provided with a worker who takes the lead for their care and is the main person that they will have contact with. This worker will normally also take the lead for liaising with other professionals to ensure that the customer is getting the care and support that they need. At present this lead worker may be a health or social care member of staff. It is envisaged that if the proposal is agreed and management responsibility returns to SCC, there will be a piece of work to redefine what social care staff do and as a result, customers' lead workers will also need to be reviewed to ensure that they are the best person to meet their needs, whether they be social care and/or health related.

This is likely to result in some customers experiencing a change in the lead member of staff that they are supported by. In addition it may result in some customers being supported by a greater number of staff. It is not possible at this stage to give an accurate picture of how many people this will impact. However, data stored on AIS\*\* for customers known to the Mental Health Social Work Service would suggest that only 7.8% have a lead worker that is a SCC employee within the integrated teams. This would suggest that a large number of customers may be subject to a change in their care coordinator. This would need to be managed through an allocation process that would require input from health and social care services and would involve matching workers to customers based upon whether they needed health and / or social care in relation to their mental health.

#### Points of access

At present the majority of contacts that staff have with customers take place in settings of the customers' choice, which is often their home, but on occasion customers access the service by visiting Somerset Partnership bases. Visits at home will remain an option, but in addition to this there may be an increase in the number of contacts that take place within community settings such as the local hubs that Adult Social Care are using. This will ensure that a community based alternative to Somerset Partnership buildings is provided. The scale and likelihood of this change is not yet known and would be dependent on the design of the new service model.

### Referrals to the service

At present people are referred to the service via the Community Mental Health Teams.

Should the service no longer be part of these teams, a new referral pathway will need to be developed. This will need to be communicated with all individuals who refer to / contact the service. This will include professionals, individuals with mental health needs and their carers and families. There is a risk that differing referral routes for health and social care may lead to confusion and this will need to be carefully considered, planned and communicated alongside SOMPAR to ensure that there is clarity about this.

It should also be noted that this offers an opportunity to ensure that more people are able to access specialist social care in relation to their mental health as at present, the current system means that there is a risk that people can normally only access the Mental Health Social Work Service if they also have high health needs in relation to their mental health.

### Staff bases

It is highly likely that staff would be based from different office locations across Somerset to which they are currently based, which on occasion may impact upon where customers access the service. There would also be changes to telephone numbers, addresses etc. that will need to be communicated to customers. The full scale / impact of these changes are not yet known and would be dependent on the design of the new service model.

### Conclusion

This impact assessment has identified that there are a number of potential implications which may impact upon customers, carers and families, staff and other organisations / services. These relate to delivering a service in a different way, and not to reducing the level of provision. The exact scale of these impacts are in many circumstances unknown until further work is undertaken to both improve the information available to inform the assessment and a new service model developed. This proposal brings a mix of implications which in some circumstances, if poorly managed, have the potential to adversely impact customers, particularly given that customers accessing the service will often be unwell, vulnerable and / or in crises.

It is therefore vital that these potential implications are managed through the development and implementation of a comprehensive project plan, which will include the design of a new service model, as well as transitional arrangements from the existing arrangements to a new structure. This will be undertaken with the involvement of SOMPAR and Somerset Clinical Commissioning Group (CCG) to ensure that any changes for customers are minimised / mitigated and that their wellbeing and safety is maintained at all times. Relationships between organisations and services will be a key element of ensuring successful implementation and this will be supported through robust governance arrangements. Staff will be involved in the development of the new service model to ensure that their views and feedback are taken in to consideration and that they are supported through the transition.

It is concluded that the proposal brings with it a number of opportunities to have a positive impact from an equalities perspective, but that is conditional on the effective design and implementation of a new service model and the transfer from existing arrangements to a new structure.

In addition, it has been identified that successful implementation will also be dependent upon effective and timely communication with all stakeholders, including customers, staff, SOMPAR, Somerset CCG and other services that link with the Mental Health Social Work Service. As such a communications plan will also be developed within the project to

ensure that there is timely, accessible and appropriate communications with all necessary stakeholders throughout the process.

If you have identified any negative impacts you will need to consider how these can be mitigated to either reduce or remove them. In the table below let us know what mitigation you will take. (Please add rows where needed)			
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions? When will the action be completed?	How will it be monitored? What is the expected outcome from the action?
Age			
Existing information held by SCC is not up to date so it is not possible to fully understand the needs of the customer group.	Work with SOMPAR to update information held by SCC. Train staff to use SCC information systems for future recording purposes.	SCC Commissioners / Operations / Information Management — timescales to be confirmed	Project plan. Up to date and accurate information on SCC systems.
Low number of young people recorded as using the service, so concerns that this age group are not being effectively supported.	New service model to ensure that there are appropriate resources and care pathways in place for young people / adults transitioning from children's services.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Young adults are well supported to access the service and receive the care and support that they require.
Current service structure is based around customer age groups, which limits flexibility if there are changing needs / demands within the specific customer groups and/or staff groups.	New service model to consider more flexible service / staffing structure to respond to changing needs/demand across age groups.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Customers are supported by a service that is flexible to meet their needs, irrespective of age.
Need to ensure that a service is being providing that is age appropriate for all groups, including older people with functional mental health conditions, and which understands individuals' needs, identities and desired outcomes in life.	New service model and workforce development plan to ensure that service and workforce are responsive and able to meet the needs of all customers.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Customers are supported by a service that is flexible to meet their needs, irrespective of age.
Disability			
Existing information held by SCC is not up to date or complete so it is not possible to fully understand the needs of the customer group.	Work with SOMPAR to update information held by SCC. Train staff to use SCC information systems for future recording purposes.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Up to date and accurate information on SCC systems.

If you have identified any negative impacts you will need to consider how these can be mitigated to either reduce or remove them. In the table below let us know what mitigation you will take. (Please add rows where needed)

Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions? When will the action be completed?	How will it be monitored? What is the expected outcome from the action?
Customers will have varying communication and access requirements, dependent on their disability and / or health condition.	Changes to the service are undertaken in a way that takes into account the different communication and access requirements of customers and reasonable adjustments are made where appropriate.	SCC Commissioners / Operations — timescales to be confirmed	Customers are communicated with and able to access the service in a manner that is meaningful and accessible to them.
Current service structure is based around customer age groups, which may not best meet the needs of customers in relation to their disabilities and / or health conditions, particularly where young people have conditions associated with old age e.g. dementia and older people have functional mental health conditions.	New service model to consider more flexible staffing structure to respond to individuals' holistic needs, rather than their age.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Customers are supported by a service that is flexible to meet their needs.
Need to ensure that a service is being provided for all customers, irrespective of diagnosis or disability, which understands individuals' needs, identities and desired outcomes in life.	New service model and workforce development plan to ensure that service and workforce are responsive and able to meet the needs of all customers.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Customers are supported by a service that is flexible to meet their needs.
Gender Reassignment			
This information is not currently routinely recorded by SCC so it is not possible to fully understand the needs of the customer group.	Work with SOMPAR to update information held by SCC. Train staff to use SCC information systems for future recording purposes.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Up to date and accurate information on SCC systems.

If you have identified any negative impacts you will need to consider how these can be mitigated to either reduce or remove them. In the table below let us know what mitigation you will take. (Please add rows where needed)			
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions? When will the action be completed?	How will it be monitored? What is the expected outcome from the action?
Need to ensure that a service is being provided for all customers, which understands individuals' needs, identities and desired outcomes in life.	New service model and workforce development plan to ensure that service and workforce are responsive and able to meet the needs of all customers, including how gender identity issues may impact upon an individual and their identity and life.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Customers are supported by a service that is flexible to meet their needs.
Marriage and Civil Partner	ship		
Existing information held by SCC is not up to date or complete so it is not possible to fully understand the needs of the customer group.	Work with SOMPAR to update information held by SCC. Train staff to use SCC information systems for future recording purposes.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Up to date and accurate information on SCC systems.
Pregnancy and Maternity			
This information is not currently routinely recorded by SCC so it is not possible to fully understand the needs of the customer group.	Work with SOMPAR to update information held by SCC. Train staff to use SCC information systems for future recording purposes.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Up to date and accurate information on SCC systems.
Need to ensure that a service is being provided for all customers, which understands individuals' needs, identities and desired outcomes in life.	New service model and workforce development plan to ensure that service and workforce are responsive and able to meet the needs of all customers.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Customers are supported by a service that is flexible to meet their needs.
New and soon to be mothers may require support from a range of services, including adults and children's services.	Develop clear pathways and referral routes between relevant services.	SCC Commissioners / Operations — timescales to be confirmed	Project plan. Customers are supported by a service that is flexible to meet their needs.

If you have identified any negative impacts you will need to consider how these can be mitigated to either reduce or remove them. In the table below let us know what mitigation you will take. (Please add rows where needed)			
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions? When will the action be completed?	How will it be monitored? What is the expected outcome from the action?
Race (including ethnicity or	national origin, colour, natior	nality and Gypsies and	Travellers)
Existing information held by SCC is not up to date so it is not possible to fully understand the needs of the customer group.	Work with SOMPAR to update information held by SCC. Train staff to use SCC information systems for future recording purposes.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Up to date and accurate information on SCC systems.
Customers whose first language is not English will have different communication needs to the majority of customers in relation to any potential changes to the service.	Changes to the service are communicated in a way that is personalised to the needs of customers and reasonable adjustments are made where required.	SCC Commissioners / Operations – timescales to be confirmed	Customers are communicated with in a manner that is meaningful and accessible to them.
Need to ensure that a service is being provided for all customers, which understands individuals' needs, identities and desired outcomes in life.	New service model and workforce development plan to ensure that service and workforce are responsive and able to meet the needs of all customers, including how ethnicity may impact upon an individual and their identity and life.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Customers are supported by a service that is flexible to meet their needs.
Individuals from non-White British ethnicities are under-represented within the customer group.	In developing the new service model, consider how it engages with local black and minority ethnic (BAME) communities to ensure that mental health is well understood, that stigma about mental health is addressed, and that people are aware of the range of support and care options available to people.	SCC Commissioners / Operations — timescales to be confirmed	Project plan. Individuals from BAME communities who are experiencing mental health issues are supported appropriately.

If you have identified any negative impacts you will need to consider how these can be mitigated to either reduce or remove them. In the table below let us know what mitigation you will take. (Please add rows where needed)			
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions? When will the action be completed?	How will it be monitored? What is the expected outcome from the action?
Religion and Belief			
Existing information held by SCC is not up to date or complete so it is not possible to fully understand the needs of the customer group.	Work with SOMPAR to update information held by SCC. Train staff to use SCC information systems for future recording purposes.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Up to date and accurate information on SCC systems.
Need to ensure that a service is being provided for all customers, which understands individuals' needs, identities and desired outcomes in life.	New service model and workforce development plan to ensure that service and workforce are responsive and able to meet the needs of all customers, including how religion may impact upon an individual and their identity and life.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Customers are supported by a service that is flexible to meet their needs.
Sex			
Existing information held by SCC is not up to date so it is not possible to fully understand the needs of the customer group.	Work with SOMPAR to update information held by SCC. Train staff to use SCC information systems for future recording purposes.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Up to date and accurate information on SCC systems.
Need to ensure that a service is being provided for all customers, which understands individuals' needs, identities and desired outcomes in life.	New service model and workforce development plan to ensure that service and workforce are responsive and able to meet the needs of all customers.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Customers are supported by a service that is flexible to meet their needs.
Sexual Orientation			
Existing information held by SCC is not up to date or complete so it is not possible to fully understand the needs of the customer group.	Work with SOMPAR to update information held by SCC. Train staff to use SCC information systems for future recording purposes.	SCC Commissioners / Operations — timescales to be confirmed	Project plan. Up to date and accurate information on SCC systems.

If you have identified any negative impacts you will need to consider how these can be mitigated to either reduce or remove them. In the table below let us know what mitigation you will take. (Please add rows where needed)			
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions? When will the action be completed?	How will it be monitored? What is the expected outcome from the action?
Need to ensure that a service is being provided for all customers, which understands individuals' needs, identities and desired outcomes in life.	New service model and workforce development plan to ensure that service and workforce are responsive and able to meet the needs of all customers, including how sexual orientation may impact upon an individual and their identity and life.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Customers are supported by a service that is flexible to meet their needs.
Other (including caring resp	onsibilities, rurality, low inco	me, Military Status etc)	
Existing information held by SCC is not up to date so it is not possible to fully understand the needs of the customer group.	Work with SOMPAR to update information held by SCC. Train staff to use SCC information systems for future recording purposes.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Up to date and accurate information on SCC systems.
Need to ensure that the service is working with carers and family members as equal partners in care.	New service model and workforce development plan to ensure that service and workforce are skilled and supported to involve carers and family members in the care and support of customers, as and when appropriate.	SCC Commissioners / Operations — timescales to be confirmed	Project plan. Carers are valued in their caring and support role.
The needs of carers are understood by the service and carers are supported to access services in their own right and continue caring should they wish to do so.	New service model and workforce development plan to ensure that service and workforce are skilled and supported to support carers and family members in their own right.	SCC Commissioners / Operations – timescales to be confirmed	Project plan. Carers are supported in their caring and support role.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

The next steps will be dependent upon the decision to be made by Cabinet in relation to the MTFP proposal. If agreed, the assessment and associated workstreams will be overseen by the project plan and management arrangements.

Completed by:	Rhian Bennett
Date	05.01.16
Signed off by:	Tim Baverstock
Date	20.01.16
Compliance sign off Date	19.01.16
To be reviewed by: (officer name)	Rhian Bennett
Review date:	08.03.16

#### **Impact Assessment Form and Action Table 2015**

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

## **Baroness Thornton, March 2010**

## Why are you completing the Impact Assessment?

**MTFP** 

What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?

MTFP R16-005c

## **Section 1 – Description** of what is being impact assessed

As part of the MTFP the service is required to achieve a 6% (Total - £105,000 = Year 1 £95,000 and Year 2 £10,000) reduction in spend to respond to reductions in central government funding. The service's spend is predominantly on human capital and so scope for spend reduction is limited to those areas over which the service exerts greater control, being staff and advice costs. A reduction in staff costs will have an impact on service delivery and will inhibit the extent to which the Commercial and Procurement Team is able to deliver commercial benefits back to SCC over and above its cost base. As such, the team has sought to consider both staff reduction options through restructure/vacancy freeze and generating income in order to offset the budget reduction requirement.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

Each Service will be expected to complete an Impact Assessment on the impact of Mid-Term Financial Plan 2012/13 on customers/clients/service users etc which will be shared with unions at Directorate Joint Consultative Committees.

Implications of MTFP 2016/17 for staff in relation to Equality and Diversity will be dealt with corporately by the HR Policy Manager in association with the HR Group Managers

#### **Section 2B** – People who are **delivering** the policy or service

A reduction in staff costs will have an impact on service delivery and will inhibit the extent to which the Commercial and Procurement Team is able to deliver commercial benefits back to SCC over and above its cost base. As such, the team has sought to consider both staff reduction options through restructure/vacancy freeze and generating income in order to offset the budget reduction requirement.

#### **Section 3 – Evidence and data** used for the assessment (Attach documents where appropriate)

Consultation will need to be through discussion with services the team support and how demand and work programme can be delivered within less resource available within the team.

Impacts and mitigations A	ction Table		
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions? When will the action be completed?	How will it be monitored? What is the expected outcome from the action?
Age:			
Disability:			
Gender Reassignment:			
Marriage and Civil Partnership:			
Pregnancy and Maternity:			
Race (including ethnicity or national origin, colour, nationality and Gypsies and Travellers):			
Religion and Belief:			
Sex:			
Sexual Orientation:			
Other (including caring responsibilities, rurality, low income, Military Status etc):			

Section 4 – Conclusions drawn about the equalities impact of the proposed change or new service/policy (Please use prompt sheet in the guidance for help with what to consider):

Having considered this we feel there is no impact because a work programme will be aligned to resource available be developed with the services the team provide advice and support to

Section 5 – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

N/A

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

As the saving is purely on staff and it will not affect service then an impact assessment would not be needed as this will be picked up through the central consideration of impacts being completed by HR

Completed by: Donna Fitzgerald			a Fitzgerald		
Date		06 January 2016			
Signed off by:	Signed off by:				
Date		January 2016			
Compliance sign off D	ate	January 2016			
To be reviewed by: (officer name)		Donn	a Fitzgerald		
Review date:		January 2017			
Version	1	Date Jan 2016			Jan 2016

#### Impact Assessment Form and Action Table 2014 - 2016

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

## **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?						
Proposed New Policy or Service	Change to Policy of Service		MTFP or Paper	Service Review or SCC Change Programme		
			X			
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		sa	arning Disability Provi vings target FP R16-006	der Service MTFP		

## **Section 1 – Description** of what is being impact assessed

This document assesses the impact of the actions linked to achieving a net MTFP efficiency target of £518,200 (gross £690,900 including CCG share of the pooled budget).

These actions include

- To continue with the transfer of services from a Residential model to a Supported Living model. This will reduce operating costs incurred by SCC
- Identifying and implementing leaner business processes, for examples streamlining administration, and delegating decision making authority.
- Deploying staff between teams more efficiently through use of a cluster working model
- Continuing to manage down staff absence rates
- Continuing to improve recruitment and retention of staff, thereby reducing the need to use overtime or agency staff

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

Adults with learning disabilities who receive services and support from the Learning Disability Provider Service could be directly affected. The service supports 1,128 adults with learning disabilities in total. Some people have physical disabilities in addition to learning disabilities

The rationale for changing services from Residential to supported living is outlined in the attached report. Where services are changed from residential to supported living, while there may be some short term disruption if building works are undertaken, people are expected to receive the same levels of support from the same locations after building works are complete. There are likely to be significant benefits in terms of an improved living environment, increased personal income and increased choice and

control. Between 30 and 40 people are likely to be impacted by the proposed changes. Specific decisions will be made for specific service changes, and the impacts assessed and planned for within this process. Where people do not have the capacity to make choices about these matters, and where there are not appropriate people such as relatives to act as advocates, best interests assessments, as outlined in the Mental Capacity Act would be undertaken, and advocacy involved to ensure appropriate decision making.

Impacts on customers and carers of actions to deliver savings in other areas are not expected to be significant as savings are based of efficiencies, not on stopping delivering any services. People's access to services is not expected to change as a consequence of these proposals.

## Section 2B – People who are delivering the policy or service

Staff employed within the LDPS could be affected. The service employs 1,127 FTE staff. There are more women employed than men. No compulsory or voluntary redundancies are expected as a consequence of the proposals.

No significant long term impacts on staff are expected from changing services from residential to supported living, although there might be short term disruption if service delivery has to move to a different location while building works are undertaken. More effective recruitment and absence management are expected to have a positive impact for individual staff and the workforce as a whole.

Cluster working and deploying staff more efficiently may require more flexibility from staff in terms of the location they work from or the times they work. However impact is not expected to be significant.

# **Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

Activity and staffing data held by the service have been used to identify numbers who could potentially be affected by the proposals. Overall numbers of customers and staff have been outlined above. While potentially all staff could be affected from more flexible deployment through cluster working, in reality this is likely to affect a small proportion of staff. It is not possible to quantify this at this stage, but it would be unlikely for more than 10% of staff to be requested to work flexibly.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

#### **Community Safety**

No impacts on community safety have been identified at this time

#### **Equality**

Changing services from residential to supported living is expected to have a positive impact for people with learning disabilities who use services, and a neutral impact for staff. The transition phase may have some negative impacts, which have been mitigated in previous transfers through good planning, It is envisaged that people will be supported from the same location once building improvements have been completed, resulting in an improved living and working environment Effective absence management and recruitment is expected to have a positive impact for staff. This is because there will be fewer requests for staff to work additional hours or provide last minute cover for services. The LD Services has invested in an improved absence management system that ensures SCC policies are followed

effectively, including support for staff reporting as sick, and prompt return to work interviews. All existing reasonable adjustment and family friendly policies will continue to be applied

Cluster working and efficiency measures are expected to have a largely neutral impact on staff. Impacts on staff who are asked to work more flexibly would be managed on an individual basis, applying SCC policies, such as payment for additional travel costs incurred

The LDPS has a system of staff meetings through which to communicate with staff, was well as monthly JCC meetings with Unions to ensure changes are consulted on and implemented sensitively. Any specific changes will be individually discussed with staff in order to take into account their personal circumstances. The LDPS supports a network of speaking up groups with its customers, so it can consult on proposals, It also links in with carers groups to consult on any changes.

The service uses skills in Somerset Total Communication to ensure any information is presented in accessible formats

#### **Health and Safety**

Any planned property or service delivery changes would be assessed to ensure that health and safety implications were taken into account before changes were implemented

#### **Health and Wellbeing**

Changing services from Residential to Supported Living could potentially have a positive impact on the health and wellbeing of people using those services because they are living in a property that is more fit for purpose; they have a higher disposable income; and they have more choice and control over their lives.

Managing staff absence better, and improving recruitment could potentially have a positive impact on the health and wellbeing of staff through reducing pressures on staff to work additional hours, and helping them maintain a good work/life balance.

No health and wellbeing impacts for utilising leaner working practices have been identified at this time.

Flexible working for staff could have a negative impact on some staff if it gave rise to increased levels of anxiety in the workplace.

## **Privacy**

Any redesign of buildings used by the service would need to consider privacy issues

#### Sustainability

No impacts on sustainability have been identified at this time

#### Risk

Failure to make services efficient and cost effective would involve a business risk for the long term viability of the service. This is not been identified to be a significant risk at this time.

#### Risk 1

Delivery of planned efficiencies from changing services from residential services to supported living would be compromised without capital investment from the Council for unfunded property improvements

A capital bid has been submitted to mitigate this risk

Likelihood	3	Impact	4	Risk Score	12
Risk 2					

Some changes to supported living are not achieved within timescales leading to delay in achieving savings

Capacity to manage the changes, and clear delivery plans are in place to mitigate this risk

Likelihood 3 Impact 3 Risk Score 9

Risk 3

Delivery of savings is negatively impacted if there is a failure or delay in procuring a delivery partner for the social enterprise

Impact is mitigated because most savings are not dependent on selection of a partner, and partner is

Likelihood 3 Impact 2 Risk Score 6

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

In order to ensure any the impacts of specific residential to supported living service transfers are fully considered, it is planned that these are treated as specific officer decisions. The particular impacts for customers and staff will be considered and planned for at the time of each decision, and all stakeholders be involved in the consultation undertaken. Previous examples of these types of transfer have led to positive outcomes resulting from the changes.

Asking staff to be deployed more flexibly across clusters could cause anxiety for staff working in unfamiliar settings. This could be mitigated through individual discussions with staff and using the service's supervision and training opportunities. The service will adhere to SCC policies in order to give due regard to the protected characteristics of any staff within such individual discussions and plans published.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

Specific decisions to change particular services from residential to supported living will be taken as officer key decisions.

Progress on implementing the proposed savings and any arising impacts will be monitored through existing management meetings

Completed by:		David Dick			
Date		09 October 2015			
Signed off by:		David Dick			
Date		09 October 2015			
Compliance sign off	Date	30 Oc	ctober 2015		
To be reviewed by:	(officer name)	David	l Dick		
Review date:		September 2016			
Version	1		Date		October 2015

	Equality Im	pact Assessment Issu	es and Action Tabl	е	
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age					
No age related negative impacts for customers have been identified					
The majority of carers of adults with learning disabilities known to SCC are aged 65+	Relatives will be involved in any residential to supported living changes planned for particular services we provide to people we support	David Dick Operations Director, LD Services	When changing a particular service from Residential to Supported Living is proposed	Through the change plan	Relatives support the changes
Disability					,
All service users have learning disabilities. Many will be unable to self advocate or give informed consent to any proposed changes from residential to supported living	1) Social workers will be asked to oversee individual proposals, and assure themselves that any service changes will both meet people's needs and are in their best interests. Where applicable an Independent Mental Capacity Advocate assessment would be required.	Nominated manager for particular change.	As set out within the particular plan.	Through the change plan	People are involved in decisions made about their services, and these decisions can be demonstrated to be in their best interests

designed to take account of the additional accessibility needs of current service users better as well as be accessible to people with higher mobility needs in the future  Gender Reassignment  No impacts identified To be dealt with on an individual basis if ssues arise  Marriage and Civil Partnership  No impacts identified  Pregnancy and Maternity  No impacts identified  Race (including ethnicity or national origin, colour, nationality and Gypsies and Travellers)	T				
No impacts identified To be dealt with on an individual basis if saues arise  Marriage and Civil Partnership  No impacts identified  Pregnancy and Maternity  No impacts identified  Race (including ethnicity or national origin, colour, nationality and Gypsies and Travellers)	Building improvements need to take account of the additional accessibility needs of service users	involved where appropriate, and encouraged to act as advocates. Where this is not possible alternative arrangements will be sought  3) Building changes will be designed to meet the accessibility needs of current service users better as well as be accessible to people with higher mobility needs in			
To be dealt with on an Individual basis if saues arise  Marriage and Civil Partnership  No impacts identified  Pregnancy and Maternity  No impacts identified  Race (including ethnicity or national origin, colour, nationality and Gypsies and Travellers)	Gender Reassignment				
No impacts identified  Pregnancy and Maternity  No impacts identified  Race (including ethnicity or national origin, colour, nationality and Gypsies and Travellers)	No impacts identified To be dealt with on an individual basis if issues arise				
Pregnancy and Maternity No impacts identified Race (including ethnicity or national origin, colour, nationality and Gypsies and Travellers)	Marriage and Civil Part	nership			
No impacts identified  Race (including ethnicity or national origin, colour, nationality and Gypsies and Travellers)	No impacts identified				
Race (including ethnicity or national origin, colour, nationality and Gypsies and Travellers)	Pregnancy and Materni	ty			
	No impacts identified				
No impacts identified	Race (including ethnicity	or national origin, colour, nation	nality and Gypsies and	Travellers)	
·	No impacts identified				
Religion and Belief	Religion and Belief				

## (Cabinet Member Key Decision – 9 November 2015)

No impacts identified						
Sex						
Staffing changes are more likely to have an impact on women, due to the gender mix of the workforce.	County HR policies will be followed to ensure that appropriate considerations are made when any redeployment or flexible working of staff is considered.	Nominated manager for particular change	As set out within the particular change plan	Through the plan	Impacts will be mitigated where possible	
Sexual Orientation						
No impacts identified						
Other (including caring responsibilities, rurality, low income, Military Status etc)						
No impacts identified						

Health and Safety, Sustainability, Community Safety Impact Assessment Issues and Action Table							
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?		
	Health	and Safety Issues and	d Action Table				
Adapted properties meet the health and safety requirements for tenants/residents and staff	Consider these within any refurbishment proposals	Nominated manager for that particular change	As set out within the particular change plan	Through the plan	Properties are fit for purpose		
	Sust	tainability Issues and A	Action Table	I			
No impacts identified							
	Comm	unity Safety Issues and	d Action Table	L	1		
No impacts identified							
	P	rivacy Issues and Acti	on Table				
Properties that are changed from residential to supported living meet the privacy requirements for tenants/residents and staff	Implement systems and processes currently used in supported living services ensure security of paper files and electronic files for customers and staff	Nominated manager for that particular change	As set out within the particular change plan	Through the plan	Properties are fit for purpose		

#### **Impact Assessment Form and Action Table 2014 - 2016**

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

## **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?						
Proposed New Policy or Service	Change to Policy	or or	MTFP or Paper  Proposed reduction in the provision of leisure services	Service Review or SCC Change Programme		
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		М٦	ΓFP R16-007			

#### Section 1 – Description of what is being impact assessed

The County Council has a 10 year contract with leisure provider 1610 (running until March 2019) to provide community leisure at 10 shared locations across Somerset. The contract includes SCC giving 1610 an annual management fee. The MTFP proposal is to reduce this contribution by 50% (specifically £518,000). This assessment is to consider the impact of this management fee reduction.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

The leisure provision contracted by SCC is aimed at community use. Whilst the facilities are on shared sites with schools the school makes use of facilities during school hours. Use/Services are not specific for any targeted area, and as such no protected characteristic should be impacted more than any other.

## **Section 2B** – People who are **delivering** the policy or service

The service is delivered by 1610 staff in 10 locations across Somerset.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

An Efficiency Savings Notice has been issued to 1610 and they are obligated to provide information on how the proposed saving is to be achieved within 20 working days. We are waiting for this information to be received; until we get more detail this

current assessment of impacts can only be fairly general.

The assessment will be reviewed and updated once more detail is received.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

## **Community Safety**

There are no identifiable community safety implications.

## **Equality**

It is possible that a change in service standards to accommodate this proposed level of saving will reduce work in certain areas where 1610 aim to provide services that meet the needs of various elements of society. This, if it transpires, could be detrimental to the ability of certain elements of society to access the services provided. However, until the detail of the proposed changes are made clear it is not possible to accurately assess the potential implications.

## **Health and Safety**

- Depending on the proposed measures to meet the proposed saving:
  - The health and safety of the community (specifically the clients) may be put at risk where staff reductions may lower the level of H&S at some/all of the sites managed by 1610.
  - This level of saving is likely to mean a significant level of change to the service provided by 1610. Proper assessment will be done once the detail of the proposed changes to service are provided by 1610.
- However, a full assessment will be undertaken once details of the proposed measures are received.

## **Health and Wellbeing**

Any reduction in service, or closure of facility/facilities, is likely to have an impact upon the health and wellbeing of the community in close proximity to the 10 service locations provided by 1610.

1610's performance relating to a range of key performance indicators, and specified outcomes, is monitored regularly. Improvement in Health and Wellbeing are at the core of their activities. It is likely, depending on the proposed changes in service, that this performance could suffer as a result of a 50% reduction in management fee contribution from SCC.

Until the detail of the proposed changes to service are provided by 1610 it is difficult to assess the impact of the proposal upon health and wellbeing, and a fuller assessment will be conducted when the details are received.

#### **Privacy**

There are no identifiable privacy implications.

#### Sustainability

The reduction of the management fee could potentially have an impact upon the sustainability of 1610 and the company's ability to effectively compete in the leisure industry in Somerset due to enforced changes. However, 1610 has to propose service

changes and SCC can then accurately consider these, in an effort to limit the detrimental impact of the resulting changes.

#### Risk

This risk assessment is based upon the impacts perceived, given the limited information/detail currently available about the measures that will be undertaken to address the proposed budget reduction.

The likelihood is based upon an impact that it is possible that there will be a negative impact of such a level of reduction, however the impact overall is not considered to be excessively serious. There will be a varying impact upon customers across the county – partially dependent on the alternatives available.

Until 1610 provide the details it is not possible to accurately assess the risk involved.

Likelihood	4	Impact	3	Risk Score	12
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**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

Full assessment of impact will take place once the detail of 1610's proposals are made clear.

SCC will assess each individual proposed change to the level of service and consider its impact, and whether it is acceptable or not. It is important to ensure that the effects are as limited as possible and that the company's ability to continue to serve the community is maintained as much as possible.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

The Impact Assessment will be updated once information is received from 1610 on the individual proposals for changes to the service.

This Assessment will be published in accordance with corporate requirements.

Completed by:			Barry James, Strategic Commissioning Manager (Community Infrastructure)		
Date		16 <sup>th</sup> N	lovember 2015		
Signed off by:		Paula	Hewitt		
Date		Nove	mber 2015		
Compliance sign of	Date	Nove	mber 2015		
To be reviewed by:	(officer name)	Barry	James		
Review date:		November 2015			
Version	0.1	•	Date	November 2015	

	Equality Im	pact Assessment Issu	es and Action Tal	ole	
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age				•	
A reduction in the service provided by 1610 could impact upon the health and wellbeing of adults in the county.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.
Disability					
A reduction in the service provided by 1610 could impact upon work undertaken by 1610 to provide services	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.
<b>Gender Reassignment</b>					
More information required for comprehensive assessment.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.

More information required for comprehensive assessment.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.
Pregnancy and Materi	nity				
More information required for comprehensive assessment.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.
Race (including ethnicit	y or national origin, colour, natio	nality and Gypsies and	Travellers)		
More information required for comprehensive assessment.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.
Religion and Belief					
More information required for comprehensive assessment.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.

Sex					
More information required for comprehensive assessment.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.
Sexual Orientation					
More information required for comprehensive assessment.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.
Other (including caring re	esponsibilities, rurality, low inco	ome, Military Status etc)			
Potential closure of sites in smaller settlements could have an impact upon a feeling of rurality, or on the ability of a settlement to provide all the services needed by a community. This will be dependent on the proposed measures to address the saving, detail which is pending.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.

Healt	Health and Safety, Sustainability, Community Safety Impact Assessment Issues and Action Table							
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?			
	Health	and Safety Issues and	d Action Table	·				
Potential for reductions in health and safety standards due to reduced funding/staffing or resources.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.			
	Sust	ainability Issues and A	Action Table					
The reduction in the management fee could impact upon the sustainability of the services provided by 1610.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610. SCC will work with 1610 to minimise impacts and to decide/agree the most acceptable and have the least negative impact.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.			
		unity Safety Issues an		Τ	Taura a la			
There should be any significant community	Full assessment will be undertaken once the detail	Any actions will be the responsibility of	To be agreed.	By monthly performance	Minimised or negated impact of			

safety issue (especially if health and safety considerations are properly taken into account). 1610 will need to ensure sufficient staff resources are present at their facilities to ensure community safety is sufficiently protected.	of the proposed changes to the service are submitted by 1610.	1610.		meeting, quarterly meetings and Leisure Commissioning Board.	the proposed budget reduction.
	Р	rivacy Issues and Acti	on Table		
More information required for comprehensive assessment.	Full assessment will be undertaken once the detail of the proposed changes to the service are submitted by 1610.	Any actions will be the responsibility of 1610.	To be agreed.	By monthly performance meeting, quarterly meetings and Leisure Commissioning Board.	Minimised or negated impact of the proposed budget reduction.

#### Impact Assessment Form and Action Table 2014 - 2016

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

## **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?								
Proposed New Policy or Service	Change to Policy or Service		MTFP or Paper	Service Review or SCC Change				
	OCIVICE		✓	Programme				
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		Re M1	ansporting Somerset duce Passenger Tran FFP Ref R16-009 (R1:	•				

## Section 1 – Description of what is being impact assessed

In line with the Medium Term Financial Plan 2016/17, the Transporting Somerset Group is required to make further savings on the passenger transport subsidy budget. Due to a continuing reduction in the amount of funding the Government provides the Council to run local services, and to manage competing demands for services that the Council is legally obliged to provide, Somerset County Council needs to review its allocation of funds for supported bus services.

SCC consulted on the withdrawal or reduction of a number of Public Transport routes. The consultation aimed to gain as many views as possible and was promoted to as many equality groups and members of the community as possible. Our proposed route changes are set out in **Appendix 1**.

Following this consultation a number of routes are now being recommended for withdrawal/reduction. **Appendix A** 

Increasingly difficult choices will need to be made about where we provide support in the future. Routes have been identified by the Council for possible reductions in financial support due to either:

- Availability of services on other days of the week or the location of alternative services.
- Low passenger use.
- Possible commercial replacement by public transport operators where passenger numbers make this viable.

The proposal is for some services to operate at a reduced frequency rather than SCC support being entirely withdrawn, to retain the ability for people to make journeys by public transport.

Some buses have low usage, especially when serving more rural areas or running at quieter times of the day. SCC needs to make sure that subsidised bus services:

- Go where people need them, enabling people to access essential services, such as education, employment, health services and essential shopping.
- Don't duplicate commercial bus services.
- Are prioritised for communities where the need for transport is greatest.

In the last 5 years SCC has reduced the public transport budget by over 50%. The routes remaining are required to maintain access between large settlements and most of these have significant student use to obtain access to college.

This round of savings will impact on current users but also impact on any future user growth in this area, reducing the ability to change travel patterns and reduce the carbon footprint in Somerset.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

The subsidised public transport service has already been reduced by over 50% during the previous 5 years. This round of savings will impact further on the bus travelling population and could impact on equalities groups as described below.

## Disability:

 Disability groups using these services across Somerset could experience indirect discrimination if services are withdrawn or reduced with a loss of independence and access to health & social care services

#### Age:

- Young people unable to access education, work placements or friends and family.
- Working population unable to access work locations.
- Retired individuals unable to move around Somerset and access health appointments.
- Young and Older residents risk more social isolation

#### Gender:

• Statistics show that women make the most use of public transport often completing escort journeys with young children. However, the most trips are made by women in the 17-20 and 60+ age groups.

#### **Social Economic**

Families and individuals who are considered low income may find that any
reduction in service directly affects their ability to access services including their
ability to attend work and interviews to gain employment due to the fact that
they are less likely to have a vehicle.

#### **Carers**

- There are a high proportion of carers within Somerset communities, with those
  who fall into the low income and female categories most at risk from bus
  subsidy reductions, as they will be most likely to utilise bus services.
- As disabled residents have less access to bus services they become more reliant on carers therefore reducing carers ability to work

## Rurality

Those people who live in rural parts of the county will be at higher risk than
those who live closer to bigger towns or major bus routes, as many of the rural
routes are not commercially viable without the subsidy and therefore are more
likely to cease completely.

## **Section 2B** – People who are **delivering** the policy or service

Public transport operators in Somerset have lost a number of subsidies over the last 5 years and some have indicated they are struggling financially to continue. It is likely that any further subsidy reduction will undermine the commercial routes operated by these contractors which could further reduce public transport in Somerset. This in turn would have an impact on staff employed by these transport companies.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

## Disability:

18.8% of people in Somerset have a limiting long-term illness.

#### Age:

The ages of Somerset residents are:

- education or pre education age (0-24) 28%
- approximate working age (25-65) 51%
- approximate pensionable age (65+) 21%

The overall age profile of residents in Somerset is changing with an increase in elderly retired residents, particularly in West Somerset.

These groups will be affected differently depending on services cut, changes to time of service and or routes.

#### Gender:

51.2% of the population of Somerset are female and 48.8% are male.

On average in the UK in 2012 males made 53 journeys per year using buses and females made 69.

#### Race:

94.6% of Somerset's population define themselves as 'White British'.

