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

(Form updated December 2015)

Customer Resolution Centre – Assessment Pathway

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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
Lead Officer and contact details	Chris Jones King 01609 798364
Names and roles of other people involved in carrying out the EIA	Dave Chapman – Senior Project Manager
How will you pay due regard? e.g. working group, individual officer	Care and Support Team (CRC) working group; HAS Leadership Team; Assessment Pathway Project Board; 2020 Governance & Reporting.
When did the due regard process start?	Project Initiation (August 2015)

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 is focused on the Customer Resolution Centre (CRC) element of the Assessment Pathway, under the Independence With Support Where I Need It (IWSWINI) programme.

The Assessment Pathway project has been informed by legislation and policy drivers, including the Care Act 2014, the NHS Five Year Forward View and emerging countywide and local collaborative working with NHS and other partners, as well as the consequences of the national deficit reduction programme and subsequent organisational transformation.

The Independence Programme aims to re-design the service pathway within Health and Adult Services, which includes prevention, assessment and reablement.

These proposals include strengthening the professional social care presence in the Customer Resolution Centre (CRC) to make sure that more people can be helped to self-care by being provided with the right advice, guidance and signposting at first point of contact. Social Workers, OT's and brokerage staff will be amongst the roles introduced into the CRC, with potential for wider partnership involvement at a later stage.

A range of triage approaches will be prototyped and piloted to ensure that activity is focused appropriately, and in a way that provides an improved customer journey for individuals. New arrangements will include improved ways for people to get in touch with the Council, including online assessments.

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.)

The Assessment Pathway's aim is to save £12.3m by 2020 and is being driven by changing legislative requirements within the Care Act 2014, and by the challenges presented by an ageing population.

A strengthened professionally qualified adult social care presence in the CRC will provide a more responsive and improved Customer Journey, ensuring resolution at first point of contact wherever possible. Revised proposals will seek to provide advice and guidance to people to help them maximise their own independence without reliance on mainstream services, ensuring that only the right referrals are passed on to Locality Teams.

This project will strive to explore, prototype and implement alternative, innovative solutions to traditional methods of delivery of care and support. The Council aims to support customers to access and gain information about services differently and to reduce the number of unnecessary contacts in areas of expensive resource. By understanding and learning what customers' needs are, new approaches will, wherever possible, deliver services in support of the 'digital by default' model; creating new opportunities for every customer to get the answers they need through an on-line channel.

Through these changes, the Council hopes to achieve a better customer experience for people in the County, getting better outcomes and a better quality of life. Improving the customer journey will maximise independence and offer people greater choice in how they access and receive their care. We hope this will prevent or delay people entering care, keeping them in their own homes for longer.

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

As part of the Assessment Pathway proposals, the Council plans to:
- invest in professionally qualified Care and Support Team staff in the CRC to ensure resolution at first point of contact and manage demand;
- validate and respond to on-line assessments for adults and their carers;
- screen safeguarding enquiries to reduce unnecessary/inappropriate referrals to locality teams;
- 'reset' care and support for a person from a provider directly following a hospital stay (where they received care before);
- initiate care and support arrangements through brokerage, without the need for a full social care assessment, where it is clear that the need is temporary e.g. as a result of a broken leg;
- initiate Trusted Assessors e.g. Home Improvement Agencies (HIAs), to assess for simple pieces of equipment, currently undertaken by our non-professionally qualified workforce.

The way people contact the Council may change, with the move to on-line and the introduction of self-serve online assessments and web-chat.

The establishment of a more effective Care and Support Team in the CRC will ensure that calls are handled by the most appropriate person at the earliest possible point in the customer journey, which will deliver a more satisfying customer experience, in addition to being a more efficient use of NYCC staff time. Under the current arrangements, many simple calls are diverted to locality teams, whereas these could be handled directly in the CRC with appropriately trained staff. Equally, where a person needs help or support urgently, the CRC teams will be able to refer this call to the relevant teams more effectively.

The implementation of the Care and Support Team (CRC) will be specifically focused to certain aspects of current provision, in order to ensure that services remain safe and consistent. As such, the vast majority of services and processes will remain unchanged at this stage. Detailed performance information will be collected throughout the trial period, in order to build a more comprehensive picture of the groups that will be going through this process. In conjunction with a bespoke performance dashboard [developed spring 16], this information will be used to inform the trial's findings and recommendations before any permanent decisions are made.

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?)

The approach required with the public and partners will need to be very different from how we have acted in the past, shifting from engagement/information ("do and tell") to co-production ("do together").

