



North

Yorkshire County Council

## Equality impact assessment (EIA) form: evidencing paying due regard to protected characteristics

(Form updated May 2015)

### Short breaks review

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যদি আপনি এই ডকুমেন্ট অন্য ভাষায় বা ফরমেটে চান, তাহলে দয়া করে আমাদেরকে বলুন।

如欲索取以另一語文印製或另一格式製作的資料，請與我們聯絡。

اگر آپ کو معلومات کسی دیگر زبان یا دیگر شکل میں درکار ہوں تو برائے مہربانی ہم سے پوچھئے۔



**Equality Impact Assessments (EIAs) are public documents. EIAs accompanying reports going to County Councillors for decisions are published with the committee papers on our website and are available in hard copy at the relevant meeting. To help people to find completed EIAs we also publish them in the Equality and Diversity section of our website. This will help people to see for themselves how we have paid due regard in order to meet statutory requirements.**

Name of Directorate and Service Area	Health and Adult Services, Provider Services
Lead Officer and contact details	Joss Harbron 01609 535330
Names and roles of other people involved in carrying out the EIA	Dale Owens – Assistant Director for Care and Support Ruth Sleaford – Project Manager
How will you pay due regard? e.g. working group, individual officer	Task and finish groups with registered managers and service managers, commissioners and brokerage.
When did the due regard process start?	August 2017

**Section 1. Please describe briefly what this EIA is about.** (E.g. are you starting a new service, changing how you do something, stopping doing something?)

This EIA relates to an initial review of the current in-house Short Breaks offer delivering a number of service changes to provide greater efficiency within the service and realise an initial £400k of cashable savings by April 2020. For the purposes of this project short breaks include day and respite services, sitting services and any other non-permanent replacement care provided. Health and Adults Services directly provides replacement care services such as day and respite services for older people, people with learning disabilities, people with autism and people with mental health needs in its own establishments. It is proposed that this be achieved through a number of initiatives:

- Increasing the flexibility and addressing underutilisation of our in-house offer, making one week out of four currently within our learning disability offer available to other client groups.
- Aligning the management structure across the County
- review of LD services to ensure full utilisation resources within Council buildings
- Alignment of service offer based upon usage and cost of delivery by re-provisioning services currently accessed through the sitting service at 101 Prospect Mount Elderly Persons Home and the day service at Sycamore Hall.
- Reviewing the charges currently levied for Continuing Health Care funded clients within the short breaks provision to apply full cost recovery.

Workstream 2 would include a review of in-house provider services through the development of a mixed model approach to the delivery of short breaks informed by the analysis of market and demand data and client, staff and provider consultation and engagement. This work has not yet been initiated and therefore a separate equalities impact assessment will be undertaken at an appropriate time.

**Section 2. Why is this being proposed? What are the aims? What does the authority hope to achieve by it?** (E.g. to save money, meet increased demand, do things in a better way.)

- To increase the utilisation across current in-house services and increase the percentage of time each service is occupied.
- To align current staffing structure within NYCC provider services to deliver modern, well regarded short breaks provision
- To save £400k by April 2020 in order to contribute to the county council's saving target due to the reduction of 34% in the council's spending power by 2019/20.

**Section 3. What will change? What will be different for customers and/or staff?**

There are a number of initiatives under development as follows:

**Initiative 1 - Increasing the flexibility and addressing underutilisation of our in-house offer, making one week out of four currently within our learning disability offer available to other client groups.**

This initiative will be piloted at 2 locations (80 High Street and Tawny Lodge) from April 2018 to March 2019 with a review at October 2018. Service levels for current Learning Disability service users of these two services will not be impacted, however the time at which they can be accessed may be.

**Initiative 2 - Aligning the management structure across the County**

An alternative management structure has been successfully operated in Selby and Craven whereby a single registered manager operates both a day services and a respite service. One of the registered manager posts in the Hambleton and Richmondshire locality has been vacant and following engagement with the remaining registered manager this model has been replicated within this locality since the vacation of the post in July 2017 providing consistency of approach.

