



North

Yorkshire County Council

Equality Impact Assessment (EIA): Evidencing paying due regard to protected characteristics

INTEGRATED FAMILY SUPPORT
February 2016

Updated post-consultation May 2016

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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	Children and Young People’s Service – NYCC
Lead Officer and contact details	Judith Hay, Assistant Director: Children and Families Service
Names and roles of other people involved in carrying out the EIA	Julie Firth, Head of Prevention Vicky Metheringham, Head of Safeguarding and LAC Naomi Smith, 2020 Project Manager Margaret Fenwick, Senior HR Advisor David Walker, Head of Social Inclusion and CYPS Lead for Equality and Diversity
How will you pay due regard? e.g. working group, individual officer	Via the Children and Families 2020 Programme Board and through staff consultation
When did the due regard process start?	From project start-up
Sign off by Assistant Director (or equivalent) and date	Judith Hay 13.07.2016

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 supports the proposal to create an Integrated Family Support Service to deliver a range of activities which support the delivery of statutory services for children and families in North Yorkshire. Like the creation of the Prevention Service in the Children and Young People’s Service in 2015, the proposed model for Integrated Family Support will establish a new multi-skilled workforce, bring more flexibility service delivery, enable better targeting of resources to changing need, reduce hand-offs for families, improve outcomes and release savings.

The proposals remain consistent with the re-shaping of Children’s Social Care services in North Yorkshire in 2012 in order to “strengthen current practice and develop new ways of working with children, young people and families, by improving frontline delivery and embedding evidence-based practice to reduce demand in services and deliver sustainable positive outcomes”, whilst also recognising the 2020 context.

The development of proposals for the Integrated Family Support Service has been guided by a number of design principles which were agreed early-on in the project and endorsed by CYPS and 2020 Programme Boards in September 2015:

- A responsive service which can deliver our priorities (preventing children entering care wherever possible)
- Improve consistency of intervention for families
- Enable families to change by establishing relationships with them via increasing direct contact with families (including early mornings, evenings and weekends)
- Deliver interventions where and when families need them
- Establish an outcomes framework
- Embed new ways of working
- Develop a flexible service which ensures capacity to manage future demand and provides new career development opportunities for staff
- Embed dedicated case supervision across the service
- Deliver value for money

It is proposed that service delivery will be underpinned by the 5 Family Intervention Factors as outlined by the Department for Communities and Local Government as part of the approach to the National Troubled Families programme. There is strong evidence surrounding the family intervention approach starting with the Glasgow University research on the Dundee Project¹ (2001). The Dundee model and subsequent Family Intervention projects have embedded the 5 key family intervention approaches and have demonstrated significant and sustained impact in delivering positive change with families. The 5 factors are:

- A dedicated worker, dedicated to the family
- Whole family approach
- Practical hands-on support
- Assertive and challenging approach
- An agreed plan and common purpose among the relevant services

Section 2. Why is this being proposed? (e.g. to save money, meet increased demand, do things in a better way.)

The establishment of an Integrated Family Support Service has been proposed in order to re-configure delivery to meet the design principles outlined in section 1, and in doing so, to meet the following objectives:

¹ Dillane, J et al (2001) *Evaluation of the Dundee Families Project*. Scottish Executive, Dundee City Council, NCH Action for Children.

- To transform organisational structures and working practices by bringing together staff into multi-skilled area teams which are more flexible to deliver from a suite of interventions the support which is most appropriate to the individual, underpinned by a robust outcomes framework which identifies the desired impact of support on children, young people and families
- To improve resilience, resource management, knowledge transfer and career development opportunities through an integrated structure underpinned by a workforce development strategy
- To deliver a total of £368k recurring cashable benefit to contribute towards savings for the 2020 programme
- To contribute to the Directorate's strategy of Reducing Looked After Children (LAC)

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

This section outlines the anticipated changes for staff and families as a result of the proposals and is informed by results from the staff engagement survey for the project which was completed in Summer 2015 (which received a 60% response rate), staff engagement events (January 2016), a review of existing feedback from families and focus groups with social workers and managers. This information is referenced in the following sections as appropriate. Comments in respect of the impact on those with protected characteristics are also welcomed as part of staff consultation (March – April 2016).

