

Equality Impact Assessments

People and Communities – Adults and Public Health

2019/20 budget proposals

Contents

Reference	Description	Page Number
PCA1	New Supported Living Scheme	3
PCA2	Full Year impact of 2018/19 savings programme - recommissioning of Care and Repair services	6
PCA3	Increase charges for community meals to make service more sustainable	10
PCA4	New Extra Care Housing Scheme	3
PCA5	Additional Shared Lives Carers	14
PCA6	Re-commission accommodation-based Supporting People contracts	16
PCA7	Reviews of Supported Living Schemes	19
PCA8	Provision management (reviews and assistive technology)	22
PCA9	Increased income from Continuing Health Care / joint funding from health	25
PCA10	Review costs and income in relation to the Carlton Centre	28
PCA11	Directorate Strategy & Policy and Housing Teams	31
PCA15	Improved Better Care Fund government grant	34
PCPH1	Public Health	36
PCPH1	Substance Misuse – Full EIA	40

Medium Term Financial Plan

Initial Equality Impact Assessment 2019/20



1. The Proposal

Service area:	Adult Social Care - Accommodation Solutions
Budget reference:	PCA1, PCA4
Budget reduction proposal:	New Supported Living Scheme (Clifton Road) New Extra Care Housing Scheme
Budget saving for this financial year:	PCA1 £160, 000 and PCA4 £15,000

Description of the proposal:

To continue the development and delivery of additional Extra Care and housing with support for vulnerable groups.

Summary of changes:

North Somerset Council have adopted the new Housing with Support Strategy. This strategy looks to provide a central focus point for ongoing development of Extra Care and Supported Living. Extra Care and Supported Living for vulnerable people are not only more cost effective but are evidenced to support improved health and wellbeing and lower incidents of falls, hospital admissions etc. Modelling of the average cost of care for Extra care or housing with support suggest significantly lower overall care package costs.

Is this a continuation of a previous medium term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people		X			X		
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income		X			X		
People in particular age groups		X			X		
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			

Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify: Health		X			X		
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3. Explanation of customer impact

There is a strategic aim to increase the total Extra Care capacity by over 120 places, and to increase the supported living capacity for people with learning difficulties by 40 units within the next 5 years. Extra Care is usually aimed at people who are over 55 and require some form of social care support. Supported Living is usually accommodation specifically designated for a specific client group, usually for people with Learning Difficulties. Extra Care and Supported Living are two areas where there can be significant financial savings made whilst providing more independence for service users. The Housing with Support Strategy 2017-2027 was adopted in December 2017.

To meet these aims, we are working with Housing and Care 21 to develop a 60-unit Extra Care site in Yatton which is aiming to be complete by January 2020 and occupancy starting in February 2020. The full benefit of this site will not be felt until 2020-2021. Extra Care schemes have had numerous studies carried out on them to determine what impact they have on people’s lives. The ExtraCare Charitable Trust found a 38% reduction in NHS costs, due to Extra Care residents having reduced (46% lower) routine GP visits and less and shorter unplanned hospital admissions compared to service users living in residential care.

The study also found 19% of people who are categorised as “Pre-Frail” returned to Resilient state within 18 months of moving into Extra Care and that Extra Care service users experienced lower levels of depression.

North Somerset Council social care will have nominations to 50% of the lettings (the affordable rented homes) and as such as the development is likely to have a positive impact for the health and well-being (older and disabled) people in receipt of a low income.

Clifton Road Supported Living Scheme is due to open in February 2019. This will provide 8 self-contained flats for people with learning difficulties. This scheme is expected to make a saving of approximately £160,000 for 2019 - 2020 financial year. It is anticipated that there will be a range of positive outcomes for service users including increased security of tenure which will provide more settled accommodation and reduce the risk of the service user needing to move; disrupting their care. Service users will live independently and have rights to full welfare benefits including housing benefit, income support and disability living allowance. This means that service users will have greater financial independence and choice over their lives compared to living in residential care. This scheme will also potentially prevent a number of clients having to be placed in semi-secure out of county residential homes, meaning that tenants will be able to keep their local connections and relationships. Stay close to family and friends, continue with education and will be a reduced cost to the Council.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

X

No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily - See above.