2.8% of Somerset's population can be defined as 'White Other'.

2% of Somerset's population can be defined 'Black and Ethnic Minority'

#### Social Economic:

Somerset currently has 15.9% of families with no cars or vans (this is a reduction from the 2001 census of almost 2%).

Although 80% of households in Somerset have a car, in most cases the main wage earner uses the car to access employment. Therefore public transport is relied on by the other members of the household to access services.

#### Carers

There are over 58,000 carers in Somerset, which constitutes 11% of the total population.

#### Consultation:

The results of the recent consultation regarding reductions in bus subsidy were analysed:-

Questionnaire responses – 1390

47% of respondents 65+ years of age

58% of respondents were female

34% of respondents have a disability or long term health condition

16% of respondents have caring responsibilities

31% travel to access shopping, 25% to access medical appointments, 25% to access social/leisure events and 11% to access work.

## Type of data used:

To inform all of the above the below sites were used.

## 2012 National Travel Survey

https://www.gov.uk/government/publications/national-travel-survey-2012

#### 2011 Census

http://www.somersetintelligence.org.uk/census-datasets.html

#### **Somerset County Council concessionary fares database:**

Based on 2014-15 data, there were just over 7.4 million trips on public transport in Somerset (registered public bus services) of which just over 4.1 million journeys were made by concessionary pass holders. There are currently 116,672 Concessionary Bus Passes in circulation, of which 111,672 have been awarded on age and 4,586 on disability. Gender information is not available.

SCC Bus Subsidies Reduction Consultation 2015/16

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

## **Community Safety**

It is acknowledged that with a reduction in bus subsidies, and the associated loss of bus routes that communities, especially those that are more rural, with residents without their own transport could find themselves isolated. This would then impact upon their quality of life and health as access to essential services would be affected. Therefore any further reduction in bus subsidies could isolate communities further and impact upon health and wellbeing.

There are implications for individuals with a disability as this group of individuals are less likely to drive and therefore more reliant on bus services to access health and social activities.

There are also potential implications for an increase in youth crime if younger people become isolated in areas.

This could also impact on community safety due to the higher cost of travel alternatives like taxis, meaning more people walk/cycle between villages/towns. This could potentially put them at risk of crime or becoming more fearful of the likelihood of being a victim of crime.

## **Equality**

The bus travelling population will be further affected by this proposal. This could impact on all equality groups, but significantly low income families, people who live rurally, females and older people reliant on these services to be able to:

- Access work, which could lead to the local economy suffering if alternatives to travel are not available.
- Access social events/family (thus potentially leading to social isolation).
- Access education.
- Access health appointments.

Disability groups using this service across Somerset could also be impacted if services are withdrawn or reduced. Many buses are disability friendly and may be the only accessible transport option.

Somerset residents who live more rurally will be at greater risk of having services reduced or ceased completely due to the non-commercial nature of the routes and therefore increasing rural isolation.

Younger people who cannot drive may become socially isolated as if they rely on buses to access education, training or social events, this reduction may prevent them doing so.

In regard race equalities, migrant workers could be particularly affected as they are more likely to rely on public transport to get around when they first arrive in the country.

Some of these impacts could then lead to an increased demand for social service provision, putting further strain on this already highly committed budget area.

#### **Health and Safety**

Considered with no impacts highlighted.

#### **Health and Wellbeing**

Reductions in public transport services without an increase in community service provision could contradict the health and wellbeing strategy vision "People live healthy and independent lives, supported by thriving and connected communities with timely and easy access to high-quality and efficient public services when they need them." Many people living rurally do not have access to all essential services within their communities and therefore have to travel to get to them and the inability to do this could leave them isolated, where their physical and mental state could suffer.

This is likely to impact upon the most vulnerable within communities who are on low income and have no access to a car, further widening health and social inequalities.

This could then affect further priorities within SCC's Health and Wellbeing strategy that families and communities are thriving and resilient and Somerset people are able to live independently for as long as possible, if members of communities become cut off within areas due to lack of public transport options.

## **Privacy**

Considered with no impact highlighted.

## **Sustainability**

This round of subsidy reductions will further impact on the access and use of public transport networks as a sustainable form of travel, reducing travel choice that do not rely on a car and therefore increase car usage, which for some without a public transport link may be one of the only alternatives.

There will be less opportunity to promote patronage in those areas affected by this proposal therefore reducing the ability to change travel patterns and reduce the carbon footprint in Somerset.

Fewer public transport links inter community and only between larger conurbations could impact upon the sustainability of an area local economy as people who rely on public transport may not be able to access local services and have to travel longer distances to larger towns to serve their needs.

Further reductions in public transport subsidy could impact on the sustainability of smaller public transport operators therefore reducing the viability to maintain commercial routes. It could also result in increased fare tariffs to maintain commercial routes.

#### Risk

There will be impacts upon SCC's County Plan, specifically in the areas of access to work and education if the current network is further reduced (Likelihood 3, Impact 2 = RAG score 6).

Reductions may also have an impact on tourism as visitors to Somerset may find it more difficult to travel around many areas of the county utilising the bus network. This in turn could increase the amount of car traffic on Somerset roads adding to air pollution (co2 emissions) and congestion (Likelihood 3, Impact 3 = RAG score 9).

A further risk if the network is reduced through public bus subsidy reductions is a legal challenge from individuals or groups with regard to the Transport Acts guidance on the provision of 'socially necessary' travel provided by local authorities (Likelihood 5, Impact 4 = RAG score 20).

The residents of Somerset's carbon footprint may also increase due to an increase in car use due to limited public transport alternatives (Likelihood 4, Impact 3 = RAG score 12)

Concern that people within communities who become isolated and unable to access essential amenities due to the reduction of discount will eventually require help from SCC's social services, putting further strain on this budget area. (Likelihood 3, Impact 2 = RAG score 6)

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

This round of proposed subsidy reductions will have further impacts on the already significantly reduced subsidised bus transport network including almost all of the remaining subsidised Saturday services. This will impact on more of the Somerset bus utilising population and affect the ability to promote the bus as a greener form of travel.

SCC is proposing to retain current Monday to Friday services on many routes, therefore maintaining people's ability to still travel on weekdays. This will help to mitigate the impact on education, health and social care services. SCC is also undertaking a consultation with all operators across Somerset to investigate the possibility of operators taking on routes commercially or identifying other ways in which services can still be provided by operators whilst achieving the required savings.

Further utilisation of SCC's 'Slinky' demand responsive network where there remains available capacity, is another way that communities without public bus access can still remain connected. Slinky routes are reviewed to ensure any new areas that may lose public bus routes, still have transport access. However this is a limited service as there are only generally two buses per district, so therefore a regular service may only constitute a once a week return journey.

Although some routes will have reduced frequency to daily service, the route itself will still continue thus maintaining transport links for those people and communities that use them.

Consultation up-date – There was a large response to the Reduction in Bus Subsidies consultation (1390, with 3 petitions) with a large proportion of respondents being over 65 years (47%) and female (58%) with a significant proportion indicating they had a disability or long term health condition (34%). The vast majority of the comments received throughout the consultation highlight concerns of people who feel they are potentially facing social isolation and an associated risk of diminished mental and physical wellbeing. Although only 11% (362) of respondents selected work as a reason for travel on their bus services, they too recorded apprehensions on what the reduction and/or cuts means in terms of their ability to work, several suggesting they would not be able to continue working as they do at present.

The consultation responses have been analysed alongside details of transport provision that will be in place following the proposed changes, with SCC taking due regard of the responses received, and the original proposals have therefore been amended for financial support in 2016/17 (as set out in Appendix A of the Cabinet decision papers) to ensure that communities retain access to basic services but not necessarily at the same time of day or frequency.

The consultation process was designed to encourage operators to come forward with proposals to take on the operation of some routes on a commercial basis (ie with no subsidy) Following meetings with operators some have indicated they may be willing to take on some of the routes commercially if we were to withdraw funding. .

The amended proposed changes will ensure that the available public transport budget continues to support those services that the Council considers are currently most essential in meeting transport needs that would otherwise be unmet by the commercial market.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

- The results of the consultation undertaken will be shared with the groups participating through email or letter.
- The assessment will be monitored and reviewed in 3 months time or earlier if

changes are made.

- All information will be published to Somerset County Council web page.
- A final decision will be taken at February 2016 cabinet meeting, the results being published as part of the minutes of this meeting.

Completed by:	Nicholas Margison					
Date			Updated 02/02/2016			
Signed off by:			Paula Hewitt			
Date		February 2016				
Compliance sign off	Date	Janua	ary 2016			
To be reviewed by: (	officer name)	Nicho	las Margison			
Review date:		Febru	ary 2017			
Version			Date			

	Equality Im	pact Assessment Issu	es and Action Tab	le	
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age					
Young/Old/Working age unable to access services. School children who are not eligible for free school transport unable to access educational establishments.	Use of SCC's 'Slinky' demand responsive transport service that operates predominantly in areas without public transport routes. The Slinky service is constantly being reviewed to take into account any new areas that lose bus services.  Subsidy reductions have been targeted to many Saturday services to minimise impact to those accessing work, education, health and social care services.  Commercial services may replace any lost subsidised routes.	SCC Transport Commissioners. Commercial operators.	The Slinky service is already available and reviewed on a regular basis.  Commercial services would plan to continue a subsidised route to coincide with the withdrawal in subsidy.	Through Slinky service usage statistics and quarterly operator meetings.  Through regular negotiations with commercial operators.	Somerset residents are still able to access essential services, work and education.
Disability					
The bus utilising disability population	Use of SCC's 'Slinky' demand responsive	SCC Transport Commissioners.	The Slinky service is already	Through Slinky service usage	Somerset residents are still able to

unable to access services.	transport service that operates predominantly in areas without public transport routes. All of the service vehicles are accessible.  Subsidy reductions have been targeted to many Saturday services to minimise impact to those accessing work, education, health and social care services.  Commercial services may replace any lost subsidised routes.	Commercial operators.	available and reviewed on a regular basis.  Commercial services would plan to continue a subsidised route to coincide with the withdrawal in subsidy.	statistics and quarterly operator meetings.  Through regular negotiations with commercial operators.	access essential services, work and education.
Gender Reassignment					
Considered with no impact highlighted.					
Marriage and Civil Part	nership				
Considered with no impact highlighted.					
Pregnancy and Matern	ity	l		1	1
Considered with no impact highlighted.					

Race (including ethnicity	or national origin, colour, nation	onality and Gypsies and	Travellers)		
Migrant workers unable to access work and services.	Use of SCC's 'Slinky' demand responsive transport service that operates predominantly in areas without public transport routes. All of the service vehicles are accessible.  Subsidy reductions have been targeted to mainly Saturday services to minimise impact to those accessing work, education, health and social care services.  Commercial services may replace any lost subsidised routes.	SCC Transport Commissioners. Commercial operators.	The Slinky service is already available and reviewed on a regular basis.  Commercial services would plan to continue a subsidised route to coincide with the withdrawal in subsidy.	Through Slinky service usage statistics and quarterly operator meetings.  Through regular negotiations with commercial operators.	Somerset residents are still able to access essential services, work and education.
Religion and Belief					
Considered with no impact highlighted.					
Sex					
Females, significantly single mothers and carers impacted.	Use of SCC's 'Slinky' demand responsive transport service that operates predominantly in areas without public	SCC Transport Commissioners. Commercial operators.	The Slinky service is already available and reviewed on a regular basis.	Through Slinky service usage statistics and quarterly operator meetings.	Somerset residents are still able to access essential services, work and education.

	transport routes. All of the service vehicles are accessible.  Subsidy reductions have been targeted to mainly Saturday services to minimise impact to those accessing work, education, health and social care services.  Commercial services may replace any lost subsidised routes.		Commercial services would plan to continue a subsidised route to coincide with the withdrawal in subsidy.	Through regular negotiations with commercial operators.	
<b>Sexual Orientation</b>					
Considered with no impact highlighted.					
Other (including caring re	esponsibilities, rurality, low inco	ome, Military Status etc)	Low Income		
Low income individuals and families affected as they are more likely to be using the bus network and less likely to have a car.	Use of SCC's 'Slinky' demand responsive transport service that operates predominantly in areas without public transport routes. All of the service vehicles are accessible.  Subsidy reductions have been targeted to mainly Saturday services to	SCC Transport Commissioners. Commercial operators.	The Slinky service is already available and reviewed on a regular basis.  Commercial services would plan to continue a subsidised route to coincide with the	Through Slinky service usage statistics and quarterly operator meetings.  Through regular negotiations with commercial operators.	Somerset residents are still able to access essential services, work and education.

	minimise impact to those accessing work, education, health and social care services.  Commercial services may replace any lost subsidised routes.		withdrawal in subsidy.		
Other (including caring r	esponsibilities, rurality, low inco	ome, Military Status etc)	Carers		
Carers impacted, especially those in the low income and female groups as they are more likely to use public transport services.	Use of SCC's 'Slinky' demand responsive transport service that operates predominantly in areas without public transport routes. All of the service vehicles are accessible.  Subsidy reductions have been targeted to mainly Saturday services to minimise impact to those accessing work, education, health and social care services.  Commercial services may replace any lost subsidised routes.	SCC Transport Commissioners.  Commercial operators.	The Slinky service is already available and reviewed on a regular basis.  Commercial services would plan to continue a subsidised route to coincide with the withdrawal in subsidy.	Through Slinky service usage statistics and quarterly operator meetings.  Through regular negotiations with commercial operators.	Somerset residents are still able to access essential services, work and education.

Other (including caring responsibilities, rurality, low income, Military Status etc) Rurality						
Somerset residents who live more rurally will be affected as subsidised services tend to be rural in nature.	Use of SCC's 'Slinky' demand responsive transport service that operates predominantly in areas without public transport routes. All of the service vehicles are accessible.  Subsidy reductions have been targeted to mainly Saturday services to minimise impact to those accessing work, education, health and social care services.  Commercial services may replace any lost subsidised routes.	SCC Transport Commissioners.  Commercial operators.	The Slinky service is already available and reviewed on a regular basis.  Commercial services would plan to continue a subsidised route to coincide with the withdrawal in subsidy.	Through Slinky service usage statistics and quarterly operator meetings.  Through regular negotiations with commercial operators.	Somerset residents are still able to access essential services, work and education.	

Health and Safety, Sustainability, Community Safety Impact Assessment Issues and Action Table						
Areas of increased risk drawn from your conclusions  Actions needed – can you mitigate the impacts/risk?  If you can how will you mitigate the impacts?		Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?	
Health and Safety Issues and Action Table						
Considered with no impact highlighted.						

Sustainability Issues and Action Table						
Risk of increased car use due to a decrease in travel choices which impacts on pollution and therefore climate change.  Fewer inter community transport links impacting on the sustainability of the local area economy.	Use of SCC's 'Slinky' demand responsive transport service that operates predominantly in areas without public transport routes. All of the service vehicles are accessible.  Subsidy reductions have been targeted to mainly Saturday services to minimise impact to those accessing work, education, health and social care services.  Commercial services may replace any lost subsidised routes.	SCC Transport Commissioners. Commercial operators.	The Slinky service is already available and reviewed on a regular basis.  Commercial services would plan to continue a subsidised route to coincide with the withdrawal in subsidy.	Through Slinky service usage statistics and quarterly operator meetings.  Through regular negotiations with commercial operators.	Somerset residents are still able to access essential services, work and education.	
Community Safety Issues and Action Table						
Increased isolation for individuals within communities who rely on the public transport service to access services and events leading to impacts on quality of life and health.	Use of SCC's 'Slinky' demand responsive transport service that operates predominantly in areas without public transport routes. All of the service vehicles are accessible.	SCC Transport Commissioners. Commercial operators.	The Slinky service is already available and reviewed on a regular basis.  Commercial services would	Through Slinky service usage statistics and quarterly operator meetings.  Through regular negotiations with commercial	Somerset residents are still able to access essential services, work and education.	

Increase in youth crime due to young people being isolated in their communities.  Impacts on community safety if more individuals walk/cycle between villages/towns.	Subsidy reductions have been targeted to mainly Saturday services to minimise impact to those accessing work, education, health and social care services.  Commercial services may replace any lost subsidised routes.		plan to continue a subsidised route to coincide with the withdrawal in subsidy.	operators.		
Privacy Issues and Action Table						
Considered with no impact highlighted.						

## Appendix 1 – Consultation Proposals for reducing or withdrawing subsidy on bus services

Route No	Service Details	Operator	Days Operated	Frequency	Proposal
1	Yeovil – Shepton Mallet	South West Coaches	Mon – Sat	5 return journeys per day.	Withdraw Saturday service – Mon to Fri services remain.
6	Bridgwater Town Service	Bakers Dolphin	Mon - Fri	Hourly between 9am – 2pm	Withdraw service – Alternative services are available within walking distance, and for those unable to access these, SCC's demand responsive transport (Slinky service) and community transport is available.
16	Langport - Bridgwater	Hatch Green Coaches	Mon – Sat	Every 2 hours	Withdraw Saturday service and revise weekday timetable to remove 0715 journey from Bridgwater and 1800 journey from Huish Episcopi.
20	Seaton – Taunton	Devon County Council (Stagecoach South West)	Mon – Sat	Every 3 hours	Withdraw contribution to Devon CC for this service – Frequent services available between Wellington and Taunton. West Buckland could be served by the Slinky service if service 20 is withdrawn or re-routed.
22	Tiverton/Cullompton - Taunton	Buses of Somerset	Mon – Fri	College days only	Withdraw funding from July 2016. Service likely to continue to be provided commercially.
25	Taunton – Dulverton	Buses of Somerset	Mon – Sat	Every 2 hours	Withdraw all funding for this service – Service 25 will continue to operate commercially between Wiveliscombe and Taunton Mon to Sat. New reduced service to be introduced between Dulverton and Wiveliscombe to connect with service 25 Monday to Friday (see attached timetable)
29	Wells - Street - Taunton	Buses of Somerset	Mon –Sat	5 return journeys per day.	Withdraw funding – peak service to continue to be provided on a commercial basis. Partial off peak service to be provided either commercially or through Demand Responsive Transport.
33	Wincanton – Frome	South West Coaches	Wed only	1 journey in each direction	Withdraw service – Slinky service available
38	Huish Episcopi Extension	Webberbus	Mon - Fri	College days only	Re-route other existing public transport service to cover Huish Episcopi extension. Timetable revised accordingly.
40	Bridport – Yeovil	Dorset County Council (Damory Coaches)	Mon – Sat	Every 2 hours	Withdraw contribution to Dorset County Council for Saturday service – Mon to Fri service remains.

51	Stoke St. Gregory – Taunton	Hatch Green Coaches	Mon – Sat	Every 2 hours	Withdraw Saturday service – Mon to Fri services remain.
53/58	Warminster/Westbury - Frome	Wiltshire County Council (Frome Minibuses)	Mon – Sat	Hourly	Withdraw contribution to Wiltshire CC for Saturday service – Mon to Fri service remains.
67	Burnham on Sea – Wookey Hole	Webberbus	Mon – Sat	9 return jnys per day	Withdraw minor funding contribution – Service to continue on fully commercial basis.
81	South Petherton – Yeovil	South West Coaches	Mon – Sat	Hourly	Withdraw funding – This may result in some reduction to the current timetable as funding supports two return journeys Monday to Saturday. The remainder of the service is commercial.
99	Chard – Yeovil	Stagecoach South West	Mon – Sat	Hourly	Reduce frequency on service between Yeovil and Chard. (see attached timetable)
113	Highbridge - Berrow	Hatch Green Coaches	Mon – Fri	5 return journeys per day.	Withdraw service – Other public bus routes available within walking distance. Slinky service also available in the area.
158	Wincanton – Shaftesbury	Dorset County Council (South West Coaches)	Mon – Sat	5 return journeys per day.	Withdraw contribution to Dorset County Council for Saturday service – Mon to Fri services remain.
198	Minehead – Dulverton	Webberbus	Mon – Sat	5 return journeys per day.	Service to be reduced and provided by smaller vehicle. (see attached timetable)
414/424	Frome – Midsomer Norton	Frome Minibuses	Mon – Sat	Every 2 hours	Withdraw Saturday service – Mon to Fri services remain.
667	Wincanton – Street	Nippy Bus	Mon – Sat	Every 90 mins	Withdraw Saturday service – Mon to Fri services remain.
668	Shipham – Street	Bakers Coaches	Mon – Fri	4 return journeys per day.	Minor timetable revisions when contract is retendered in 2016.
669	Shepton Mallet – Street	Frome Minibuses	Mon – Sat	Every 2 hours	Withdraw Saturday service – Mon to Fri services remain.
776	Shepton Mallet – Midsomer Norton	Hatch Green Coaches	Mon – Sat	5 return journeys per day.	Withdraw service – Other public bus routes available within walking distance. Slinky service also available in the area.
N9	Martock - Yeovil	Nippy Bus	Mon - Sat	Hourly	Withdraw funding from 0800 journey on Saturday. Mon – Fri service and balance of Saturday service remains.
N10C	Stanchester School – Taunton	Nippy Bus	Mon – Fri	One journey in each direction	Withdraw funding from non-college day journeys.

## Appendix A below shows the proposed changed to bus subsidy following consultation

						I	
Annor	adiv A						
Apper			_				
Chang	ges to Supported	Bus Services 2	2016/17				
Contract							
Number	Service	Operator	Days of operation		Proposal	Comments	Cabinet Member decision
15/009	N9 Martock - Yeovil	Nippybus	Mon-Sat	1 each direction	Withdraw Saturday journey	Mon-Friday service and balance of Saturday service remains	Withdraw Saturday service
13/003	776 Shepton Mallet -	Пірруваз	Worroat	uncouom	William Galarday Journey	Slinky and other public bus routes avaiable within	Withdraw Catalady Colvido
14/776	Midsomer Norton	Hatch Green Coaches	Mon-Sat	2 hourly	Withdraw service	walking distance	Withdraw service as other routes available
	N10 Stanchester Sch -						
15/010C	Taunton	Nippybus	Mon-Fri	3 hourly	Withdraw service	Low passenger use on non college days	Withdraw service
15/033	33 Wincanton - Frome	South West Coaches	Wed	1 each direction	Withdraw service	Very low usage can be replaced with DRT	Withdraw and replace with DRT
10/033	33 Willicanton - Frome	South West Coaches	vveu	anecuon	VVIGILIAW SCIVICE	This will result in some reduction to the current timetable.	With Mild with Teplace with DRT
						DRT will be reviewed with a view to serving this area.	
45/004	04 Courth Both outon Vocaril	Courth Wood Cooches	Man Cat	la a combo	M/ithedranic comics		Service frequency may be reduced. S106 funding may be available to support the service
15/081 16/040	81 South Petherton - Yeovil 40 Bridport - Yeovil	South West Coaches  Dorset County Council	Mon-Sat Mon-Sat	hourly	Withdraw service Withdraw Saturday service	Mon - Fri services remain	Withdraw Saturday service
10/040	53/58 Warminster/Westbury	- Dorset County Council	WOIFSat	Hourly	William Salurday Service	Wolf-1 if services remain	Withdraw Saturday service
16/053	Frome	Wiltshire County Counc	il Mon-Sat	hourly	Withdraw Saturday service	Mon - Fri services remain	Withdraw Saturday service
	158 Wincanton -						
16/058	Shaftesbury	<b>Dorset County Council</b>	Mon-Sat	2 hourly	Withdraw Saturday service	Mon - Fri services remain	Withdraw Saturday service
					Reduced frequency on		
					Yeovil to Chard part of		
				l	service Renegotiate		Reduced frequency to be introduced between
24/099	99 Chard - Yeovil	Stagecoach South West	Mon-Sat	hourly	contract Minor timetable revision	Reduced frequency	Yeovil and Chard Service to be retendered on expiry of current
					when contract is retendered		contract (Minor timetable changes to be
24/668	668 Shipham - Street	Bakers Coaches	Mon-Fri	2-3 hourly	in 2016	Minor timtable changes	implemented )
					Withdraw all funding from		
					service 25 and provide a new reduced contracted		
					feeder service from		
					Dulverton to Wiveliscombe.		Reduced service to be implemented between
					The section of route	25 service would continue to operate between	Dulverton and Wiveliscombe Mon - Friday. No
					between Wiveliscombe and Taunton is currently	Wiveliscombe and Taunton Mon - Sat. New reduced service to be introduced between Duilverton and	Saturday service but community bus could be used. Wiveliscombe to Taunton to remain as
25/025B	25 Taunton - Dulverton	Buses of Somerset	Mon-Sat	SCC part 2 hou	provided commercially.	Wiveliscombe to connect with 25 Mon - Friday	commercial service
						Frequent services available between Wellington and Taunton. West Buckland could be served by DRT if	
26/020	20 Seaton - Taunton	Devon County Council	Mon-Sat	3 hourly	Withdraw service	Devon CC withdrew or re-routed the service	Withdraw service
				,	Withdraw funding from July		11 11
					2016. Service likely to be		
45/000	22 Tiverton/Cullompton -	Dunna of Comment	Man Eri	College days	replaced on a commercial basis	This route brings Devon students into Richard Huish	Withdraw service. Operator has indicated there
15/022	Taunton	Buses of Somerset	Mon-Fri	only	Dasis	College	will continue service commercially
Note fundi	ng support also to be withdra	wn from following service	s hut some operato	rs have indicate	 ed that they may take on co	mmercially:	_
14/016	16 Langport - Bridgwater		o, sur some operati	J. J. Have mulcat	oa arat tiloy illay take oli co	v. owny.	
14/113	113 Highbridge - Berrow				_,		
15/067	67 Burnham - Wookey Hole	(part funding)			71		

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

## **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?							
Proposed New Policy or Service X	Change to Policy or Service		MTFP or Paper	Service Review or SCC Change Programme			
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?			w Policy on the provis nefits including extend crifice options for staff FP R16-010	ding the salary			

## **Section 1 – Description** of what is being impact assessed

The introduction of a new staff benefits scheme to include the widening of the options for tax efficient salary sacrifice for staff.

All staff will be able to access all parts of the scheme provided that they do not take their gross salary below the National Minimum Wage / National Living Wage. Whilst some potential salary sacrifice items may not be relevant to or affordable to all staff, some will. All staff will be able to take advantage of those discounts available should they wish to.

Staff will be able to access the scheme either on-line, or via telephone, and will automatically receive discounts from retailers on production of their membership card.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

All Staff will be targeted without reference to protected characteristic. No staff should be discriminated against due to any protected characteristic.

It is a personal decision of each member of staff, regardless of characteristic whether to join the scheme or not or to use the options open to them.

#### **Section 2B** – People who are **delivering** the policy or service

Fully managed service via a preferred supplier and Organisational Development

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

Section 4 – Conclusions drawn about the impact of the proposed change or new

service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

## **Community Safety**

There are no Community Safety implications

## **Equality**

There are no equality implications other than the ability for some staff to be able to sacrifice some of their salary for the provision of some benefit due to their salary being close to the minimum wage. Salary Sacrifice must not reduce an employee's gross salary to below the relevant minimum wage.

In many circumstances there will be a positive impact on certain groups of staff. Discounts available to staff and their families on food and essentials shopping will have a significant positive impact.

Those staff on lower incomes are less likely to spend as much as others on higher incomes and may therefore not save as much. However, it is not right to assume that those on higher salaries will benefit more as they may have equally onerous outgoings that prevent excessive spending.

Those staff near the minimum / living wage will have less option to use salary sacrifice. Those staff who no longer pay NI due to having reached retirement age will still be able to make full use of the scheme as salary sacrifice is TAX efficient. They of course do not pay any NI so savings in NI for them is irrelevant.

All staff will be able to draw some benefit from the scheme whether through salary sacrifice or via direct discounts.

## **Health and Safety**

There are no H&S implications

## **Health and Wellbeing**

While the impact on health and wellbeing for staff is likely to be positive, there are potential implications for health and wellbeing, and sustainability, if certain categories of benefit are permitted. This is most obvious re lease cars, if for example large, high emission vehicles are permitted under the scheme. Consideration of wider impacts should be a factor when considering which benefit categories are in scope and if there is a need to limit any particular category eg engine size, type. The scheme could be used to specifically encourage adoption of particular technologies eg low emission vehicles. The inland revenue rules on Road Fund Licence and Benefit in Kind supports this.

## **Privacy**

Employee details will be shared with the supplier where salary sacrifice is chosen. Any supplier contract for this service will need to include the standard Data Protection and Confidentiality Terms and Condition, this can be supported by the supplier holding the CYBER ESSENTIALS CERTIFICATE.

#### Sustainability

None identified

#### Risk

The council will incur management fee costs to the supplier and internal management and marketing costs. This is offset by savings in employer's NI and payroll costs. There is minimal risk that this scheme will not cover its costs. Even then, the likelihood is low and the impact is low. There is minimal risk where bikes, cars or technology

items are selected under salary sacrifice. In all circumstances, including maternity or paternity leave, such risk can be alleviated by additional insurances included in the cost or by the supplier covering the costs, in circumstances such as redundancy or maternity. The likelihood is LOW and the Impact is also LOW.

Likelihood	LOW	Impact	LOW	Risk Score	Low
------------	-----	--------	-----	------------	-----

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

Discussions and negotiations have minimised the risk to the authority and the funding of 'big ticket' items such as cars has been alleviated by the option being a contract hire agreement and not a purchase lease.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

#### N/A

Completed by:			Hugh Griffith				
Date			24 <sup>th</sup> November 2015				
Signed off by:			Chris Squire				
Date			25 <sup>th</sup> November 2015				
Compliance sign of	f Date	16 <sup>th</sup> November 2015					
To be reviewed by:	(officer name)	Hugh Griffith					
Review date:		1 <sup>st</sup> January 2017					
Version	V1.1		Date	25 <sup>th</sup> November 2015			

	Equality Im	pact Assessment Issu	es and Action Tab	le	
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age					
None identified					
Disability					
None identified					
Gender Reassignment					
None identified					
Marriage and Civil Part	nership			•	
None identified					
Pregnancy and Materni	ty				
None identified					
Race (including ethnicity	or national origin, colour, nation	nality and Gypsies and	Travellers)		
None identified					
Religion and Belief					
None identified					
Sex				•	
None identified					
Sexual Orientation				•	
None identified					
Other (including caring re	esponsibilities, rurality, low inco	ome, Military Status etc)			
Some staff close to minimum wage will not be able to take as much advantage of	NONE	N/A	N/A	N/A	N/A

	1	T	T		1
salary sacrifice as					
others due to the					
legislation around such					
schemes. All other non					
salary sacrifice benefits					
remain available.					
Healt	h and Safety, Sustainability,	Community Safety Imp	pact Assessment	Issues and Action T	able
Areas of increased	Actions needed - can you	Who is responsible	When will the	How will it be	What is the
risk drawn from your	mitigate the impacts/risk?	for the actions?	action be	monitored?	expected outcome
conclusions	If you can how will you		completed?		from the action?
	mitigate the impacts?		o compression :		
	· · · · · · · · · · · · · · · · · · ·	and Safety Issues and	 1 Action Table		
Nama	Tieatti	and Salety Issues and	Action Table		
None					
	Sust	ainability Issues and A	Action Table		
None					
	Comm	unity Safety Issues an	d Action Table		
None					
	P	│ Privacy Issues and Acti	on Table		
Where staff choose to	The supplier complies	Payroll and supplier		Payroll	Secure transfer of
		Payron and Supplier		Payroll	
utilise salary sacrifice	with the required CYBER		date		limited data
options where	ESSENTIALS				
payment is made by	Certification.				
the council to the					
supplier, employee					
	1	I	1		1

## (Cabinet Member Key Decision – 7 December 2015)

ear cor mir iss	ails such as nings (to ensure mpliance with nimum wage ue), payroll mber and tax band.			

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

#### **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?							
Proposed New Policy or Service	Change to Policy or Service		MTFP or Paper	Service Review or SCC Change Programme			
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?			FP R16-011				

#### **Section 1 – Description** of what is being impact assessed

Savings from the school transport budget of £364,900 to be achieved through the effective use of the Dynamic Purchasing System (DPS) when re-tendering for school transport contracts.

The DPS is a streamlined online market portal which enables Transporting Somerset to share bespoke contract requirements with a wide range of pre-qualified bidders. The system requires bidders to accept a number of contract requirements before submitting their lowest bid in order to secure the contract.

This affects contracts for all school transport provision.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

Children & Parents – School children, through a statutory entitlement or Pay Seat arrangement, are the primary users of school transport.

Their parents are dependent on this provision and factor it in to their daily routine.

#### **Section 2B** – People who are **delivering** the policy or service

Operators – The recently implemented DPS was designed to create a more efficient and cost-effective online marketplace in which operators have to submit the lowest deliverable contract price in order to secure contracts.

Transporting Somerset – Transport Officers upload details of the routes that need to be delivered and formalise contracts at the end of the tendering process.

# **Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

There are around 67,000 children of school age in Somerset, of those 12,385 were using school transport when this document was drafted.

Most school transport demand comes from children attending secondary schools and although demand for school transport has generally declined over the last 3 years (see table below), a population bulge is currently working through primary schools and is likely to start being evidenced in secondary schools in 2018 or 2019.

#### **Number of Pupils Transported**

Type of Passenger	2011/12	2012/13	2013/14	2014/15
Mainstream Entitled Under 16	8964	8693	8173	7968
Children Looked After (CLA)	84	96	87	97
Mainstream Schools Post 16	250	239	231	252
FE (excluding SEN)	2722	3100	3270	3215
SEN Under 16 non-residential	556	614	653	652
SEN Post 16 non-residential	191	130	118	75
SEN Residential	17	9	5	7
Pupil Referral Units	102	105	106	119
Pupils Transported	12,886	12,986	12,643	12,385

#### Table explained:

- Mainstream Entitled Under 16 Those children, aged 4-16, who are entitled to free school transport to a mainstream school.
- Children Looked After (CLA) Those children who are in the care of the Local Authority, who are transported to school.
- Mainstream Schools Post 16 Those children aged 16+, who are using school transport to attend 6<sup>th</sup> Form provision at a mainstream school.
- FE (excluding SEN) Those children aged 16+, who are using transport to attend Post-16 provision at a college.
- SEN Under 16 non-residential Those children, aged 4-16, with a Statement of Educational Need, who are entitled to free school transport to a special school.
- SEN Post 16 non-residential Those children, aged 16-19, with a Statement of Educational Need, who are entitled to free school transport to a special school.
- SEN Residential Those children, aged 4-19, with a Statement of Educational Need, who are entitled to free school transport to a residential special school.
- Pupil Referral Units Those children who are entitled to free school transport to a Pupil Referral Unit.

Re-tendering processes in 2015-16, which incorporated DPS from July 2015, look set to achieve like for like contract savings of around £600k for mainstream transport.

An increase in the number of school days in the 2016/17 financial year could result in a 2.6% pressure on school transport contract costs, when compared to 2015/16.

Based on the 2015/16 budget, this could be an increase of around £310k. This has been factored in to the saving.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

## **Community Safety**

School transport will continue to be delivered in line with policy and enhanced risk management processes.

The management of journeys and the safety of children being transported to school have been subjected to a renewed focus with each route being annually risk assessed.

The risk assessment process which underpins this more robust approach to risk management is likely to require additional officer resource which will need to be funded from the school transport budget.

## **Equality**

Entitlement to school transport is based on a number of factors including:

- Child's age
- Distance between the home and the school
- Catchment criteria
- Evidence of low income
- Road dangers
- Additional Needs & Disability
- Religion & Belief
- Other exceptional circumstances

These factors are then assessed by SCC's Admissions & Entitlements Team and entitlement awarded where appropriate.

There is a 2-stage appeal process for any parents who believe their child's application has been processed erroneously or when they believe their child's case is exceptional.

The appeals process will ensure that no child or family is discriminated against and that entitlement to school transport is awarded in line with policy.

In terms of specific, disproportionate impacts on certain groups:

- Disabled people Entitlement to school transport will be based on an assessment of the child's individual needs. Statutory entitlement will not be affected by this proposal.
- Low income families Children of low income families receive entitlement to free school transport if they live over 2 miles from their nearest or catchment school. This will not be affected by this proposal.

 Rurality – Children living in rural areas are assessed for school transport in the same way as all other children. This will not be affected by this proposal.

#### **Health and Safety**

A revised risk management process will be introduced for school transport ahead of the 2016/17 school year.

This will require each school transport route to be risk assessed. Factors including;

- Number of seats;
- Number of pupils:
- Duration of the journey;
- Number of KS1 pupils;
- Number of pupils with SEN or EHCP;
- Number of pupils accessing High Needs Funding;
- Number of pupils with acute medical needs;

will form the basis of the assessment and will dictate where additional supervision on school transport is required.

There is a cost pressure associated with the additional supervision required to ensure the safety of children on routes that are identified as presenting an enhanced risk.

Existing mitigation will also be identified and may include:

- Driver training
- Emergency procedures
- Vehicle tracking devices
- 2-way communication
- Maximum journey times
- Booster seats

#### **Health and Wellbeing**

The process for identifying any behavioural or medical risks presented by pupils is currently being reviewed.

This will enable the health and wellbeing of children travelling on school transport to be more effectively protected.

#### **Privacy**

Personal information relating to individual children will only be shared with operators when there is a need to carry out an individual risk assessment relating to a medical need or disability they might have.

This will enable the operator to safely manage the journeys of those that are most vulnerable.

Contract clauses with the operators must ensure that the information is protected in

accordance with the principles of the Data Protection Act.

### **Sustainability**

School transport routes are, for economic reasons, designed to optimise the capacity available on commercial vehicles and make best use of public service bus networks.

This will reduce the number of school buses on the road and will have a knock-on effect of minimising the pollution associated with school transport vehicles.

#### Risk

#### Financial

In an attempt to reduce prices and win contracts, operators put the financial stability of their company at risk. This could result in companies taking unacceptable financial risk and going out of business, resulting in a reduction in the number of operators, reducing competition and increasing contract prices.

Transporting Somerset maintains close links with operators and will encourage them to give notice on contracts which are unsustainable and put the company at risk.