**Initiative 3 - Review of LD services to ensure full utilisation of resources within current Council run buildings. This initiative does not realise any savings until 2019/2020.** This initiative will look to relocate LD service delivery whilst reducing building costs and usage. Service delivery will not be reduced to current service user group.

**Initiative 4 - Alignment of service offer based upon usage and cost of delivery by re-provisioning services currently accessed through the sitting service at 101 Prospect Mount Elderly Persons Home and the day service at Sycamore Hall.**

#### **4.1 - 101 Prospect Mount Road – Sitting Service**

The sitting service is situated within a building which is currently subject to consultation proposing its closure. A decision on this is due to be made on the 30<sup>th</sup> January 2018 and therefore the sitting service would be impacted by this decision.

The re-provision of residential care to an extra care offer has been subject to a wider EIA as part of the Care and Support Where I Live strategy.

There is one member of staff who delivered the sitting service. this member of staff has left the service, however if they had remained and the sitting service ceased this member of staff would have undertaken duties as part of the wider staff team with 101 and terms and conditions of services would remain unchanged. There were 5 service users impacted by this proposal and services to these people has been re-provisioned at their request using a strength based approach through individual engagement and a review of their support needs.

#### **4.2 – Sycamore Hall – Day Service**

The day service at Sycamore Hall is underutilised. The staff team provide up to 2 staff members to support the day services which currently delivers support to up to 3 people within the service.

There is a rental cost to the local Authority of £8000 per annum.

The 3 people currently using the service will be offered a full review of their support needs and look to support them through strength based approach to access other community activities and engagement.

**Initiative 5 - Reviewing the charges currently levied for Continuing Health Care funded clients within the short breaks provision to apply full cost recovery.**

NYCC in house provision currently provides services to people who are either fully funded through continuing healthcare from the NHS or have a jointly funded package of care due to their level of need. Review of the charges for fully funded packages is underway to ensure full cost recovery from April 2018. This should have no impact upon individuals as the funding is provided through Clinical Commissioning Groups and services will continue to be provided regardless of the cost attributed. There is no impact on current staff.

**Section 4. Involvement and consultation** (What involvement and consultation has been done regarding the proposal and what are the results? What consultation will be needed and how will it be done?)

**Initiative 1 - Increasing the flexibility and addressing underutilisation of our in-house offer, making one week out of four currently within our learning disability offer available to other client groups.**

Work is underway to identify trends/common requests for service usage from current service users in order to identify the most appropriate weeks to be made available to other client groups whilst increasing utilisation of the service but having the least impact upon the dates available to them. There are currently 25 customers who have accessed Tawny Lodge in the last 12 months and 13 Customers who utilised these services at 80 The High Street Harrogate

**Initiative 2 - Aligning the management structure across the County**

There has been no impact on customers from the management structure alignment. Management are monitoring the impact on the operational management team at the services affected. Consultation was through individual discussions with local managers in relation to the proposals and to agree a local approach.

**Initiative 3 - Review of LD services to ensure full utilisation of resources within current Council run buildings. This initiative does not realise any savings until 2019/2020.**

This initiative will look to relocate LD service delivery whilst reducing building costs and usage. There are no plans for reduction of service delivery to the current service user group. The consultation with managers and staff will commence post April 2018. These proposals will also be shared with families and people who use the affected services.

**Initiative 4 - Alignment of service offer based upon usage and cost of delivery by re-provisioning services currently accessed through the sitting service at 101 Prospect Mount Elderly Persons Home and the day service at Sycamore Hall.**

**4.1 - 101 Prospect Mount Road – Sitting Service**

Individual strength-based re-assessments will be undertaken to re-provision services currently provided to these service users at this location. The conversations with people using the sitting services have started following the implementation of the formal consultation in September 2017.

Each person using the sitting service has had a formal review of their support needs and been offered alternative support or have decided they no longer need this support. Any changes will initially be reviewed 6 weeks after implementation and then as part of the yearly review of support needs. All residents and families have had the opportunity to feedback formally on the consultation to cease the service. This has been through formal meetings, the offer of 1-2-1 with a social care assessor and through feedback questionnaires, and an email address.