Anticipated changes for customers:

In order to improve consistency of intervention for families, the new integrated approach proposes to mainstream all edge of care and Public Law Outline work previously delivered by the Family Intervention Service into the Integrated Family Support Service. This would be delivered by the worker already allocated to the family, reducing the need for handoffs which currently take place between the Family Support and Family Intervention Workers. This is anticipated to benefit families, who will have a dedicated worker with whom they can build a trusting relationship.

By embedding new ways of working through the 2020 Modern Council programme, the proportion of frontline worker time spent with children, young people and families should increase. Project staff engagement survey responses indicate that currently only approximately 33% of workers spend more than half their working week in direct contact with families, and a number of staff responses indicated that increased time spent working directly with families would improve the service for them.

Sometimes families most need support outside of standard office hours, so proposals for the integrated service include enabling flexible service provision to support families at times of greatest need for them. It is anticipated that this will be

a positive change for families, as existing feedback shows that service users value workers being able to respond quickly to issues, and to work flexibly to fit in with the family. However this proposal will have an impact on the workforce, therefore as part of consultation we will seek views from staff about the potential changes and impacts of proposed working outside of standard office hours.

Anticipated changes for staff

Delivery of the new service will be guided by an outcomes framework with a menu of evidence-based interventions, which will improve our ability to demonstrate impact and monitor performance of our services. This will be underpinned by an integrated workforce development approach in order to equip staff to deliver / apply evidence-based programmes and practice in their work. This is anticipated to be a positive change, as of the 79 staff who recently completed the project engagement survey, 68 (86%) agreed that they would welcome the opportunity to learn new skills from the project and 75% agreed that they would like more opportunities to develop their career. Staff feedback from the engagement sessions held in January 2016 was also positive in respect of the proposed workforce development approach. This will also bring anticipated benefit to families by ensuring staff are appropriately trained to deliver the most effective support to families in need. Service user feedback shows that families welcome working with staff to try different tools and techniques, for example around communication and parenting.

A new generic job profile is proposed for all frontline workers in the integrated pool to allow for more flexible deployment of resource according to need across teams and to reinforce the requirement to work beyond the normal working day.. Current job descriptions already reflect the need to provide support to families outside of standard working hours. The proposed generic job description will continue to reflect this. This may have a varied impact on staff, depending on their personal circumstances. Views from staff were sought as part of consultation. On the whole staff were positive about the principle of flexible working for the benefit of families but were concerned to ensure that this was managed consistently across staff, that demands for supervised contact did not unduly restrict flexibility and that individual circumstances were taken into consideration in the allocation of work. In the new model, this will be considered in the allocation of out-of-hours working arrangements at the discretion of line managers and supervisors. It will form part of the post-implementation review.

In line with the overarching 2020 Modern Council programme, it is anticipated that consideration of mobile and remote working and provision of new devices will lead to reduced travel time/costs for workers, improved live recording of information and increased time available for direct contact with families. Any identified training needs in relation to new ways of working will be addressed. This is anticipated to be of benefit to both staff and frontline workers. Of the 79 staff who recently completed the project engagement survey, 55 (70%) agreed that they could work

more efficiently or effectively if they had access to new technology. 60 out of 79 staff (76%) reported that they currently visit an office base at least once a day.

The proposed structure which has been consulted upon includes the disestablishment of the Contact Facilitator Role, meaning that post-holders would be at risk of redundancy. This has been proposed in light of changing requirements in respect of Supervised / Unsupervised Contact with families as analysis of current and recent Contact commitments show that the majority of Contact now requires supervision and observation, demanding greater skill levels from workers. In addition, the draft structure for the new service proposed a reduced demand for supervisory roles in the interventions team, meaning that a number of Senior FIT workers would be at risk of redundancy through these proposals. As a result of consultation feedback, revised proposals for management and supervision were put forward, and these were more positively received by the majority of staff. The alternative structure which includes dedicated team leader posts for the new Integrated Service is therefore the recommended option following consultation. For post holders who are at risk of redundancy, proposals are likely to have a negative impact, however this will be mitigated through established support mechanisms throughout consultation and any subsequent assimilation, notice period and redeployment in line with NYCC policies. In terms of any redundancy scenario, we will be mindful of our equality duties as an employer and will be following our procedures to ensure that we comply with these.