Larger companies which can absorb a prolonged period of loss-making may attempt to undercut smaller providers and prevent them from winning contracts. This could have the reducing the number of operators in the market, driving up costs in the medium to long term.

SCC procurement will continue to engage with operators and encourage more to sign up to Dynamic Purchasing System in order to maintain a buoyant market.

#### Health & Safety

Operators will be contractually obliged to implement the risk management measures the local authority requires to ensure the safety of children travelling on school transport.

These will be assessed through risk assessments of routes and individual children.

Likelihood 2	Impact	3	Risk Score	6
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**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

The recommendation is to implement the savings of £364,900 from the school transport budget for 2016/17.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

There is no planned consultation in relation to this saving.

This assessment will be published alongside the associated decision paper.						
Completed by:		Phil C	Curd			
Date		21 De	21 December 2015			
Signed off by:	Signed off by:		Julian Wooster			
Date		December 2015				
Compliance sign of	Date	December 2015				
To be reviewed by: (officer name)		Phil Curd				
Review date:		December 2016				
Version	V0.2		Date	21/12/15		

	Equality Im	pact Assessment Issu	es and Action Tal	ble	
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age			•	•	
Lower contract prices result in operators cutting costs, with school children potentially accessing	SCC will be implementing an increasingly robust approach to risk management on school transport vehicles.	Transporting Somerset	February 2016	Ongoing commissioner monitoring and internal audits.	School transport is safe and adequately protects passengers and the general public.
an unsafe school transport provision.	Drivers will need to be properly trained and have clearance through the Disclosure and Barring Service (DBS).	Transporting Somerset	Ongoing		
	Transporting Somerset will carry out spot checks of vehicles at schools.	Transporting Somerset	Ongoing		
Disability					,
Disabled children cannot access appropriate school transport.	Children with a disability or additional needs will be assessed on an individual basis to ensure their school transport solution meets their needs.	Transporting Somerset	Ongoing	Ongoing commissioner monitoring and internal audits.	School transport provision meets specific needs.
Gender Reassignment					
No issue identified					
Marriage and Civil Part	nership				

No issue identified								
Pregnancy and Maternit	Pregnancy and Maternity							
No issue identified								
Race (including ethnicity	or national origin, colour, natio	nality and Gypsies and	Travellers)					
No issue identified								
Religion and Belief								
No issue identified								
Sex								
No issue identified								
Sexual Orientation								
No issue identified								
Other (including caring re	esponsibilities, rurality, low inco	ome, Military Status etc)						
No issue identified								

2 85

Healt	Health and Safety, Sustainability, Community Safety Impact Assessment Issues and Action Table							
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?			
	Health	and Safety Issues and	d Action Table					
School children are accessing an unsafe school transport provision.	SCC will be implementing an increasingly robust approach to risk management on school transport vehicles.	Transporting Somerset	February 2016	Ongoing commissioner monitoring and internal audits.	School transport is safe and adequately protects passengers and the general public.			
Disabled children cannot access appropriate school transport.	Children with a disability or additional needs will be assessed on an individual basis to ensure their school transport solution meets their needs.	Transporting Somerset	Ongoing	Ongoing commissioner monitoring and internal audits.	School transport provision meets specific needs.			
	Sust	tainability Issues and A	Action Table		-			
Costs for school transport rise as larger operators force smaller operators out of business	DPS offers a significant number of contract opportunities for operators of all sizes, located within and outside of Somerset. The sheer volume and diversity of contracts should prevent a single operator from dominating and manipulating the market to its long-term advantage.	Transporting Somerset SCC Procurement	Ongoing	Ongoing monitoring	The local authority continues to reduce the cost of school transport and secure best value for			

	Community Safety Issues and Action Table							
No issues identified								
	F	Privacy Issues and A	Action Table					
Information relating to individual children is not collected, stored or deleted correctly.	Information relating to individual children will only be shared when there is health & safety / wellbeing reason for doing so.  At all other times, information will be collected, stored and deleted in accordance with relevant data protection legislation.	Transporting Somerset Admissions & Entitlements	Ongoing	Ongoing monitoring and internal audits.	Information is stored securely			

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

## **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?						
Proposed New Policy or Service	Change to Policy Service	or	MTFP or Paper MTFP 2016/17	Service Review or SCC Change Programme		
Assessment on (which policy, service, N		МТ	siness Support and Fa FP savings of £350,0 F <b>FP R16-012a&amp;c</b>			

#### Section 1 – Description of what is being impact assessed

The impact of the Business Support and Facilities Management MTFP savings

- Internal Business Support £90,000
- Facilities Management £110,000
- Smart Office £150,000

A generic impact assessment has been prepared for the Smart Office Programme and forms part of the paperwork.

As properties are confirmed as closing specific impact assessments will be prepared as required for each site.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

#### **Internal Business Support**

These savings are being taken from the business support teams supporting Commercial and Business Services, Customers and Communities and Finance and Performance. They will therefore not directly impact the frontline service.

## **Facilities Management**

The proposal to close one of the two reception areas at County Hall and to close C Block reception will have an impact on Social Care staff.

Therefore, a business review was undertaken for this savings proposal and it was

concluded that the closure of the C Block reception should be delayed until the summer of 2016 when the Adults and Children's Social Care teams are expected to move to B Block. By this time the CASA project will have also have progressed their work in relation to Customer Access and a decision may have been made in relation to the County Hall Campus Strategy. A reduction in hours for a vacant post will offset the delayed implementation of this saving.

## **Section 2B** – People who are **delivering** the policy or service

There will be a number of redundancies and vacant posts that will either not be filled or hours reduced. Whilst every effort will be made to review duties and responsibilities this will impact the remaining business support staff, who may be asked to undertake additional duties.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

Business Case for the proposal to close a reception area at County Hall – Background Paper 1.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

## **Community Safety**

None

## **Equality**

Each Service will be expected to complete an Impact Assessment on the impact of Mid-Term Financial Plan 2012/13 on customers/clients/service users etc: which will be shared with unions at Directorate Joint Consultative Committees.

Implications of MTFP 2016/17 for staff in relation to Equality and Diversity will be dealt with corporately by the HR Policy Manager in association with the HR Group Managers.

#### **Health and Safety**

In smaller offices there could potentially be a reduced number of staff and an increased risk of lone working. This risk will be locally managed by Team Managers.

## **Health and Wellbeing**

There is a potential impact on the remaining staff, if workloads increase as a consequence of the overall reduction in staff and not filling vacancies with temporary staff.

Employment is a key component of wellbeing for most people of working age. Compulsory redundancy is likely to have negative health and wellbeing consequences for the affected staff (and their families), unless they are able to find suitable positions elsewhere within a short timeframe.

#### **Privacy**

None

#### **Sustainability**

None

#### Risk

The reduction in Facilities Management will reduce the level of FM service in the area Smart Office hubs and associated satellite offices. Once the employee redundancy process is complete further work will take place with the remaining Facilities Managers to determine the shape and size of the future Facilities Management service. The statutory duties such as Fire Risk Assessments, Fire Drills and Health and Safety checks will not be affected. There will be a reduced capacity to support corporate projects.

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

It is recommended that a budget saving of £350,000 for Business Support, Facilities Management and Smart Office is implemented in 2016/17. Every effort will be made to reduce the number of compulsory redundancies, by off-setting vacant posts, seeking voluntary redundancies and offering redeployment where possible.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

The Impact Assessment will be published on Somerset County Council's Internet Site.

Completed by:		Adrienne Parry			
Date		13/01/2016			
Signed off by:		Richa	rd Williams		
Date		14/01/2016			
Compliance sign off	Date	05/01/2016			
To be reviewed by:	(officer name)	Adrie	nne Parry		
Review date:		30/06/16			
Version	1		Date		January 2016

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

## **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?						
Proposed New Policy or Service	Change to Policy or Service		MTFP or Paper	Service Review or SCC Change Programme		
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		МТ	FP R16-014			

## **Section 1 – Description** of what is being impact assessed

## Adults and Health staffing efficiencies.

We are assessing the impact of not recruiting to vacancies across the Adults Service and reducing duplication in existing posts.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

Adult Social Care supports clients that meet national eligibility criteria as set out in the Care Act 2014:

- Older people
- Learning Disabilities
- Mental Health
- Physical Disabilities & Sensory Loss
- Carers

Somerset's total estimated population for 2015:

Ages 18 - 64 = 306,300

Ages 65+ = 128,200

20.2% of the adult population in Somerset have moderate, serious physical or long term limiting disability (source: POPPI/PANSI) but only 3.4% of the Somerset population receive our services.

In 14/15 we provided the following services to all adult customer groups in Somerset (includes older people, people with physical and learning disabilities):

- Care and assessment services:
  - 480 carer's assessments were completed and we provided information and advice to a further 1,917 people via our commissioned carers service. This compares to an estimate that 15,491 people in Somerset aged 65+ provide unpaid care to a partner, family member of other person and do not necessarily approach the local authority for assistance (source: 2011 census).
  - 10,781 new people accessed reablement with 3,601 going on to receive long term care
  - 3,287 new people accessed long term services (either community based, residential or nursing).
  - 1,121 clients were reviewed for care and support needs
- Over 1,000 people received safeguarding services.
- Care and Support at Home (externally commissioned provision)
  - We supported 8,418 people in long term community based services during the year.
- Residential and nursing
  - 1,666 people were provided with nursing placements
  - 1,916 people were provided with residential placements

## **Section 2B** – People who are **delivering** the policy or service

#### 243 FTE deliver the Adults Service

The overall impact of the Mid-Term Financial Plan 2016/17 on customers/clients/service users etc will be shared with unions at Directorate Joint Consultative Committees.

Implications of MTFP 2016/17 for staff in relation to Equality and Diversity will be dealt with corporately by the HR Policy Manager in association with the HR Group Managers

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

Analysis undertaken by the Adults Transformation Programme supported an operational redesign that went live on 1<sup>st</sup> Sept 2015.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

#### **Community Safety**

We are maintaining front line social work positions as these are critical to service delivery. Therefore there should be no specific impact on community safety as all

areas of the county and all communities and people are still being provided with a service.

## **Equality**

We are maintaining front line social work positions as these are critical to service delivery. Therefore there should be no specific impact on equality for customers and communities as all areas of the county and all communities and people are still being provided with a service.

The impact on the staff will be minimised as much as possible by offering options for them to consider. Pay and conditions will be protected in line with SCC policy.

#### **Health and Safety**

We are maintaining front line social work positions as these are critical to service delivery. Therefore there should be no specific impact on health and safety for customers and communities as all areas of the county and all communities and people are still being provided with a service.

## Health and Wellbeing

We are maintaining front line social work positions as these are critical to service delivery. Therefore there should be no specific impact on health and wellbeing for customers and communities as all areas of the county and all communities and people are still being provided with a service.

#### **Privacy**

We are maintaining front line social work positions as these are critical to service delivery. Therefore there should be no specific impact on privacy for customers and communities as all areas of the county and all communities and people are still being provided with a service.

#### **Sustainability**

We are maintaining front line social work positions as these are critical to service delivery. Therefore there should be no specific impact on sustainability for customers and communities as all areas of the county and all communities and people are still being provided with a service.

#### Risk

The main risk to the service and authority is a reduced ability to carry out statutory services due to reduced resources impacting our ability to manage demand. This risk has been mitigated by the new operational model. This risk is being managed and reviewed on a monthly basis.

Likelihood 3	3	Impact	4	Risk Score	12
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**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

Based on the impact assessment, our recommendation is to go ahead with the proposal set out in the impact assessment.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

This decision forms part of the MTFP for the Adults service, it will therefore be communicated, reviewed and updated as part of the corporate MTFP process. Completed by: Pip Cannons 8<sup>th</sup> Jan 2016 **Date** Mel Lock Signed off by: January 2016 **Date Compliance sign off Date** December 2015 To be reviewed by: (officer name) Pip Cannons Review date: December 2016 2.0 18<sup>th</sup> Nov 2015 Version **Date** 

Healt	Health and Safety, Sustainability, Community Safety Impact Assessment Issues and Action Table							
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?			
Ability to meet demand into the service due to changes in demography or legislation	Holding vacancies will need to be reviewed on an ongoing basis to ensure we are meeting demand and fulfilling our statutory functions. Therefore the recommendation is that we proceed with holding vacancies and review workforce requirements at 6 monthly checkpoints.	ML/ PC	Every 6 months	Via Performance and Business meetings	Decision on whether to recruit to vacancies or not.			

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

#### **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?						
Proposed New Policy or Service	Change to Policy Service ✓	or or	MTFP or Paper  ✓	Service Review or SCC Change Programme		
What are you comple Assessment on (which MTFP reference, clus	ch policy, service, ster etc)?		MTFP proposals: Reduced staffing levels a part of changes to library opening hours an review of staffing levels.  MTFP R16-016a			

## **Section 1 – Description** of what is being impact assessed

A review of library staffing levels is being undertaken as part of the 2016/17 MTFP programme for libraries, and the impact of this review on staff is what is being assessed in this document. A separate impact assessment document assesses the impact of a further review of library opening hours on staff and service users. Any changes in staffing levels proposed will be subject to staff consultation and are likely to impact 8 library teams - with the majority of libraries seeing no reduction in staffing levels.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

The proposal to review staffing levels in certain libraries is being done to address an imbalance in staffing levels at some libraries, and will not affect services to people or communities.

## Section 2B – People who are delivering the policy or service

Frontline library staff in certain libraries.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

Comparative data for staffing costs in relation to a library's opening hours and usage has been used to carry out the review.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

## **Community** Safety

There is no evidence that there will be a differential impact from the proposed changes on community safety.

#### **Equality**

The majority of library staff are female and working part time hours. There is likely, therefore, to be a greater impact on staff with these characteristics.

#### **Health and Safety**

An increase in lone working will occur in some libraries, which will increase Health and Safety risks. However, procedures and practices for lone working are already in place at a number of libraries; risks have been assessed as part of the Council's Health and Safety processes and are considered acceptable

## **Health and Wellbeing**

Staff morale is likely to be adversely affected at some specific libraries, particularly in view of the other changes to opening hours that are being considered on the same timescales as this proposal. Transitional support will be available to manage change effectively and minimise the risk of stress related absences. Robust absence monitoring processes will also be in place. Care First will be available for individuals requiring additional guidance and support.

## **Privacy**

There is no evidence that there will be a differential impact from the proposed changes on privacy or data security.

## **Sustainability**

There is no evidence that there will be a differential impact from the proposed changes on sustainability.

#### Risk

There are no significant risks emerging from this proposal; the only notable slight risk is an increase in the risks associated with lone working (as this will increase marginally if the proposal is implemented). This risk is scored below.

Likelihood	1	Impact	2	Risk Score	2
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**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

It is recommended that the proposal is taken forward for staff consultation and further analysis. At this stage impacts are considered to be acceptable, and will be mitigated by the following actions:

- Review working alone risk assessments in the affected libraries to ensure all
  potential risks are effectively managed. Ensure all staff are appropriately trained
  and supervised to enable them to fulfil their roles competently and confidently
  with no visible impact on customers.
- Ensure that staff welfare is considered throughout the engagement and consultation process, and that staff are supported appropriately by local and more senior managers.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to

## review the Impact Assessment

A business case will be prepared and presented to Trade Unions and staff. Staff engagement will provide opportunities for concerns and comments to be considered before a formal staff consultation process is undertaken.

This Impact Assessment will be reviewed following the engagement and consultation processes and prior to implementing the proposal.

Completed by:		Sue Crowley				
Date		8 <sup>th</sup> November 2015				
Signed off by:		Oliver Woodhams				
Date		10 <sup>th</sup> November 2015				
Compliance sign off Date		26 <sup>th</sup> November 2015				
To be reviewed by: (officer name)		Sue Crowley				
Review date:		March 2016				
Version	1.0		Date		11 <sup>th</sup> November 2015	

Equality Impact Assessment Issues and Action Table						
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?	
Age					•	
None identified						
Disability						
None identified						
Gender Reassignment						
None identified						
Marriage and Civil Part	nership					
None identified						
Pregnancy and Matern	ity					
None identified						
Race (including ethnicity	or national origin, colour, natio	onality and Gypsies and	Travellers)			
None identified						
Religion and Belief						
None identified						
Sex						
85% of library staff are female and any changes to levels of staffing will therefore have an impact proportionate to this ratio.	There are no actions that can be taken to mitigate this impact.					

Sexual Orientation							
None identified							
Other (including caring re	Other (including caring responsibilities, rurality, low income, Military Status etc)						
Low Income.							
Front line library staff are employed on Grade 15, and the majority are contracted on a part time basis.	Staff will be able to express an interest in a range of options ranging from voluntary redundancy through to applying a proportional reduction in contracted hours across the whole team or on an individual basis. All those put at risk will also be eligible to apply to the County Council's Resource Pool. A number of Fixed Term contracts are currently being utilised to offer the service greater flexibility and to mitigate the impact on the permanent workforce. All existing vacancies can also be put forward where appropriate for staff to consider potential relocation.	Strategic Manager, Library Services.	By June 2016.	The Service Manager, Customer Service will ensure contractual amendments are in place and all operational issues are managed with no visible impact on customers.	That the new libraries opening hours and modified staff levels across all libraries are in place by the beginning of June 2016.		

Healt	th and Safety, Sustainability,	Community Safety Imp	pact Assessment	Issues and Action T	able
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
	Health	and Safety Issues and	d Action Table	•	
Risk Assessments – Working Alone/staff awareness.	Ensure the Risk Assessments for those libraries where working alone is introduced have been completed and all relevant staff/supervisors are appropriately trained.	Strategic Manager, Library Services.	By June 2016	Service Manager customer Service will ensure all risk assessments are in place and that training has been delivered, taking action if there is a risk of noncompliance.	That all risk assessments are completed and reviewed in line with SCC policies.
	Sus	tainability Issues and A	Action Table		
None identified.					
	Comm	unity Safety Issues an	d Action Table		
None identified.					
	P	Privacy Issues and Act	ion Table		
None identified.					

(Expand the boxes as appropriate, please see guidance (www.somerset.gov.uk/impactassessment) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

#### **Baroness Thornton. March 2010**

Why are you completing the Impact Assessment?						
Proposed New Policy or Service	Change to Policy of Service		MTFP or Paper ✓	Service Review or SCC Change Programme		
What are you completing the Impact Assessment on (which policy, service,		II.	 eview of Library openir FFP R16-016b	ng Hours		
MTFP reference, cluster etc)?						

#### **Section 1 – Description** of what is being impact assessed

This impact assessment considers potential impacts of reducing library opening hours. Changes to opening hours are part of a public engagement exercise, pending a Cabinet decision on 6<sup>th</sup> December, from 17<sup>th</sup> December to 11<sup>th</sup> February. We will seek feedback from stakeholders and customers on a number of potential developments (customer access hubs and changes to library services including reducing opening hours). Consequently this assessment, at this point in time, is on potential changes rather than on the implementation due to decisions on reducing library opening hours. A full impact assessment will be completed when decisions are made following feedback from public engagement.

Library opening hours have remained unchanged since the Judicial Review process in 2011/12. There are a number of anomalies/non-standardised arrangements that a review of opening hours will aim to address whilst contributing to the service's MTFP savings.

An assessment of each of the 34 libraries has been undertaken using a combination of usage data (i.e. patterns of footfall; library transactions; and People's Network usage) The number of hours affected will vary library by library and range from 0 hours per week (though sometimes with the pattern of opening changing) to 8.5 hours per week, based on evidence of use, need and feedback. Public engagement will bring insight into how opening hours changes can be made with least impact on customers.

Appendix 3 of the 9 December Cabinet Paper ('Listening, learning, changing – the future of hubs and libraries') sets out the changes proposed to individual libraries. A summary of the proposed changes is:

• **Fifteen** libraries will see a reduction of 3 hours per week or less, including **three** libraries that will see no change at all (i.e. Porlock, Taunton & Yeovil).

Glastonbury library will be open 10 hours more per week (6 days a week) once the hub there opens during 2016);

- Thirteen libraries will see a reduction of between 3.5 and 6 hours per week;
- **Six** libraries will see a reduction of between 6.5 and 8.5 hours per week (i.e. Bridgwater, Chard, Dulverton, Ilminster, North Petherton and South Petherton)
- The average reduction in percentage terms is 12%. However, individual proposals for each library are based on need and demand and therefore vary.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

As libraries are an open access universal service all individuals and communities in Somerset have the potential to be affected including all Protected Characteristics. However, people that could be most affected by the changes to library opening hours include:

- Older people
- People with disabilities, and/or health issues
- Carers
- People on low incomes

Following public engagement and before any decisions are made on changes to opening hours a full impact assessment will be made.

## **Section 2B** – People who are **delivering** the policy or service

Frontline library staff who provide a face to face service at each library will be affected as contractual hours may be reduced. However the number of staff directly affected is not known at this stage.

Following public engagement and before any decisions are made on changes to opening hours a full impact assessment will be made and appropriate staff consultation undertaken. However, the number of people impacted will by definition be low as the hours impacted are when libraries are least well used.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

The Library Management System (LMS) has provided data on how many library members are registered with each library. The demographic data in the LMS reflects the information given when users registered with the library service so may be incomplete or out of date. However, census data for the library catchment area has also been used to ensure that Transaction data (taken from the LMS) shows the number of transactions taking place within each opening hour of each library. Information for each library is available - see an example of this for Crewkerne Library at the end of this Impact Assessment. This has been reviewed alongside data on visitor numbers at libraries and reviewed by library service managers who are familiar with the reasons for current opening hours (for example where opening hours seek to match busy times in particular communities), and when events/activities held at individual libraries. Visitor numbers are collected at each library and these have been used to assess patterns of usage across the week.

A needs analysis as part of the original Library service review has also been refreshed

and used to identify demographic groups and areas of deprivation. Information about access to private transport and the size of each library's catchment area has been used to determine potential impact. These have been made publicly available through the Somerset Intelligence website <a href="www.somersetintelligence.org.uk/libraryprofile">www.somersetintelligence.org.uk/libraryprofile</a>. Appendix 2 highlights key elements of the evidence and data that have informed proposed changes for individual libraries.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

#### **Community Safety**

At this stage no Community Safety issues have been identified.

## **Equality**

At this stage specific and detailed equality issues have not been identified though overall it is likely that there will be impacts. Below is an outline of potential impacts, and these have been used to inform specific proposals made for each library. However, a detailed assessment will be made following public engagement and before decisions are made.

## Age

People over the age of 60 and under 18 are significant groups of users of library services.

#### **Disability**

A proportion of customers have disabilities including mobility, visual and hearing loss. The Royal Voluntary Service (RVS) and Good Neighbour Scheme can provide a home library service for those who find it difficult to visit a library building.

#### Sex

There is a greater proportion of library users who are women (61%) rather than men so changes to opening hours could disproportionately disadvantage women.

#### **Sexual Orientation and gender reassignment**

It is less likely that this group will be adversely affected by changes to opening hours.

#### **Marriage and Civil Partnership**

It is less likely that this group will be adversely affected by changes to opening hours.

#### **Pregnancy or Maternity**

It is less likely that this group will be adversely affected by changes to opening hours.

## Race, Religion and Belief

It is less likely that this group will be adversely affected by changes to opening hours.

#### Caring

Those with caring responsibilities may be affected if their local library is open for fewer hours. Mitigation is being explored through potentially offering more advantageous borrowing rights (e.g. longer loan periods) to those with caring responsibilities.

#### Rurality

Smaller libraries with shorter opening hours are largely situated in rural parts of the county. Relevant information, such as the proportion of people with access to a vehicle is one of the issues considered when considering the needs of particular communities.

#### Low Income

Some communities with higher levels of people on low to moderate incomes may be affected by changes to opening hours.

## Military status

It is less likely that this group will be adversely affected by changes to opening hours.

## **Health and Safety**

At this stage no specific H&S issues have been identified. However, it is possible that there will be impacts and these will be assessed before decisions are made, for example complaints impacting front line library staff.

## Health and Wellbeing

At this stage no specific Health and Well-being issues have been identified. However, it is possible that there will be impacts and these will be assessed before decisions are made. Where there are events and activities which play a particular role in supporting health and wellbeing, particular efforts have been made to take account of these in the proposed opening hours changes.

#### **Privacy**

At this stage no specific Privacy issues have been identified.

## **Sustainability**

The proposal will have a positive impact on sustainability in those buildings where operating hours are reduced. For example, less energy will be consumed during non-operating hours providing that:

- Heating controls are set correctly according to occupancy and hours of operation.
- Lighting and electrical equipment is switched off when not needed and when the building is closed.

Reduced energy usage will have a positive impact on the Authority's carbon footprint therefore meeting the Council's County Plan and Energy Policy objectives.

#### Risk

It is possible that there will be Risks to the Council such as reputation loss from campaign groups and media attention. However these will be assessed once public engagement has informed decisions on changes to opening hours. The options considered in the cabinet paper ('Listening, learning, changing – the future of hubs and libraries') shows that much higher risks are associated with alternative courses of action such as potential library closures.

Risks around individual projects will be identified, monitored and reviewed in line with SCCs Risk Management Strategy.

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

Face to face Meetings with the Friends of Somerset Libraries (FOSL) and the Somerset Library Service User Group will take place. Drop-in sessions will take place in libraries (one per district, as with the previous consultation, plus others at locations where there are specific proposals) so that public and library users have opportunities to discuss potential changes and help shape the detail of them. Other stakeholder

groups such as Equalities Groups and Parish/Town Councils will also have the opportunity to meet face to face if they request to do so.

Engagement will inform how changes to opening hours can be made with least impact on the public and library users.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

The findings from the public engagement will be reported through Cabinet and be available on the SCC website. Groups and individuals who have participated in the engagement and have indicated they want to be kept informed will be contacted with the findings. Copies of the report will be available in each library.

Detailed impact assessments will accompany decisions on changes to library opening hours.

Completed by:		Sue Crowley				
Date			26 <sup>th</sup> November 2015			
Signed off by:	off by: Mickey Green					
Date		26 <sup>th</sup> November 2015				
Compliance sign of	Date	Nove	mber 2015			
To be reviewed by:	(officer name)	Sue C	Crowley			
Review date:		March 2016				
Version	1.0		Date		26 <sup>th</sup> November 2015	

	Equality In	mpact Assessment Is	sues and Action Ta	ble	гарег в Аррепих 4
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age					
A high proportion of library users are aged over 60 (36%) and under the age of 18 (28%).	Engagement will inform how changes to opening hours can be made with least impact. For example, keeping core hours but opening later and closing earlier. New technologies may provide a potential solution to increase access to a library building outside staffed hours.  The Home Library Service and Good Neighbour Scheme will be promoted to those unable to visit a library building as a result of any changes.	Sue Crowley Strategic Manager, Library Services.	On completion of engagement findings report and this informing decisions on changes to opening hours.	Reporting to Libraries Programme Board	People will be supported to continue to make good use of library services.
Disability		T	T	T	
A proportion of customers have disabilities including mobility, visual and hearing loss.	Engagement will inform how changes to opening hours can be made with least impact. For example, keeping core hours but opening later and closing	Sue Crowley, Strategic Manager, Library Services.	On completion of the engagement findings report and this informing decisions on changes to	Reporting to Libraries Programme Board	People will be supported to continue to make good use of library services.

		(Cabinet – 9 Decembe	51 2015)		Paper B Appendix 4
	earlier. New technologies may provide a potential solution to increase access to a library building outside staffed hours.  The Home Library Service and Good Neighbour Scheme will be promoted to those unable to visit a library building as a result of any changes.		opening hours.		
Gender Reassignment			1	T	
No issues identified at this stage.	Engagement will inform how changes to opening hours can be made with least impact. For example, keeping core hours but opening later and closing earlier. New technologies may provide a potential solution to increase access to a library building outside staffed hours.	Sue Crowley, Strategic Manager, Library Services	On completion of engagement findings report and this informing decisions on changes to opening hours.	Reporting to Libraries Programme Board	People will be supported to continue to make good use of library services.
Marriage and Civil Par	tnership				_
No issues identified at this stage.	Engagement will inform how changes to opening hours can be made with least impact. For example, keeping core hours but opening later and closing earlier. New technologies	Sue Crowley, Strategic Manager, Library Services	On completion of engagement findings report and this informing decisions on changes to opening hours.	Reporting to Libraries Programme Board	People will be supported to continue to make good use of library services

		(Cabinet – 9 December	C1 2010)		Paper B Appendix 4
	may provide a potential solution to increase access to a library building outside staffed hours.				
Pregnancy and Materr	nity				
No issues identified at this stage.	Engagement will inform how changes to opening hours can be made with least impact. For example, keeping core hours but opening later and closing earlier. New technologies may provide a potential solution to increase access to a library building outside staffed hours.	Sue Crowley, Strategic Manager, Library Services	On completion of engagement findings report and this informing decisions on changes to opening hours.	Reporting to Libraries Programme Board	People will be supported to continue to make good use of library services
Race (including ethnicit	y or national origin, colour, nat	ionality and Gypsies a	nd Travellers)		
No issues identified at this stage.	Engagement will inform how changes to opening hours can be made with least impact. For example, keeping core hours but opening later and closing earlier. New technologies may provide a potential solution to increase access to a library building outside staffed hours.	Sue Crowley, Strategic Manager, Library Services	On completion of engagement findings report and this informing decisions on changes to opening hours.	Reporting to Libraries Programme Board	People will be supported to continue to make good use of library services
Religion and Belief		I		ı	
No issues identified at this stage .	Engagement will inform how changes to opening	Sue Crowley, Strategic Manager,	On completion of engagement	Reporting to Libraries Programme Board	People will be supported to

		(Cabinet – 9 Decembe	El 2013)		Paper B Appendix 4
	hours can be made with least impact. For example, keeping core hours but opening later and closing earlier. New technologies may provide a potential solution to increase access to a library building outside staffed hours.	Library Services	findings report and this informing decisions on changes to opening hours.		continue to make good use of library services
Sex					
A higher proportion of women use library services (c.61%).	Engagement will inform how changes to opening hours can be made with least impact. For example, keeping core hours but opening later and closing earlier. New technologies may provide a potential solution to increase access to a library building outside staffed hours.  Information about library activities (e.g. reading groups/storytimes/family events) will be promoted online and within each community to encourage active participation.	Sue Crowley Strategic Manager, Library Services.	On completion of engagement findings report and this informing decisions on changes to opening hours.	Reporting to Libraries Programme Board	People will be supported to continue to make good use of library services
Sexual Orientation	T	ı		ı	
No issues identified at this stage .	Engagement will inform how changes to opening	Sue Crowley Strategic Manager,	On completion of engagement	Reporting to Libraries Programme Board	People will be supported to

		(Cabinet – 9 December	er 2015)		Donor D. Annondiy 4
	hours can be made with least impact. For example, keeping core hours but opening later and closing earlier. New technologies may provide a potential solution to increase access to a library building outside staffed hours.	Library Services.	findings report and this informing decisions on changes to opening hours.		Paper B Appendix 4 continue to make good use of library services
, ,	responsibilities, rurality, low in	come, Military Status e	etc)	T	T
Caring responsibilities					
Carers may find changes to opening hours affects their ability to visit a library	Engagement will inform how changes to opening hours can be made with least impact. For example, keeping core hours but opening later and closing earlier. New technologies may provide a potential solution to increase access to a library building outside staffed hours. The Home Library Service and Good Neighbour Scheme will be promoted to those unable to visit a library building as a result of any changes. Potential changes to the borrowing rights of carers are currently being explored.	Sue Crowley, Strategic Manager, Library Services.	On completion of engagement findings report and this informing decisions on changes to opening hours.	Reporting to Libraries Programme Board	People will be supported to continue to make good use of library services

Rurality

		(Cabinet – 9 Decembe	el 2013 <i>)</i>		Paper B Appendix 4
Those living in rural communities with smaller libraries will be affected by reduced opening hours	Engagement will inform how changes to opening hours can be made with least impact. For example, keeping core hours but opening later and closing earlier. New technologies may provide a potential solution to increase access to a library building outside staffed hours.  The Home Library Service and Good Neighbour Scheme will be promoted to those unable to visit a library building as a result of any changes.	Sue Crowley, Strategic Manager, Library Services.	On completion of engagement findings report and this informing decisions on changes to opening hours.	Reporting to Libraries Programme Board	People will be supported to continue to make good use of library services
Low Income	Engagement will inform how changes to opening hours can be made with least impact. For example, keeping core hours but opening later and closing earlier. New technologies may provide a potential solution to increase access to a library building outside staffed hours.  The library's public access computers may be the only IT access some customers	Sue Crowley, Strategic Manager, Library Services.	On completion of engagement findings report and this informing decisions on changes to opening hours.	Reporting to Libraries Programme Board	People will be supported to continue to make good use of library services

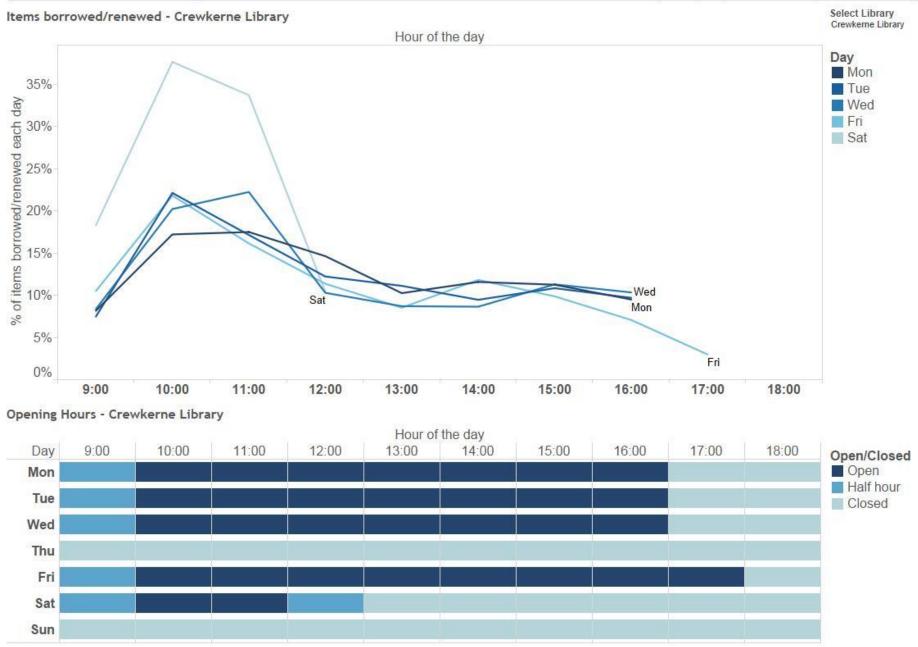
		(Cabinet – 9 December 2	2013)		Paper B Appendix 4
	can afford. This may impact on those claiming Universal Credit, Job seekers, Learners and those socially isolated. Links with Job Centre Plus, other council services such as Getset, Adult services, Education etc could provide opportunities for more individual/personalised support. New technologies may also provide a potential solution to increase access to a library building outside staffed hours.				
Healt	th and Safety, Sustainability,	Community Safety Im	pact Assessment Is	ssues and Action Ta	ble
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
	Health	n and Safety Issues an	d Action Table		
Potential increase in number of customer complaints impacting on front line library staff at a time when work patterns and hours of work are changing.	Library Staff are an integral part of the public engagement process. They will also be consulted on the changes and will be briefed on the implementation process. Library Supervisors will monitor	Sue Crowley, Strategic Manager Library services.	On completion of engagement findings report and this informing decisions on changes to opening hours. Plus on-going	Reporting to Libraries Programme Board Through ICase; line management meetings; staff briefings.	Staff are supported through the changes. People will be supported to continue to make good use of library services

# (Cabinet – 9 December 2015)

		(Cabinet – 3 December 2	.010)		
					Paper B Appendix 4
	sickness/attendance levels and support staff who may experience anxiety/stress.				
	Sus	tainability Issues and	Action Table		
Potential positive impact on reduced energy consumption and carbon footprint		Sue Crowley, Strategic Manager Library services.			
	Comm	nunity Safety Issues an	d Action Table		
No issues identified at this stage.		Sue Crowley, Strategic Manager Library services.			
Privacy Issues and Action Table					
No issues identified at this stage.		Sue Crowley, Strategic Manager Library services.			

Paper B Appendix 4

# Somerset Libraries - Percentage of the total number of items borrowed/renewed in the 2014-15 financial year by day of the week by hour of the day



# Impact Assessment Form and Action Table 2014 - 2016

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

## **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?							
Proposed New Policy or Service	Change to Policy o Service		MTFP or Paper	Service Review or SCC Change Programme			
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		ac	e direction of travel pr cess hubs and librarie FFP R16-016c				

#### Section 1 – Description of what is being impact assessed

Cabinet have previously agreed to implement shared customer access hubs across Somerset. Public engagement, pending a Cabinet decision on 9<sup>th</sup> December, from 17<sup>th</sup> December to 11<sup>th</sup> February will enable SCC to explain why we want to create them, what services are likely to be available from them, where they are likely to be, and what they will look and feel like. It will provide insight to help ensure that the approach reflects the specific needs and demand of communities.

Plans for shared customer access hubs link directly with the future of libraries in the county. At present there are a set of 10 priority towns for hubs and libraries will be key to these. This is just part of the need to set plans in progress for the future of libraries. We will do everything we can to keep our libraries open, reflecting what we have been told previously by communities, and also recognising libraries are evolving because the way people use them is changing. We also face huge financial challenges, and our 34 library buildings with 2 million visits a year need to make a much more effective contribution to Council key priorities (supporting educational achievement, enabling people to make informed choices for their health and wellbeing, offering cost-effective preventative services, and supporting economic growth).

This impact assessment considers potential impacts regarding the implementation of customer access hubs and libraries being part of them, plus piloting library self-service technology to enable access to libraries outside staffed hours. Customer and stakeholder feedback through a public engagement exercise will help inform forward planning.