Staff have been part of a formal consultation process which ended in December 2017. Staff have had two meetings with management, the offer of 1-2-1 with local management and HR representatives and the opportunity to feedback formally through the consultation process.

The staff member who delivered the sitting service has left employment with NYCC.

**4.2 – Sycamore Hall – Day Service**

The 3 people currently using the service have been offered a full review of their support needs and with their Social care assessors will look to support them through a strength based approach to access other community activities and engagement.

**Initiative 5 - Reviewing the charges currently levied for Continuing Health Care funded clients within the short breaks provision to apply full cost recovery.**

Clinical commissioning groups will be informed of the change to charges in January/February 2018. They will be given notice period with the aim to commence the new proposals from April 2018

**Section 5. What impact will this proposal have on council budgets? Will it be cost neutral, have increased cost or reduce costs?**

Please explain briefly why this will be the result.

Initiative	Cost Saving 18/19	Comments
<b>Initiative 1 - Increasing the flexibility and addressing underutilisation of our in-house offer, making one week out of four currently within our learning disability offer available to other client groups. Pilots in 2 locations</b>	£29.25k	Subject to the success of these pilots there is potential for further savings in subsequent years based upon roll-out to other locations.
<b>Initiative 2 - Aligning the management structure across the County</b>	£10k	Circa £30k saving was realised in financial year 17/18 due to the staffing vacancy
<b>Initiative 3 Review of LD services to ensure full utilisation of resources within current Council run buildings. This initiative does not realise any savings until 2019/2020.</b>	£0	Possible future savings projected at £159.5K
<b>Initiative 4 – re-provisioning of sitting service at 101 Prospect Mount Road and day service at Sycamore Hall</b>	£21k	£13,000 staffing £8000 per annum rental costs for Sycamore Hall
<b>Initiative 5 - Reviewing the charges currently levied for Continuing Health Care funded clients within the short breaks provision to apply full cost recovery.</b>	£9.5k	

Section 6. How will this proposal affect people with protected characteristics?	No impact	Make things better	Make things worse	Why will it have this effect? Provide evidence from engagement, consultation and/or service user data or demographic information etc. (see Appendix 1)
Age	✓ ✓	✓		For initiative 1 the widening of the offer of respite facilities to other client groups will offer opportunity for greater numbers of people with social care needs and disabilities to be offered respite. Currently the service is limited to people 18-65 and with a learning disability. It will potentially reduce the flexibility of dates when respite can be offered to the current beneficiaries, however evidence shows that our current respite services are underutilised (see Appendix 1 – table 1). Initiative 2 Initiative 3 Initiative 4

	✓ ✓			Initiative 5
Disability	✓ ✓ ✓ ✓	✓		For initiative 1 the widening of the offer of respite facilities to other client groups will offer opportunity for greater numbers of people with social care needs and disabilities to be offered respite. Currently the service is limited to people 18-65 and with a learning disability. It will limit the availability for current client group however evidence shows that our current respite services are under utilised Initiative 2 Initiative 3 Initiative 4 Initiative 5
Sex (Gender)	✓			
Race	✓			
Gender reassignment	✓			
Sexual orientation	✓			
Religion or belief	✓			
Pregnancy or maternity	✓			
Marriage or civil partnership	✓			

<b>Section 7. How will this proposal affect people who...</b>	<b>No impact</b>	<b>Make things better</b>	<b>Make things worse</b>	<b>Why will it have this effect? Provide evidence from engagement, consultation and/or service user data or demographic information etc.</b>
...live in a rural area?	✓			
...have a low income?	✓			

**Section 8. Will the proposal affect anyone more because of a combination of protected characteristics? (e.g. older women or young gay men) State what you think the effect may be and why, providing evidence from engagement, consultation and/or service user data or demographic information etc.**

Initiative 1 will potentially support a wider age range of people, who may have a range of disabilities or complex needs to have the offer of council provided respite services