Co-design with service users and carers and engagement with partners is key to the successful development and delivery of the Assessment Pathway project and such activity will be incorporated into future work Given the nature of the proposals for the period 2015- 2017, formal public consultation is not required. However, changes to the ways in which service users interact with services will be subject to Customer Journey Mapping approaches, which will include the views of people regarding design and revision. This will seek to ensure that revised services are informed by the views of service users and are customer-focused (as appropriate).

Throughout the trial period, information will be collected on the stakeholders going through the revised process, so that more effective, efficient and targeted engagement will be possible in the future.

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

Overall, the Assessment Pathway aims to save £12.3m by 2020.

In 2015/16, the Council is looking at enhancing the number of professional HAS staff into the CRC to support these proposals. These extra staff will cost an estimated £225k in 2015/16 and £75k in 2016/17. This will be financed from savings within the Assessment Pathway project itself.

Increasing the use of on-line and self-serve arrangements, along with commissioning services with partners, is anticipated to have a strong savings effect, and will contribute to the Council's targets to address the national deficit reduction. These figures will continue to be monitored and validated as the project progresses.

In the long run, this approach in the CRC will lead to savings due to its preventative measures. People will only be referred to locality teams if they really need to be, otherwise they will be signposted to other help and advice.

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.
Age		X		There is a risk that the move to a 'digital by default' approach may adversely affect older people who are less likely to use the internet. A physical information offer will be maintained to support this group; however this will not be on the scale currently offered. When creating the proposal in regards to online delivery, it will be important to ensure that accessibility is maintained for all affected groups. It is intended that appropriate links are made to work already underway to support stronger communities and customer channel shift activity, to ensure that these arrangements are suitably developed. Furthermore, any changes to the ways in which service users interact with services will be subject to Customer Journey Mapping approaches, which will include the views of people regarding design and revision. Therefore, any issues relating to this protected characteristic will also be addressed at this stage. The online approach will however allow information to be more readily available to people in their own homes and will allow NYCC to keep information much more up to date.

				Performance information on those going through these revised processes will also be collected and analysed to ensure that on-going decision making and provision does not disproportionately impact on any protected characteristics. This process is currently under development.
Disability		X		With a stronger professional Care and Support Team presence in the CRC, individuals will receive help more quickly, and speak to professionals earlier on. This will help maintain their independence and provide access to accurate and timely information and support. However, it is important to recognise that accessing information online may be difficult for some individuals with additional needs, who may not be able to access information in this way. Proposals will need to consider and maintain accessibility for all groups and how these new arrangements are compensated for within wider service provision. The development of the on-line offer will also need to be as inclusive as possible so that people with additional access needs are not unnecessarily excluded. Performance information on those going through these revised processes will also be collected and analysed to ensure that on-going decision making and provision does not disproportionately impact on any protected characteristics. This process is currently under development.
Sex (Gender)	X			The HAS service user base is predominantly female, so any positive or negative impacts will have a larger impact on this group in terms of numbers. However, this is a result of the population profile rather than any specific facet of the programme. Any proposed changes will be considered in terms of their impact on service users. Any changes to the ways in which service users interact with services will be subject to Customer Journey Mapping approaches, which will include the views of people regarding design and revision. Therefore, any issues relating to this protected characteristic will also be addressed at this stage.

Race	X			Arrangements are in place for contacting, informing and supporting minority ethnic/non-English speaking individuals and/or groups. Current arrangements including interpretation and translation services will need to be reviewed regularly to ensure that they continue to be fit for purpose. This will be addressed during the development and delivery of revised arrangements.
Gender reassignment	X			There is no evidence to suggest the proposals will impact on individuals with reference to gender reassignment, although national sources suggest that individuals within this protected characteristic are less likely to have extensive familial support and/or networks. When individuals come into contact with the Service, their needs will be assessed on an individual basis.
Sexual orientation	X			There is no evidence to suggest the proposals will impact on individuals with reference to their sexual orientation, although national sources suggest that individuals within this protected characteristic are less likely to have extensive familial support and/or networks. When individuals come into contact with the Service, their needs will be assessed on an individual basis.
Religion or belief	X			There is no evidence to suggest the proposals will impact on individuals with reference to their religion or beliefs, but when individuals come into contact with the Service, their needs will be assessed on an individual basis.
Pregnancy or maternity	X			There is no evidence to suggest the proposals will impact on individuals with reference to this protected characteristic, but when individuals come into contact with the Service, their needs will be assessed on an individual basis.
Marriage or civil partnership	X			There is no evidence to suggest the proposals will impact on individuals with reference to their marital/civil partnership status, but i when individuals come into contact with the Service, their needs will be assessed on an individual basis.