Following the public engagement and before any decisions are made or implemented on specific locations Impact Assessments will be completed.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

Customer access hubs and libraries have the potential to affect every individual and community in Somerset. Hubs will bring together a number of face to face services provided by a range of organisations: libraries are statutory universal services available to all. Each hub will differ in terms of its services and partners; these will range from universal services such as Registration of Births, Deaths and Marriages, to tailored services, including those for more vulnerable people or groups. Similarly libraries provide generic and targeted services, examples of the latter being Books on Prescription and Dementia collections.

Each of the Protected Characteristics will be carefully considered before any decisions are taken regarding particular hub locations and library service offers (including new self-service technology).

# **Section 2B** – People who are **delivering** the policy or service

Hubs will bring together staff teams from the relevant services and organisations located in them and each will be different. However, there will be a common theme regarding the need for customer service roles as first point of contact in hubs.

With respect to Library Services the role of library staff has been changing for some time and will continue to do so as more transactions are carried out through self-service or on-line. Closer working with community partners and volunteers will impact on Library staff as their role as advocates and co-ordinators increases.

Before any decisions are taken the impacts on staff and volunteers will be carefully considered, including consultation with staff and unions as appropriate.

# **Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

Demographic data, individual library profile information, budget information, engagement feedback and customer/service intelligence will be assessed for each community where detailed proposals regarding hubs or changes to library services are being considered.

Detailed engagement and/or consultation will be carried out with individual communities prior to any decisions being made.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

# **Community Safety**

At this stage no Community Safety issues have been identified. It is however likely that there will be impacts regarding individual hubs and changes to library services and these will be impact assessed before decisions are made. For example, self-service technology to enable libraries to be open outside staffed hours may have impacts on community safety and perceptions about unstaffed public buildings – and these will be assessed as this is explored further.

# **Equality**

At this stage no specific Equality issues have been identified. It is likely that there will be impacts regarding individual hubs and changes to library services and these will be impact assessed before decisions are made. For example, the majority of front-line library staff are female, work part-time and may be on low incomes. Many customers requiring services are elderly and/or parents with young children and both these groupings may have caring responsibilities. The opportunity to increase opening hours through hubs and offer further services may also have particular benefits for those with protected characteristics.

# **Health and Safety**

At this stage no specific H&S issues have been identified. It is likely that there will be impacts regarding individual hubs and changes to library services and these will be impact assessed before decisions are made. For example, bringing together a number of services will require H&S audits on access and potentially conflicting requirements such as quiet spaces and busy reception and transit areas

# Health and Wellbeing

At this stage no specific Health and Well-being issues have been identified. It is likely that there will be impacts regarding individual hubs and changes to library services and these will be impact assessed before decisions are made. For example, the needs of more vulnerable client groups such as those registering deaths or attending health/social care related appointments. Bringing services together and making them more accessible may also have health and wellbeing benefits.

# **Privacy**

At this stage no specific Privacy issues have been identified. It is likely that there will be impacts regarding individual hubs and changes to library services and these will be impact assessed before decisions are made. For example, systems for managing customers across a range of organisations and services where confidential data is required.

#### Sustainability

At this stage no specific Sustainability issues have been identified. It is likely that there will be impacts regarding individual hubs and changes to library services and these will be impact assessed before decisions are made. For example, the environmental impacts to relocate services from multiple locations to a single location will have a positive impact on sustainability.

#### Risk

The detail of risks will be assessed once public engagement has informed decisions on hubs and changes to library services. Risks could include public and stakeholder perceptions of changes to services.

Risks around individual projects will be identified, monitored and reviewed in line with SCCs Risk Management Strategy".

Likelihood	2	Impact	3	Risk Score	6
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**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

The proposal to create hubs and shared premises has the potential to realise many positive impacts to meet Council objectives including supporting the most vulnerable, rationalising the Council's estate and individual buildings and reducing the Council's carbon footprint with a positive impact on long term running costs.

However, at this current stage the detail of specific impacts have not been identified as there aren't detailed proposals for individual locations. The public engagement is to share ideas and generate dialogue with stakeholders and customers. Public engagement will enable insight to be brought to detailed proposals for hubs and changes to library services. Each detailed proposal and change will be impact assessed before decisions are made.

Consequently the accompanying Equality Impact Assessment Issues and Action Table has been completed as an overview rather than in detail at this stage.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

The findings from the public engagement will be reported through Cabinet and be available on the SCC website. Groups and individuals who have participated in the engagement and have indicated they want to be kept informed will be contacted with the findings. Copies of the report will be available in each library.

Impact assessments will accompany each future individual proposal for decisions on hubs and changes to library services.

Completed by:			n Templeton	
Date		25 <sup>th</sup> November 2015		
Signed off by:		Micke	ey Green	
Date	26 <sup>th</sup> November 2015			
Compliance sign off	Date	Nove	mber 2015	
To be reviewed by:	(officer name)	Alisor	n Templeton	
Review date:		March 2016		
Version	1.0		Date	26 <sup>th</sup> November 2015

	Equality Im	pact Assessment Issu	es and Action Tab	le	r apor 5 / apondine c
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age					
Older and younger customers will potentially be impacted more than other age groups	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Older and younger people will be supported to continue to access services as needed
Disability					
Those with disabilities may be affected by access and relocation decisions	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	People with disabilities will be supported to continue to access services as needed
Gender Reassignment			•	•	
At this stage it is not thought that this group will be adversely affected	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected
Marriage and Civil Part	nership				
At this stage it is not thought that this group will be adversely affected. However those notifying marriages/civil	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected

		(Cabinet – 9 December 2	010)		Paper B Appendix 5
partnerships may be affected					
Pregnancy and Materni	ity				
At this stage it is not thought that this group will be adversely affected. However those notifying births may be affected plus parents accessing other services such as getset and libraries	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected
Race (including ethnicity	or national origin, colour, nation	onality and Gypsies and	Travellers)		
At this stage it is not thought that this group will be adversely affected.	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected
Religion and Belief					
At this stage it is not thought that this group will be adversely affected.	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected
Sex					
Females may be impacted more than males due to more women staff than men and for some services, including libraries,	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected

Paper B	Appendix	5
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more women customers than men					
Sexual Orientation					
At this stage it is not thought that this group will be adversely affected.	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected
Other (including caring re	esponsibilities, rurality, low inc	ome, Military Status etc)	)		
Carers may be affected by changes	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected
Those living in rural areas may be affected by changes	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected
Those on Low incomes may be affected by changes	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected

Healt	h and Safety, Sustainability,	Community Safety Imp	act Assessment I	ssues and Action Ta	able
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
	Health	and Safety Issues and	Action Table		
Potential increase in customer issues regarding multiple services and library self-services outside staffed hours	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected
	Sust	ainability Issues and A	\ Action Table		
Potential increase in customer issues regarding multiple services and library self-services outside staffed hours	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected
	Comm	unity Safety Issues an	d Action Table	<u> </u>	1
Potential increase in customer issues regarding multiple services and library self-services outside staffed hours	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected

# Paper B Appendix 5

	Р	rivacy Issues and Acti	on Table		
Potential systems issues regarding multiple services and organisations	Consider feedback	Senior Responsible Officers for hubs and libraries	As part of the decision making process on the future of hubs and libraries	Through DCS and Libraries Programme Boards	Customers will not be adversely affected

## Impact Assessment Form and Action Table 2014 - 2016

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of boxticking; it requires the equality impact to be **considered rigorously and with an open mind**."

#### **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?						
Proposed New Policy or Service	Change to Policy or Service	MTFP or Paper	Service Review or SCC Change Programme			
	✓	$\checkmark$				
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?						

# Section 1 – Description of what is being impact assessed

In line with the objectives of the Medium Term Financial Plan 2016/17 (MTFP), Somerset County Council (SCC) is required to make budget savings and therefore needs to review its allocation of funds and policy for discretionary areas of concessionary fares support for public bus and community transport services.

SCC has a statutory duty to manage and provide the English National Concessionary Travel Scheme (ENCTS) that enables anyone who qualifies for a bus pass to travel for free on public bus services after 9:30am. The Councils current concessionary transport policy provides more than this statutory requirement in that further areas of discretionary policy have been added to the scheme which the Council does not have a statutory responsibility to provide.

The areas of discretionary policy that will be reviewed with a view to reducing or removing for ENCTS pass holders are as follows:

- 1. 50% discount on the cost of the fare (up to a maximum of £5 per single trip or £10 per return journey) for pass holders when travelling on community transport (including car schemes). The proposal is to reduce this to a 25% discount (up to a maximum of £5 per single trip or £10 per return journey);
- 2. Travel for pass holders on public and community transport (including car schemes) between 9:00-9:30am. The ENCTS statutory scheme begins at 9:30am and the proposal is to return to this.
- **3.** Companion free travel element for pass holders who qualify. The proposal is to remove this policy.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

Any person who uses an ENCTS bus pass could be affected by the proposed changes to the discretionary policy, eligible groups within Somerset being either:

- people of pensionable age;
- people who qualify because of their disability;
- people with a disability and need assistant from a companion/carer.

Through the demographic information, communities within the South Somerset district are

more likely to be affected as there are a higher proportion of concessionary pass holders in this district.

Reviewing each policy change individually, specific groups that could be affected are:

- 1. Reduction of the 50% discount on fares to 25% for ENCTS pass holders when travelling on community transport schemes This will affect anyone who uses their bus pass to travel on community transport or car schemes. For accessible community transport this will be a mixture of all eligible groups and for car schemes will generally be the elderly as they are the typical users of this type of transport. This will have a direct impact on the protected characteristics of age, disability, low income, women and rurality.
- 2. Removal of concessionary travel between 9:00am 9:30am This concession is allowed on public transport, community transport schemes and SCC's Slinky demand responsive transport service. Most of the impact will be mitigated by people moving their travel times to 9:30am and after, but for those travellers who are unable to do this such as those who need to access work, or specific appointments such as attending hospital or the job centre, the impacts will be greater. This will be felt most by people on low income, especially those who live rurally where travel times to get to work or services will be much longer therefore having to start travelling earlier than their urban counterparts. It will also affect carers who are pass holders who may need to travel at these times.
- 3. Removal of the companion free travel element ENCTS pass holders who are unable to travel on public transport, community transport schemes or the Slinky service without the help of a carer due to a physical and/or learning disability, are the usual recipients of the companion pass which allows the carer to travel for free in Somerset. Removal of this element would affect the user's ability to travel if the carer could not afford to pay the cost of the fare thus affecting those on low income. This inevitably could have an impact on the well-being of the bus pass holder, restricting access to services and leisure opportunities.

## **Section 2B** – People who are **delivering** the policy or service

Any transport company or scheme whose clients benefit from the discretionary elements of the concessionary fares scheme will be impacted by each element as follows:

1. Reduction of the 50% discount on fares to 25% for ENCTS pass holders when travelling on community transport schemes – This will have a direct impact on community transport scheme finances and ultimately for some their financial viability as the reduction in discount may prevent some of their clients from travelling due to the increase in the fare contribution. This then reduces the concessions that can be claimed from SCC by the transport scheme. From smaller car schemes to larger community transport groups this may be a vital income which help keep these mainly voluntary services running and therefore keep the transport links for the communities they serve.

The loss of any schemes will have a detrimental impact in rural areas as this is where many of the schemes operate, serving many vulnerable people who in many cases will not have another transport option, especially as bus services rurally are disappearing.

2. Removal of concessionary travel between 9:00am – 9:30am – Much of the impact here will be mitigated by ENCTS passengers changing their travel times so they can continue to get free travel. There may be a loss of concessionary income if the pass holder could not do this and therefore decided not to travel, but passengers may decide

to pay a fare instead. This will affect rural schemes more as their passengers generally have longer travel times to get to larger towns to access services, and therefore may have to travel earlier to get to specific appointments.

3. Removal of the companion free travel element – Less than 1% of ENCTS bus passes allocated are for companions and therefore there would be minimal impact on any specific transport scheme. The administration of assessing eligibility within SCC's ticketing team can sometimes be difficult and often confrontational with customers who are applying and therefore its removal would have a positive impact, reducing administration time and stress to those in this team.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

## Social Economic (low income):

Somerset currently has 15.9% of families with no cars or vans.

Somerset has 3 of the top 6 most deprived areas in the country (out of 32,482), all in West Somerset.

Number of Pension credit claimants (May 2015) by Somerset district:

Mendip - 3400

Sedgemoor – 4010

South Somerset - 5150

Taunton Deane – 3500

West Somerset - 1650

Somerset - 17,710

# Age:

The ages of Somerset residents are:

- education or pre education age (0-24) 28%
- approximate working age (25-65) 51%
- approximate pensionable age (65+) 21%

#### **Disability:**

12.7% of people in Somerset aged 16 to 64 reported their day-to-day activities were limited (either a little or a lot) by long-term illness or disability.

## Carers:

There are over 58,000 carers in Somerset, which constitutes 11% of the total population.

# **Rurality:**

1 in 9 households in rural Somerset have access to one car/van or no vehicle at all.

Number of people aged 65+ by Somerset district with no car/van in household, and living in a rural area:

Mendip - 1296

Sedgemoor – 1460

South Somerset - 3697

Taunton Deane - 784

West Somerset - 962

Somerset - 8199

#### **ENCTS Bus Pass:**

Based on 2013-14 data, there were just over 7.4 million trips on public transport in Somerset (registered public bus services) of which just over 4.1 million journeys were made by

concessionary pass holders.

As of November 2015 there are currently 116,258 Concessionary Bus Passes in circulation, of which 111,672 have been awarded on age, 4,586 on disability and 966 for companions. Split by Somerset districts the number of concessionary pass holders is:

Mendip - 23828

Sedgemoor – 24435

South Somerset - 34495

Taunton Deane - 23355

West Somerset - 10145

During 2014-15 there were 69,300 concessionary journeys claimed by community transport and car schemes.

## **Consultation:**

Responses – 1056

81% of respondents 65+ years of age

64% of respondents were female

58% of respondents have a disability or long term health condition

64% use their concessionary pass on either community transport schemes or the Slinky service.

60% of respondents use the 50% fare discount element within the discretionary scheme with 49% utilising the 9:00-9:30am element.

54% of respondents would not be able to continue to access services if discretionary elements within the concessionary scheme either ceased or were reduced, with 33% uncertain of the affects.

82% travel to access medical appointments, 77% to access shopping and 65% to access social/leisure events.

# **Data Sources:**

2011 Census

http://www.somersetintelligence.org.uk/census-datasets.html

2012 National Travel Survey

https://www.gov.uk/government/publications/national-travel-survey-2012

Office for National Statistics

http://www.nomisweb.co.uk

SCC concessionary fares database

SCC Discretionary Concessionary Fares Consultation 2015/16

Joint Strategic Needs Assessment (JSNA)

rural JSNA

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

## **Community Safety**

1. Reduction of the 50% discount on fares to 25% for ENCTS pass holders when travelling on community transport schemes - There could be an impact on a person's social isolation and eventually their quality of life and wellbeing if community transport is their only transport option and the fare contribution increases and they

cannot afford the increase, leaving them isolated in their community. This will also be true if community transport schemes are unable to operate due to a reduction in concessionary fares funding. This could then lead to an increase in demand for SCC's social services and put further strain on these budget areas. This could be mitigated by some schemes covering the cost of the increase for the passenger or by the passenger using SCC's Slinky demand responsive transport service that operates in areas without public transport.

- 2. Removal of concessionary travel between 9:00am 9:30am An impact to a person's quality of life and wellbeing if the bus pass holder needs to travel between these times and cannot afford the normal fare thus leaving them unable to access work or medical appointments. Some mitigation, if travel was for medical appointments, through changing their appointment times through the NHS 'Choose & Book' service where medical appointment times can be selected to suit a person's needs or by using the free NHS social welfare transport service (Health Travel Cost Scheme HTCS) if they qualify.
- 3. Removal of the companion free travel element Social isolation and health and wellbeing impacts for people with disabilities if their carers cannot afford the fare costs, leaving the bus pass holder unable to travel. This may be mitigated through the use of the disabled person's mobility allowance which they may be in receipt of as this is a qualifying criterion, and could be used to pay the fare for the carer as the disabled person is travelling for free.

# **Equality**

1. Reduction of the 50% discount on fares to 25% for ENCTS pass holders when travelling on community transport schemes — This will have a direct impact on the protected characteristics of age, disability, low income, women and rurality. ENCTS pass holders qualify through age and disability and therefore these groups will directly be affected by the proposed reduction in concessionary discount and inevitable increase in fares, unless the transport schemes absorb the extra cost. This will have a further bearing on those who are also on low income and live ruraly as they may not be able to afford the increase and may have no other alternative public transport option available, potentially leaving them isolated within their communities. Statistics show that 1 in 9 households in rural Somerset have access to one vehicle or no vehicle and that 8,199 people aged 65+ living rurally have no access to a vehicle. Statistics also show that the West Somerset area has 3 of the top 6 most deprived areas in the country and that 17,710 people in Somerset claim pension credits.

Older women are particularly affected by a lack of transport, especially if they outlive their partner as they are less likely to drive a car with over 16,000 women aged 65+ across Somerset not having access to private transport (ONS Census 2011) and maybe therefore reliant on community transport to access services.

A high percentage of the journeys undertaken by car schemes are medical related, taking people to vital hospital or doctors' appointments. Some of these journeys could be long distance, depending on where you live in the county and your proximity to the nearest hospital. Therefore any reduction in discount would considerably increase the cost of the fare for those who live rurally and have to make longer journeys, which could impact on their ability to attend these appointments. Missed appointments cost the NHS considerable amounts of money every year with a compounding effect on social care services if residents of Somerset do not get the medical assistance they need and their well-being is affected. Community transport schemes convey many people who are either unable to access a conventional bus service or do not have one in their area, and

therefore provide a vital facility to enable people to access services such as medical appointments, shopping and leisure, enabling more rural areas of the county to retain transport links.

Affects could also be seen for some older people who use community transport services to keep up their voluntary work or charitable activities. Any fare increases may limit the ability of fit, older adults to contribute to their communities for lack of affordable transport.

Some of the effects could be mitigated through people using the Slinky service where ENCTS pass holders receive a full concession as they would on a public bus or through community transport schemes covering the cost of this discount reduction for their passengers.

#### The consultation results showed that:

- High proportions of respondents were 65+ years of age (81%), female (64%) with a disability or long term health condition (58%) and thus these will be the most affected groups by any changes to the current discretionary concessionary fares scheme.
- Out of the respondents (1056), 60% use the 50% discount on community transport schemes fares element and a high proportion (87%) would either not be able to continue to access services or would be uncertain of the effects on them of changing the discretionary scheme.
- A significant proportion of respondents use either community transport schemes
  or Slinky services (64%), which provide a door to door service to their clients, and
  thus would probably not be able to access public transport services otherwise.
- The main reasons that respondents use their concessionary pass to travel are to access medical appointments (82%), go shopping (77%) and to attend social/leisure events (65%).
- The overwhelming comments from respondents to the reduction in fare concession would be that they would not be able to afford the fare increase, and with no alternative travel options, would be left isolated at home within their communities.
- 2. Removal of concessionary travel between 9:00am 9:30am Impacts on protected characteristics of age, disability, low income and rurality. Pass holders who have no alternative but to travel between 9:00-9:30am and would now have to pay a fare, will be affected which impacts more on those who are low income and live rurally where travel times are longer and therefore may need to travel earlier to get to work or appointments.

The consultation highlights that 49% of those who responded would be affected by the proposed removal of travel between 9:00 and 9:30am with one of the main reasons that respondents' travel at this time being to access medical appointments. Mitigations can be found through passengers utilising the NHS 'Choose & Book' service where medical appointment times can be selected to suit a person's needs. Those on low income could qualify for the free NHS social travel scheme and some passengers could also qualify for free NHS travel on medical grounds.

3. Removal of the companion free travel element – This will impact the characteristics of disability, low income and carers. Disabled ENCTS bus pass users, who need a companion to travel on public transport may find themselves socially isolated, with eventual effects on their health and wellbeing if carers cannot afford to travel. This will have a greater impact on women as they tend to undertake caring responsibilities. Impacts could be mitigated through the use of the disabled person's mobility allowance which the disabled person could use to pay for the fare of the carer.

# **Health and Safety**

Considered with no impact highlighted

# **Health and Wellbeing**

- 1. Reduction of the 50% discount on fares to 25% for ENCTS pass holders when travelling on community transport schemes This reduction could have an impact on the health and wellbeing of people and communities if either the fare increase cannot be afforded by the individual or the community transport scheme is unable to continue due to the loss in concessionary revenue. With the continual reduction in the public transport network some communities are heavily reliant on the services of community transport schemes to be able to access essential services and any inability for an individual to be able to do this due to lack of transport alternatives could impact on their health. This could then also have impacts on a person's ability to be able to live independently for as long as possible which will then add costs to health and social care budgets. Some impacts could be mitigated through utilising SCC's Slinky bus service or where they can community transport schemes covering the extra costs to the passenger themselves.
- 2. Removal of concessionary travel between 9:00am 9:30am Impacts could be felt by those ENCTS travellers who could not change their journey times to 9:30am or after, and could not afford to pay the normal fare. This could be those who need to attend specific medical appointments, especially those who live rurally where journey times are generally longer. This could lead to deterioration in a person's health and wellbeing if essential medical care is not accessed and eventually to their ability to lead an independent life. This would then put further strain onto health and social care services. There would be some mitigation through patients being able to book convenient appointment times through the NHS 'Choose & Book' service or the utilising the NHS Health Travel Cost Scheme for those who qualify through social welfare criteria like low income.
- 3. Removal of the companion free travel element This could directly affect people with disabilities ability to remain independent and also their health and wellbeing if the carer using a companion pass could not afford to pay the cost of travel, leaving the person more isolated in their community. Mitigations through the disabled person using their mobility allowance to pay for the carers travel.

## **Privacy**

Considered with no impact highlighted

# **Sustainability**

All three discretionary elements could have an impact on sustainability in the area of travel choices that do not rely on a car, if people decide to change to this mode of transport rather than stay on public or community transport.

## **Business Risk**

The business risk for each of the proposed elements will be as follows:

1. Reduction of the 50% discount on fares to 25% for ENCTS pass holders when travelling on community transport schemes – the business risk here will be highest as there is a concern that people within communities who become isolated and unable to access essential amenities due to the reduction of discount will eventually require help from SCC's social services, putting further strain on this department.

Likelihood -3, Impact -2 (score =6)

2. Removal of concessionary travel between 9:00am – 9:30am – most of the business risk here will be mitigated through ENCTS pass holders moving their time of travel and therefore only people who need to attend set appointments or work could be affected making the risk low.

Likelihood -2, Impact -2 (score =4)

3. Removal of the companion free travel element – the business risk here of people requiring further SCC services can be mitigated through the use of mobility allowances which all recipients will either be receiving or could apply for. Therefore the risk will be low.

Likelihood -2, Impact -1 (score =2)

		1	I		
Likelihood	1	Impact		Risk Score	

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

Somerset County Council has a statutory duty to provide the ENCTS as set out by the Department for Transport. At present it provides a scheme with elements over and above its statutory obligation which it plans to reduce or remove.

1. Reduction of the 50% discount on fares to 25% for ENCTS pass holders when travelling on community transport schemes – Of all the proposed changes this one has the potential to have the widest impact for residents of Somerset and will especially be true for older women with a disability or health condition who are less likely to drive. It will also impact significantly on those who live rurally or those on low income, and could be felt most in the West Somerset district as they have some very high areas of deprivation and a large proportion of community transport schemes. The consultation having highlighted most of the above also showed that the lack of alternative transport options within rural communities due to the continual reduction in public transport means these schemes are sometimes the only transport option for people in these communities to be able to access essential services such as medical appointments or food shopping. Community Transport is, in most case, the provider of last resort therefore without this service large numbers will be left unsupported.

There is a likelihood that the reduction in concessionary discount will make travelling on this form of transport too expensive for the most vulnerable within these communities leaving them unable to travel, which will then impact on the concessionary fares reimbursement claimed by community transport schemes themselves, putting some at risk of folding, which would then have further impacts to the communities they support.

Any inability for members of communities to access essential amenities could lead to an increased demand for social and health services on budgets that are already strained and again this is highlighted through respondents' consultation comments where overwhelmingly people replied to say they would not be able to afford to travel if fares increase due to the change in discount.

Some mitigation to this change is SCC's Slinky demand responsive transport service, where bus pass holders would receive a full concession for travelling as they would on a public bus. With generally only two Slinky buses within each district of the county, this would also put more pressure on an already limited resource. Some schemes may also decide to absorb the additional cost to their passengers and not increase fares but this is not likely to happen for smaller car schemes where operating margins are very small.

Therefore careful consideration of the impacts highlighted within this report and mirrored by the consultation is recommended before a final decision is made, to ensure areas of the county are not cut off leaving residents stranded from services, potentially putting more pressure on health and social care services in the long run.

- 2. Removal of concessionary travel between 9:00am 9:30am Although this affects all ENCTS pass holders, most will be able to move their time of travel to 9:30am and after, mitigating most of the impact. It is acknowledged that the change in this policy will affect those who have to attend work or appointments early in the morning. This will especially impact those on low income who might not be able to afford the bus fare if they continued to travel before 9:30am and those who live rurally where travel times are longer and they need to set off earlier. The impacts to the most vulnerable regarding medical appointments can be mitigated through the NHS Health Travel Cost Scheme which is free socially provided hospital transport or through the 'Choose & Book' NHS system that allows patients to book convenient appointment times.
- 3. Removal of the companion free travel element This policy change directly impacts disabled ENCTS pass holders and their carers who would no longer be able to travel with the disabled person for free. This could affect the disabled person's ability to travel if the carer could not afford the bus fare, and thus their ability to access services and leisure opportunities. Most of the impact here could be mitigated by the use of the disabled person's mobility allowance which they could use to pay for their carer, having free travel themselves.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

- The results of the consultation undertaken will be shared with the groups participating through email or letter.
- The assessment will be monitored and reviewed in 3 months time or earlier if changes are made.
- All information will be published on Somerset County Council web page.
- A final decision will be taken at February 2016 cabinet meeting, the results being published as part of the minutes of this meeting.

Completed by:		Nicho	las Margison			
Date			November 2015			
Signed off by:		Paula Hewitt				
Date			January 2016			
Compliance sign off	Date	December 2015				
To be reviewed by:	(officer name)	Nicholas Margison				
Review date:		November 2016				
Version	1		Date		November 2016	

	Equality Impact Asse	ssment Issues	and Action Table		
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age					
Impacts on pensionable age ENCTS users where:  1. Reduction in the fare discount when travelling on community transport schemes means they cannot afford to travel anymore, reducing access to essential services.  The reduction in passenger discount and therefore concessionary fare reimbursement to operator's causes the community transport schemes to fold, leaving some community residents unable to access essential services.  2. They travel between 9:00am-9:30am on public buses and community transport schemes to access medical appointments and/or work.	Mitigations are:  1. Utilising the Slinky demand responsive bus service where ENCTS pass holders get a 100% discount on the fare. Some community transport schemes may also decide to absorb the extra cost to the passenger.  2. Passengers could pay a fare or where this is unaffordable and a medical appointment needs to be accessed they could either change their appointment time to suit concessionary travel times through the NHS 'Choose & Book' service or utilise the NHS HTCS car service which operates for people who qualify with a social need.	Transporting Somerset manages the Slinky service on behalf of SCC and will need to ensure that the service operates in areas where there is no public transport.	The Slinky service is already available and reviewed on a regular basis.	Through Slinky service usage statistics and monitoring the loss of any community transport schemes.	Individuals are sti able to access essential services

# **Disability**

Impacts on disabled ENCTS users where:

1. Reduction in the fare discount when travelling on community transport schemes means they cannot afford to travel anymore, reducing access to essential services.

The reduction in passenger discount and therefore concessionary fare reimbursement to operator's causes the community transport schemes to fold, leaving some community residents unable to access essential services.

- 2. They travel between 9:00am-9:30am on public buses and community transport schemes to access medical appointments and/or work.
- 3. Removal of the companion pass element means the disabled person cannot travel anymore to get to essential and leisure services.

Mitigations are:

- **1.** Utilising the Slinky demand responsive bus service where ENCTS pass holders get a 100% discount on the fare. Some community transport schemes may also decide to absorb the extra cost to the passenger. The disabled person could utilise their mobility allowance if they are in receipt of one.
- 2. Passengers could pay a fare or where this is unaffordable and a medical appointment needs to be accessed they could either change their appointment time to suit concessionary travel times through the NHS 'Choose & Book' service or utilise the NHS HTCS car service which operates for people who qualify with a social need. Mobility allowances could

The Slinky **Transporting** Somerset service is already available and manages the Slinky service reviewed on a on behalf of regular basis. SCC and will need to ensure that the service operates in areas where there is no public

transport.

Through Slinky service usage statistics and monitoring the loss of any community transport schemes.

Individuals are still able to access essential services.

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	also be used to cover the cost of transport.  3. The disabled person could use their				
	mobility allowance to pay the fare for the carer or if they do not have one, they could apply to have it.				
Gender Reassignment					
Considered with no impact highlighted					
Marriage and Civil Partnership					
Considered with no impact highlighted					
Pregnancy and Maternity					
Considered with no impact highlighted					
Race (including ethnicity or national	al origin, colour, nationality and	Gypsies and Tra	avellers)	l	
Considered with no impact highlighted					
Religion and Belief					
Considered with no impact highlighted					
Sex					
Impacts on female ENCTS users where:  1. Reduction in the fare discount when travelling on community transport schemes means they					

cannot afford to travel anymore, reducing access to essential services.	
to essential services	
to essential services.	
The reduction in	
passenger discount and	
therefore concessionary	
fare reimbursement to	
operator's causes the	
community transport	
schemes to fold, leaving	
some community residents	
unable to access essential	
services.	
2. They travel between	
9:00am-9:30am on public	
buses and community	
transport schemes to	
access medical	
appointments and/or work.	
3. Removal of the companion	
pass element means the	
carer cannot travel	
anymore with the disabled	
person to get to essential	
and leisure services.	
Sexual Orientation	
Considered with no impact	
highlighted	
Other (including caring responsibilities, rurality, low income, Military Status etc) LOW INCOME	
Impacts on low income ENCTS Mitigations are: Transporting The Slinky Through Slinky	Individuals are still
users where:  1. Utilising the Slinky   Somerset   service is already   service usage	able to access
1. Reduction in the faredemand responsivemanages theavailable andstatistics and	essential services.
discount when travelling bus service where Slinky service reviewed on a monitoring the loss	
on community transport ENCTS pass holders on behalf of regular basis. of any community	

	T	1	T	1	_
schemes means they cannot afford to travel anymore, reducing access to essential services.  The reduction in passenger discount and therefore concessionary fare reimbursement to operator's causes the community transport schemes to fold, leaving some community residents unable to access essential services due to a lack of affordable alternatives.  2. They travel between 9:00am-9:30am on public buses and community transport schemes to access medical appointments and/or work and cannot afford the full fare.	get a 100% discount on the fare. Some community transport schemes may also decide to absorb the extra cost to the passenger.  2. Passengers needing to access a medical appointment could either change their appointment time to suit concessionary travel times through the NHS 'Choose & Book' service or utilise the NHS HTCS car service which operates for people who qualify with a social need such as those on benefits.	SCC and will need to ensure that the service operates in areas where there is no public transport.		transport schemes.	
Other (including caring responsibil	 ities, rurality, low income, Milita	ry Status etc) <b>R</b>	 URALITY		
Impacts on ENCTS users who live rurally where:  1. The reduction in passenger discount and therefore concessionary fare reimbursement to operator's causes the community transport schemes to fold, leaving residents unable to access	Mitigations are:  1. Utilising the Slinky demand responsive bus service that operates in areas of no public transport.  2. Passengers could pay a fare or where this is unaffordable	Transporting Somerset manages the Slinky service on behalf of SCC and will need to ensure that the service operates in	The Slinky service is already available and reviewed on a regular basis.	Through Slinky service usage statistics and monitoring the loss of any community transport schemes.	Individuals are still able to access essential services.

essential services due to a lack of transport alternatives.  2. Due to their rural location travel between 9:00am-9:30am on public buses and community transport schemes is essential to access medical appointments and/or work.	and a medical appointment needs to be accessed they could either change their appointment time to suit concessionary travel times through the NHS 'Choose & Book' service or utilise the NHS HTCS car service which operates for people who qualify with a social need.	areas where there is no public transport.			
Other (including caring responsibility Impacts on ENCTS companion pass users who have caring responsibilities where:  3. Removal of the companion pass element means they cannot undertake their caring responsibilities with a disabled person due to not being able to afford the fare to travel with them.	Mitigations are:  3. The disabled person could use their mobility allowance to pay the fare for the carer or if they do not have one, they could apply to have it.	ry Status etc) <b>C</b>	aring Responsibilit	ies	

Health and Safety, Sustainability, Community Safety Impact Assessment Issues and Action Table						
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?	
Health and Safety Issues and Action Table						
Considered with no impact		400				

highlighted							
Sustainability Issues and Action Table							
Increased car usage due to the proposed changes.	There will be mitigation through some users utilising the Slinky bus that operates in areas of no or low public transport.	Transporting Somerset manages the Slinky service on behalf of SCC and will need to ensure that the service operates in areas where there is no public transport.	The Slinky service is already available and reviewed on a regular basis.	Through Slinky service usage statistics and monitoring the loss of any community transport schemes.	The potential impact of increased car usage is kept as low as possible.		
	Community Safe	ety Issues and A	Action Table				
Increased risk of residents in communities becoming social isolated with eventual impacts on quality of life and wellbeing.	There will be mitigation through some users utilising the Slinky bus that operates in areas of no or low public transport.	Transporting Somerset manages the Slinky service on behalf of SCC and will need to ensure that the service operates in areas where there is no public transport.	The Slinky service is already available and reviewed on a regular basis.	Through Slinky service usage statistics and monitoring the loss of any community transport schemes.	People within communities are still able to access services and do not become isolated.		
Privacy Issues and Action Table							
Considered with no impact highlighted							

## **Impact Assessment Form and Action Table 2014 - 2016**

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

# **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?							
Proposed New Policy or Service	Change to Policy or Service		, ,		MTFP or Paper	Service Review or SCC Change Programme	
			X	X			
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		Change Programme - Support Services for Education (SSE) Project MTFP R16-019					

# Section 1 – Description of what is being impact assessed

# **Background**

The local authority has a responsibility to promote educational excellence for all the children and young people of Somerset, to support a diversity of educational provision that meets local needs, to ensure schools have access to the services they need and to develop robust school improvement strategies.

In 2012, Somerset County Council implemented a new way of working involving a separation of day-to-day operational service delivery from strategic commissioning of services. The organisational restructure resulted in core and traded services for schools being spread across a wide range of management teams, without a coherent customer focus. Schools raised concerns about the lack of visibility of educational services and in October 2012 school representatives met with the Leader of The Council to agree a way forward which still enabled the provision of high quality and valued services whilst reducing cost.

John Osman's statement summarised the Direction of Travel as follows:

- Consider the options, scope the development and subsequently plan for a school facing services arrangement that would initially be set up by the Local Authority in partnership with the Children and Young People's Compact. Over time this could develop into an arms' length or separate organisation from Somerset County Council. Some of the potential advantages and disadvantages of establishing a joint venture with another organisation to do this should be considered.
- 2. The Compact Executive would utilise funding to enable a local delivery model to be developed and SCC capacity would be used to support this work.
- 3. Early consideration would be given to key liability and cost issues for Somerset County Council and an arm's length organisation including pensions and potential redundancy costs alongside commercial viability.

On 8 July 2013 Cabinet approved the next phase of the project - to bring together in-scope core and traded services in an in-house operational service unit, whilst considering the effectiveness and viability of an arms' length organisation. The Support Services for Education (SSE) unit was established on 1 April 2014.

On the 23rd April 2014, the Cabinet Lead Member for Children and Families approved the development of a Business Case assessing the following;

- 1. Transfer of SSE to an external organisation involving a partner
- 2. Transfer of SSE into an independent external organisation which has significant involvement from schools
- 3. Comparison of both to the in-house service.

The Cabinet is due to consider the Business Case and confirm the future service delivery model on 10 December 2014. A full options appraisal is set out in the Business Case – a high level overview of the models (options) is set out below.

Option	Potential Benefits	Risks
1.Partner model Example of a current Partner Company – Devon County Council and Babcock  337 schools Joint Venture Partnership - Babcock - Devon CC¹19.9%, Babcock 80.1%	Potential Benefits Reduction in reliance on Council funding Easier to attract additional business Continued access to high quality services Better sales and marketing methods Long term agreement guarantees future Potential upfront payment to Council	Currently unclear as to level of bidder interest     Potential for nonalignment of vision and values affecting relationship     Potential for previous experience (South West One) to influence stakeholders view of model     Lack of commissioning clarity leading to loss of flexibility/increased costs when changes in service are required     Cost and time to procure partner
2.Independent model Buckinghamshire – Charitable Trust.  233 schools 200 staff in 11 services 1 Charitable Trust, with a Board of Trustees 4 County Councils 12 Schools 2 Staff 2 Co-opted (to ensure commercial skills mix)	<ul> <li>Potential Benefits</li> <li>Can apply for grants as a charity, not available to the Council</li> <li>Enter into contracts in own right, not through trustees</li> <li>Trust has limited liability members not held liable for more than nominal guarantee of £1</li> <li>Retains a local focus</li> <li>Ability to increase traded income</li> </ul>	Risks     Costs associated with set up     Potential for Charity Commission to refuse status/associated timescales     Lack of initial capital to support business     Challenge of securing adequately skilled and independent Board of Directors

<sup>&</sup>lt;sup>1</sup> Percentages relate to the amount of ownership of the Company.