<b>Section 9. Next steps to address the anticipated impact. Select one of the following options and explain why this has been chosen. (Remember: we have an anticipatory duty to make reasonable adjustments so that disabled people can access services and work for us)</b>	<b>Tick option chosen</b>
<b>1. No adverse impact - no major change needed to the proposal.</b> There is no potential for discrimination or adverse impact identified.	✓
<b>2. Adverse impact - adjust the proposal</b> - The EIA identifies potential problems or missed opportunities. We will change our proposal to reduce or remove these adverse impacts, or we will achieve our aim in another way which will not make things worse for people.	
<b>3. Adverse impact - continue the proposal</b> - The EIA identifies potential problems or missed opportunities. We cannot change our proposal to reduce or remove these adverse impacts, nor can we achieve our aim in another way which will not make things worse for people. (There must be compelling reasons for continuing with proposals which will have the most adverse impacts. Get advice from Legal Services)	
<b>4. Actual or potential unlawful discrimination - stop and remove the proposal</b> – The EIA identifies actual or potential unlawful discrimination. It must be stopped.	
<p><b>Explanation of why option has been chosen.</b> (Include any advice given by Legal Services.)</p> <p>Although the proposals identify changes to the service delivery, all efforts have been made to ensure people who use services and their protected characteristics have been considered. Each person using services has and will be supported through a strength based assessment or review to look at alternative support requirements, where relevant. The services have and will potentially impact on staffing, however all staff will be supported through a consultation process and any impact to their personal circumstances or characteristics will be considered and minimised where possible.</p>	

**Section 10. If the proposal is to be implemented how will you find out how it is really affecting people? (How will you monitor and review the changes?)**

The Short Breaks Project Board oversees and monitors the delivery of the project. Their role includes monitoring overall progress, ensuring that the project complies with agreed delivery standards and commission regular reviews to assess progress and confirm that the project remains on course to deliver its objectives. The project board is in turn accountable to the Care and Support Where I Live (CASWIL) sub-programme and the 2020 HAS Programme. Measures to evaluate the impact and success of each initiative are under development and will be monitored by the project board through this project governance structure. Where appropriate pilots will be used to test new approaches and feedback will be sought from staff, service users and their families. At this stage of development those measures currently include but are not limited to the following:

- Initiative 1, 3, and 4 – Success measures for pilots include an assessment of customer feedback from current and new clients, feedback from staff and analysis of data to monitor the impact upon access to services.
- For initiative 2, Service management will review this locally with the operational management and share findings with senior management and the short break project board.
- For Initiative 4 for the current clients/customers and carers there will be an individual review after 6 weeks of implementation and a yearly review
- For initiative 5 - this will be reviewed as per contract arrangements
- Post implementation reviews will be undertaken where appropriate.

**Section 11. Action plan.** List any actions you need to take which have been identified in this EIA, including post implementation review to find out how the outcomes have been achieved in practice and what impacts there have actually been on people with protected characteristics.

<b>Action</b>	<b>Lead</b>	<b>By when</b>	<b>Progress</b>	<b>Monitoring arrangements</b>
Initiative 1 – feedback from staff, service users/families and analysis of data to be reviewed throughout the pilot period.	Joss Harbron	April 2019	Specific measures and supporting data under development	The project team meets fortnightly and will gather data/information and prepare reports for review meetings throughout the pilot period. These will take place monthly for the first 6 months and 3monthly thereafter. The Project Board will also receive reports to monitor progress (frequency to be agreed) and the outcome of these reviews will feed into the PIR process.
Initiative 2 – Service Management to review the impact of this initiative	Joss Harbron	March 2018		To be reviewed by the Project Board and any further actions identified
Initiative 3 – Further develop measures for success including an evaluation of the impact upon people throughout the development of the proposed model	Joss Harbron	April 2019	This initiative is still under development and therefore actions relating to monitoring progress and impact are to be further developed and agreed	The project board will monitor, frequency of reporting to be confirmed along with specific measures
Initiative 4 - Sitting service and day service at Sycamore Hall	Social care Assessors	After first 6 weeks of implementation of new support plan		Initial 6 week reviews of individuals affected and yearly review of support needs
PIR/s to be undertaken as appropriate	Joss Harbron/Ruth Sleaford	TBC - 3 months post implementation		PIRs will be undertaken (frequency and timescales to be agreed) and the outcomes monitored by the project board. The CASWIL sub-programme board meeting will also receive the outcome of the PIRs and where relevant lessons learnt logs/reports and closure report upon completion.
Further identify and consider the	Joss Harbron	April 2018		This data will form part of the evaluation of impact of each of

demographic data available				the initiatives through the project teams and project board.
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**Section 12. Summary** Summarise the findings of your EIA, including impacts, recommendation in relation to addressing impacts, including any legal advice, and next steps. This summary should be used as part of the report to the decision maker.