Some staff are likely experience changes to line management or supervision arrangements, dependent on the outcome of assimilation. In such cases, a managed handover will take place to ensure that staff are supported through this change.

Section 4. What impact will this proposal have on council resources (budgets)?

Cost neutral? N

Increased cost? N

Reduced cost? Y

It is proposed that the new Integrated Family Support service will go live on 1st October 2016 and will deliver savings of £368k. Reserve funding will be drawn from Developing Stronger Families Reserves in order to underpin delivery during the design of the new service and allow activity to be maintained at required levels to meet demand.

Section 5. Will this proposal affect people with protected characteristics ?	No impact	Make things better	Make things worse	Why will it have this effect? Give any evidence you have.																		
Age	√			<p><u>Impact on Customers</u></p> <p>The services in scope work holistically with all members of the family, but specifically in the interests of promoting the welfare of children. The design principles of ‘enabling families to change’ and ‘delivering interventions when families need them’ are likely to benefit customers of all ages who are referred to the service.</p> <p>The age breakdown of customers recorded on the LCS Case Management System as having allocated support delivered by a worker in scope for this project is as follows (data as at February 2016):</p> <table border="1" data-bbox="708 842 1393 1048"> <thead> <tr> <th>Age</th> <th>Number</th> <th>% of cases</th> </tr> </thead> <tbody> <tr> <td>Unborn - 5 years</td> <td>231</td> <td>34.38%</td> </tr> <tr> <td>6 years - 10 years</td> <td>179</td> <td>26.64%</td> </tr> <tr> <td>11 years - 17 years</td> <td>251</td> <td>37.35%</td> </tr> <tr> <td>18 years and over</td> <td>11</td> <td>1.64%</td> </tr> <tr> <td>Grand Total</td> <td>672</td> <td>100.00%</td> </tr> </tbody> </table>	Age	Number	% of cases	Unborn - 5 years	231	34.38%	6 years - 10 years	179	26.64%	11 years - 17 years	251	37.35%	18 years and over	11	1.64%	Grand Total	672	100.00%
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	√			<p><u>Impact on Staff</u></p> <p>Out of the staff who have been identified as affected by the proposals, the approximate² age profile is as follows</p> <table border="1" data-bbox="708 1196 1129 1447"> <thead> <tr> <th>Age bracket</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>under 30 years</td> <td>9%</td> </tr> <tr> <td>30 - 39 years</td> <td>24%</td> </tr> <tr> <td>40 - 49 years</td> <td>34%</td> </tr> <tr> <td>50 - 54 years</td> <td>18%</td> </tr> <tr> <td>55 years and over</td> <td>14%</td> </tr> </tbody> </table> <p>We will be compliant with the legislation to ensure that staff are not disadvantaged because of their age.</p>	Age bracket	%	under 30 years	9%	30 - 39 years	24%	40 - 49 years	34%	50 - 54 years	18%	55 years and over	14%						
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Disability		√		<p><u>Impact on Customers</u></p> <p>In recognition of the specialist nature of Family Support Work within the Disabled Children’s Service, these workers were ruled out of scope during the development of proposals as retaining capacity within this specialist service was felt to be the best option. However, the proposed integrated service will continue to work with customers with disabilities to provide effective support to children with disabilities and their families, taking account of their specific needs and circumstances. The design principles of ‘enabling families to change’ and ‘delivering</p>																		

² Note that this can only be an approximate snapshot in time as ages may change on a daily basis with dates of birth