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# 3.Independent model Hertfordshire – Schools Owned

481 schools
230 staff in 6 services
Schools' Company, with a
Board of Directors
2 County Council
6 School
Managing Director
Schools own 80% of shares
(£25 each), Council owns
20% of shares

### **Potential Benefits**

- Schools have control plus clear role for LA
- Limited liability for schools
- Moral driver at forefront
- Swift decision making body but held to account by all schools and LA All schools have equal ownership

#### **Risks**

- Potential lack of commercial expertise amongst previously inhouse staff
- No up-front capital to support set up of the company

Potential for conflicts of interest between LA requirements to meet statutory duties and school requirements for support e.g. need for company to challenge schools and the interests of the majority school shareholders

# 4.Improved In-House Somerset

260 schools 230 staff in 15 services Proposed SSE Governing Board

-Mix of SCC and schools/early years representatives -Commissioning arrangements
Development of Compact role

# **Potential Benefits**

Consolidates services –
more visible Continues
move towards full cost
recovery Implementation of
Business Improvement Plan
moves SSE towards a
customer focused
/commercial culture
SSE moves towards
sustainable position with
potential to move to
external organisation
SCC develops
Commissioning framework
with Compact

#### Risks

Lack of commercial expertise in-house Loss of momentum/confidence that improvements/changes will be made Potential for SCC constraints to block SSE development as a trading unit

# Updated 2<sup>nd</sup> November 2015

The Cabinet considered the report in December 2014 and recommended that SSE remain in house for at least 2 yrs with a review after one year of operation. This review is due to be presented to Cabinet in early February 2016.

It is proposed that there is an 8% reduction in Dedicated Schools Budget (DSG) from 1<sup>st</sup> April 2016 in order to support SSE moving to full cost recovery as identified in the 5 year financial plan.

Section 2A – People or communities that are targeted or could be affected (for Equalities - taking particular note of the Protected Characteristic listed in action table)

### **Customers**

The SSE project contributes to the delivery of the following SCC County Plan 2013-17 targets

- working more effectively with partners for a smaller leaner more customer focused public sector in Somerset
- better schools providing better results for our children

As part of work undertaken through a separate project SCC has adopted a policy of full cost recovery for all its services (unless this is prevented by legislation). As an in-house unit SSE is already moving towards the recovery of full cost and this has resulted in the introduction of price increases for its traded services. The SSE Business Case therefore assumes that this move towards full cost recovery would be the position whether the in-house service was retained or moved to an arms' length organisation. The financial model contained in the Business Case assumes the need to mitigate the price increases by phasing their introduction over 3 years.

As the main customers for SSE are SCC and schools/early years providers, there would little direct public impact. The exception is the potential for a move to a charitable Trust which would impact on the price of some services provided to individual users as a result of the application of VAT. Whilst some assumptions have been built into the Business Case to mitigate this, consultation with those affected would be incorporated into the implementation plan, if this was agreed as the preferred model, to assess the potential for further mitigation.

Somerset schools have been purchasing traded services from the local authority for over 20 years through the Blue Book (and now SSTEP) process. Access to services is through an on-line catalogue and ordering system, recently updated and streamlined. Many service providers are experienced traders and many have provided support to schools outside of Somerset in the past. In addition SCC has worked with the Children and Young People's Compact to ensure the most effective and efficient use of its local authority budget and centrally held Dedicated Schools Grant (DSG). Both types of funding ensure the delivery of services at no charge to schools/early years providers. It is not expected that a change in service delivery model would impact detrimentally on the range of services currently provided. Indeed the intention is for the change to make the services more sustainable and for there to be development of the services to better meet customer needs.

The breakdown of Somerset Schools<sup>2</sup> (as at January 2014) is set out in the table below:

	ct conoois (a	<u> </u>				
	Middle					
	(Deemed		All			
Primary	Secondary	Secondary	Through	Special	PRUs	Total
10						10
			2			2
39						39
12						12
	9					9
151						151
					4	4
		15				15
		_				
		8				8
				8		8
						J
		5				5
212	9	28	2	8	4	263
	Primary 10 39 12 151	Middle (Deemed Secondary 10 39 12 9 151	Primary Secondary Secondary  10  39 12 9 151 151 15	Primary Secondary Secondary Through  10  2  39 12 9 151 15 15 8	Primary Secondary Secondary Through Special  10  2  39  12  9  151  151  15  8  8	Primary Secondary Secondary Through Special PRUs  10  2  39  12  9  151  151  152  153  154  155  155  156  157  158  158

The breakdown of school Governance <sup>3</sup> (as at January 2014) is set out in the table below:

<sup>&</sup>lt;sup>2</sup> Analysis of school numbers taken from School Census information on iPost as at January 2014

Governance Academy - CA	Primary 28	Middle Deemed Secondary) 4	Secondary 21	All Through 2	Special	PRUs	Total 55
Community - CO	72	3	4		7	4	90
Foundation FO	5		2		1		8
Voluntary Aided – VA	38						38
Voluntary Controlled – VC	69	2	1				72
Total	212	9	28	2	8	4	263

The breakdown of schools by District <sup>4</sup>(as at January 2014) is set out in the table below:

Total	212	9	28	2	8	4	263
Somerset							
West	14	3	1				18
Taunton Deane	41		6		2	1	50
South Somerset	66	2	10		2	1	81
Sedgemoor	42	2	6	1	2	1	54
Mendip	49	2	5	1	2	1	60
District	Primary	Middle (Deemed Secondary)	Secondary	All Through	Special	PRUs	Total

The breakdown of other Early Years providers in Somerset 5

Private day nursery - 121 (118 from September – planned closures)

Voluntary and community group - 143 (142 from September – passing over to school governors)

Child minder (individual and groups) - 414 (400 on Early Years register)

Nursery units of Independent Schools - 13

Local Authority - 1

### **Updated November 2015**

Schools may will be affected by the MTFP saving on DSG funding for the narrowing the gap service. Although schools will still have access to the service some services such as training will be charged at full cost recovery. Schools will also have the opportunity to access additional visits although they are going need to pay for these from schools budgets.

Schools will still be able to access Somerset Total Communications. Any price increases will

<sup>5</sup> Figures from School Place Planning and Early Years Commissioning Team

<sup>&</sup>lt;sup>3</sup> Analysis of school numbers taken from School Census information on iPost as at January 2014

<sup>&</sup>lt;sup>4</sup> Analysis of school numbers taken from School Census information on iPost as at January 2014

be in line with inflation.

It is proposed, subject to consultation, that savings will be made through the reduction in management costs and back office functions.

Although SCC are expecting SSE to repay £250k of its loan in the next financial year (2016/2017) SSE are not planning for any significant changes in the services schools can access other than those mentioned above.

SSE has had a successful first year of full trading and as a result of this SSE is not proposing to increase its charges to schools by the 5% (plus pay and price) identified in the 5 year financial plan. Increases will be no more than 3% for 2016/2017 academic year. The balance will be found through use of reserves in order to limit the impact on schools.

### Section 2B – People who are delivering the policy or service

### Staff

SSE initially comprised approximately 370 full time equivalent staff across 20 services (Option A). From 1 October 2014 arevised transitional service scope was implemented (Option C). This comprises approximately 230 full time equivalent staff and 15 services. The change arose as a result of various strategic issues and took into account stakeholder concerns that the initial scope was too large. The current in scope services are structured under three main areas:

#### **Educational Effectiveness**

**School Improvement** - School improvement services as part of the LA's responsibilities as champion of children and families and promoter of educational excellence. This includes monitoring and evaluating the progress of schools and intervening where appropriate. **Early Years Improvement** - provides support to settings and families with young children with special education needs or English as an additional language.

**Governor Support** - provides support and advice to governing bodies of secondary and special schools and academies (this latter group on a wholly traded basis).

**ELIM (Schools Curriculum and IT admin)** - ICT Curriculum and Management Information Strategy for Schools, traded service for schools providing ICT curriculum and SIMS support and advice.

**Education Psychology**- works on behalf of children and young people from birth to 19 and those responsible for their care by facilitating the development of objectives and strategies to enhance learning, development and well-being.

**Narrowing the gap -** Ethnic Minority Achievement/Traveller Education/Equalities and Diversity/English as an Additional Language - supports and advises staff in schools on how they can meet the needs of pupils form these groups and raise their attainment

### **Enrichment and Entitlement**

**Education Attendance** - provides advice to schools and SCC enabling them to fulfil their statutory duties in relation to school attendance issues

**School Admissions -** delivers SCC's statutory responsibilities in relation to school admissions, school transport, early years entitlements and Free School Meals **Somerset Music** - delivers music tuition in line with the National plan for music education 2011(NPME). As part of the NPME it delivers first access programmes (Whole class ensemble tuition, WCET), progression tuition, ensembles, singing strategy, low cost instrument hire and large scale music events.

**Somerset Outdoor Residential and Learning Service** – offers outdoor learning from Residential Learning Centres at Kilve, Charterhouse and Greatwood. Also provides courses for gifted and talented pupils.

Resources for Learning - School Library Service

**Commercial Development –** provides support across SSE and developing its commercial/business culture and operation

#### **Business Services**

**Finance** – provides support and training to schools and academies in effective financial management.

**Human Resources** - provides expert support, guidance and advice to assist school leaders and governing bodies in carrying out their staff management and employer responsibilities. **Contract Support** - offers an advice and support service to School Management and Governing Bodies on all aspects of letting and monitoring contracts for Cleaning, Catering, Refuse/Recycling and School Meals

**Health and Safety**- provides support to schools and academies to enable them to comply fully with Health and Safety legislation and maintain a safe environment for pupils and staff. **SCIL & SCITT** – provides professional development and teacher training. South West One services are not in scope.

# The following services were originally in scope under Option A but are now out of scope under Option B

**SEN Casework -** fulfils the Local Authority's statutory responsibilities to '...Identify and assess Special Educational Needs, making and reviewing Special Educational Needs statements and a transition plan from age 14

**Sensory, Physical and Medical Support -** The Hearing, Vision and Physical and Medical Support Service is an educational advisory support service which provides specialist educational assessments and interventions for children and young people with hearing, medical, physical or visual needs arising from an identified condition or impairment. Working in partnership with families, educational settings and other agencies, the team aim to enable children and young people to access their education and communities.

**Autism/Comms Support -** Supports schools with the identification and implementation of strategies that enhance inclusion for pupils with Autistic Spectrum Disorder (ASD). The Speech, Language and communication team supports schools in the implementation of strategies that enhance the inclusion of pupils with Speech, Language and Communication Needs.

**Learning Support -** The Learning Support Service is part of the SEN Group within the Children and Young People's Directorate and works with schools and localities in the context of the Somerset interpretation of the SEN Code of Practice.

The Business Case recommends the confirmation of the Option B service scope with the options of further services being added at a later date when the service requirements have been clarified.

### Staff statistics:

The staffing information available to Somerset County Council is by age, gender, ethnicity, grade/Income and disability. Impacts resulting from any decision will have a disproportionate effect on Women and those over the age of 40.

Age: 59% of staff are aged 41+ Average age is 44 Gender: 76% of staff are Women.

Ethnicity: 82% of staff are White: English/Welsh/Scottish/North Irish/British. Grade/Income: 60% of staff are between Somerset Grade 15-10.

Disability:97% of staff do not have a disability.

Location: 58% of staff are located in Taunton the remainder are located across the County. The Business Case assumes that under either model staff would remain in their current location.

The staff data has been gathered from the SCC HR Database (SAP)

Any transfer to an external entity is likely to result in the application of TUPE (Transfer of Undertakings Protection of Employment) for the in scope staff and an application for that new entity to be allowed admitted body status in respect of the pension arrangements for those staff. There will be an on-going pension liability for SCC, which has yet to be quantified, however initial investigations suggest that this would not of itself be significant enough to outweigh the potential benefits of that transfer.

Potential impacts include loss of staff to other organisations, resistance to change, and fear of what the future my hold. Considerations include pensions and insurance.

If the service remains in-house, staff would retain public sector terms and conditions for their employment and staff and may as a result feel more secure.

Whilst it is not expected that any change in the service delivery model/or retention of the inhouse model would cause redundancies of itself, there is the possibility that under either model the move towards full cost recovery may have an impact on the structure of SSE. In addition under either option/model, SSE may be affected by changes in SCC's budget and the degree to which schools and academies decide to buy back traded services.

# **Updated November 2015**

SSE units have come together and creased a clear vision for SSE. Staff engagement has been crucial and almost all units are over achieving growth and efficiencies.

SSE is however looking at the potential of 3 redundancies, although these will be subject to formal consultation. The remaining savings for 2016/2017 will be achieved through ending fixed term contract posts and those employed through Somerset Staffing. It is also expected savings will be achieved during 2016/2017 through a reduction in the number of bases SSE uses.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

### The following data has been used for the assessment:

**Engagement with Schools** The following stakeholders have been engaged as the project has progressed:

**Head teacher Associations** 

**School Business Managers** 

Schools Client Group (schools, SCC and Southwest One officers – discuss performance/development of traded services) Unions (JCC/JNC/JCNC) Staff (in scope for SSE)

### Summary of Stakeholder views **Engagement with schools and academies**

The following stakeholders have been asked for their views and provided with regular updates throughout the project; Headteacher Associations, Compact Executive, Client group, Traders including Southwest One, Community Learning Partnerships, School Business

Managers, Governors, Early Years Cluster leads, SSE in scope staff, SSE out of scope support staff e.g. Business Support, Unions, Members.

Engagement has included an on line survey, attendance at regular meetings, provision of briefing notes and updates. There has been limited engagement with parents/individual users of the service as it is not expected that a change in service delivery model would have a significant impact to levels of service provided. The exception would be a move to a charitable trust where there would be some potential impacts arising from VAT implications. If that model is to be adopted further consultation would be needed to assess the impact and potential for mitigation and this would be factored into the implementation plan.

The findings of stakeholder engagement undertaken as part of Phases and 1 and 2 of the SSE project are summarised below. The full details for Phase 1 are set out in the report 'Future Arrangements for Provision of services to schools' considered by Cabinet on 8/7/13. Further detail of the feedback received during Phase 2 of the project is set out in the SSE Business Case – Appendix D. This is being considered by Cabinet on 10 December 2014.

# Summary of findings Phase 1of the SSE project – 2013

Most important factors for schools in determining future arrangements were;

Existing valued services are preserved, services are of high quality and provide value for money, any surplus generated from traded services should be reinvested in provision for Somerset children and young people, the wish for schools to have the balance of control if an arms' length model was introduced.

Consistent support for the services provided by the County Council, particularly those supporting schools in their business and management functions.

High quality support for Raising Achievement and School Improvement is a key area for development

### Phase 2 - 2014

There has been wide ranging and on-going stakeholder engagement throughout Phase 2 of the project. The full details are set out in Appendix D of the SSE Business Case.

Overall the findings of Phase 1 have been validated during Phase 2 – the key points are; Services are valued and schools wish to see them continue subject to good quality and fair price.

Want to see good level of commercial expertise whether in-house or external.

If there is to be a move to an external organisation the majority would prefer an independent model – they want schools to have a significant involvement.

Schools owned model is ahead of charitable trust – although schools would like more detail. Some concern has been expressed about the scale of services being included in scope.

### **Engagement with In House staff –**

Throughout 2014 staff have been kept informed and had the chance to find out more about the potential options. There have been and will continue to be staff awareness sessions around key milestone dates to inform staff of the decisions that have been taken, and their feedback has been used to help inform the Business Case and Business Improvement Plan for the SSE Unit.

Alongside the awareness sessions a monthly newsletter is produced to update staff in more detail on some of the activities undertaken and there have been drop in sessions for staff to raise questions or concerns.

The Change Programme website provides access to project updates. This includes a Frequently Asked Questions document and a channel for posting new questions if staff should have them. A similar extranet page was also created so that those affected staff without an SCC network could have the same information made available to them.

Most recently staff have been involved in supporting the work of task and finish groups to progress the implementation of the Business Improvement Plan.

# **Updated November 2015**

Narrowing the Gap assessments.

Although numbers of reviews carried out by the Advisory Teachers has increased steadily over the past three years (see below), numbers of centrally led courses have decreased to allow time for this.

Year	No. of Reviews
2012-13	56
2013-14	68
2014-15	82

Previously advisory teachers have been carrying out assessments which would normally be done by English as Additional Language Support Advisers (EALSA). There is currently capacity in the EALSA to cover this work which would release the advisory teachers to carry out the higher level duties

Area Base staff moved under SSE in September 2015.

- Provide admin support services for over 150 professional staff.
- There are 33 (22.35 FTE) support staff in the Area Bases consisting of:
  - 10 term time only staff
  - 17 all year round staff
  - 2 staff on fixed term contracts
  - 3 Somerset Staffing temporary staff
- There are 3 additional staff who work directly to the Education Psychology Service and support SEN Services.

MTFP savings will be achieved through the reduction of the above 5 post (fixed term contracts and Somerset Staffing temporary staff. There is a further 1 fte vacancy which will be deleted from the structure. Savings will also be made through reduction in premises costs.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy

This change (i.e. a change in the service delivery model for SSE) is being considered because;

Schools value the services and want them to be sustainable in the future

SCC has confirmed its commitment to the services but wishes to ensure they are provided through the most cost effective, sustainable model

The project drivers relate to provision of high quality services focused on educational outcomes and sustainability rather than specified savings which might result in a change in service

Irrespective of any potential decision to move SSE to an arms' length organisation, the inhouse model is already in the process of implementing a Business Improvement Plan which will move the unit towards full cost recovery and a more commercial/customer focused approach. Whilst this will result in price increases, it is not expected that there will be a detrimental impact on the services provided but rather that the services will become more sustainable and more customer focused

### **Updated November 2015**

SSE is making excellent progress towards meeting the expectations outline in the 5 year financial plan. SSE is expecting to exceeds its growth and efficiencies savings for 2015/2016. SSE is expecting to end the financial year 2015/2016 with a further surplus of £415k.

MTFP savings for 2016/2017 will be achieved through the potential 3 redundancies and though reduction in staff on a fixed term contract. The £250k additional loan repayment will be achieved through increase growth targets on services within SSE.

### **Community Safety**

No direct implications arising from this report

### **Equality**

The main impact of a transfer out of SSE would be for staff who are expected to be subject to TUPE. The majority of staff are female.

### **Updated November 2015**

The three members of staff affected are two female and one male. Full 45 days staff consultation will take place prior to any decisions being made.

#### **Health and Safety**

There is no inherent new or increase in risk associated with outsourcing a service which focuses on trading with educational establishments. However, as the outsourced service contains a H&S team which will continue to deliver statutory duties to establishments on behalf of SCC, the proposal will have implications for SCC's risk profile.

# Potential benefit or reduction of anticipated increase in risk to schools, and therefore SCC

As the proposal is intended to secure services for schools and avoid their erosion through salami slicing, SCC schools should be able to continue improving/maintaining their level of H&S compliance using the services available, as long as those services can remain cost-effective and those responsible for delivering them continue to invest in suitable people.

# Increase in potential risk to SCC

A move to an arms' length model potentially creates the hitherto non-existent conflict of interest through deployment of the same finite H&S resource outside SCC control required to both:

- deliver statutory duties to schools on behalf of SCC and
- generate increasing levels of income for the new organisation

The risk of reduced effort being devoted to the statutory work will have to be controlled through an effective SLA design, monitoring and review process – with a robust escalation route built into the contract between SCC and the partner.

The model splits the centralised H&S resource within the LA into two discrete components with separate line management arrangements. Both components have the common aim of ensuring the adoption of good H&S standards via SCC policies and procedures in the areas where they apply. The real loss of flexibility and mutual support within the single unit, plus the potential loss of maintaining a common understanding between the new teams, will make it more difficult to deploy resources effectively to address new or emerging H&S risks to SCC.

This will have to be minimised by effective liaison – but that will become increasingly difficult as personalities change and the two organisations move further apart. If SSE were to remain in-house, the increased risk caused by the split should be taken into account when its future make-up and structure is being reviewed.

Maintenance of the important links with retained SCC functions, primarily Insurance and Property Services will be more difficult from outside the Council and may result in increased claim success under Employers' and Public Liability as well as poor premises related outcomes.

In order to perform its role effectively in support of schools and SCC, the SSE H&S team will need to retain these close links and overcome any barriers to the sharing of information that may be created by the separation.

# **Updated November 2015**

No health and safety issues identified as a result of planned MTFP savings.

### **Health and Wellbeing**

No additional comments

#### **Privacy**

### Transfer of SSE to an external arms' length organisation

Further work is required to identify how the Council would discharge its responsibilities around Data Protection and Freedom of Information should a move to an external arms' length organisation be preferred. However, it has been assumed that the provider would not be treated any differently to any other supplier organisation in this regard.

Matters for consideration at a later date will include:

- Confirmation of the Data Controller/Data Processor in any new model
- Data types
- Further work on information required and agreements needed.
- Data Protection, Data Subject Access Request, Freedom of Information and Data Security Contract clauses if any of the services go out to tender
- The implementation of a secure data transfer process if an external organisation is formed or an external contractor engaged.
- Clarification of the need for integration with current Adult Social Care systems if an external organisation is formed or an external contractor engaged.

 The need to use paper records and the related risks, if electronic data transfer is not used

There could be considerable risk to information security if it is agreed to move to an arms' length organisation: the most crucial risks are the disclosure of client personal data and the disclosure of employees' personal data. Should either be disclosed by loss or theft there is a potential for significant damage to:

- The individual concerned
- The reputation of SCC
- Fines of up to £500,000 from the Information Commissioner's Office.

If it is decided to progress an arms' length organisation the implementation plan will take into account the need to clarify and manage these issues including the need to establish the relevant contractual documentation.

Any new organisation may need to be registered with the ICO as a data controller depending on the exact nature of the contract and the responsibilities taken on by the new provider.

The new organisation will need to show that it has the administrative and technical controls to keep personal information secure and to share it effectively.

The contract with the new organisation will need to include the Standard T&C's that contain the data protection information security and FOI clauses.

The risk of a personal data breach is raised as SCC will not have direct control over the collection, processing, storage, transmission and destruction of the personal data held by the new organisation.

#### Remain In House

There are no additional risks to privacy as the processes for collection, processing, storage and transmission will remain the same as now. Any efficiency savings that may be introduced must not impair SCC's duty to keep personal data secure

# **Updated November 2015**

No privacy issues identified as a result of planned MTFP savings.

### Sustainability

No additional comments

### Risk

Depending on the decision taken, threats and risks will need to be assessed in order to ascertain how we can support communities through any potential changes.

There are a number of risks identified throughout the Impact Assessment; these will be explored further when the decision has been taken.

Likelihood	Impact	Ris	sk Score
	iiiipaot	1 1 1 1 1	,,, 000,0

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

Overall it is not expected that a move to an arms' length organisation would negatively

impact on the type/number of services offered to schools/early years providers. All models including the in-house service will result in price increases in order to provide a sustainable service into the future.

### **Updated November 2015**

MTFP savings can be achieved through the above reductions. These also support SSE to achieve efficiencies outlined in the 5 year financial plan.

SSE's first year of trading has been positive. SSE has achieved expected efficiencies/growth targets for 2015/2016 and is currently expecting to add a further £415k to its reserves.

Putting SSE to an arms-length organisation will attract additional scrutiny from our partners in the NHS for the potential transfer of Health records for the purposes of SEN. The organisation may well find it needs to compliant with the requirements of the NHS Information Governance Toolkit.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

This impact assessment will form an appendix to the Business Case for the Support Services for Education Project which is due to be considered by the Cabinet on 10 December 2014. The Business Case and accompanying Cabinet report will also reference the identified impacts and set out mitigations to inform the decision.

The Business Case (including the impact assessment) will be available on the SCC Internet site at that time. If it is agreed to change the service delivery model, the impact assessment will be reviewed as part of the resulting implementation plan.

### **Updated November 2015**

This updated impact assessment will be used to support SSE MTFP financial savings and support the one year review of SSE.

•		Kate Marks – updated by Ian Rowsell – November 2015		
Date		18.7.2014		
Signed off by:		Kay A	Allen & Richard Willia	ams
Date		August 2014 & January 2016		
Compliance sign off Date		October 2014 & November 2015		
To be reviewed by: (officer name)		lan R Educ	owswell Head of Supation	oport Services for
Review date:		November 2015		
Version	3.0		Date	16/11/14
Updated version	1			2 <sup>nd</sup> November 2015

	Equality Im	pact Assessment Issu	es and Action Tal	ble		
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?	
Age			•			
Most staff 40yrs plus	Staff engagement	SSE Manager	Ongoing	SSE Leadership Team	Upskilling of staff where needed	
Disability	,			,		
N/A						
Gender Reassignment						
N/A						
Marriage and Civil Part	nership					
N/A						
Pregnancy and Materni	ity					
N/A						
Race (including ethnicity	or national origin, colour, nation	onality and Gypsies and	Travellers)			
N/A						
Religion and Belief						
N/A						
Sex						
N/A						
Sexual Orientation			·			
N/A						
Other (including caring r	Other (including caring responsibilities, rurality, low income, Military Status etc)					

Healt	th and Safety, Sustainability,	Community Safety Imp	oact Assessment	Issues and Action T	able
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
	Health	and Safety Issues an	d Action Table		
Need to ensure discharge of SCC duties through SSE	Contractual documentation if external, Service Level Agreements for internal	SSE Manager	SLA – Spring 2015	SCC Commissioner – Health and Safety	No impact for SCC
	Sus	tainability Issues and <i>i</i>	Action Table		
N/A		,			
	Comm	unity Safety Issues an	d Action Table		
N/A					
	F	Privacy Issues and Act	ion Table		
Need to confirm statutory requirements if moving SSE out. None if in-house	Contractual documentation if external, SLA if internal.	SSE Manager	SLA – Spring Term 2015	SCC Commissioner – Information Governance Manager	No impact for SCC

# **Equality Impact Assessment Form and Action Table 2015**

(Expand the boxes as appropriate, please see guidance (<u>www.somerset.gov.uk/impactassessment</u>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind.**"

### **Baroness Thornton, March 2010**

What are you completing the Impact
Assessment on (which policy,
service, MTFP reference, cluster etc)?

MTFP R16-021b

Version Date

Section 1 - Description of what is being impact assessed

Reduction in HR-OD budget of £170,000

**Section 2A** – People or communities that are **targeted or could be affected** (taking particular note of the Protected Characteristic listed in action table)

Potential impact on HR staff of shrinking team and increased demand for service from the organisation. This in turn may have an impact on teams delivering services to people and communities.

Section 2B – People who are delivering the policy or service

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

n/a – straight reduction to HR budget

**Section 4 – Conclusions** drawn about the equalities impact (positive or negative) of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

There is no impact on specific group, rather a potential impact on the HR service across Somerset County Council. This will be addressed through taking savings from existing vacancies and carefully monitoring the workload of the team.

# DRAFT – CONFIDENTIAL – NOT FOR PUBLICATION (Officer Non-Key Decision between £25k and £250k – [Click **here** and type date]))

ions needed – can u mitigate the pacts? If you can	Who is responsible for the	How will it be				
w will you mitigate impacts?	actions? When will the action be completed?	monitored? What is the expected outcome from the action?				
Gender Reassignment						
nal origin, colour, nation	nality and Gypsies and	Travellers)				
oilities, rurality, low incor	me, Military Status etc)					
	nal origin, colour, nation					

<b>Section 6</b> - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment			
The IA will be considered in line alongs	ide regular 'health-checks' of the HR service		
Completed by: Chris Squire			
Date 6 <sup>th</sup> January 2016			
Signed off by: Chirs Squire			
Date 6 <sup>th</sup> January 2016			
Compliance sign off Date January 2016			
To be reviewed by: (officer name) Chris Squire			
Review date:	January 2017		

### **Impact Assessment Form and Action Table 2014 - 2016**

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

### **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?					
Proposed New Policy or Service	Change to Policy Service Y		MTFP or Paper	Service Review or SCC Change Programme	
			Y		
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		МТ	TFP R16-022		

### **Section 1 – Description** of what is being impact assessed

The contract with PLUSS was structured to reduce SCC funding year on year over its lifespan and to cease after year 5. This IA looks at any implications of the final cessation of funding. The service will not be renewed after this end date. If this was not the case then the service would have to be re-procured in any case, and there is no guarantee that PLUSS would win this contract.

PLUSS is currently looking to convert to a Community Interest Company (please see Cabinet paper from 14<sup>th</sup> October 2015). They offer specialist employment support to people with a learning disability, mental health issues, physical disabilities and long term health conditions and other disadvantages into employment through a range of specialist, local employment services and through direct employment within commercial enterprises. This service also supports disabled ex-service men and women. The cessation of SCC funding is not expected to impact on the business model and support given it was a phased withdrawal, mapped out in advance.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

This change relates to one contract which currently supports people under 65 years of age with a disability in Somerset. Previous research (2014) suggests those supported were 98.5% White British (compared to 95.76% of Somerset population) and 70.15% male (compared to 48.7% of the Somerset population) (ONS 2010). Any changes to the service provision could have a disproportionate impact on men supported by PLUSS.

Somerset County Council has been working in partnership with PLUSS to remodel the service to meet efficiency targets over the last few years.

### **Section 2B** – People who are **delivering** the policy or service

This contract relates to employment services delivered by PLUSS. PLUSS employs over 600 people in the UK around half of whom have a disability.

Somerset County Council is not the only funder for this organisation but the reduction of funding may have some impact on their employees. PLUSS operates throughout the South West and West Yorkshire, with partner social enterprises across the UK. PLUSS receives significant funding from and currently develop, deliver and manage a range of innovative employability programmes on behalf of DWP (Work Choice prime contractor), a number of local authorities, NHS, European Social Fund and the Skills Funding Agency. They have been aware of the intention not to renew or continue with SCC funding post March 2016 for some time and it has formed part of their planning process.

The makeup of their workforce across the UK is:

650 employees

308 with a disability (mobility, hearing/speech, Learning Disability, Mental Health disability, visual impairment)

In Somerset there are around 40 employees. Support continues despite funding changes and PLUSS have not indicated that there will be any impact on staff.

PLUSS has already restructured and altered the way it delivered services which had resulted in local redundancies in Bridgwater. However earlier this year the Strategic lead for SCC felt that PLUSS "are acting responsibly and making sensible changes well ahead of the end of contracts with a view to modernising their business and making it sustainable for the longer term."

# **Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

This assessment is based on publicly available information on PLUSS and on previous discussions with PLUSS.

In addition, the plans for PLUSS to become a Community Interest Company were outlined in a Cabinet paper of 14/10/15.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

### **Community Safety**

No impact identified

### Equality

The service supports disabled people and their aspirations to gain employment. PLUSS have worked to restructure their business over the last few years and to maintain support as a result. Funding reductions have been agreed in discussions with PLUSS and as such support for people with a learning disability, mental health issues, physical disabilities and long term health conditions should continue utilising new funding resources.

### **Health and Safety**

No impact identified

### **Health and Wellbeing**

No impact identified

### **Privacy**

If required, additional signposting to new services and the sharing of personal and sensitive data with new partners and contractors will be managed to ensure compliance with the Data Protection Act and associated Caldicott principles. This may require the creation of data processing agreements or data sharing agreements depending on the contractual relationship with the new partners and / or contractors

### Sustainability

There is a potential compound effect if other public sector partners reduce their contracts too. The reduction in funding has been managed over an agreed period and monitored through the contract management processes. PLUSS has a robust financial model designed for its new life as a Community Interest Company and this is not dependent on SCC funding.

### Risk

### Financial

PLUSS have assisted SCC in managing their funding efficiencies for this service over the last 5 years. In addition they have undertaken a significant financial assessment of their future for their potential transfer to a Community Interest Company. It is not anticipated that the decision not to renew this contract will adversely affect the organisation. Score L1xl1

### Reputation

SCC, as a current joint owner of PLUSS, has a vested interest in its current and future success. Although in the future the company will not be owned by the local authorities, it would be potentially damaging if such an important provider were to fail. This is not likely given their numerous other financial and business interests across the UK. Score L1xl5

### Social

PLUSS is an important regional and national partner and is one of the leading organisations of its type in the country, having a significant social impact on work training for the disabled. It has significant contracts with other public sector bodies and is expected to be able to continue its work locally without the current SCC contractual arrangements.

Score L1xl1

Likelihood	1	Impact	3	Risk Score	3
------------	---	--------	---	------------	---

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

The decision not to renew the current contractual arrangements was part of an overall strategy for reducing funding and has therefore been communicated to PLUSS who have made plans on this basis for the future. The impact therefore should not affect their organisations future or the people they are able to support. It is therefore recommended that the planned decision not to renew or extend the contract is the right one in the current financial climate.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

SCC will write to PLUSS to confirm the previous discussions. The overall funding decisions form part of the SCC Budget for 2016-17 and as such will be formally agreed

in February 2016.					
Completed by:			T Baverstock		
Date		22/12	:/15		
Signed off by:		K Curry			
Date		22/12/15			
Compliance sign off Date		December 2015			
To be reviewed by: (officer name)		T Baverstock			
Review date:		Sept 2016			
Version	1	Date			December 2015

	Equality Im	pact Assessment Issu	es and Action Ta	ble	
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age					
None					
Disability					
It is recognised that the service and its employee policy supports the equal working rights of disabled people.	The service has a business plan and other funding sources with which to continue its work with little impact.	PLUSS	April 2016	PLUSS will continue to be an important partner and their progress will be monitored, particularly during their conversion to a Community Interest Company.	That's PLUSS remains a vibrant and important social provider.
Gender Reassignment			•	•	•
None					
Marriage and Civil Part	nership				
None					
Pregnancy and Materni	ity				
None					
Race (including ethnicity	or national origin, colour, nation	nality and Gypsies and	Travellers)		
None					

Religion and Belief						
None						
Sex						
None	None					
<b>Sexual Orientation</b>	Sexual Orientation					
None						
Other (including caring responsibilities, rurality, low income, Military Status etc)						
None						

Healt	th and Safety, Sustainability,	Community Safety Imp	act Assessment	Issues and Action	Table
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
	Health	and Safety Issues and	Action Table		
	Sust	tainability Issues and A	Action Table		
	Comm	unity Safety Issues an	d Action Table		
Privacy Issues and Action Table					

### **Impact Assessment Form and Action Table 2014 - 2016**

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

### **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?					
Proposed New Policy or Service	Change to Policy Service	or MTFP savings: Reduction in Somerset County Council contribution to Youth Offending Team pooled budget: £138,900	Service Review or SCC Change Programme		
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		Somerset Youth Offendi	ng Team		

### **Section 1 – Description** of what is being impact assessed

The Youth Offending Team ("YOT") is a statutory partnership of which the Local Authority is lead member and accountable partner. The YOT is resourced by

- "in-kind" contributions by partner agencies (eg seconded staff)
- a statutory pooled budget made up of contributions from partner agencies
- a Youth Justice Grant made by the Youth Justice Board. This has been reduced in year in 2015/16 by 10.6%.

The levels of reductions in partner contributions or the Youth Justice Grant 2016/17 are as yet unknown, but anticipated.

The statutory purpose of the YOT is to reduce offending and re-offending by children and young people. All business is delivered to meet statutory requirements and the core work with offenders is demand driven in that the work flows from within the criminal justice system. There is flexibility over the level of YOT resource committed to preventative work. The activities necessary to deliver the relevant statutory requirements include:

- Provision of Appropriate Adults at police stations (140 call-outs p.a.)
- Attendance at cautioning panels (50 panels p.a.)
- Service to Magistrates Courts (50 court sittings per annum plus about 60 stand-by Courts and Crown Court where required)
- Production of Reports for Courts (about 60 p.a.)
- Supervision and enforcement of statutory orders including cautions on young people (active caseload about 100)

- Operation of MAPPA level 1 and high risk and vulnerability panels (25 per year)
- Delivery of additional court ordered programmes (eg AIM2 for Sex Offenders)
- Supervision and enforcement of parenting orders. Our policy is to deliver this work by voluntary contract and therefore we have very few such orders. Parenting work is particularly important with sexual offenders living at home.
- Operation of volunteer referral panels (about 100 p.a.)
- Training/support of volunteers for panels and AA work (minimum pool about 50 active volunteers)
- Engagement of victims (about 50 per year) and offer of restorative interventions
- Delivery of Intensive Supervision and Surveillance Programmes in some bail, community orders and post-release orders.
- Provision of Reparation Programmes and "Unpaid Work" requirements within orders

The total operating resources in 2015/16 are

- Seconded posts: 4.2 f.t.e.staff
- Pooled budget: £1.482k (which pays all staff and operating costs)

The number of children entering the Youth Justice System nationally and locally has reduced steadily over recent years so that the Youth Offending Team has remained able to deliver the necessary volume of statutory services despite year on year reductions in resources.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

The statutory target groups for the Youth Offending Team are young offenders aged 10-17, their families and their victims. The active caseload, which is currently running at approximately 100, includes a relatively high proportion of young people with particular needs and vulnerabilities such as looked after status, learning difficulty and poor emotional wellbeing. The proportions of particular needs vary from time to time.

### Section 2B – People who are delivering the policy or service

The service is delivered by SCC staff and a small number of partner agency staff seconded to the YOT. The service recruits, trains and supports approximately 130 community volunteers. A number are required statutorily to sit on Referral Panels. Others act as statutory Appropriate Adults and/or "Buddies" for vulnerable young people.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

The Youth Justice Plan 15/16 is attached. The caseload referred to is the current number.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

# **Community Safety**

The statutory purpose of the Youth Offending Team is to prevent offending and reoffending by children and young people. This responsibility lies alongside the statutory purpose of the Safer Somerset Partnership, of which Somerset County Council is a statutory member, to reduce re-offending. The reduction in caseload numbers means that no adverse effect upon rates of anti-social behaviour by young people is expected.

### **Equality**

In year savings required to manage the reduction in the Youth Justice Grant have been achieved by non-replacement of staff who have left the service. All posts currently vacant will be deleted. This will lead to a permanent overall reduction in service capacity. However, the reduction in young offenders entering the system means that the level of service will be maintained on a case by case basis and the specialist resources will be sustained. Thus there will be no disproportionate impacts on those protected under equality legislation.

### **Health and Safety**

The service will be able to continue to comply with Somerset County Council H&S requirements and relevant legislation. Therefore there will be no adverse impact on SCC's liability in respect to H&S potential failings.

# **Health and Wellbeing**

The delivery of existing specialist work within the YOT will continue so there will be no impact upon health and wellbeing.

### **Privacy**

In order to operate, the service accesses and collect sensitive information about vulnerable young people who appear on many different databases.