This EIA covers a number of initiatives at varying stages of development and Where appropriate pilots will be used to test new approaches and feedback will be sought from staff, service users and their families. Based upon the consideration of information available at this time it is considered that there will be no adverse impact of these initiatives upon anyone more because of a combination of protected characteristics and therefore no major change is needed to the proposal. This EIA will be continually reviewed and updated as development of the initiatives progress and more information is available.

It is considered that there will be no impact upon any protected characteristics with the exception of a possible positive impact upon age and disability through piloting the widening of the in-house respite offer to other client groups within initiative 1. It is anticipated that this will potentially support a wider age range of people as the service will no longer be limited to those aged 18-65 who have a learning disability but may be offered to other client groups and age ranges.

As detailed within the action plan above, success measures for the pilot and any other initiatives will be developed and agreed in advance and measured and reviewed at regular intervals throughout, in order to ensure any impact (whether making things better or worse) is identified, and taken into consideration. These success measures will include an assessment of customer feedback from current and new clients, feedback from staff and analysis of data to monitor the impact upon access to services.

**Section 13. Sign off section**

This full EIA was completed by:

**Name:** Joss Harbron  
**Job title:** Head of Provider Services  
**Directorate:** Health and Adult Services  
**Signature:** Joss Harbron

**Completion date:** 17/01/18  
**Authorised by relevant Assistant Director (signature):** Dale Owens

**Date:** 19<sup>th</sup> January 2018

## Appendix 1 – Supporting Evidence

**Table 1 - Occupancy for in house provision is detailed in the table below:**

Facility	Beds	Yearly Capacity	Actual Occupancy	%
<b>Elderly Persons Homes</b>				
101 Prospect Mount Road	36	1872	743	40%
5 Whitby Road	40	2080	1478	71%
Ashfield, Malton	31	1612	1266	79%
Ashfield House, Skipton	30	1560	1056	68%
Benkhill Lodge	30	1560	1154	74%
Brentwood Lodge	30	1560	347	22%
Carentan House	29	1508	786	52%
Larpool Lane	40	2080	1587	76%
Neville House	26	1352	867	64%
Silver Birches	31	1612	774	48%
Springfield Garth	28	1456	865	59%
Station View	39	2028	855	42%
Woodfield House	28	1456	833	57%
<b>Respite</b>				
65a Valley Road – Resource Centre	6	312	189	61%
80 High Street	6	312	91	29%
Jubilee Lodge	4	208	110	53%
Milestone House	6	312	167	54%
Tawny Lodge	3	156	88	56%
<b>Total</b>	<b>443</b>	<b>23036</b>	<b>13256</b>	<b>58%</b>

The table above shows occupancy across all overnight bed based provision including long stay and respite. The figures are skewed due to a number of factors such as issues with recruitment, buildings restricting the levels of complexity etc. and the fact that all registered beds are not currently staffed for, however do show that there is some underutilisation within the services which is unsustainable.

**Table1 – Number of Clients currently receiving a short break, by locality and client group April 2016 to March 2017**

Locality	Learning Disability	Mental Health	Older People	Physical Disability	Sensory	Total
<b>Hambleton and Richmondshire</b>	224	60	162	91	10	<b>547</b>
<b>Harrogate and Craven</b>	283	76	260	135	20	<b>774</b>
<b>Scarborough, Whitby and Ryedale</b>	250	5	263	111	17	<b>646</b>
<b>Selby</b>	85	0	98	50	5	<b>238</b>
<b>Total</b>	<b>842</b>	<b>141</b>	<b>783</b>	<b>387</b>	<b>52</b>	<b>2205</b>