			<p>interventions when families need them' are likely to benefit customers who receive to the service, including those with disabilities.</p> <p>The profile of customers with a disability recorded on the LCS Case Management System as having allocated support delivered by a worker in scope for this project is as follows (data as at February 2016):</p> <table border="1"> <thead> <tr> <th>Disability</th> <th>Number</th> <th>% of cases</th> </tr> </thead> <tbody> <tr> <td>No</td> <td>578</td> <td>86.01%</td> </tr> <tr> <td>Yes</td> <td>94</td> <td>13.99%</td> </tr> <tr> <td>Grand Total</td> <td>672</td> <td>100.00%</td> </tr> </tbody> </table>	Disability	Number	% of cases	No	578	86.01%	Yes	94	13.99%	Grand Total	672	100.00%			
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	√		<p><u>Impact on Staff</u></p> <p>As an organisation, NYCC must continue to meet the requirements of the Equality Act 2010, which obligates us to make reasonable adjustments to accommodate disabled individuals as employees or service users. Out of the staff who have been identified as affected by the proposed changes, 2% have declared to the organisation that they have a disability and 27% have not disclosed this information.</p>															
Sex (Gender)	√		<p><u>Impact on Customers</u></p> <p>Provision of these services is based on statutory assessments and referrals, and not targeted at / restricted to those of specific genders. As the nature of the services provided is dependent on and responsive to individual assessed need through Social Work teams, it is anticipated that there would be no identifiable or planned impact on specific gender groups as a result of emerging proposals. The design principles of 'enabling families to change' and 'delivering interventions when families need them' are likely to benefit customers of all genders.</p> <p>The gender breakdown of customers recorded on the LCS Case Management System as having allocated support delivered by a worker in scope for this project is as follows (data as at February 2016):</p> <table border="1"> <thead> <tr> <th>Gender</th> <th>Number</th> <th>% of cases</th> </tr> </thead> <tbody> <tr> <td>Female</td> <td>302</td> <td>44.94%</td> </tr> <tr> <td>Male</td> <td>367</td> <td>54.61%</td> </tr> <tr> <td>Unborn/not recorded</td> <td>3</td> <td>0.45%</td> </tr> <tr> <td>Grand Total</td> <td>672</td> <td>100.00%</td> </tr> </tbody> </table> <p>This breakdown is compared to a male / female split of 49.2% / 50.8% across the total population of North Yorkshire.</p>	Gender	Number	% of cases	Female	302	44.94%	Male	367	54.61%	Unborn/not recorded	3	0.45%	Grand Total	672	100.00%
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			<p>The current gender profile of staff in scope is approximately 86% female; 14% male. In this respect, it is anticipated that more than half of those staff affected by any proposed changes will be female, reflecting the total gender proportions of those in scope. Appointments to the structure will follow NYCC policies and procedures and will be made on merit. The resulting profile will be reviewed as part of the post implementation review. It is expected that the impact of reinforcing the requirement to work outside of the normal working day will vary dependent on personal circumstances of individuals</p>																																										
Race	√		<p><u>Impact on Customers</u></p> <p>Provision of these services is based on statutory assessments and referrals, and not targeted at / restricted to those of specific genders. As the nature of the services provided is dependent on and responsive to individual assessed need through Social Work teams, it is anticipated that there would be no identifiable or planned impact on specific racial groups as a result of emerging proposals. The design principles of 'enabling families to change' and 'delivering interventions when families need them' are likely to benefit customers of all racial groups.</p> <p>The ethnicity group breakdown of customers recorded on the LCS Case Management System as having allocated support delivered by a worker in scope for this project is as follows (data as at February 2016):</p> <table border="1"> <thead> <tr> <th>Ethnicity</th> <th>Number</th> <th>% of cases</th> </tr> </thead> <tbody> <tr> <td>A1 - White - British</td> <td>617</td> <td>91.82%</td> </tr> <tr> <td>A2 - White - Irish</td> <td>1</td> <td>0.15%</td> </tr> <tr> <td>A3 - Any other White Background</td> <td>15</td> <td>2.23%</td> </tr> <tr> <td>A5 - Gypsy/Roma - CSC</td> <td>3</td> <td>0.45%</td> </tr> <tr> <td>B1 - Mixed - White and Black Caribbean</td> <td>1</td> <td>0.15%</td> </tr> <tr> <td>B2 - Mixed - White and Black African</td> <td>3</td> <td>0.45%</td> </tr> <tr> <td>B3 - Mixed - White and Asian</td> <td>13</td> <td>1.93%</td> </tr> <tr> <td>B4 - Mixed - Any Other Mixed Background</td> <td>9</td> <td>1.34%</td> </tr> <tr> <td>C2 - Asian/Asian British - Pakistani</td> <td>1</td> <td>0.15%</td> </tr> <tr> <td>E2 - Any Other Ethnic Group</td> <td>5</td> <td>0.74%</td> </tr> <tr> <td>E4 - Information not yet obtained</td> <td>2</td> <td>0.30%</td> </tr> <tr> <td>Not Recorded</td> <td>2</td> <td>0.30%</td> </tr> <tr> <td>Grand Total</td> <td>672</td> <td>100%</td> </tr> </tbody> </table> <p>97.3% of North Yorkshire residents are White (based on 2011 census data), which is broadly consistent with the ethnic breakdown of the customer cohort, of whom 94.2% are White.</p>	Ethnicity	Number	% of cases	A1 - White - British	617	91.82%	A2 - White - Irish	1	0.15%	A3 - Any other White Background	15	2.23%	A5 - Gypsy/Roma - CSC	3	0.45%	B1 - Mixed - White and Black Caribbean	1	0.15%	B2 - Mixed - White and Black African	3	0.45%	B3 - Mixed - White and Asian	13	1.93%	B4 - Mixed - Any Other Mixed Background	9	1.34%	C2 - Asian/Asian British - Pakistani	1	0.15%	E2 - Any Other Ethnic Group	5	0.74%	E4 - Information not yet obtained	2	0.30%	Not Recorded	2	0.30%	Grand Total	672	100%
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	√			<p><u>Impact on Staff</u></p> <p>Of the affected workforce, approximately 88% have declared themselves to be White (British, English, Welsh, Scottish, Northern Irish, Irish, Other), 1 staff member has declared themselves to be of another ethnic group, and 12% have not declared information. As an organisation, NYCC must comply with relevant legislation and all services need to be culturally sensitive and appropriate and respect the values, beliefs, culture and tradition of the individuals we work with. Staff should also directly tackle any evidence of racist attitudes, bullying or discrimination amongst colleagues and service users.</p>
Gender reassignment	√			<p><u>Impact on Customers</u></p> <p>Provision of these services is based on statutory assessments and referrals, and not targeted at / restricted to those who have (not) undergone gender reassignment. As the nature of the services provided is dependent on and responsive to individual assessed need through Social Work teams, it is anticipated that there would be no identifiable or planned impact on specific groups in relation to gender reassignment as a result of emerging proposals. The design principles of 'enabling families to change' and 'delivering interventions when families need them' are likely to benefit customers of all gender groups.</p>
	√			<p><u>Impact on Staff</u></p> <p>No workforce data is available on gender re-assignment. As an organisation, NYCC must comply with the conditions of the Gender Recognition Act and there is the statutory requirement to protect the confidentiality of someone who has changed, or is in the process of changing their gender.</p>
Sexual orientation	√			<p><u>Impact on Customers</u></p> <p>Provision of these services is based on statutory assessments and referrals, and not targeted at / restricted to those of different sexual orientation. As the nature of the services provided is dependent on and responsive to individual assessed need through Social Work teams, it is anticipated that there would be no identifiable or planned impact on specific groups in relation to sexual orientation as a result of emerging proposals. The design principles of 'enabling families to change' and 'delivering interventions when families need them' are likely to benefit customers of all gender groups. It should be noted that we do not hold data on the proportions of customers who have different sexual orientations. We will continue promote an understanding of diversity and respect for others and will work sensitively around any issues of sexuality and identity</p>
	√			<p><u>Impact on Staff</u></p> <p>Of the affected workforce, approximately 14% have declared themselves to be heterosexual. The remainder</p>