It is essential that existing protocols and data sharing arrangements continue to operate effectively regarding such data that and comply fully with the provisions of the Data Protection Act.

If any partner services should cease to operate, they shall ensure that any such personal data, which they hold for the purposes of the YOT, is returned to the YOT and securely deleted from their own electronic devices, networks and servers. Steps will also be taken to ensure the secure removal of any such personal data which could be left on devices of departing staff members.

No impact is expected.

### Sustainability

YOT performance indicators include inclusion of young offenders in education training and employment. This work will continue. No impact is expected.

### Risk

The service is structured in a way that will allow for normal variations in demand to be

managed effectively. A sustained increased in offending by 10-17 year olds might exceed service capacity but there is no reason to expect this at a local or national level within the foreseeable future. The reducing number of young offenders also means that the current good performance levels can be sustained.

It is expected that there will be reductions in other funding sources but these have been allowed for in budget planning.

<b>Likelihood</b> Likely	Impact	Minor	Risk Score	4
--------------------------	--------	-------	------------	---

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

The YOT staff remaining after the deletion of current vacancies will be reorganised to ensure that they are deployed in an effective manner and some specialist roles will be transferred to the targeted Youth Support Service. Youth Justice statutory responsibilities will thereby continue to be delivered.

The close working with the Targeted Youth Support Service which has assisted in achieving the good performance levels of the YOT will continue.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

The statutory Youth Justice Plan for 16/17 will set out how Youth Justice services will be resourced and delivered in that period. The annual plan is circulated to partner agencies and published by the YJB.

Completed by:		Γom Whitworth			
Date	Date				
Signed off by:		Julian Wooster			
Date	Date				
Compliance sign off	Compliance sign off Date		December 2015		
To be reviewed by: (officer name)		Tom Whitworth			
Review date:		November 2016			
Version	1	Date			



# Somerset Youth Offending Team

# **Youth Justice Plan**

**April 2015 - March 2016** 

Youth Offending Team Managers signature:

Dated 29<sup>th</sup> June 2015

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- 1 Introduction
- 2 Structure and Governance
- 3 Resources and value for money
- 4 Partnership arrangements
- 5 Work with young offenders
- 6 Service Improvement
- 7 Risks to future delivery

# 1 <u>INTRODUCTION</u>

### 1.1 SUMMARY OF ACHIEVEMENTS 2014/15

This plan sets out a summary of where we have arrived over the previous year and our intentions for the year to come. The first section shows progress against the nationally and locally agreed measures. It also shows more detail of the differences between the male and female offender cohorts that will continue to be reported as part of the measures to address better the needs of female offenders; this is discussed further below. The tables show:

- First time entrants continue to decline. Whilst the rate is higher than regional and national rates, it is lower than the Avon and Somerset Police force area average.
- The proportion of female offenders appears to have stabilised at around 20% with violence and dishonesty as the predominant offence types.
- The reoffending rate in Somerset continues to edge downwards whilst in many parts of the country it is now increasing. The numbers involved are small and fluctuations may be expected.
- The use of custody locally has declined to the extent that Somerset is now one of the lowest users in the country. The numbers involved are very small so significant fluctuations in rate can be expected from time to time, but the overall position is clear.
- Engagement in Education, Training and Employment continues to be an area for focussed efforts. The slight downward trend was an expected consequence of the more difficult labour market and loss of incentives such as the Education Maintenance Allowance. The reduction in engagement by school age children is a concerning national trend.
- The slight decline in accommodation suitability is difficult to interpret in the light of the lack of guidance for staff on how to assess suitability. We will seek guidance for staff to improve the consistency and comprehensibility of these figures.
- The offending rate of looked after children in Somerset, as measured by the DfE indicator, has continued to decline significantly after a number of actions were taken. We will continue to monitor the details of offences in order to identify further opportunities for reduction.

# **TABLES**

TABLE 1.1A1 FTES 2012/15

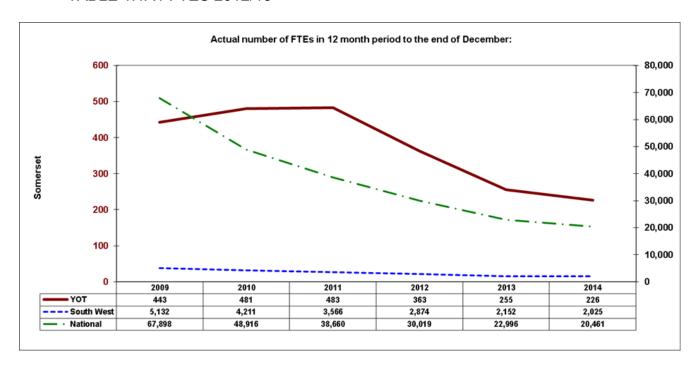


TABLE 1.1A2 OFFENCE TYPE BY GENDER

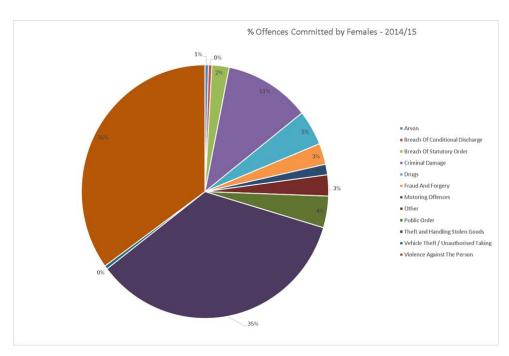


TABLE 1.1A3 GENDER/ETHNICITY OF CURRENT OFFENDER CASES

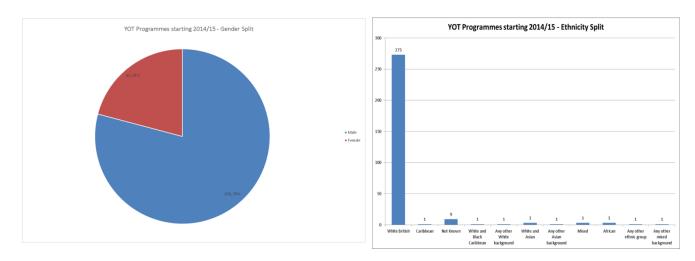


TABLE 1.1B REOFFENDING 2012/15

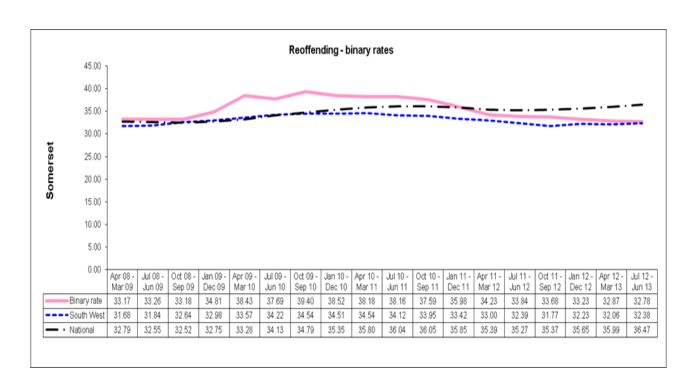
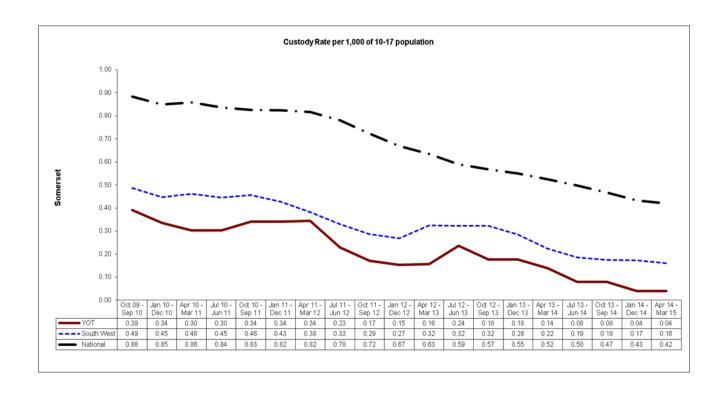
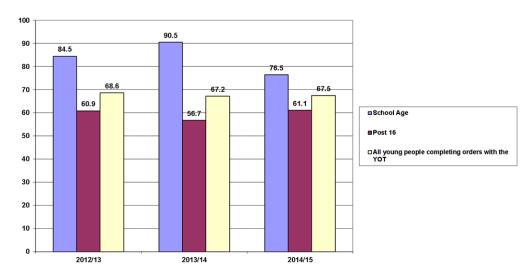


TABLE 1.1C USE OF CUSTODY 2012/15

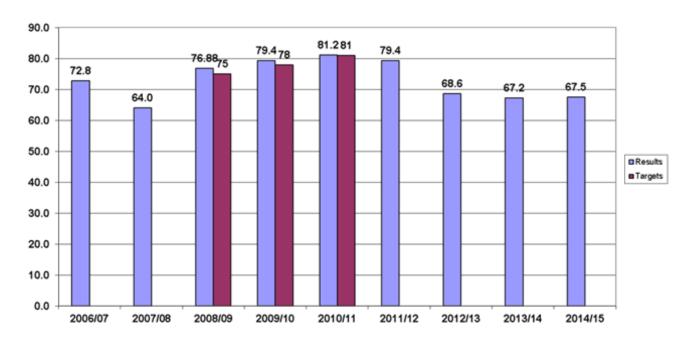


### TABLE 1.1 D ENGAGEMENTS IN ETE 2012/15

Percentage ETE Comparison between school age and over school age young people



### % in Full-Time Education, Training and Employment



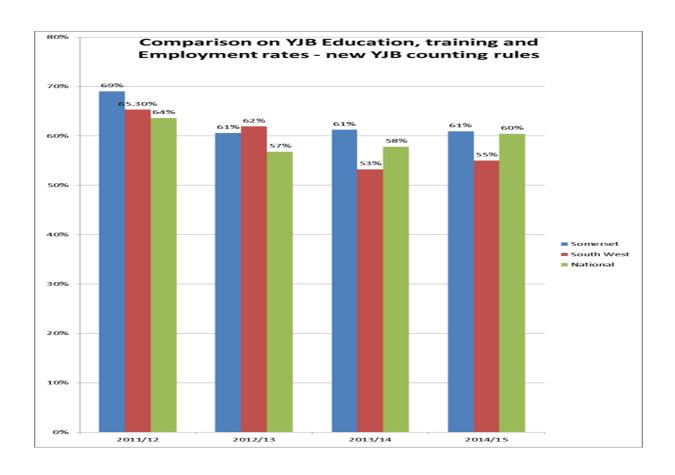


TABLE 1.1E SUITABILITY OF ACCOMMODATION 2012/15

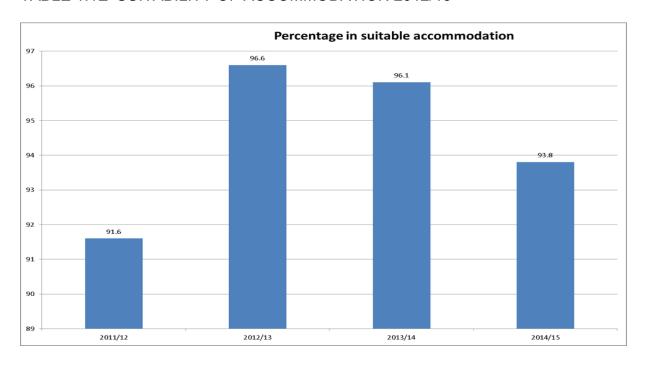


TABLE 1.1F OFFENDING BY LOOKED AFTER CHILDREN 2012/15

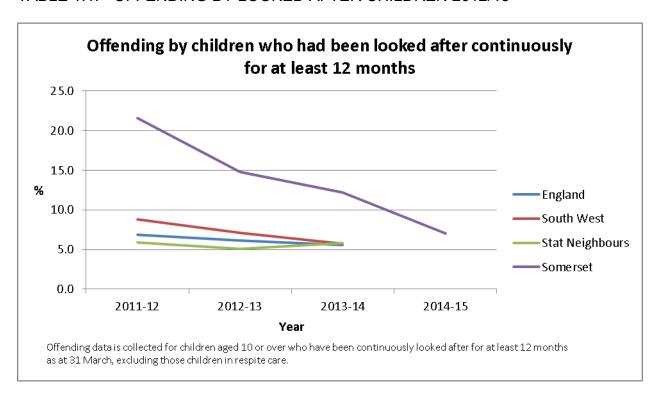


TABLE 1.1G TYPES OF OFFENCE BY LAC 14/15 BY GENDER

All children		2013				2014		
7 til Crillar Cri		Look	ed after child	dren	All children	Loo	ked after child	dren
Percentage aged 10 to 17 years convicted or subject to a final warning or reprimand during the year <sup>3</sup>	Number looked at for 12 months aged 10 17 at 3 March	Number looked after for 12 months aged 10 to 17 at 31 March <sup>1</sup>	Number convicted or subject to a final w arning or reprimand during the year <sup>2</sup>	Percentage convicted or subject to a final warning or reprimand during the year	Percentage aged 10 to 17 years convicted or subject to a final warning or reprimand during the year <sup>3</sup>	Number looked after for 12 months aged 10 to 17 at 31 March <sup>1</sup>	Number convicted or subject to a final warning or reprimand during the year <sup>2</sup>	Percentage convicted or subject to a final warning or reprimand during the year
0.3	4,2	4,340	30	0.8	0.2	4,560	30	0.6
2.2	6,5	6,350	410	6.4	1.7	6,410	420	6.5
5.5	6,3	6,110	860	14.1	4.4	6,190	820	13.2
2.4	17,0	16,800	1,300	7.8	1.9	17,160	1,260	7.4
0.1	3,2	3,460	x	x	0.0	3,610	10	0.2
0.7	4,8	4,970	190	3.8	0.5	4,980	150	2.9
1.1	4,5	4,610	330	7.1	0.9	4,920	290	6.0
0.6	12,7	13,040	530	4.0	0.4	13,510	450	3.3
0.2	7,5	7,800	40	0.5	0.1	8,170	40	0.4
1.5	11,3	11,320	600	5.3	1.2	11,390	560	4.9
3.4	10,9	10,720	1,190	11.1	2.7	11,100	1,110	10.0
1.5	29,7	29,840	1,830	6.1	1.2	30,660	1,710	5.6
	29,7	1.5	1.5 29,840	1.5 29,840 1,830	1.5 29,840 1,830 6.1	1.5 29,840 1,830 6.1 1.2	1.5 29,840 1,830 6.1 1.2 30,660	1.5 29,840 1,830 6.1 1.2 30,660 1,710 Source

<sup>2.</sup> This includes children who were convicted or subject to a final warning or reprimand under the Crime and Disorder Act 1998 during the year for an offence committed while being lo ensure that the figures presented are accurate and complete. However it is important to note that these data have been extracted from large administrative

### 1.2 YOUTH OFFENDING TEAM RESTRUCTURING 2014/15

In the autumn of 2014 it was confirmed that there would be a reduction of 15% in the contribution made by the Local Authority to the Youth Justice pooled budget and also a reduction in the Youth Justice grant of approximately 7%. The YOT works very closely with TYS who support many young offenders during and after their periods of statutory supervision; this service had also to prepare for a budget reduction of approximately 25% and the loss of some "one off" funding. A joint consultation and planning exercise was undertaken which led to a restructuring and closer alignment of the two services as well as the loss of a number of staff through voluntary redundancy. This achieved the necessary reduction in costs and created a more resilient management and delivery structure (shown below.).

As the design of the operational side of the services was being finalised, a parallel review was undertaken of business support functions within the YOT. This has rationalised and streamlined some activities and also created additional capacity to provide some support to operational functions and Quality Assurance activities.

<sup>4.</sup> Age as at 31 March

An on-going background activity has been the implementation by the County Council of the Smart Office programme. This has led to changes in office accommodation in Bridgwater and Mendip with changes about to take place in South Somerset. There are some outstanding issues in Mendip and South Somerset relating to client access and facilities for group work.

# 1.3 RESPONSE TO THEMATIC INSPECTION REPORTS

The HMIP report "Girls in the Criminal Justice System" was published in December 2014.

The report includes thirteen recommendations:-

# Chairs of the Youth Offending Team Management Boards should ensure that:

- work is undertaken to understand and identify needs which are specific to girls and that appropriate services are commissioned to meet those needs
- the effectiveness of interventions for girls is evaluated in order to support the development and continuous improvement of practice
- they regularly review data by gender to understand the trends of offending by girls, and then use that data to develop the shape and content of future provision
- there is effective liaison and cooperation between Youth Offending Teams and other agencies working to safeguard girls at risk of sexual exploitation and that the effectiveness of this cooperation is regularly monitored and evaluated: including any out of area placements for girls
- staff working with girls are suitably skilled and trained to assess and meet the specific needs of girls effectively.

# • Youth Offending Team Managers should ensure that:

- assessments of likelihood of reoffending and risk of harm take into account the impact of gender
- o appropriate interventions are offered to meet the needs of girls
- assessments of vulnerability take the impact of gender into account and for all girls consider the possibility of child sexual exploitation
- health practitioners are sufficiently involved with the work carried out, in particular, in relation to assessment, interventions and information sharing
- exit strategies are developed to ensure that girls have access to appropriate on-going support when their involvement with Youth Offending Teams ends.

# Local authorities should ensure that:

- senior corporate parents, including Directors of Children's Services and elected members, routinely review the offending rates of Looked After Children by gender to ensure that they understand patterns of offending by girls and are able to take action to address this where necessary
- where girls are known to children's social care, regular contact should be maintained while they are in custody so that plans for their release are made in a timely way and involve them fully, in line their legal duties.

# Police forces should:

 ensure that early intervention schemes, commissioned, provided or used by the police, take account of the needs and interests of girls. Our responses are:-

- This plan includes, in the review of performance figures above, new tables separating cases by gender where this is informative and data on offending by children who are Looked After also separated by gender. These figures will be reported regularly to the Board and made available to the Corporate Parenting Board.
- In 2013 the YOT appointed a lead practitioner for Child Sexual Exploitation who coordinates YOT involvement with the multi-agency CSE conferencing arrangements and oversees work with children who are being sexually exploited or at significant risk thereof. This practitioner has extensive previous experience working with young vulnerable female clients. The YOT Manager is a member of the Somerset Child Sexual Exploitation Strategic Group. All young people who enter the service are screened for CSE and DVA. The CSE /DVA worker carries a small case load of young women at risk of or who are being sexually exploited. This is intensive specialist work and involves linking closely with other agencies.
- The YOT operates fortnightly risk and vulnerability panels which oversee planning
  in cases where children are considered at high risk of causing serious harm to
  others, or highly vulnerable. These panels now also oversee cases held by TYS
  that meet these criteria regardless of their involvement with the YOT. The plans
  overseen by these panels consider individual needs including gender specific
  issues
- In 2014 the YOT undertook a survey of young people's experience of abuse within relationships, including domestic and relationship violence and abuse. In the light of the findings we are to allocated two full time equivalent workers across Somerset to focus on these issues which involve young women primarily, but not exclusively as victims. Because of the plain links with sexual exploitation, the work will be co-ordinated by the CSE practitioner.
- The Buddy scheme provides a young person with a volunteer who offers regular support and encouragement. Supported young people include vulnerable teenage parents who were the original focus of the scheme. The scheme itself is being assessed to achieve the "Approved Standard" with the Mentoring and Befriending Foundation (NCVO).
- Working closely with Public Health, TYS provides a flexible sexual health service for young people considered to be at greater risk of teenage pregnancy and poor sexual health, including those who have recently had an abortion, with staff appropriately trained and supported to deliver sexual health interventions. We also provide trained volunteers to support school nurses in young people's health clinics.
- We have run groups specifically for young women in all areas of the county, including some delivered in Pupil Referral Units and schools. The programmes include; sexual health, safe use of social media; exploration of healthy and unhealthy relationships and mental health.
- We deliver mixed gender Youth Inclusion Programmes in each area of the County. Young people are targeted for the programme via consultation with schools and other professionals to identify those most at risk of offending,

disengaging from education or having risk factors known to be associated with disengagement. The groups meet weekly and provide a programme of interventions to address the risk factors associated with offending and disengagement. The YIP finishes with a residential experience and supports the young people in their transition from school.

### 2 STRUCTURE AND GOVERNANCE

#### 2.1 HEAD OF SERVICE

In Somerset the Head of Youth Offending Services has the formal title "Strategic Manager, Vulnerable Young People and reports to the Head of Children's Social Care. The management portfolio includes the Youth Offending Team, Targeted Youth Support Service, "Promise" mentoring service and the "Pathways to Independence" homelessness prevention service. These services between them span a service user age range of approximately 8 to 24 years, plus parents/carers and victims. The role includes membership of a range of relevant groups including

- Somerset Youth Justice Partnership Board
- Somerset Local Safeguarding Children's Board
- Somerset Corporate Parents' Board
- Somerset CSE Strategic Group
- Avon and Somerset Victim and Witnesses Board
- Safer Somerset Silver Group
- Somerset Children's Services' Senior Management Team
- Somerset Early Help Strategic Board
- "Pathways to Independence" Board

The five YOTs in the Avon and Somerset area share representation on area wide Boards. During 2013 to 2015 the Somerset YOT Manager was the representative on the Avon and Somerset Area Strategic Criminal Justice Board; from 2015 to 2017 Somerset will represent the five YOTs on the MAPPA Senior Management Board.

# 2.2 BOARD STRUCTURE

TABLE 2.2A BOARD STRUCTURE

Julian Wooster	Director of Children's Services	Chairperson
Tom Whitworth	Strategic Manager -Services for Vulnerable Young People	Statutory member
Lucy Martin	Somerset Partnership Manager, Department for Work and Pensions	Additional member
Liz Spencer	Head of National Probation Service, Somerset	Statutory member
Stuart Brown	Chief Executive - Mendip District Council	Statutory member
Dave Farrow	Area Education Manager	Statutory member
Richard Kelvey	DCI Manage (South), Avon & Somerset Constabulary	Statutory member
Michelle Hawkes	Public Health Specialist	Statutory member
Frances Nicholson	Cabinet member for Children and Families	Additional member
Kerry Rickards	Chief Executive, Sedgemoor District Council (Teresa Harvey representing)	Statutory member
Pauline Kinton	Local Partnership Advisor, Youth Justice Board for England and Wales	YJB Link
Claire Winter	Acting Children & Families Operations Director, SCC	Additional member
Simon Williams	Youth Court Lead, Her Majesty's Court	Additional member
Tony Johnson	Service Manager, Performance Management and information Team, SCC	Additional member

# 3 RESOURCES AND VALUE FOR MONEY

# 3.1 YOUTH JUSTICE GRANT

TABLE 3.1A YOUTH JUSTICE GRANT EXPENDITURE

YJB YOT BUDGET 2015/16	568696
Staff salaries/travel/expenses	532696
Training	2000
Volunteers expenses	8000
Premises/sundries	20000
ICT Maintenance/support	5000
YP Activities	1000

# 3.2 PARTNER CONTRIBUTIONS TO YOUTH OFFENDING SERVICES

TABLE 3.2A PARTNER CONTRIBUTIONS

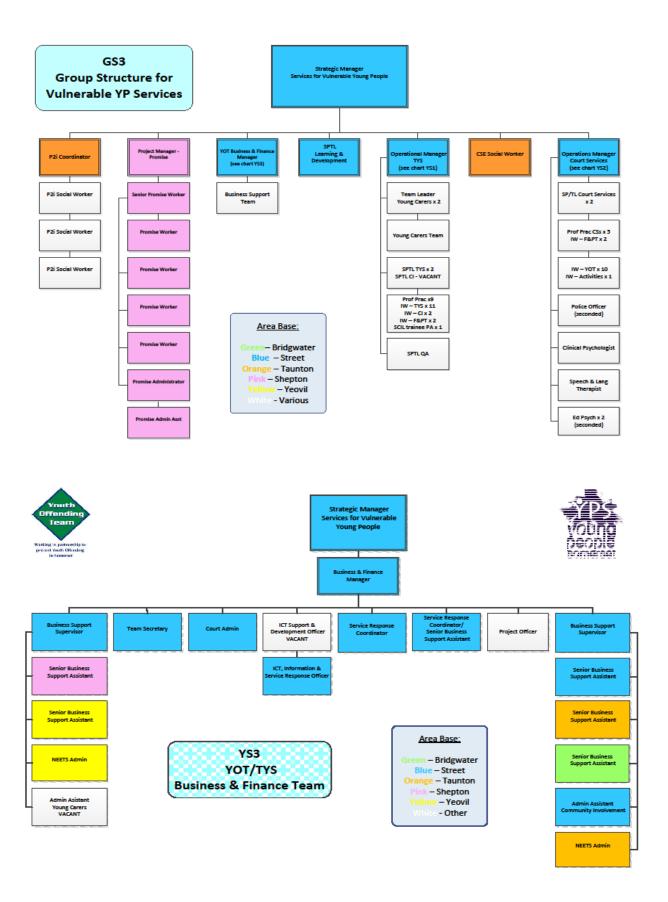
AGENCY			Other	TOTAL
	Staffing	Payments	Delegated	
	Costs	in Kind	Costs	
Police	£103,077	£8,000	£30,109	£141,186
Police & Crime Commissioner			£69,318	£69,318
Probation	£40,075		£70,307	£110,382
Health	£39,890			£39,890
Local Authority	£607,200	£391,080	£122,225	£1,120,505
YJB YOT Grant			£568,696	£568,696
YJB YRO Unpaid Work Grant			£11,920	£11,920
YJB RJ Maintenance Grant			£2,000	£2,000
TOTAL				£2,063,897

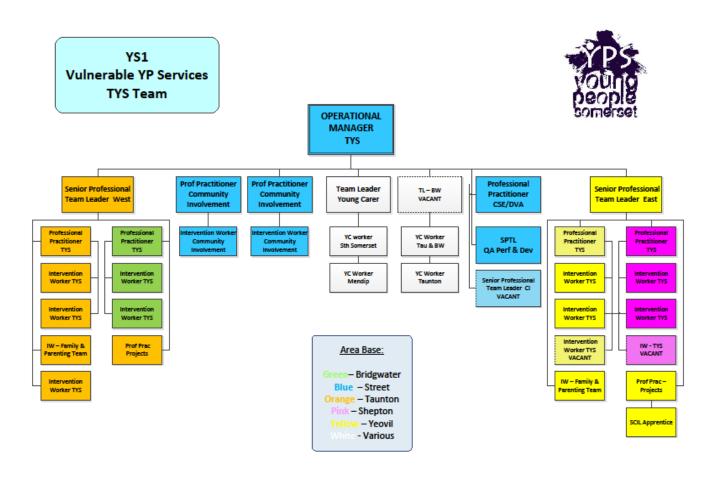
TABLE 3.2B PARTNER SECONDED STAFF

Probation Officer	1
Police Officer	1
Police Youth Interventions	
Worker	1
Clinical Psychologist	0.8
Educational Psychologist	0.4

# 3.3 STAFFING AND VOLUNTEER RESOURCE

# TABLE 3.3C STAFFING STRUCTURE





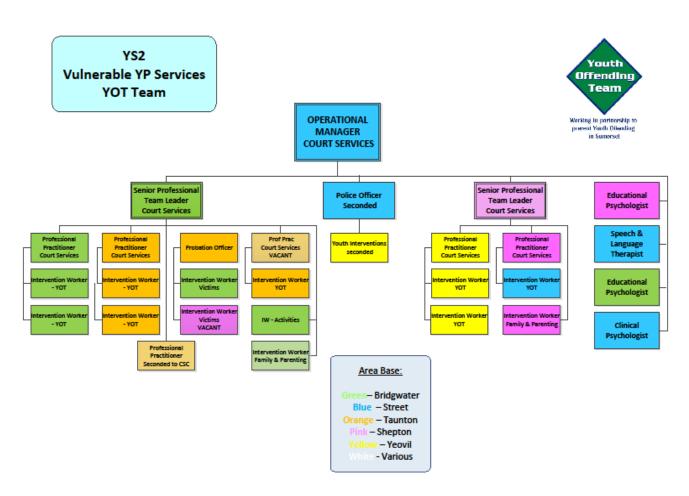


TABLE 3.3D STAFFING BY GENDER

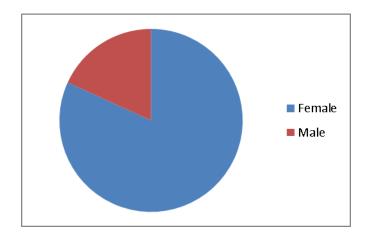


TABLE 3.3E STAFFING BY ETHNICITY

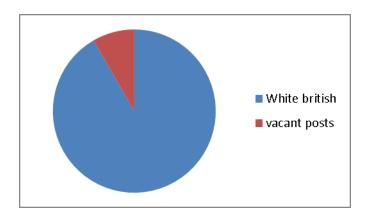
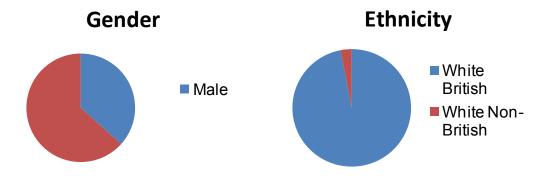


TABLE 3.3F VOLUNTEERS

The YOT currently has 131 volunteers of whom 28 are trained to facilitate Restorative Justice Conferences.



# 4 PARTNERSHIP ARRANGEMENTS

#### 4.1 POLICE

The Avon and Somerset Constabulary contribute to the Youth Justice pooled budget and second a full time police officer and a full time civilian Youth Interventions Officer to the YOT. They also provide accommodation for the YOT main office on the police station site in Street. The YOT building benefits from a secure fibre-optic link to the police network, giving the seconded staff access to police communication and information systems. There is an identified senior link officer who is also a member of the Partnership Board as well as other senior officers who link for specific purposes

### 4.2 PROBATION

The National Probation Service contributes to the Youth Justice pooled budget and also seconds a full time qualified Probation Officer to the YOT. This officer is linked to a local NPS manager for liaison and support purposes whilst a senior manager sits on the partnership Board.

#### 4.3 CHILDRENS SOCIAL CARE

Children's Social Care Service contributes to the Youth Justice pooled budget and also seconds a full time qualified Social Worker to the YOT, who specialises in work with children who perpetrate sexually harmful behaviour and also undertakes risk assessments of adult sexual offenders for Children's Social Care. The head of Children's Social Care manages the Strategic Manager who is the YOT Manager and also sits on the Partnership Board.

### 4.4 EDUCATION

Education makes no financial contribution to the YOT and seconds two Educational Psychologists for a total of slightly less than two days per week to the YOT. Education representation on the Partnership Board has changed during the year and is likely to be reviewed during the coming period.

# 4.5 HEALTH

Somerset Partnership, a local health provider, seconds a full time Clinical Psychologist from the CAMHS service to the YOT. Four days per week of this post are funded by CAMHS and the fifth by the YOT. The psychologist receives clinical supervision and support from CAMHS. Health are represented on the Partnership Board by a Public Health Commissioner and make no contribution to the pooled budget.

#### 4.6 TARGETED YOUTH SUPPORT

The Targeted Youth Support Service is a Local Authority Service which is co-located and works closely alongside the YOT. This service focusses on Tier 2 Substance misuse work and a wide range of transitions support for young people who are, or who are at risk of becoming, disengaged from education training or employment post 16. Although having a priority age range of 16 to 21, this service

shares a proportion of cases with YOT and also undertakes work with children and young people at risk of offending.

#### 4.7 RESETTLEMENT

Somerset has an extremely low rate of use of custody and thus arrangements for resettlement of offenders post-release are made on an individual bespoke basis. However, the coordinator of the "Pathways to Independence" homelessness prevention service works alongside the YOT, giving ready access to the range of accommodation and support options offered for vulnerable 16-24 year olds by these services and also by the District Councils who are commissioning members of the Pathways to Independence Board.

#### 4.8 TROUBLED FAMILIES

In Somerset the Troubled Families Project is embedded in the Local Authority "getset" early help service. The YOT provides information about young offenders and their offending under YJB data sharing arrangements. This is used to help identify eligible families and to assess project impact in terms of reduced offending.

#### 4.9 EXETER UNIVERSITY

Over the past two years we have supported research by Exeter University into the incidence of traumatic brain injury amongst young offenders. We have received a further request for support in the year to come.

### 4.10 POLICE AND CRIME COMMISSIONER

The PCC Young Persons' Lead is a member of the Partnership Board and the YOT works closely with the Office of the PCC in a number of settings. The YOT also receives funding from the PCC each year. This year we have proposed and agreed to commit this funding to assessing and intervening with young people who victims or perpetrators of abuse are within peer relationships, or the perpetrators of violence towards their parents.

#### 4.11 COMMUNITY SAFETY

The YOT Manager is a member of the "Safer Somerset Silver Group", a partnership group which oversees operational planning for Community Safety, including "Prevent" activities within the counter terrorism strategy.

### **WORK WITH YOUNG OFFENDERS**

#### 5.1 "Asset Plus"

"Asset" is the assessment and planning tool that the YJB requires YOTs to use. Designed about 15 years ago it forms the basis of our electronic case recording and management system ("Careworks"). The YJB has developed an updated version of this tool which is being rolled out nationally. There are many changes but the overall themes are of greater user involvement and more focus on protective and desistance related factors. We are in the first wave of changeover for YOTs who use Careworks, and our date for going live is September 13<sup>th</sup> 2015. Training of staff, which includes all managers, practitioners, administrative and

relevant partner staff has already started and will continue throughout the summer. Alongside this run the technical aspects of transferring to what is effectively a new case management system. As usual there have been, and will probably continue to be a range of technical problems to overcome and questions to resolve. The work involved and demands upon staff time to deliver all the necessary activity is very large, and is exacerbated by the recent restructure and continuing turnover of staff. Nonetheless we are assessed by the YJB as on track to our target date and look forward to full implementation.

#### 5.2 Interventions

We are in the process of reviewing the interventions that are being delivered. An Intervention strategy is being written but is delayed as it needs to be linked to the new Asset Plus framework. Case collaboration meetings have been established in each area to ensure that staff produce a clear intervention plan that is linked to the assessment. This supports the delivery of multi-modal and multi-systemic interventions.

# 5.3 PACE and 17 year olds

There is a revision to the Police and Criminal Evidence Act requiring that the provisions relating to those under 17 are now extended to 17 year olds. For the YOT the relevant requirements are that an "Appropriate Adult" is present during interview and administration of Cautions. In Somerset, the police and the YOT already operate on this basis so the impact is minimal. We intend to continue the arrangements whereby the police pay the YOT also to provide Appropriate Adults for interviews with vulnerable adults.

# 5.4 Unpaid work

It is now the responsibility of YOTs to deliver unpaid work programmes. We have had very few such orders, including those transferred in from other areas. In our geographical context the only approach to rare but demanding requirements such as these is to deal with them on a bespoke basis which we have done.

# 5.5 One to one CSE support

All young people who enter the service are screened for CSE and DVA. The CSE /DVA worker carries a small case load of young women at risk of or who are being sexually exploited. This is intensive specialist work and involves linking closely with other agencies

# 5.6 Family and Parenting team

We remain committed to working with the parents and carers of young people at risk of offending or those who have offended. The YOT now has a specialist worker in each area, trained to deliver structured parenting interventions to parents of teenagers.

### 6 SERVICE IMPROVEMENT

# 6.1 QA and Participation

The restructuring included the creation of a permanent part-time post committed to developing a comprehensive Quality Assurance and Auditing Framework and overseeing the operation of this. The post was filled last autumn and work has been progressing since then.

We have purchased a three year "Viewpoint" License. This is a user-friendly young persons' consultation system which is already used by HMIP to collect feedback from young offenders. As soon as the system is live we will be able to interrogate the data already held by HMIP. Subsequently we will be able to design our own feedback collection tools. Development will proceed slowly through the summer because of the priority of implementing "Asset Plus".

We have continued to develop our use of volunteers as representatives of the communities we serve, as well as an unequalled resource for young people. We now have a community development action plan within which the key objectives are:

- Appropriate Adults Service: continue to develop and meet the ongoing needs of a service for juveniles and vulnerable adults
- The Buddy project: enable the project to deliver good quality outcomes to existing areas and to grow sufficiently that coverage of the project can reach ALL areas of the County
- Referral Order Panels; to strengthen and improve the quality of delivery
- School Health Clinics: To continue to provide trained volunteers to support school nurses in health clinics county wide
- Support for volunteers: to provide a county wide celebration event for volunteers

# 6.2 Domestic Violence and abuse (DVA)

In accordance with a proposal to the Police and Crime Commissioner, we are focussing on teenage relationship abuse including abuse of parents by teenagers. Abuse takes many different forms including, verbal, emotional, physical and sexual. In some cases the roles of victim and perpetrator are interchangeable. Young people involved in such relationships often fail to access relevant services and parents who are victims frequently feel unable to seek help. We are training staff to deliver interventions to all young people who are identified through an initial screen screening process as victims and/or perpetrators.

#### 6.3 "Private Providers"

For the past year the YOT has, on behalf of the LSCB, convened and funded a quarterly meeting for representatives of the private companies who operate child care homes in Somerset, selling places to Local Authorities across the country. It has been recognised for many years that the relatively large number of such units in Somerset has placed a burden upon local services for which many agencies receive no funding. Work generated by vulnerable teenagers placed in these homes has generally accounted for over 20% of total demand on the YOT. The development of effective working relationships has always been important to criminal justice agencies because of violence, absconding and offending by this particularly troubled group of young people. These relationships are now even

more important for whole of children's services with the placement of children vulnerable to exploitation and the recent opening of units specialising in accommodating children who have been victims of sexual exploitation. Thus whilst the YOT will continue to support this partnership work, it will look to bring in other relevant services.

# 6.4 Speech and Language

The pilot project conducted last year confirmed the level of need for this type of service within the young offender population and thus a tendering exercise was undertaken to acquire 10 hours per week of specialist support, which is now being supplied by Somerset Partnership through a dedicated worker. This resource will fit especially well alongside the new Asset Plus assessment and planning framework.