5. Consolidation -savings – please complete for medium or high impact -areas

None

6. Review and Sign Off Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 23rd November 2018

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager: Gerald Hunt
Date: 12th November 2018

Medium Term Financial Plan

Initial Equality Impact Assessment 2019/20



1. The Proposal

Service area:	People and Communities – Adult Care
Budget reference:	PCA2
Budget reduction proposal:	Full Year impact of 2018/19 savings programme - recommissioning of Care and Repair services
Budget saving for this financial year:	£65,000

Description of the proposal:

WE Care and Repair contract ended on November 2018. As part of the Medium Term Financial Plan, a decision was made to change the way we commission Home Improvement Agency (HIA) services to ensure that we provide essential services to the most vulnerable people in North Somerset, to help them maintain and adapt their homes, while providing best value.

The services were transformed with a mixture of procurement, making best use of current resources and bringing services in house.

Summary of changes:

The Motex Equipment and Demonstration Centre has been brought back to North Somerset Council to support Single Point of Access's clinical model. The centre will provide early intervention and prevention services including Occupational Therapy and Care management support.

We have a new equipment provider for retail equipment at the centre, alongside this we are developing a self-service offer and a leaflet of trusted local suppliers.

We have recommissioned a handyperson service with a clear pricing structure. This is being provided by AMS electrical and is a subsidised service for vulnerable and other groups. Work has been ongoing with the handypersons service to strengthen the links between the home from hospital service, Curo, Medequip to provide a more seamless service for residents.

We have been working with Trading Standards to encourage local contractors to join the "Buy with Confidence" scheme to provide residents with access to competent contractors and other specialist services.

We will also will be working with our providers of information and advice on other contracts to ensure that they can continue to support our residents to find the information and advice they need.

People who are in receipt of Disabled Facilities Grant will continue to be supported to complete their works in line with good practice guidance; this may be a combination of Buy with Confidence scheme, in house agency, self-help and/or specialist referral.

Below is a table of current services that will support people with Private Sector Housing renewal moving forward.

West of England Care and Repair Services	Services in North Somerset that provide a similar function
Information and Advice	Care Navigators North Somerset Online Directory Floating support service Curo Care Connect NSC OT services First Stop Turn2us Trustmark - Government endorsed standards
Handyman services	Access your Care - Key Safe Man Local market providers Home fire safety assesment Social Tenants - Minor adaptations and repair service NSC Minor Adaptations and trusted assessor service - via Medequip.
Casework including repairs	Home from Hospital service Floating support services Curo NSC grants team
Technical services for major adaptations	NSC grants team and local market
Independent living centre	NSC OT/CM clinics
Financial support	Wessex Loans NSOD CURO Floating support worker Affordable warmth grants Citizens Advice

Is this a continuation of a previous medium term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people		X				X	
People from different ethnic groups			X			X	
Men or women (including pregnant women or those on maternity leave)			X			X	
Lesbian, gay or bisexual people			X			X	
People on a low income			X			X	
People in particular age groups		X				X	
People in particular faith groups			X			X	

People who are married or in a civil partnership				X		X	
Transgender people			X			X	
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:							

3. Explanation of customer impact

This service is exclusively for disabled people and older people who have lived in owner occupied properties or private rented accommodation.

There is greater access to subsidised handypersons services for residents of North Somerset in need of financial support and there is a trusted handypersons service for private payers. We have already received positive feedback on this service from residents and we are continuing to strengthen links between handypersons and our other community providers.

The Equipment and Demonstration centre will give this client group a higher level of access to clinician lead assessment and will support our early intervention and prevention agenda as part of the broader changes to adult social care as part of The Vision

People who are having a Disabled Facilities Grant will received the same level of agency support, though this will be a combination of Buy with Confidence scheme, in house agency, self-help and/or specialist referral.

Work has been done with our community providers to ensure that clients still receive a good level of information and advice about services available. We have set up an emergency repairs grant and heating process with our community providers to ensure those in need of emergency support are still able to receive this.

By giving some of the grant support that was available through WE Care and Repair directly to Voluntary and Community Sector providers in North Somerset, we have enabled faster support to be given to the most vulnerable.

We have developed a communication plan that has been delivered and includes, article in winter special of North Somerset Life, social media, leafleting, improving awareness in among North Somerset council staff. After an initial communication push it has become apparent more targeted work is needing to engage the residents of Weston/Worle and people from different ethnic groups. We will be continuing communications work along these lines including exhibiting in Weston Super Mare town centre in the new year.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

Staff from Care and Repair have now been TUPED over as required to new services and there are no outstanding staffing issues.

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily.

Number of staff TUPE is 1.5 fte or 2 staff.