				of staff have not disclosed this information. The Government estimates that 5-7% (one in 15) of the population is lesbian, gay or bisexual. As an organisation, NYCC promotes an understanding of diversity and respect for others and work sensitively around issues of sexuality and identity.
Religion or belief	√			<u>Impact on Customers</u> Provision of these services is based on statutory assessments and referrals, and not targeted at / restricted to those of different religions or beliefs. As the nature of the services provided is dependent on and responsive to individual assessed need through Social Work teams, it is anticipated that there would be no identifiable or planned impact on specific religious groups as a result of emerging proposals. The design principles of 'enabling families to change' and 'delivering interventions when families need them' are likely to benefit customers of all religious groups.
	√			<u>Impact on Staff</u> No workforce data is available on religion or belief, however as an organisation, NYCC should continue to make efforts to accommodate the needs of individuals in terms of religion or belief.
Pregnancy or maternity	√			<u>Impact on Customers</u> Provision of these services is based on statutory assessments and referrals, and not targeted at / restricted to those who are pregnant or have recently had a baby, although provision is responsive to this circumstance where appropriate. As the nature of the services provided is dependent on and responsive to individual assessed need through Social Work teams, it is anticipated that there would be no identifiable or planned impact on those who are pregnant or have recently had a baby as a result of emerging proposals. The design principles of 'enabling families to change' and 'delivering interventions when families need them' are likely to benefit all customers, including those who are pregnant or have recently had a baby.
	√			<u>Impact on Staff</u> At the time of writing, 4 affected staff members are on maternity leave, though it is recognised that this profile may change over time. As an organisation, NYCC is compliant with relevant legislation and it is unlawful for employers or service providers to discriminate against women who are pregnant or have recently given birth.
Marriage or civil partnership	√			<u>Impact on Customers</u> Provision of these services is based on statutory assessments and referrals, and not targeted at / restricted to those of a particular marital status. As the nature of the services provided is dependent on and responsive to individual assessed need through Social Work teams, it is anticipated that there would be no