# 6.5 Operational Processes

As envisaged in our previous planning cycle we have commenced upon implementing several innovative approaches to planning and review both to support the implementation of Asset Plus and to ensure best use of the range of resources. In April we started piloting "Combined Case Planning Meetings". The principle is that the local team leader chairs a meeting to which new case plans are presented by the case holder. Each meeting is also attended, so far as practicable, by education, health, speech and language, family and other workers who can challenge the plan and ensure that a multi-systemic multi-resource approach is taken in each case. In the pilot period only new Youth Rehabilitation Plans are considered in these meetings but as the processes are refined and streamlined it is intended that all case plans, reviews and closure reviews will go through these meetings. These meetings support the development of collaborative working in our mixed discipline teams and are supported by "Joint Area Meetings" which deal with non case-related local matters.

### 6.6 Staff Training and Development

The loss of experienced staff, developments in partner organisations, social change and progress in understanding adolescent behaviour combine to create a need for a substantial investment in staff training and development. We will therefore revise our workforce development plan although implementation will inevitably be slowed by the requirements of implementing Asset Plus. There are some particular priorities which we will address sooner:

- The approved system in Somerset for assessment and intervention work with children who behave in sexually harmful ways, including those convicted of sexual offences is "AIM2". We have lost a number of our AIM trained practitioners and will therefore source training for current staff including refresher training, and specific modules in assessment, intervention and family work.
- Substance misuse work at Tier 2 has been delivered by the Targeted Youth Support Service, and we will increase overall capacity by training YOT practitioners and intervention workers to carry out screening and assessments and deliver Tier 2 interventions to young offenders.

• The YOT has now lost almost all its Social Work qualified staff which has impacted upon the ability to take students on practice placements. This has always been a valuable activity for the YOT for a range of reasons, not least the challenge and learning that practitioners derive from supervising students. We will therefore train a number of practitioners to act as "Student Supervisors" whilst "Practice Education" will be provided externally. Again, the timetable for this will start in the autumn, once Asset Plus is embedded.

# 6.7 Mobile Working

Somerset YOT has been approved as a pilot team for the "Careworks" mobile App. This means that we have acquired eight approved tablets which will be equipped with 3g connectivity and will run a trial version of the mobile app. Our hope is that it will become possible for staff to use our case management system when they are working off site, particularly in the most rural areas where they are currently reliant on returning home or to an office to access or record case information.

#### 6.8 Victims and RJ

Our plans for improving and embedding victim work have to some extent been compromised by long term staff absence. However the new structure includes two dedicated victim posts and we will pursue accreditation either at a service or organisational level. We are signatories to the Memorandum of Understanding which sets out the basis for collaboration with "Lighthouse", the Avon and Somerset Police victim support service

# 7 RISKS TO FUTURE DELIVERY

# 7.1 Demand and Resources

The level of demand and also resourcing level of Youth Justice Services in Somerset (and nationally) are at their lowest level for many years. There is the obvious risk that the former rises without any increase in the latter. The current configuration of the YOT and the new more generic job descriptions would allow for flexibility within the staff to focus time upon the core statutory functions, should need arise. We will

- seek help from other areas where the rate of first time entrants is now rising in order to understand better the causes and likely impacts
- monitor first time entrants on a monthly cycle and inform the Board if numbers start to rise at a rate that causes concern

### 7.2 Welfare Benefit reforms

It is as yet unclear how reforms in the welfare benefit system that supports many young offenders and their families will impact. There are suggestions that there may be a rise in homelessness which could lead to a rise in acquisitive and street crime. We will:

- monitor homelessness applications for 16/17 year olds through P2i data
- inform the Board should the number of vulnerable young people at risk of homelessness rise at a rate that causes concern

# Signed Approval of Somerset Youth Justice Plan 2015/2016

Name	Agency	Post Held In Agency	Signature	Date
Chair : Julian Wooster	Somerset County Council	Director of Children's Services	Lilled	35
Tom Whitworth	Samerset County Council	Strategic Manager, Services for Vulnerable Young People	Touldatoute	10/7/15
Michelle Hawkes	Public Health, Somerset County Council	Public Health Specialist	~=	17/8/15
Tony Waller	Somerset County Council	Service Manager Education Welfare	3350	14/R/15
Liz Spencer	National Probation Service	Head of the National Probation Service - Somerset, North Somerset and Bath and North East Somerset	Chizosh Spenel	10/7/15
Richard Kelvey	Avon & Somerset Constabulary	DCI, Manage (South)	2) Kalvey	13/08/15

# **Impact Assessment Form and Action Table 2014 - 2016**

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

# **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?						
Proposed New Policy or Service	Change to Policy Service		MTFP or Paper	Service Review or SCC Change Programme		
Reduction in SCC repairs and maintenance (R&M) budget	Reduction in SC repairs and maintenance budget	C	Reduction in SCC repairs and maintenance budget	, and the second		
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		МТ	FP: R16-027a			

### Section 1 – Description of what is being impact assessed

The impact on reducing the repairs and maintenance budget for SCC properties (Non schools) by a total of £75,000 for 2016/17. The budget in 2015/16 will reduce to £755,000. Buildings must be properly serviced to ensure that they provide a safe environment for people to work and visit. Lack of planned maintenance shortens the life of buildings and can cause additional damage requiring further repairs.

The repairs budget is managed on SCC's behalf by SW1 and delivery in through a term contract with Skanska. This term contract was put into place with effect from 1 April 2105 and full impact of this new contract has not yet been fully assessed for 2105/16 before the decision to reduce the repairs budget will have been taken. In addition to this the contract with SW1 will reach its natural end of term during the contract with Skanska.

Accessibility and adaptations works are not included in the R&M budget so are not affected.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

The Council's buildings provide both work space for its staff and accommodation from which its services are delivered. The budget reduction would be equal across all services. The budget for schools maintenance would not be affected by this proposal. There will be reduced expenditure in the economy as the Council retains a proportion of its savings rather than investing in the property portfolio.

# Section 2B – People who are delivering the policy or service

South West One (SW1) manages the delivery of the R&M budget. From 2015/16 servicing and works has been be carried out by the Council's maintenance term

contractor, Skanska and a requirement of the contract is that the contractor establishes a local supply chain of sub contractors.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

The R&M budget in 2014/15 was £1.1M and reduced to £830,000 in 2015/16. The proposed MFTP saving will reduce the budget to in 2016/17 to £755,000.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

The impact will be a reduction in spend on R&M in the local economy as the Council reduces its budgets. The impact on the condition on the property estate will be mitigated by the estate size being reduced through property rationalisation programmes and transferring of property maintenance responsibilities and costs to outsourcing services.

Expenditure on maintenance will prioritise on statutory compliance activities e.g. servicing of plant and that of keeping properties safe, warm and dry for occupation. Planned repairs such as window replacements, decoration, keeping down weeds will take a low priority and are unlikely to be addressed until an item fails and becomes a higher priority.

If buildings were allowed to fall in to a state of disrepair then there could be accessibility issues for customers and members of staff, so there will be an increase in reactive repairs.

### **Community Safety**

Statutory works and serving of buildings will remain a priority to ensure buildings are safe. Buildings are regularly inspected by SW1 building surveyors.

# **Equality**

Statutory works and serving of buildings will remain a priority to ensure buildings are safe. Buildings are regularly inspected by SW1 building surveyors.

# **Health and Safety**

Statutory works and serving of buildings will remain a priority to ensure buildings are safe. Buildings are regularly inspected by SW1 building surveyors. SW1 will continue to manage the Hard FM service and this proposal does not impact on that arrangement.

The reduction in budget reflects the planned reduction the size of the Council's estate and lower rates negotiated in the new R&M contract.

# **Health and Wellbeing**

Statutory works and serving of buildings will remain a priority to ensure buildings are safe. Buildings are regularly inspected by SW1 building surveyors.

# **Privacy**

No issues

# Sustainability

A reduction in planned maintenance will shorten the life cycle of a property. Over time the appearance of buildings will deteriorate and resent an image of a lower quality environment. However they will remain safe and functional as the budget will be prioritised in this area.

#### Risk

Buildings become unsafe through reduction in planned maintenance.

Likelihood 4 Impact 4 Risk Score 16

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

That the R&M budget is reduced by £75,000

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

This assessment will inform part of the MTFP savings within Business Development.

Completed by:		Jame	James Stubbs			
Date			/15			
Signed off by:		Richard Williams				
Date	08/10/15					
Compliance sign of	Date	Nove	mber 2015			
To be reviewed by:	(officer name)	Richa	rd Williams			
Review date:		October 2016				
Version	1	Date			November 2015	

	Equality Im	pact Assessment Issu	es and Action Tab	ole	
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age					
	Effective mobilisation and management of the R&M contract to ensure no impact on any particular equality area.	Head of Property	31 March 2017	Regular management review meetings and monitoring of KPIs and budgets.	Sustainable R&M service within the MTFP budget.
Disability					
	Effective mobilisation and management of the R&M contract to ensure no impact on any particular equality area.	Head of Property	31 March 2017	Regular management review meetings and monitoring of KPIs and budgets.	Sustainable R&M service within the MTFP budget.
<b>Gender Reassignment</b>					
	Effective mobilisation and management of the R&M contract to ensure no impact on any particular equality area.	Head of Property	31 March 2017	Regular management review meetings and monitoring of KPIs and budgets.	Sustainable R&M service within the MTFP budget.
Marriage and Civil Part	nership		•		•
	Effective mobilisation and management of the R&M contract to ensure no	Head of Property	31 March 2017	Regular management review meetings	Sustainable R&M service within the MTFP budget.

	impact on any particular equality area.			and monitoring of KPIs and budgets.	
<b>Pregnancy and Mater</b>	nity				
	Effective mobilisation and management of the R&M contract to ensure no impact on any particular equality area.	Head of Property	31 March 2017	Regular management review meetings and monitoring of KPIs and budgets.	Sustainable R&M service within the MTFP budget.
Race (including ethnici	ty or national origin, colour, natio	onality and Gypsies and	d Travellers)		
	Effective mobilisation and management of the R&M contract to ensure no impact on any particular equality area.	Head of Property	31 March 2017	Regular management review meetings and monitoring of KPIs and budgets.	Sustainable R&M service within the MTFP budget.
Religion and Belief					
	Effective mobilisation and management of the R&M contract to ensure no impact on any particular equality area.	Head of Property	31 March 2017	Regular management review meetings and monitoring of KPIs and budgets.	Sustainable R&M service within the MTFP budget.
Sex					
	Effective mobilisation and management of the R&M contract to ensure no impact on any particular equality area.	Head of Property	31 March 2017	Regular management review meetings and monitoring of KPIs and	Sustainable R&M service within the MTFP budget.

				budgets.			
Sexual Orientation							
	Effective mobilisation and management of the R&M contract to ensure no impact on any particular equality area.	Head of Property	31 March 2017	Regular management review meetings and monitoring of KPIs and budgets.	Sustainable R&M service within the MTFP budget.		
Other (including caring responsibilities, rurality, low income, Military Status etc)							

Healt	h and Safety, Sustainability,	Community Safety Imp	oact Assessment	Issues and Action Ta	ıble
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
	Health	and Safety Issues and	Action Table	•	
Budget reduction leads to property H&S repair items not being addressed.	Effective mobilisation and management of the R&M contract	Head of Property	31 March 2017	Regular management review meetings and monitoring of KPIs and budgets.	A safe property estate
	Sust	ainability Issues and A	 Action Table		
Budget reduction leads to property repair items not being addressed and an increase in backlog repairs.	Effective mobilisation and management of the R&M contract	Head of Property	31 March 2017	Regular management review meetings and monitoring of KPIs and budgets.	Reducing maintenance backlog
			I A off our Table		
	Comm	unity Safety Issues an	d Action Table		
	Р	rivacy Issues and Acti	on Table	1	

# **Equality Impact Assessment Form and Action Table 2015**

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

# **Baroness Thornton, March 2010**

What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		Learning Disabilities Development Fund  MTFP R16-033		
Version 1		Date		21/01/2015

# Section 1 – Description of what is being impact assessed

The Learning Disabilities Development Budget (LDDF) has, over the last decade, funded three development initiatives that have been delivered by Somerset Partnership NHS Foundation Trust:

- 1. Occupational Therapist to support "My Day". This was a development initiative that was established to initiate change within what customers with learning disabilities did during the day. With the move to a person centred, outcome, community focused and employment focused approach moving forward apace this approach will no longer be required. My Day provided a structure for care staff, to support service users with learning disabilities (living within local authority or housing association accommodation, and supported 24 hours a day) to engage in everyday activities both within their home and in the wider community.
- 2. Development resources to lead and action the roll out of "My Health Book" and support access to primary care services.

"My Health Book" is a document owned by a customer to record information about:

- o Them
- People who look after their health
- o Their health
- Their health actions
- Their emergency plans

# To help them:

- Keep as healthy as they want to
- Understand about their health
- Make choices about how to stay healthy
- o Talk to Health Professionals
- Make sure they have all my check ups
- Remember their appointments

"My Health Book" was an initiative established in response to Valuing People (2001) with the aim of adopting a person-centred and user-led approach to Health Action Planning. Given its nature, and the fact that the roll out has been completed and the work transitioned to "Business as usual" decisions regarding the funding of any ongoing work in this area is an NHS responsibility.

3. Additional health staff to underpin the transition process. This is the process through

which a young person that is receives care and/or support in relation to their health and/or social care needs moves from childhood to adulthood, and the support that they receive from the Council, NHS and other organisations during this time. Funding was provided to develop this aspect of NHS involvement, but responsibility for any decisions regarding on-going funding for additional NHS staff involvement in the process an NHS responsibility. For the avoidance of doubt this relates only to the provision of funding for this specific development aspect of this work and no other aspect, including the Council's involvement, is affected by this decision.

The total funding for these initiatives is £112,592, of which SCC contributes £84,400. The reduction would be for the full amount, with the remaining £28,192 returned to the Somerset Clinical Commissioning Group which is aware of these proposals.

It should be noted that the Learning Disabilities Development fund no longer exists as a specific grant, and that while Somerset County Council has continued to fund this budget line while the developmental aspects of these initiatives was completed now that they have been, or have been superseded, this development funding is no longer required. It was never the purpose of the LDDF to provide on-going "business as usual" funding for any development initiatives it supported, and therefore the decision making reasonability of any on-going funding will the responsibility of the relevant agency responsible for the commissioning of that service.

**Section 2A** – People or communities that are **targeted or could be affected** (taking particular note of the Protected Characteristic listed in action table)

All customers, who by definition have the protected characteristic of learning disability – with often related needs, including a range of physical or learning disabilities or sensory impairments and/or age related problems, who access any activity related to these initiatives, could potentially be affected by this change. National data also indicates that more men than women are likely to be have a learning disability.

### **Section 2B** – People who are **delivering** the policy or service

No data is held on staff employed by external Somerset Partnership NHS Foundation Trust, however it would not be an unreasonable to assume that there are likely to be HR implications for Somerset Partnership NHS Foundation Trust

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

No data is held by the Council on the individual customers accessing activity related to these initiatives in relation to them.

**Section 4 – Conclusions** drawn about the equalities impact (positive or negative) of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

Occupational Therapist to support "My Day": No impact identified on either customer or carers. This is an initiative that has been superseded by the move to a focus on person centred planning and outcome focused services of services, both of which address any potential impact on protected characteristics by looking at, and where applicable, meeting customer need on an individual basis.

Resources to lead and action the roll out of My Health Book and support access to primary care services: No impact identified on either customer or carers. The rollout of this work has been completed so, in terms of this specific funding from the LDDF budget, this work is complete and the funding is therefore no longer required. There may an impact on customers should Somerset CCG cease to provide for any on-going funding requirements, for example for new customers, through either the same or a different delivery mechanism. However, it is also clear that, as the original activity funded by LDDF

has been completed (i.e. the development aspect), any decision regarding the on-going funding of these initiatives an NHS responsibility.

Additional health staff to underpin the transition process: No impact identified on either customer or carers. Work is currently underway to redesign the transitions processes for young people moving into adult health and social care services, of which NHS involvement will be a key factor for some customers, depending on their individual needs. This development work has been completed and any decisions regarding the ongoing funding of the involvement of NHS staff are an NHS reasonability. For the avoidance of doubt this decision does not in any way effect the role of the Council in the transitions process or the support that young people would receive from the Council and/or services that it commissions and therefore it has been assessed that there is no impact on protected characteristics from the perspective of Somerset County Council.

If you have identified any mitigated to either reduce you will take. (Please add r	or remove them. In the tak		
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions? When will the action be completed?	How will it be monitored? What is the expected outcome from the action?
Age			
N/A			
Disability			
The proposal relates to the development funding allocated initiatives delivered by Somerset Partnership NHS Foundation Trust which target residents with significant and complex Learning Disabilities, in particular in relation to Health Action Planning. While this development work has been completed there could be an impact if, where required, decisions are not taken to provide on-going funding once the development funding ends.	To work with Somerset CCG to ensure that individual customer's Health Action Planning outcomes continue to be delivered, albeit potentially in a different way depending on how Somerset CCG chooses to commission any ongoing work that is required.	Eelke Zoestbergen, Joint Lead Commissioner – Learning Disabilities	Through Joint Lead Commissioner
Gender Reassignment	T	T	
N/A			
Marriage and Civil Partner	ship	T	
N/A			
Pregnancy and Maternity	T	T	
N/A			
Race (including ethnicity or	national origin, colour, nation	nality and Gypsies and	Travellers)
N/A			
Religion and Belief	T	T	
N/A			
Sex			
N/A			
Sexual Orientation			
N/A			
Other (including caring resp	onsibilities, rurality, low inco	me, Military Status etc)	
N/A			

<b>Section 6</b> - How will the assessment, consultation and outcomes be published and
communicated? E.g. reflected in final strategy, published. What steps are in place to
review the Impact Assessment

Completed by:	Stephen Miles
Date	January 2016
Signed off by:	Tim Baverstock
Date	28/01/2016
Compliance sign off Date	January 2016
To be reviewed by: (officer name)	Tim Baverstock
Review date:	January 2016

# **Impact Assessment Form and Action Table 2014 - 2016**

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

# **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?						
Proposed New Policy or Service	Change to Policy Service	or	MTFP or Paper Y	Service Review or SCC Change Programme		
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		De He	rality Improvement & Nevelopment Service Contact alth commissioning FFP R16-036			

# **Section 1 – Description** of what is being impact assessed

The ending of the current contract for the Quality Improvement & Workforce Development Service, which is currently held by Care Focus (South West). This contract was awarded in December 2014 on a one year term from April 2015 and its current value is £50,000. It is the intention not to renew the contract given severe funding pressures on Adult Social Care budgets and the fact that this is a non-statutory service. This service tasked Care Focus with achieving the following outcomes for our social care providers:

- (i) an improvement in their performance in workforce planning;
- (ii) they are kept informed of opportunities for training and funding;
- (iii) remedial work undertaken by the service provider has improved the quality of the service and their ability to meet key standards;
- (iv) they are signposted to the wide range of resources and services available to them, including SCIE, SCILS, Skills for Care, Think Local Act Personal and the National Skills Academy to enable them to develop their workforce and improve quality;
- (v) their team leaders feel their leadership and coaching skills have improved and their staff teams have improved their interaction skills with clients.

It is worth noting that the incumbent provider has reported that they enabled significant investment into the Somerset care workforce (£450k in 2013/14) through other funding streams and some providers have previously indicated that they would be prepared to pay for quality improvement support. The impacts to be assessed need to be:

- -The impact on Care Focus as an influential local provider of support services for social care providers and their workforce
- -The impact on social care providers of no longer having this service available and

funded by Somerset County Council.

-The impact the previous two factors would have on the quality of services for people using them.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

Care Focus provides support for providers of social care, predominately providers of residential/nursing homes or care at home services. Some of these organisations are larger providers but some are singly owned or stand alone. The workforce for these providers is predominately female, aged 18-50. These providers and their workforce are regulated by the Care Quality Commission and as such need to ensure they adhere to relevant standards and provide a high quality of care.

These providers are providing care to mainly the elderly and disabled population, as well as those with Learning Disabilities and Mental Health conditions.

# Section 2B – People who are delivering the policy or service

Care Focus delivers the service using the current SCC funding to form part of their business funding. The organisation is not a large business but does have significant funding from other sources which is expected to remain. Obviously a reduction in funding or service is likely to mean a reduction in staffing required but this needs to be explore further with Care Focus. Many of the current staff are part time and the majority are female.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

Data from the non-key decision dated 9/12/2014, titled, "To make a contract award to the successful bidder for the Quality Improvement & Workforce Development Service contract for financial year, 2015-16."



Somerset has around 5500 beds in its care homes and these homes are supported by Care Focus where appropriate. There is a high turnover of staff in this sector and therefore training is an essential part of the providers work.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

### **Community Safety**

None

### **Equality**

The majority of users of these services provided by the organisations that Care Focus currently support are elderly or disabled or have learning disabilities or mental health problems. For the elderly, most of these will be women as they longer. If the withdrawal of support did affect the organisations' ability to provide care, then these groups would be the ones most affected.

# **Health and Safety**

The legal responsibility for the standards of care provided in the adult social care sector clearly rests with the owner of each care providers. However, Somerset Council has a duty of care for those people it has placed into the care of care providers. Should this reduction of support not be offset or delivered in a different way it is possible that some providers may find it difficult to keep compliant with legislative changes.

# **Health and Wellbeing**

The sector that Care Focus supports is vital to the health and social care system as a whole. Should any providers fail in the future or require improvement but not have the support mechanisms to do so, then part of this system could deteriate. We need to provide high quality alternatives to medical models of care, both in peoples' homes and in care home settings and providers are currently under immense financial pressure.

# **Privacy**

It is possible that the withdrawal of funding to support these providers could see a reduction in privacy and security awareness training if appropriate training is not provided or overseen.

# Sustainability

The Care Act stipulates that local authorities must facilitate markets to offer continuously improving, high-quality, appropriate and innovative services, including fostering a workforce that underpins the market. Removing this support service could affect some providers with the information and advice no longer being freely available via Care Focus. This can be particularly true of those providers who may require support to improve and those smaller organisations that are not able to employ specific people into quality and monitoring roles.

### Risk

#### Financial

The risk of continuing to fund the service is that funding will not be available for statutory services which SCC must provide give the current financial position. However by not funding the service, there is also a risk that providers would fail which could incur additional cost. Score L2xl4=8

# Reputation

If the withdrawal of funding affects the support that the sector can secure then this is likely to further damage the relationships we have with social care providers, many of whom are struggling financially and with the regulatory burdens placed on them. Score L3xl3.

#### Social

There is a significant shortage of staff wishing to work in social care nationally and locally and providers need support to rectify this. By removing the support mechanisms provided by this service you could adversely affect the quality and quantity of staff available to deliver care. Score L3xl3

Likelihood	3	Impact	3	Risk Score	9
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**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

The budget manager for Adult Social Care is unable to fund this service from April 2016. Whilst the support for the sector is seen by this assessment to be really

important, services to have to be prioritised.

Commissioners and ASC managers will need to look at alternative ways of supporting providers via regular contact and support for workforce issues via joint working groups with health colleagues and new systems of working.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

n/a

Completed by:			T Baverstock			
Date			21/12/15			
Signed off by:	K Curry					
Date		21/12/15				
Compliance sign off	Date	December 2015				
To be reviewed by:	(officer name)	me) T Baverstock				
Review date:		Sept 2016				
Version	1	Date December 2015			December 2015	

	Equality Impact Assessment Issues and Action Table						
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?		
Age							
The legal responsibility for the standards of care provided in the adult social care sector clearly rests with the owner of each care providers. However, Somerset Council has a duty of care for those people it has placed into the care of care providers. These people are disproportionately elderly, disabled and vulnerable.	Help Care Focus retain a sustainable model of support without SCC funding through their other funding streams. In addition provide support through contractual arrangements and reviews with providers.	Strategic Commissioning and ASC	Ongoing	Review of care provision and workforce annually	To sustain and help the care sector providers.		
Disability					,		
The legal responsibility for the standards of care provided in the adult social care sector clearly rests with the owner of each care providers. However, Somerset Council has	Help Care Focus retain a sustainable model of support without SCC funding through their other funding streams. In addition provide support through contractual arrangements and reviews with providers.	Strategic Commissioning and ASC	Ongoing	Review of care provision and workforce annually	To sustain and help the care sector providers.		

a duty of care for those people it has placed into the care of care providers. These people are disproportionately elderly, disabled and vulnerable.							
Gender Reassignment		<u> </u>	<u> </u>				
None							
Marriage and Civil Part	nership						
None							
Pregnancy and Materni	ity						
None							
Race (including ethnicity	or national origin, colour, natio	nality and Gypsies and	Travellers)				
None							
Religion and Belief							
None							
Sex	Sex						
None							
Sexual Orientation							
None							
Other (including caring re	Other (including caring responsibilities, rurality, low income, Military Status etc)						

Healt	h and Safety, Sustainability,	Community Safety Imp	act Assessment	Issues and Action	Table				
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?				
	Health and Safety Issues and Action Table								
	Sust	ainability Issues and A	Action Table						
	Comm	unity Safety Issues and	d Action Table		·				
	P	rivacy Issues and Acti	on Table	<u> </u>	- 1				

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

# **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?						
Proposed New Policy or Service	Change to Policy Service	or	Community Infrastructure Commissioning Savings, mainly from Devon and Somerset Joint Trading Standards Service and the AONBs	Service Review or SCC Change Programme		
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		МТ	FP R16-039			

# **Section 1 – Description** of what is being impact assessed

Community Infrastructure Savings of £35,300. Includes a 5.4% reduction in AONB contributions to Quantock, Mendip and Blackdown Hills and the remainder coming from the Devon and Somerset Joint Trading Standards Service.

The Trading Standards Service is a joint Somerset and Devon arrangement, with Devon County Council providing direct management. As 85% of the budget is staffing-based it is possible that there could be reductions in staffing to meet the proposed saving.

The AONBs are partnerships which are financed by Defra (75% of their costs) and local authorities and some other local funders (which contribute the remaining 25%). SCC hosts Quantock and Mendip staff; Devon County Council hosts the Blackdown Hills AONB staff.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

From a Trading Standards perspective reductions in the services provided could impact upon the community of Somerset, residents, consumers and businesses.

From an AONB perspective reductions could impact upon delivery of the Management Plan (production of which is a statutory duty for the local authorities).

This assessment considers the potential impacts, and notes where impacts are limited as it is known how the saving is to be delivered.

# Section 2B – People who are delivering the policy or service

In-house staff (Trading Standards) and partnership staff (the AONBs), Quantock and Mendip are hosted by SCC, Blackdown Hills staff hosted by Devon County Council.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

The decision report includes additional detail relating to the saving proposal relating to Trading Standards.

The AONB saving was invited by the 3 AONBs, and Councillor David Hall, Cabinet Member for Business, Inward Investment and Policy, responded by agreeing to the 5.4% reduction for 2016/17.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

# **Community Safety**

Trading Standards aim to ensure a safe and fair trading environment for consumers and businesses. Potential reductions to funding could impact on the service's ability to maintain this safety, and as a consequence could have an impact upon community safety. An example of where there could be concern is the statutory duties on age restricted products and their innovative work on scams which target the most vulnerable.

There are no obvious impact upon community safety from the accepted cut from the AONB services. The Quantock Hills are the only service to have a Ranger, and this postholder has no response/assistance duties as part of her role (however, in practice she will sometimes attend to support, or make use of the 4x4.)

#### **Equality**

It is unlikely that there will be an impact from these savings.

# **Health and Safety**

- Health and safety is an important aspect of Trading Standards relating to duties in relation to the storage of petroleum products, the safety of consumer goods and food quality and safety. DCC will need to consider these as it progresses with delivering the saving, and where staff resource is focused.
- There is little concern from an AONB perspective based on this proposed saving.

#### **Health and Wellbeing**

Reductions in Trading Standards service could impact on the health and wellbeing of Somerset residents. It could result in an increase in offences under Trading Standards legislation and the Service having to focus on higher level offences. Poor trading practices could go undetected and lead to more offences being committed.

The AONBs work together on a health and wellbeing project however it is not

considered that this level of saving will impact upon the delivery of this (which attracts its own, three year, ring fenced funding).

### **Privacy**

No obvious privacy issues; there could be some pressure on the Trading Standards service but it is not expected to be significant.

# **Sustainability**

Trading Standards – to meet this funding reduction a cut in the region of 6% will be needed. In the cost-sharing agreement of one third/two thirds this triggers reductions from DCC, and as such the total reduction could equate to 5.5 FTE redundancies. Coming so early in the joint working agreement it could impact upon the appetite to continue with the agreement when it comes up for review.

There are also responsibilities in relation to storage and labelling of petroleum, pesticides, poisons and other products damaging to the environment to consider, and how the reduced budget takes these into account.

AONB - There could be concerns if other budget reductions from other partners were proposed, threatening the sustainability of the Partnerships. However, at the time of writing this assessment there is no known threat to the sustainability of the partnership and the 5.4% reduction is not particularly significant, and can be managed with the existing structures in place.

#### Risk

Trading Standards – a key risk (in addition to the theoretical risk of government intervention) is that the timing of this reduction in the joint service puts off the potential interest from other authorities, which may prevent the realisation of further savings (which are likely to be realisable with significantly less impact on front line service delivery) in future years. There could be a reduction in sampling (there is a statutory minimum required). The service may have reduced capacity to respond to an incident. There is a risk of viability of the service.

AONB – it is a risk that other partners may also decide to reduce funding, thus creating a risk to the 75%/25% funding split between Defra and local funders. This could result in less money drawn down from Government, and could impact upon the ability of the partnerships to continue work or continue with current structures.

The risk is based on the Trading Standards aspect of the proposal as it is considered there is little risk, given the information known at the moment, to the AONB element (which is also much smaller).

Likelihood	3	Impact	4	Risk Score	12
LIKEIIIIOOU	J	IIIIpaci	<del>'1</del>	KISK SCOLE	14

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

Trading Standards – there are statutory responsibilities relating to enforcing a wide range of complex (and overlapping) legislation that collectively contributes to ensuring a fair and safe trading environment supporting both consumers and businesses. This will need to continue, and DCC will need to ensure that – if redundancies are required – that the impacts are fully considered. From an SCC perspective, the share of

pension and redundancy costs would need to be clear.

AONB – this budget reduction has been offered by the three AONBs and it is considered that it can be absorbed without significant detrimental impact.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

This assessment will be published in accordance with SCC's requirements. It is not expected that there will need to be a review of the assessment given the level of budget reduction proposed, however the assessment will be reviewed if there are factors that suggest it would be prudent (for example, if other partners look to reduce their contributions).

Completed by:	ompleted by:			Barry James			
Date		17 <sup>th</sup> November 2015					
Signed off by:		Paula Hewitt					
Date		January 2016					
Compliance sign off	Date	Decei	mber 2015				
To be reviewed by:	(officer name)	Barry	Barry James				
Review date:		Nove	mber 2016				
Version	1		Date		Nov 2016		

	Equality Impact Assessment Issues and Action Table							
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?			
Age								
TS – potential for work to protect vulnerable consumers due to their age could be impacted, notably the elderly but also across the spectrum of ages.	TS - DCC to decide how to implement the changes to service as a result of the proposed budget reduction.	DCC Manager.	To be agreed.	By Joint Service Review Panel.	Minimised impact of the proposed savings.			
Disability					•			
TS - No significant impact, to be considered when DCC decide how to deliver the saving.  AONB – potentially reduced service could contribute towards a more limited ability to facilitate level/easy access in certain areas of the AONB. However, with this level of saving it is not expected.	TS - DCC to decide how to implement the changes to service as a result of the proposed budget reduction.	DCC Manager.	To be agreed.	By Joint Service Review Panel.	Minimised impact of the proposed savings.			
Gender Reassignment	1	1	1	1	1			

No discernible impact.	None.				
Marriage and Civil Part					
No discernible impact.	None.				
Pregnancy and Materni					
No discernible impact.	None.				
·	or national origin, colour, natio	nality and Gypsies and	Travellers)		
AONB - No discernible impact.  TS – potential impact upon ability to work with groups in Society (e.g. Gypsies and Travellers). To be assessed when DCC decide how to deliver the required level of savings.	TS - DCC to decide how to implement the changes to service as a result of the proposed budget reduction.	DCC Manager.	To be agreed.	By Joint Service Review Panel.	Minimised impact of the proposed savings.
Religion and Belief				•	
No discernible impact.	None.				
Sex					
No discernible impact.					
Sexual Orientation					
No discernible impact.					
Other (including caring r	esponsibilities, rurality, low inco	ome, Military Status etc	)		
A potential reduction in service could possibly see a reduction in	TS - DCC to decide how to implement the changes to service as a result of the	DCC Manager.	To be agreed.	By Joint Service Review Panel.	Minimised impact of the proposed savings.

ability to respond to incidents (e.g. animal welfare-related, which	proposed budget reduction.		
could conceivably impact on rural areas).			

Health and Safety, Sustainability, Community Safety Impact Assessment Issues and Action Table							
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?		
	Health	and Safety Issues and	Action Table				
A budget reduction could result in less consideration being given to health and safety issues. For example trading standards has duties in relation to the storage of petroleum products, the safety of consumer goods and food quality and safety.	TS - DCC to decide how to implement the changes to service as a result of the proposed budget reduction.	DCC Manager.	To be agreed.	By Joint Service Review Panel.	Minimised impact of the proposed savings.		
	Sust	tainability Issues and A	Action Table	<u> </u>	1		
Budget reductions could threaten the longer term sustainability of the joint agreement, especially if current activity impacts on new partners joining. Trading Standards	TS - DCC to decide how to implement the changes to service as a result of the proposed budget reduction.	DCC Manager.	To be agreed.	By Joint Service Review Panel.	Minimised impact of the proposed savings.		

have responsibilities in relation to storage and labelling of petroleum, pesticides, poisons and other products damaging to the environment.					
	Comm	unity Safety Issues and	d Action Table		
Trading Standards aim to ensure a safe and fair trading environment for consumers and businesses. Potential reductions to funding could impact on the service's ability to maintain this safety, and as a consequence could have an impact upon community safety. An example of where there could be concern is the statutory duties on age restricted products and their innovative work on scams which target the most vulnerable.	TS - DCC to decide how to implement the changes to service as a result of the proposed budget reduction.	DCC Manager.	To be agreed.	By Joint Service Review Panel.	Minimised impact of the proposed savings.

although there could be pressure on the implement the changes to service as a result of the savings.  Review Panel. the proposed savings.	Privacy Issues and Action Table							
Service depending on how the savings are to be delivered.	although there could be pressure on the Trading Standards Service depending on how the savings are to	implement the changes to	DCC Manager.	To be agreed.	, ,			

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

# **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?							
Proposed New Policy or Service	Change to Policy or Service		MTFP or Paper	Service Review or SCC Change			
			X	Programme			
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?			ΓFP Public Health 201 Γ <b>FP R16-046</b>	6 – 17			

# **Section 1 – Description** of what is being impact assessed

Assessing the impact of the proposed 2% savings (£25,300) on non- ring fenced public health programmes as part of the under the 2016 – 17 MTFP process.

The non -ring fenced budget held by public health is comprised of two elements

- the Somerset County Council contribution to the substance misuse programme under Somerset Drugs and Alcohol Partnership
- and the Somerset County Council Community Safety Programme

It is proposed that savings are taken as follows:

- £10,000 from the revenue budget which supports the multi- disciplinary domestic abuse training programme and awareness campaigns.
- £15,300 from the commissioning staffing budget

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

The staff commissioning drug and alcohol services for Somerset are responsible for the procurement and performance of drug and alcohol treatment services (adults, young people and carers/families members), they provide leadership for partnership working (such as the Hidden Harm Programme), produce and act upon the local substance misuse needs assessment, and work in partnership to support and commission prevention work. This proposal is to take £15,300 from the establishment costs of a vacant senior commissioning post. £42,600 remains in the establishment.

This decision is being proposed to minimise the direct impact on client facing services which include both adults and young people who are problematic drug and/or alcohol users, and the family / carers of this group of people regardless of whether they are in treatment or not., Local information tell us that the client base has a range of cross

cutting social care, health and criminal justice needs as they are more likely to be involved in offending behaviours, in housing need, claiming benefits and have mental health issues; additionally over 50% of the in treatment adult population are living with children (own or others) or are parents but not living with their children.

The impacts of the proposal to reduce the establishment for **commissioning drug** and alcohol services would fall on

- the Drug and Alcohol Partnership Coordinator, who will have to realign workloads and priorities.
- on partners, due to reduced capacity to engage in partnership activity
- on families, partners and communities if prevention work is reduced

The multi –disciplinary domestic abuse training programme is mainly delivered by the specialist service provider (Knightstone) as part of the Domestic Abuse Service contract. Awareness campaigns are delivered by a range of providers and is dependent upon the type and topic I each case .The revenue budget held by SCC has been used to support room bookings, event costs and purchase of campaign materials. It has been agreed that these costs can be mitigated by sourcing free venues, rationalising campaign materials and considering charging for training. This option is proposed to minimise any direct impact on service delivery.

# **Section 2B** – People who are **delivering** the policy or service

The impacts of the proposal to reduce the establishment for commissioning drug and alcohol services and responses would fall on the Drug and Alcohol Partnership Coordinator, who will have to realign workloads and priorities.

The impacts of the proposal to delete the revenue budget for The **multi –disciplinary domestic abuse training programme** will fall on the Domestic Abuse Commissioner to source alternative/free training venues and to implement a charging policy. There will be impacts on other organisations as a result of the charging policy which will need to be carefully assessed and managed.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

Evidence from the JSNA and from service monitoring demonstrates the need for Drug and Alcohol, and Domestic Abuse Services in Somerset. Based on this evidence the proposed savings are directed at commissioning and administrative functions, to protect direct service provision.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

# **Community Safety**

Drug and Alcohol Services and Domestic Abuse Services are essential elements in ensuring the protection of individuals and communities. Substance misuse is strongly associated with crime, re-offending rates and violence. Domestic Abuse has a lifelong impact on women and children. Poverty, vulnerability and social exclusion are associated factors. These factors are the reason that this proposal minimises the impact on frontline services.