Section 7. How will this proposal affect people who…	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.
..live in a rural area?		X		Improving online services and enhancing the CRC offer will enable people in rural communities to access accurate information and support without traveling to NYCC offices. Therefore, information and support will be more easily available across the County. Some issues may exist in extremely rural areas where internet access is limited or non-existent; in these limited cases the telephone offer through the CSC will still be available. Consideration will need to be given to the small number of people without internet access for whom verbal/telephone communication is difficult, for example Deaf people. Solutions such as text relay should continue to be made available.
…have a low income?	X			Proposals will seek to improve the mechanisms for delivering services, but access to services will continue to be needs based and assessed. Therefore, proposals will not disproportionately affect low income groups. However, moving services online may disadvantage those who do not or cannot access a computer, and this issue may be increased by the on-going review of library facilities. Consequently, access to information and advice will need to be provided through other services and settings, for those who cannot access information online.

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.**

Because of the profile of HAS clients, any proposals will impact more on older disabled women than older disabled men. However, this impact is due to the client profile arising from population profile, rather than any specific need related to their protected characteristics. This impact should be generally positive if not neutral.

There is a risk that the move towards online content may impact anyone unable to use the internet and telephone (e.g due to additional needs or impairment) who lives in a rural community and is unable to access face to face services. This may be further exacerbated by the closure of rural NYCC offices, libraries and other communal buildings.

More work will need to be done to determine how this group can be best served, however the implementation of Living Well Co-ordinators and Stronger Communities may help to mitigate the

impact. In addition to training and professional development for Living Well Co-ordinators and Stronger Communities staff, the development of more accurate business intelligence will also help to identify at risk groups and support more targeted and effective mitigations to be implemented.

It will be important to make sure that proposals are equitable and available to people irrespective of their location or their additional need.

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)	Tick option chosen
1. **No adverse impact - no major change needed to the proposal.** There is no potential for discrimination or adverse impact identified.	X
2. **Adverse impact - adjust the proposal -** 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.	
3. **Adverse impact - continue the proposal -** 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)	
4. **Actual or potential unlawful discrimination - stop and remove the proposal –** The EIA identifies actual or potential unlawful discrimination. It must be stopped.	

Explanation of why option has been chosen. (Include any advice given by Legal Services.)

Any proposals that are developed will need to consider the potential impact on rural communities, certain demographic profiles and those with additional needs, as access to information through suitable alternative delivery methods must be maintained if new online arrangements are implemented.

As the proposal progresses this will be reviewed and the EIA updated. Current proposals are anticipated to be an enhancement to current services.

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?)

Proposals will include appropriate performance metrics to measure any impact of service change, and will include mechanisms for capturing service user, staff and partner feedback.

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.

Action	Lead	By when	Progress	Monitoring arrangements
Collect relevant information to inform a review of the pilot.	Chris Jones-King	January 2016	Ongoing	Via Working Group
	Chris Jones-King	January 2016	Ongoing	Via Working

Conduct initial review and plan ongoing review of pilot				Group
Engage with services users on development of online solutions	Chris Jones-King	April-July 2016	Ongoing	Via Customer Working group

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.

The CRC element of the Assessment Pathway is about improving the customer journey, enhancing the professional HAS presence within the CRC and, where appropriate, moving assessments and access to information online. This will help the Council to save £12.3m by 2020, whilst keeping people independent and offering greater choice in how they access and receive their care.

As yet, no involvement and consultation has been carried out however there are specific pieces of work required within the CRC that may inform the EIA. The EIA will be updated as the proposals progress to make sure that due regard is given to all protected characteristics.

Although the move to online could make it easier for many people, meaning they can access help and information without leaving their house, there is a concern around older people and people with additional needs and, combined with rural areas and low incomes, this could leave some people with limited ways to contact the Council for help. This will be considered when developing proposals, ensuring there will always be ways for people to access information, irrespective of their location or additional need.

From this information, it shows that having a strengthened professional HAS team in the CRC will create a positive experience for the customer. Calls will be handled by the most appropriate person, hopefully ensuring resolution at the first point of contact. This will ensure only the people that really need care are sent through to the locality teams. This will promote independence and help people chose how their care and support is delivered.

As this is still in the proposal phase this EIA will be reviewed and updated as it progresses.

Section 13. Sign off section

This full EIA was completed by:
Name: Chris Jones-King
Job title: Head of Practice
Directorate: Health and Adult Services

Completion date: 8th January 2016

Authorised by relevant Assistant Director: Anne Marie Lubanski

Date: 18th January 2016