				<p>identifiable or planned impact on groups with a particular marital status as a result of emerging proposals. The design principles of 'enabling families to change' and 'delivering interventions when families need them' are likely to benefit all customers regardless of marital status.</p>																		
	√			<p>Impact on Staff The profile of marital status for the affected staff group according to HR records is as follows:</p> <table border="1"> <thead> <tr> <th>Marital status</th> <th>%</th> </tr> </thead> <tbody> <tr> <td>#N/A or prefer not to say</td> <td>33.8%</td> </tr> <tr> <td>Co-habiting</td> <td>1.9%</td> </tr> <tr> <td>Divorced</td> <td>6.5%</td> </tr> <tr> <td>Married</td> <td>33.8%</td> </tr> <tr> <td>Partner</td> <td>1.9%</td> </tr> <tr> <td>Separated</td> <td>1.3%</td> </tr> <tr> <td>Single</td> <td>20.8%</td> </tr> <tr> <td>Total</td> <td>100.0%</td> </tr> </tbody> </table> <p>It is unlawful for employers or service providers to discriminate against individuals with regard to marriage or civil partnership. Employers must also treat civil partners in the same way as married people in a wide range of matters, including employment and vocational training. Any benefits given to married employees must also be offered to civil partners, including flexible working, statutory paternity pay, paternity and adoption leave, health insurance and survivor pensions.</p>	Marital status	%	#N/A or prefer not to say	33.8%	Co-habiting	1.9%	Divorced	6.5%	Married	33.8%	Partner	1.9%	Separated	1.3%	Single	20.8%	Total	100.0%
Marital status	%																					
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Section 6. Would this proposal affect people for the following reasons?	No impact	Make things better	Make things worse	Why will it have this effect? Give any evidence you have.																		
Live in a rural area		√		<p>Impact on Customers Provision of these services is based on statutory assessments and referrals, and not targeted at / restricted to those living in particular areas of the County. As the nature of the services provided is dependent on and responsive to individual assessed need through Social Work teams, it is anticipated that there would be no identifiable or planned impact on those who live in a rural area as a result of emerging proposals. The design principles of 'enabling families to change' and 'delivering interventions when families need them' are likely to benefit all customers including those in rural areas. Locality team structures will be maintained under the proposals, so as to enable staff to deliver services in a distinct geographical area. Specific issues around rurality in respect of the 2020 Modern Council Programme and new ways of working will be considered as this is rolled</p>																		