#### **Equality**

Substance Misuse and Domestic Abuse are two elements in a triangle of harmful behaviours which impact on men (usually as the perpetrator), women (usually as the

victim) and children in terms of their development, their achievements and their own future behaviours.

# **Health and Safety**

The workload and stress placed upon the commissioning team will remain at the current level, as the senior commissioning post in question has been and is still currently vacant. Any additional pressure and/or stress placed upon the current commissioning team due to some reduction and reprioritising front line Service delivery, will be monitored with necessary preventative actions taken as required at an appropriate management level. Therefore all significant issues in relation to health, safety and wellbeing for SCC staff have been identified.

# Health and Wellbeing

The Health and Wellbeing of commissioning staff will need to be considered as a result of increased pressure.

The reduction in commissioning capacity could impact on the Health and Wellbeing (prevention) elements of the programme as it is the commissioning staff who lead this work.

# **Privacy**

No impacts on privacy have been identified at this time

# **Sustainability**

No impacts on sustainability have been identified at this time

#### Risk

The Risks identified from this proposal are:

Stress on commissioning staff due to managing increased workload demands and reprioritisation (Score 2/3)

Reputational impacts on Public Health and Somerset County Council as a result of reduced leadership / partnership / prevention work / development capacity around substance misuse (Score 3/3)

Reputation and financial impacts to the organisation and risk to clients from reduced contract performance. Successful completion of drug treatment is a key indicator in the Corporate Performance wheel, and the Health Premium Incentive Scheme. (Score 2/3)

Reputational impact on Somerset County Council as a result of implementing charges for domestic abuse training. (2/2)

Likelihood 2	2	Impact	3	Risk Score	6
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**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

We recommend that the requirement for 2% savings on the non-ring fenced public health budgets are taken as follows:

- £10,000 from the revenue budget which supports the multi- disciplinary domestic violence training programme and awareness campaigns.
- £15,300 from the commissioning staffing budget

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

The impact assessment will be included in the 2016 -17 MTFP Impact Assessment Report which is published in the Somerset County Council Website.

Members of the Somerset Drug and Alcohol Partnership and the Interpersonal Violence sub –group of the Community Safety Partnership will be directly informed.

Completed by:		Christina Gray, Consultant in Public Health Somerset County Council			
Date	1	19 <sup>th</sup> O	ctober 2015		
Signed off by:		Christina Gray			
Date	1	1/12/2015			
Compliance sign off Date	3	30/11/2015			
To be reviewed by: (officer n	ame) (	Christi	ina Gray		
Review date:	3	30/9/2016			
Version	·		Date		1/12/2015

	Equality Im	pact Assessment Issu	es and Action Ta	ble	
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age				•	
To make sure that impacts of harmful adult behaviour on children continue to be actively addressed by commissioners and services.	To ensure that reduced commissioning capacity does not negatively impact on SCCs ability to develop this area of work.	The Public Health Programme managers (Consultant in Public Health, SDAP Coordinator and Service Manager for Community Safety)	Kept under review	Through the performance framework and the Hidden Harm Action Plan.	That any negative impacts will be recognised and minimised.
Disability			•	•	•
No specific impacts identified					
Gender Reassignment				•	
No specific impacts identified					
Marriage and Civil Part	nership		•	•	•
No specific impacts identified					
Pregnancy and Materni	ity				
As per Age impacts above					
Race (including ethnicity	or national origin, colour, nation	onality and Gypsies and	Travellers)		
No specific impacts					

identified					
Religion and Belief					
No specific impacts identified					
Sex					
Men and women are both potential impacted as service users and as victims of violence.	No specific action is proposed. Services are designed to address these gender impacts and are monitored as business as usual.	SDAP Coordinator and Service Manager for Community Safety	Under regular review.	Business as Usual processes	That negative gender impacts are addressed.
Sexual Orientation					
Other (including caring re	esponsibilities, rurality, low inco	ome, Military Status etc)			
Ex- service personnel are over represented in substance misuse services.  Ex- service personnel can have difficulties adjusting to civilian life, and may experience emotional / anger issues as a result of PTSD	No specific action is proposed. Services are designed to address these impacts and are monitored as business as usual.	SDAP Coordinator and Service Manager for Community Safety	Under regular review	Business as Usual processes	That negative impacts are identified addressed.

Healt	Health and Safety, Sustainability, Community Safety Impact Assessment Issues and Action Table						
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?		
	Health	and Safety Issues and	Action Table				
No specific impacts identified							
	Sust	ainability Issues and A	Action Table				
No specific impacts identified							
	Comm	unity Safety Issues and	d Action Table				
Substance misuse is strongly associated with crime, re-offending rates and violence.	This proposed savings directed at the commissioning staffing allocation is to minimise the direct impact on clients,	The Somerset Drug and Alcohol Partnership Coordinator	Kept under review	Through business as usual processes	That negative impacts are identified addressed.		
Domestic Abuse has a lifelong impact on women and children.	This proposed savings directed at non-essential elements of the training budget is to minimise the direct impact on clients	The Service Manager for Community Safety	Kept under review	Through business as usual processes	That negative impacts are identified addressed.		

	Health a	nd Wellbeing Issues a	nd Action Table					
The Health and Wellbeing of commissioning staff will be needed to be considered as a result of increased pressure.	Close engagement with the existing staff team in designing the new commissioning solution.  Decision to retain current temporary commissioning manager until March 2016 to maintain continuity and support the change process.	The Public Health programme lead – Christina Gray, Consultant in Public Health	Kept under review	Through business as usual processes	That negative impacts are identified addressed.			
The reduction in commissioning capacity could impact on the Health and Wellbeing (prevention) elements of the programme as it is the commissioning staff who lead this work.	This will need to be kept under review, and subject to wider partner discussion and engagement. Wider Wellbeing impacts will be considered as part of priority setting and performance	The Public Health Programme managers (Consultant in Public Health, SDAP Coordinator and Service Manager for Community Safety)	Kept under review	Through business as usual processes	That negative impacts are identified addressed.			
Privacy Issues and Action Table								
No specific impacts identified								

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

# **Baroness Thornton, March 2010**

Why are you comple	Why are you completing the Impact Assessment?								
Proposed New Policy or Service	Change to Policy Service	or	Reduction in Contribution towards the Somerset Local Authorities Civil Contingencies Partnership	Service Review or SCC Change Programme					
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		МТ	FP R16-050						

# Section 1 – Description of what is being impact assessed

The MTFP proposal is to reduce the SCC financial contribution towards the Somerset Local Authorities Civil Contingencies Partnership by £23,300 (current contribution is £186,000). The Partnership is made up of the six local authorities in Somerset. This assessment considers the impact of this reduction on funding to the Civil Contingencies Unit (CCU).

The CCU activities contribute towards meeting two strategic corporate risks – ORG0007 (Business Continuity) and ORG0001 (Emergency Planning).

This reduction can be managed within existing budget without the need for any loss of any posts within the CCU.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

Reductions in the service provided by CCU could, if not properly managed, impact upon the community of Somerset. This assessment considers potential impacts. It is possible that the more vulnerable elements of the community could be negatively impacted if the budget reduction resulted in less capacity when responding to emergencies.

# Section 2B – People who are delivering the policy or service

The CCU team, made up of Civil Contingencies Officers.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

Evidence used for this assessment is based on information understood about the service, involvement in the Partnership and discussion with the CCU Manager.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

# **Community Safety**

The Council's have a statutory duty enshrined in the Civil Contingencies Act 2004. Poorly managed changes to service as a result of a reduction in contribution could impact upon community safety.

This level of budget reduction is not considered to have a significant impact upon community safety and will be accommodated within the team without significant changes. However, any reduction in resource can mean that plan production, testing, exercising, training and other activities are reduced and this could mean a reduced effectiveness and efficiency in response to an incident (it is noted that First Responder training must continue). Community Safety is a key aspect of the CCU's work and therefore careful prioritisation will take place (in liaison with the partner authorities) to minimise impacts of this budget reduction.

#### **Equality**

No significant impact identified however there is the potential that with reduced resources the ability to adequately meet the needs of various parts of society could be hampered.

#### **Health and Safety**

Reducing this contribution should not have any discernible impact from a Health and Safety perspective.

#### Health and Wellbeing

Accommodating the reduced contribution could result in reduced hours and an increase in pressure on staff to deliver at the same level as they currently do. Expectations will need to be managed from this perspective. From a customer's perspective the same considerations as noted above in Community Safety apply, i.e. that reduced resources can mean less training/preparation/testing, which could impact upon the effectiveness of response to an incident.

# **Privacy**

No obvious privacy issues.

#### Sustainability

There could be concerns if budget reductions threatened the sustainability of the Partnership. However, at the time of writing this assessment there is no known threat to the sustainability of the partnership.

If further budget reductions were planned/imposed this risk rating could change; the potential impacts of the partnership dissolving are potentially significant as the

statutory duties would still need to be delivered.

#### Risk

The assessment of risk below is based on the fact that it is known this level of contribution does not result in a significant threat to the work of SLACCP and consequently the delivery of statutory duties by the partners.

If further budget reductions were planned/imposed this risk rating could change; the potential impacts of not meeting statutory duties, or not planning accordingly for events, could be significant.

The CCU activities contribute towards meeting two strategic corporate risks – ORG0007 (Business Continuity) and ORG0001 (Emergency Planning).

It is considered that if there was an incident the partners would ensure sufficient resources would be given to address to issue. However, reductions in resources would impact upon the ability to plan and exercise, which could impact upon the effectiveness and efficiency of response.

Likelihood	1	Impact	4	Risk Score	4

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

It is considered that a budget reduction of this amount can be absorbed without significant detrimental impact to the service delivery of the CCU, and therefore to the community safety of Somerset.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

This assessment will be published in accordance with SCC's requirements. It is not expected that there will need to be a review of the assessment given the level of budget reduction proposed, however the assessment will be reviewed if there are factors that suggest it would be prudent (for example, if other partners look to reduce their contributions).

Completed by:		Barry James				
Date		17 <sup>th</sup> N	lovember 2015			
Signed off by:			Hewitt			
<b>Date</b> Nov			November 2015			
Compliance sign off	Date	Nove	mber 2015			
To be reviewed by:	(officer name)	Barry	James			
Review date:		November 2016				
Version	1		Date		November 2015	

	Equality Impact Assessment Issues and Action Table							
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?			
Age				•				
No discernible impact. The activities of the CCU are tailored to ensure emergency planning for all areas of society, and work in partnership with other agencies (including the voluntary sector) to meet the needs of those who require assistance.	No action needed. However, the CCU will ensure that the savings do not significantly impact upon plan production and testing via exercise.	CCU Manager – Nicola Dawson.	Ongoing.	At regular 121 meetings with line manager (Barry James) and if needed at SLACCP meetings.	That the savings are achieved without any detrimental impact upon this characteristic.			
Disability								
A potential reduction in service could impact upon how members of society are accommodated in an emergency, or that exercises do not take them into account properly.	Ensure that the savings do not significantly impact upon plan production and testing via exercise.	CCU Manager – Nicola Dawson.	Ongoing.	At regular 121 meetings with line manager (Barry James) and if needed at SLACCP meetings.	That the savings are achieved without any detrimental impact upon this characteristic.			
Gender Reassignment								
No discernible impact.	None.							

Marriage and Civil Parti	nership									
No discernible impact.	None.									
Pregnancy and Materni	Pregnancy and Maternity									
No discernible impact.	None.									
Race (including ethnicity	or national origin, colour, natio	nality and Gypsies and	Travellers)							
A potential reduction in service could impact upon how members of society are accommodated in an emergency, or that exercises do not take them into account properly.	Ensure that the savings do not significantly impact upon plan production and testing via exercise.	CCU Manager – Nicola Dawson.	Ongoing.	At regular 121 meetings with line manager (Barry James) and if needed at SLACCP meetings.	That the savings are achieved without any detrimental impact upon this characteristic.					
Religion and Belief										
No discernible impact. The CCU work with voluntary agencies and this includes faith groups, however this budget reduction is not expected to impact upon this work as the main link is via the Somerset Emergency Voluntary Agencies Group (SEVAG), which will continue.	None.									
Sex			,							
No discernible impact.										

Sexual Orientation								
No discernible impact.								
Other (including caring r	esponsibilities, rurality, low inco	ome, Military Status etc)						
A potential reduction in service could possibly see a reduction in plan production, review and exercising is not sufficiently regular. This could impact upon how members of society are accommodated in an emergency, or that exercises do not take them into account properly.	Ensure that the savings do not significantly impact upon plan production and testing via exercise.	CCU Manager – Nicola Dawson.	Ongoing.	At regular 121 meetings with line manager (Barry James) and if needed at SLACCP meetings.	That the savings are achieved without any detrimental impact upon this characteristic.			

Healt	h and Safety, Sustainability,	Community Safety Imp	oact Assessment	Issues and Action Ta	able
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
	Health	and Safety Issues and	Action Table		
A budget reduction could result in less consideration being given to health and safety issues.	Recent H&S Audit highlighted certain issues that have been addressed; need to ensure that work to plan/review for H&S issues continues.	CCU Manager.	Ongoing	At regular 121 meetings with line manager (Barry James) and if needed at SLACCP meetings.	Maintaining the required level of H&S.
	Sust	ainability Issues and A	Action Table		
Budget reductions could threaten the sustainability of the partnership, especially if other partners also reduce their contribution.	Careful planning and priority setting, plus working closely with partners to ensure the benefits of the partnership and its work are understood.	CCU Manager	Ongoing.	At regular 121 meetings with line manager (Barry James) and if needed at SLACCP meetings.	Maintenance of levels of funding, as much as is possible, with current levels and without having to reduce current staff levels.
	Comm	unity Safety Issues an	d Action Table		
There are statutory duties under the Civil Contingencies Act 2004 relating to emergency planning, and failure to resource this work appropriately could	Continue to ensure that statutory duties are delivered to the satisfaction of all partners. This exercise has been done recently and will continue to be done periodically as	CCU Manager in liaison with partnership managers from each local authority.	Ongoing.	By the SLACCP Partners who meet quarterly.	Continued delivery of statutory duties, and continued liaison between partners to maintain the partnership.

impact upon community safety in the event of an emergency.	required, particularly when budgets are under pressure or the CCU is notified of potential further reductions.				
	P	rivacy Issues and Acti	on Table		
The CCU is expected to respond to emergency situations that involve the personal safety of the most vulnerable in our communities.  The last significant event, the flooding of 2014, involved numerous emergency services and voluntary organisations sharing large amounts of personal data to ensure the safety and comfort of these vulnerable citizens. Any reduction in the capability of this service could result in this personal data being put at risk of unauthorised disclosure.	Ensure the councils within the partnership are aware of the potential for personal data to be put at risk and to be vigilant during an incident that this is not compromised.	CCU Manager and/or staff to ensure the CCU keep personal data safe and secure; and to communicate a reminder to the partners the same requirement.	To be agreed in liaison with the CCU Manager (i.e. to decide whether a preemptive message is needed or whether we rely on current practices within the partners and wait until an incident occurs so there is a timely reminder).	At de-brief following an incident.	No personal data breaches.

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

# **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?							
Proposed New Policy or Service	Change to Policy of Service		MTFP or Paper X	Service Review or SCC Change Programme			
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?		su <sub>l</sub> Pa	FP proposal to reductopport services commisthways for Adults (P4) FP R16-056	ssioned through the			

#### Section 1 – Description of what is being impact assessed

The Pathways for Adults (P4A) programme comprises a range of housing related support services aimed at helping adults who would otherwise be homeless or at risk of homelessness to establish and maintain a sustainable housing situation. SCC commissions the support element of services in specialist accommodation and associated outreach with the aim of helping service users to develop the skills required to obtain and maintain a tenancy. Assistance with rent and other housing costs is provided through Housing Benefit. There are a range of P4A services in Somerset targeted according to the needs of specific client groups including adults currently in contact with mental health services; adults with a history of offending and under supervision; and adults who are currently 'street homeless' or at risk of becoming so for unspecified reasons.

It is proposed that P4A services are reduced to the minimum required to meet SCC's statutory duties. This would have the following effect:

- P4A funding of support in specialist accommodation for adults in contact with mental health services and associated outreach will be maintained at current levels with a view to extending the existing contract beyond its current term.
- The one P4A contract for support in specialist accommodation for adults with a history of offending and associated outreach would not be extended beyond its current term ending 30<sup>th</sup> April 2016.
- The two P4A contracts for support in specialist accommodation for adults who
  are homeless or at risk of homelessness and associated outreach would not
  be extended beyond their current terms ending 30<sup>th</sup> April 2016.

This proposal is expected to achieve a net saving of £879k (full year effect) on the housing related support budget from May 2016 onwards.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

These changes will have negative impacts on existing and future users of the services. They are likely to result in a reduction of the quantity and scope of services available and the possible closure of some services. Access to services will become more restricted creating the possibility of greater physical and emotional harm to people before they are helped. It is anticipated that the proposed changes, if accepted, will exacerbate existing problems encountered by homeless people in gaining access to health care, welfare benefits, food, shelter and other services required to meet basic needs

A needs assessment has identified that in many cases the people who use the affected services will have mental health problems and/or problems of substance misuse (even though the affected services are not targeted at these particular client groups).

People with a history of offending and under supervision will be affected. In 2014: 70% of those housed by P4A have additional self-assessed support needs associated with mental health, substance misuse, offending and domestic abuse; around a third of P2i, P4A, SDAS (Somerset Drugs and Alcohol Service) clients had a (self-assessed) issue with offending or were ex-offenders.

More men than women use the services, but the women who use the services are particularly vulnerable.

The quality of life in communities across Somerset may be affected by an increase in homelessness and associated potential for an increase in lower level crime and disorder and anti-social behaviour that increases the fear of crime and erodes community cohesion. There may be a negative impact on local economies caused by an increase in shop theft and damage to trade, including the tourist trade, caused by an increase in visible homelessness and associated behaviours (e.g. begging).

# **Section 2B** – People who are **delivering** the policy or service

There is likely to be employment implications for support staff of organisations providing the affected services. It is likely that a signification number of jobs will be lost.

# **Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

In the west of the county, 122 bed spaces (including 19 in the specialist countywide provision for adults with a history of offending) and capacity for a further 62 people to receive outreach support (including 11 countywide places for those with a history of offending) will be at risk; affecting up to 400 people per year.

Provider estimates suggest that greater than 40 jobs will be at risk.

In the east of the county 70 bed spaces and capacity for 51 outreach support will be at risk affecting up to 350 people per year. An unspecified number of jobs will be placed at risk.

District Councils predict a sharp increase of vulnerable homeless people in B&B accommodation.

**Section 4 – Conclusions** drawn about the impact of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

# **Community Safety**

The proposal could result in an increase in street homelessness, which could increase incidents of anti-social behaviour and acquisitive crime in local communities and erode community cohesion.

The ability of the police and probation services to monitor and manage serious and prolific offenders could be undermined.

The clients currently receiving accommodation-based support for offenders live in accommodation provided by a national organisation. If funding is cut, it is possible that the charity will take-in highly complex individuals from outside of Somerset who may then settle in Somerset. This will potentially lead to increased demand on public services.

#### **Equality**

The proposal will affect more men than women, but the smaller number of women affected are particularly vulnerable and will be even more so if they are less able to access services. People with mental health problems, substance misuse problems and a history of offending will be disproportionately affected. All clients are on a low income. A small number of ex-service personnel will fall into the client group.

#### **Health and Safety**

The health and safety of individuals is likely to be directly affected by their being unable to access services, particularly if they are left 'street homeless'. Fewer support staff in supported accommodation will increase the likelihood of incidents and practices that jeopardise the safety of remaining staff and residents.

#### Health and Wellbeing

The health and wellbeing of individuals is likely to be directly affected by their being unable to access services, particularly if they are left 'street homeless'. Homeless people who are no longer able to access P4A services will have greater difficulty in obtaining the services they require to meet their basic needs, including health care services, welfare benefits, food and shelter. High numbers of the clients have mental health problems (albeit below the level of specialist services) and high levels of alcohol and drug problems.

#### **Privacy**

There are no specific privacy issues.

#### Sustainability

There are no specific sustainability issues.

#### Risk

There is a significant risk of creating additional demand for other services provided / commissioned by SCC, particularly mental health services. There is a risk of 'shunting' costs into other public and voluntary sector services.

Likelihood3Impact5Risk Score15

**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

That the Cabinet agrees to proceed with the proposed reduction to P4A services. This is because the affected services are not required to meet SCC statutory duties in social care and it is important that SCC targets reducing resources in order to meet statutory responsibilities in the first instance. There is potential for the worst, immediate impacts to be mitigated through multi-agency transition planning and in the longer term for the impacts to be mitigated through the new multi-agency partnership action. Some progress towards this has already been achieved and the prospects for further development are promising.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

As part of papers for the Cabinet meeting of 4<sup>th</sup> November 2015.

Completed by:	Gareth O'Rourke
Date	3 <sup>rd</sup> Sept 2014. Updated 20 <sup>th</sup> Jan 2015 and 6 <sup>th</sup> Oct 2015.
Signed off by:	Kim Curry
Date	6 <sup>th</sup> Oct 2015
Compliance sign off Date	14 <sup>th</sup> Oct 2015
To be reviewed by: (officer nar	me) Gareth O'Rourke
Review date:	1 <sup>st</sup> April 2016
Version	Date

Equality Impact Assessment Issues and Action Table							
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?		
Age				•	•		
Care leavers and other people aged under 25 will be affected if they are homeless / at risk of homelessness.	P21 will continue to meet the needs of most care leavers and people aged under 25 either directly or in partnership with other agencies	Vikki Hearn – P21 Commissioning Manager	November 2015 onwards	Through on-going P2i arrangements	A continuation of support to this client group in accordance with SCC's statutory responsibilities		
	Any clients under 25 or Care Leavers in receipt of P4A services will be identified and appropriately managed, either through P21 or in collaboration with partner agencies	Dave Williams – Adults and Health Commissioning (for P4A) and Vikki Hearn – P2i Commissioning Manager		Through transition and on-going monitoring processes			
	The Multi-agency Design Partnership will oversee redesign / flexible use of allied services and will take account of the needs of care leavers / under 25s. SCC will make available £309k per year to the new body	SCC lead: Christina Gray, Consultant in Public Health		Through the new partnership			

Disability						
People with mental health problems will be affected if they are homeless / at risk of homelessness	The current P4A services targeted at people in contact with mental health services will be continued as they are	Kim Curry (as Lead Commissioner for Adults and Health)	November 2015 onwards		A continuation of support to this client group in accordance with SCC's statutory duties in adult social care	
	People thought to have social care needs will be offered an assessment and support for eligible needs (under the Care Act 2014) as part of transition arrangements	Mel Lock (as Director of Operations for ASC)	November 2015 onwards	Via ASC and Somerset Partnership performance management systems	The social care needs of individuals are met according to SCC statutory responsibilities	
Gender Reassignment						
There are no issues specific to gender reassignment						
Marriage and Civil Partnership						
There are no issues specific to marriage or civil partnership						

Pregnancy and Materni	ity				
Any clients identified as pregnant would be a high priority for further support	SCC will work with providers to ensure that any pregnant clients in receipt of P4A services are identified and provided with appropriate support	Dave Williams, Adults and Health Commissioning in conjunction with P4A providers	April 2016	Via the de- commissioning plan	Individuals who are pregnant identified and referred to appropriate agencies
Race (including ethnicity	or national origin, colour, nation	nality and Gypsies and	Travellers)		
There are no issues specific to race.					
Religion and Belief					
There are no issues specific to religion or belief.					
Sex	,	,			
The proposal will affect more men than women, but the smaller number of women affected are particularly vulnerable and will be even more so if they are less able to access services	The Multi-agency Design Partnership will be asked to consider the vulnerability of services users in determining eligibility and prioritising needs.	Christina Gray will lead for SCC	November 2015 onwards	Via the new commissioning / partnership body	Eligibility is determined and needs prioritised according to the vulnerability of people who present

Sexual Orientation					
There are no issues specific to sexual orientation.					
Other (including caring r	responsibilities, rurality, low inco	ome, Military Status etc)		1	
A small number of exservice people are known to use the affected services.	The specific needs of exservice people using affected services will be considered in transition arrangements. This will include linking them with relevant support organisations if they are not already in contact	Dave Williams, Adults and Health Commissioning in conjunction with P4A providers	November 2015 onwards	Via the de- commissioning plan	Ex-service people using the affected services receive the specialist support they need
All clients are on a low income	Information can be provided to clients about sources of support for money management, employment and training	The P4A service provider with support from Dave Williams, Adults and Health Commissioning	November 2015 onwards	Via the de- commissioning plan	Clients on low income are provided with or signposted to appropriate organisations for information and advice

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

# **Baroness Thornton, March 2010**

Why are you completing the Impact Assessment?							
Proposed New Policy or Service	Change to Policy of Service		MTFP or Paper Yes	Service Review or SCC Change Programme			
What are you completing the Impact Assessment on (which policy, service, MTFP reference, cluster etc)?			ssenger Transport. Pa FP R16-057	ark and Ride.			

# **Section 1 – Description** of what is being impact assessed

A reduction in £80,000 to the budget for Park and Ride subsidy as part of a procurement process for a new service contract.

The level of saving proposed is considered to be achievable through a reduction in frequency of park and ride buses from 10 minutes to 15 minutes; although every effort will be made deliver the saving through seeking a more commercial operation of the service (e.g. a sliding scale subsidy or offering commercial use of the sites as a service concession) rather than through reducing levels of service.

**Section 2A** – People or communities that are **targeted or could be affected** (for Equalities - taking particular note of the Protected Characteristic listed in action table)

Users of the Park and Ride service in Taunton with approximately 25,000 to 28,000 trips being made per month.

#### **Section 2B** – People who are **delivering** the policy or service

A public transport operator to be identified through a procurement process.

**Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

Current patronage of the service and costs related to achieving certain service frequencies.

Section 4 – Conclusions drawn about the impact of the proposed change or new

service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

# **Community Safety**

Implications for community safety have been considered and no issues have been identified.

### **Equality**

Impact on people with protected characteristics has been considered and no issues have been identified.

# **Health and Safety**

Impact on health and safety has been considered and no issues have been identified.

# **Health and Wellbeing**

Impact on health and wellbeing has been considered and no issues have been identified.

# **Privacy**

Impact on privacy has been considered and no issues have been identified.

# Sustainability

May reduce frequency of buses accessing Taunton from the Park and Ride from 10 minutes to 15 minutes which may result in an increase in travellers choosing to drive into town rather than use the park and ride.

#### Risk

Failure to identify a more commercial model to operate the service will result in delivering the saving through reduced frequency of service. This could in-turn result in reduced patronage leading to increased costs per passenger.

Likelihood	3	Impact	2	Risk Score	6 (Low)
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**Section 5** – After consideration please state your final recommendations based on the findings from the impact assessment. Also include any examples of good practice and positive steps taken.

Proceed with the proposal to reduce the subsidy for Park and Ride as part of the process of agreeing a new contract.

**Section 6** - How will the assessment, consultation and outcomes be published and communicated? E.g. reflected in final strategy, published. What steps are in place to review the Impact Assessment

The assessment will be published with the decision paper. It is not intended to review the assessment.

Completed by:		Mike O'Dowd-Jones			
Date			/15		
Signed off by:		Paula Hewitt			
Date		Jan 16			
Compliance sign of	Date	November 2015			
To be reviewed by:	(officer name)	Mike (	O'Dowd-Jones		
Review date:		November 2016			
Version	1		Date	21/10/15	

	Equality Im	pact Assessment Issu	es and Action Ta	ble	
Identified issue drawn from your conclusions	Actions needed – can you mitigate the impacts? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?
Age					
No impact identified	None				
Disability			•	•	
No impact identified	None				
<b>Gender Reassignment</b>					
No impact identified	None				
Marriage and Civil Part	nership				
No impact identified	None				
Pregnancy and Materni	ity				
No impact identified	None				
Race (including ethnicity	or national origin, colour, nation	onality and Gypsies and	Travellers)		
No impact identified	None				
Religion and Belief					
No impact identified	None				
Sex					
No impact identified	None				
Sexual Orientation					
No impact identified	None				
Other (including caring r	esponsibilities, rurality, low inc	ome, Military Status etc	)		
No impact identified	None				

Healt	th and Safety, Sustainability,	Community Safety Imp	oact Assessment	Issues and Action T	able		
Areas of increased risk drawn from your conclusions	Actions needed – can you mitigate the impacts/risk? If you can how will you mitigate the impacts?	Who is responsible for the actions?	When will the action be completed?	How will it be monitored?	What is the expected outcome from the action?		
	Health	and Safety Issues and	d Action Table	·			
No impact identified	None						
	Sust	tainability Issues and <i>I</i>	Action Table				
May reduce frequency of buses accessing Taunton from the Park and Ride from 10 minutes to 15 minutes which may result in an increase in travellers choosing to drive into town rather than use the park and ride.	Ensue new procurement process maximises opportunity for operators to propose a more commercially focused contract to avoid the saving being achieved through frequency reduction.	Commercial and Procurement	May 2016	Through the procurement process and prior to contract award.	Saving achieved without need to reduce service frequency.		
	Comm	unity Safety Issues an	d Action Table				
No impact identified	None.						
	Privacy Issues and Action Table						
No impact identified	None						

# **Equality Impact Assessment Form and Action Table 2015**

(Expand the boxes as appropriate, please see guidance (<a href="www.somerset.gov.uk/impactassessment">www.somerset.gov.uk/impactassessment</a>) to assist with completion)

"I shall try to explain what "due regard" means and how the courts interpret it. The courts have made it clear that having due regard is **more than having a cursory glance** at a document before arriving at a preconceived conclusion. Due regard requires public authorities, in formulating a policy, to give equality considerations the weight which is **proportionate in the circumstances**, given the potential impact of the policy on equality. It is not a question of box-ticking; it requires the equality impact to be **considered rigorously and with an open mind**."

# **Baroness Thornton, March 2010**

What are you completing the Impact
Assessment on (which policy,
service, MTFP reference, cluster etc)?

The Medium Term Financial Plan 2016/17 for the whole of Somerset County Council and any impacts on staff.

Version Date December 2015

# **Section 1 – Description** of what is being impact assessed

County Council Medium Term Financial Plan 2016/17 setting out the required financial savings. Redundancies will be made across SCC and across all Service areas

**Section 2A** – People or communities that are **targeted or could be affected** (taking particular note of the Protected Characteristic listed in action table)

All employees could be affected depending on decisions made within service areas.

# Section 2B – People who are delivering the policy or service

Managers will take decisions supported by HR

# **Section 3** – **Evidence and data** used for the assessment (Attach documents where appropriate)

The following tracks the profile of redundancies over the last two years. It is notable that there are no particular concerns against the protected characteristics for which data is available:

	Profile of redundancies made (compulsory & voluntary)							
Gender	Female		Male		Not Declared			TOTAL %
2013/14 %	73.3%		26.7%		0			100
Ethnic Group	White British		BME		Not Declared			
2013/14 %	84.4%		3.9%		11.7%			100
Disability	Non-Disabled		Disability Declared		Not Declared			
2013/14 %	95%		0.74%		4.26%			100
Age	Aged 16-25	Aged 26-35	Aged 36-45	Aged 46-55	Aged 56-65	Aged 65+	Not Found	
2013/14 %	9.3%	18.%	17.3%	24.6%	26.8%	4%	0	100

	Profile of redundancies made (compulsory & voluntary)							
Gender	Female		Male		Not Declared			TOTAL %
2014/15 %	83%		21%		0			100
Ethnic Group	White British		BME		Not Declared			
2014/15 %	82.7%		6.7%		10.6%			100
Disability	Non Disabled		Disability Declared		Not Declared			
2014/15 %	94.2%		1.9%		3.9%			100
Age	Aged 16-25	Aged 26-35	Aged 36-45	Aged 46-55	Aged 56-65	Aged 65+	Not Found	
2014/15 %	0	1.9%	19.2%	28.9%	46.2%	3.8%	0	100

# **Current workforce profile**

Total headcount (excluding schools) 4494

#### Gender

Female – 74.36% Male – 25.64%

# Age

16-25 6.2%

26-35 17.3%

36-45 22.5%

46-55 31.7%

56-65 20.4%

66+ 1.9%

# **Disability**

Yes 4.98%

No 87.3%

Prefer not to say 6%

Blank 1.71%

# **Ethnicity**

Asian 0.58%

Black 0.65%

Mixed 0.69%

White British 86.4%

White Other 2.63%

White Irish 0.4%

Total BME (excluding White Irish) 4.55%

Areas with identified redundancies of 5 or higher fte:

# Finance and Performance - headcount of 164

#### Gender

Female - 67.7% Male - 32.3%

# Age

16-25 7.3% 26-35 24.8% 36-45 24.7% 46-55 28.6% 56-65 14.6% 66+ 0%

# **Disability**

Yes 3.05% No 93.9% Prefer not to say 3.05% Blank 0%

# **Ethnicity**

Asian 0.6%
Black 0%
Mixed 0.6%
White British 95.7%
White Other 0%
White Irish 0%

#### Commercial and Business Services - headcount of 817

#### Gender

Female – 73.4% Male – 26.6%

#### Age

16-25 7.5% 26-35 18.5% 36-45 25.5% 46-55 30% 56-65 16.8% 66+ 1.7%

# **Disability**

Yes 3.4% No 88.4% Prefer not to say 7.4% Blank 0.8%

#### **Ethnicity**

Asian 0.49%
Black 0.12%
Mixed 1.1 %
White British 85.9%
White Other 1.6%

White Irish 0.36%

Adults and Health Operations – headcount of 427

#### Gender

Female - 85.7%

Male - 14.3%

### Age

16-25 3%

26-35 13.6%

36-45 23.2%

46-55 37.5%

56-65 21.8%

66+ 0.9%

# **Disability**

Yes 4.9%

No 87.1%

Prefer not to say 8.0%

Blank 0%

# **Ethnicity**

Asian 1.4%

Black 1.8%

Mixed 0.7%

White British 86.6%

White Other 2.6%

White Irish 0.9%

Economy and Community Infrastructure – headcount of 98

# Gender

Female - 47.9%

Male - 52.1%

# Age

16-25 2.0%

26-35 16.4%

36-45 30.6%

46-55 28.6%

56-65 21.4%

66+ 1%

#### **Disability**

Yes 3.06%

No 91.8%

Prefer not to say 4.08%

Blank 1.06%

# **Ethnicity**

Asian 2.04%

Black 0%

Mixed 0%

White British 91.8% White Other 1.06% White Irish 1.06%

Customers and Communities – headcount of 59

#### Gender

Female – 49.1% Male – 50.9%

### Age

16-25 0% 26-35 37.3% 36-45 23.7% 46-55 30.5% 56-65 8.5% 66+ 0%

#### Disability

Yes 8.47% No 83.06% Prefer not to say 8.47% Blank 0%

# **Ethnicity**

Asian 1.7%
Black 0%
Mixed 1.7%
White British 89.8%
White Other 1.7%
White Irish 0%

Whilst the Council has the facility to capture Sexual Orientation, Religion & Belief and Transgender data of its employees within SAP few employees have completed this information. This lack of data means that no meaningful conclusions regarding any impact of redundancies, adverse or otherwise, can be drawn. The Council has a Request For Service in place with Southwest One which will see each employee prompted to update their personal information, including the above protected characteristics, electronically. Once this is in place we will be in a position to identify any potential impacts of redundancies within service areas upon the listed protected characteristics.

**Section 4 – Conclusions** drawn about the equalities impact (positive or negative) of the proposed change or new service/policy (Please use **prompt sheet** in the guidance for help with what to consider):

**Age** – Finance and Performance and Customers and Communities have smaller pools of staff in the 55+ age group. This will potentially impact on the number of voluntary redundancy applications and may result in a greater number of compulsory redundancies. Most of the areas are broadly in line with the workforce as a whole.

**Gender** – Adults and Health Operations has a greater number of women than across the workforce as a whole. It is anticipated that redundancies will impact more greatly on women than men. This is the case, but to a lesser degree in Commercial and Business Services and Finance and Performance.

**Disability** – Customers and Communities has a higher percentage of disabled employees than across the workforce.

**Ethnicity** – The information indicates that the areas affected by redundancies do not have a greater proportion of people from a Black or Minority Ethnic group within them than the wider organisation.

**Maternity and Pregnancy** – regulations require that care is taken in applying the redundancy policy to those on maternity leave.

Other protected characteristics have been considered and it is not believed there should be any greater adverse impact on any of these. To ensure this continues to be the case throughout the redundancy process, leaver data will be collated and reviewed where data is available.

The redundancy policy clearly states that decisions on redundancies should be made on the post rather than the people. This is in place to avoid any discrimination in the selection process. This impact assessment will be updated as it becomes clearer from services which posts will be made redundant.

miti	ou have identified any og gated to either reduce will take. (Please add r	or remove them	n. In the tab					
	ntified issue drawn n your conclusions	Actions needer you mitigate the impacts? If you how will you not the impacts?	he u can	Who is responsible for the actions? When will the action be completed?	How will it be monitored? What is the expected outcome from the action?			
Age								
Disa	ability							
Gen	der Reassignment							
Marı	riage and Civil Partner	ship						
Preg	gnancy and Maternity							
Rac	e (including ethnicity or	national origin, c	olour, natior	nality and Gypsies and	Travellers)			
Reli	gion and Belief							
Sex								
Sex	ual Orientation							
Othe	er (including caring resp	onsibilities, rural	ity, low inco	me, Military Status etc)				
	Section 6 - How will the communicated? E.g. review the Impact Asse	eflected in final st		<u> </u>				
	Completed by:		Vicky Hayter					
	Date		05/01/16					
	Signed off by:		Chris Squire					
	Date	25/1/16						

28/1/16

Vicky Hayter

Autumn 2016 as part of 2017/18 MTFP

**Compliance sign off Date** 

**Review date:** 

To be reviewed by: (officer name)