				out through implementation of the final proposals after consultation.
	√			<u>Impact on Staff</u> No changes to working locations are proposed as part of the changes, therefore there is no anticipated impact on staff who live in a rural area through a change (either decrease or increase) in travel to work time, which might impact particularly on those living in rural areas due to greater likelihood of poor connectivity.
Have a low income	√			<u>Impact on Customers</u> Current provision of service is based on referrals, on a non-means tested basis, in accordance with assessed need. In this respect, changes to service configuration will be applied equitably, irrespective of an individual's income, as there are no plans at this stage to make services chargeable or restrict eligibility based on income.
	√		√	<u>Impact on Staff</u> The review proposes the disestablishment of the band 5 posts in the current structure, due to changes in demand for contact work with families. This is the lowest grade post in the current structure but the role is no longer required. This proposal has not been drawn up on the basis of pay band, but in accordance with the needs of the service. There is however a recognition that because these workers may have lower skill levels, they may find it more difficult to find alternative employment. We will assist staff at risk of redundancy through established support mechanisms throughout consultation, notice period and redeployment will be sought in line with NYCC policies. In terms of any redundancy scenario, we will be mindful of our equality duties as an employer and will be following our procedures to ensure that we comply with these.

Section 7. Will the proposal affect anyone more because of a combination of protected characteristics? (e.g. older women or young gay men?) State where this is likely to happen and explain what you think the effect will be and why giving any evidence you have.

Impacts on individual characteristics which are known or anticipated at this stage of the project have been outlined above. It is not considered that proposals will have more of an adverse impact on staff or customers as a result of them exhibiting a combination of protected characteristics. This is because current support delivered to customers is tailored to individual need following established assessment practice, and this will continue with the new integrated service.

Section 8. Only complete this section if the proposal will make things worse for some people. Remember that we have an anticipatory duty to make reasonable adjustments so that disabled people can access services and work for us.

Can we change our proposal to reduce or remove these adverse impacts?

The overall aim of this project is to make things better and improve outcomes for children, young people and families in North Yorkshire and proposals have been developed with a view to reducing or removing adverse impacts as far as possible. Proposals have been subject to a consultation period with staff and unions, and the outcomes of this have been fed into the project before implementation. Consultation has provided an opportunity for staff and unions to put forward alternative suggestions for achieving the objectives of the review to further mitigate any impacts identified, and significant changes to management and supervision arrangements have been recommended as a result of consultation feedback.

Can we achieve our aim in another way which will not make things worse for people?

The overall aim of this project is to make things better and improve outcomes for children, young people and families in North Yorkshire and proposals have been developed with a view to reducing or removing adverse impacts as far as possible. Proposals have been subject to a consultation period with staff and unions, and the outcomes of this have been fed into the project before implementation. Consultation has provided an opportunity for staff and unions to put forward alternative suggestions for achieving the objectives of the review to further mitigate any impacts identified, and significant changes to management and supervision arrangements have been recommended as a result of consultation feedback.

If we need to achieve our aim and can't remove or reduce the adverse impacts get advice from legal services. Summarise the advice here. Make sure the advice is passed on to decision makers if the proposal proceeds.

Section 9. If the proposal is implemented how will you find out how it is really affecting people? (How will you monitor and review the changes?)

The impact on staff will be monitored through regular supervision, prior, during and after the changes. Supervision will also be a channel for assessing the impact on customers, through discussion of specific cases of families being worked with. A full post-implementation review of the project will also be carried out after one year, to determine the impact of the changes, and an interim review will take place 6 months after implementation.

The impacts on customers will be monitored through the activities of Participation Workers, who have a specific role to engage with users of CYPS services to seek

their feedback about the services provided as well as their ideas for improvement. In addition, feedback and learning from complaints will be monitored, and the results of customer engagement surveys conducted through the SNAP tool will provide a valuable source of feedback through which impact can be monitored. This can also be compared with historic data from Viewpoint.

Section 10. List any actions you need to take which have been identified in this EIA

Action	Lead	By when	Progress
Develop initial draft EIA to assess impact of design principles for the project	J Hay with Project Group	Sept 2015	Complete
Engage staff and customers in detailed definition work for the project through survey for staff, shadowing, staff engagement events and review of customer feedback	J Firth with Project Group	Feb 2016	Complete
Review EIA as detailed proposals for the new integrated service are developed, including consideration of how potential impacts will be monitored	J Firth with Project Group	Feb 2016	Complete
Consult with staff and unions on proposals	J Firth, V Metheringham	Mar-April '16	Complete
Refine proposals in light of consultation	J Firth, V Metheringham	April-May '16	Complete
Implement revised proposals	J Firth, V Metheringham	Oct 2016	
Conduct post-implementation review of project, including impacts on equality	J Firth, V Metheringham	March - Oct 2017	