5. Consolidation savings – please complete for medium or high impact areas

None

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 23rd November 2018

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager:

Laura Cresser

Date:

23rd November 2018

Medium Term Financial Plan

Initial Equality Impact Assessment 2019/20



1. The Proposal

Service area:	People and Community - Community Meals
Budget reference:	PCA3
Budget reduction proposal:	Increase charges for community meals to make service more sustainable
Budget saving for this financial year:	£40,000

Description of the proposal:

The proposal was submitted to introduce an increase to community meals charges to be phased in over two years, with the intention to ensure that the service was cost neutral. This is the second year of the implementation.

Summary of changes:

The cost of a hot meal delivered by community meal will increase from £5.00 to £5.50
And the cost of tea time snack from £3.30 to £3.40

The original proposal was informed by benchmarking with neighbouring authorities, revealing that charges in North Somerset for community meals were lower, whilst offering a comparable high-quality service with additional welfare checks and support. The charges are shown in the table below

Description	2016/17 Charge	2017/18 Charge	2018/19 Charge	2019/20 Charge
Hot Meals Service	£4.50	£4.56	£5.00	£5.50
Afternoon Tea Service	£3.30	£3.30	£3.30	£3.40

Is this a continuation of a previous medium term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X				X
People from different ethnic groups			X				X
Men or women (including pregnant women or those on maternity leave)			X				X
Lesbian, gay or bisexual people				X			

People on a low income			X				X
People in particular age groups			X				X
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify: May see cost shift to carers or service users declining meals due to cost which could impact on carers.			X				X

3. Explanation of customer impact

With regards to the risks associated with increased cost, it is felt the cost of a hot meal with additional welfare checks and support remains competitive.

In relation to the annual increase in expense to the individual, a low Impact is identified for all groups where data is known.

The gender breakdown for people in receipt of community meals is as follows:

- 269 (66%) Female and 136 (34%) Male.

Work is under way to ensure effective performance reports from the service database to help identify scope of service delivery and any impact.

It is anticipated that people on low income would be most impacted by price rises for the service (this has been indicated as a low impact), however, the financial circumstances of service users is unknown to the service.

Steps are in place to mitigate against financial hardship (hardship fund) for those in need of a hot meal delivery service but whom are unable to pay for the increase cost of meals. There has been no use of the hardship fund to date.

Care provision for meal time assistance remains an alternative option for those meeting the eligibility criteria for services under the Care Act 2014. These care services are means tested.

The proposed increases equate to an increased cost (based on receiving meals seven days per week) of £3.50 per week for main meals and £0.70 per week for tea time meals; presenting a maximum weekly cost increase of £4.20 for someone receiving both meals, each day.

Previous analysis of service data shows that roughly 33% of people in receipt of community meals have a hot meal *daily* and only 20% of total meals take up is for the tea time option. Therefore, a maximum of 20% would be in receipt of both, daily.

Since implementing the initial increase, the service experienced a decrease in take up:

- 01/01/14 – 31/12/14: 112,519 meals
- 01/01/15 – 31/12/15: 103,026 meals
- 01/01/16 – 31/12/16: 87,647 meals
- 01/01/17 – 31/12/2017: 76,491 meals
- 01/01/18 - 31/10/18: 66,881 meals

However more recent figures (2018 / 19) are showing an increase in meals, despite the increase in price.

April to September figures:

- 2017/18 – 43,609
- 2018/19 – 45,754

Work is underway to promote the service following a lack of marketing and the numbers are beginning to increase.

Reasons for people electing to leave the service have been monitored and has not indicated the increase in price being the reason given. Reasons given include: moving into care home, deceased, family member able to assist. There have been no recorded complaints in respect of the cost of meals and no one indicating a need for financial assistance to continue receiving meals, following the last increase in meal charge. The service will continue to monitor the reasons why people stop having meals – to enable any financial concerns to be identified and addressed appropriately.

Although no applications have been made for assistance with cost of meals, anecdotally it has been reported that those on low income are reluctant to have the meals service due to cost, despite offering the additional welfare support.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes
 No

Explanation of staff impact

N/A

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily. **N/A**

5. Consolidation savings – please complete for medium or high impact areas

None

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 23 November 2018

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager:

Sarah Shaw

Date:

21 November 2018

Medium Term Financial Plan

Initial Equality Impact Assessment 2019/20



1. The Proposal

Service area:	People and Communities - Adult Care
Budget reference:	PCA5
Budget reduction proposal:	Additional Shared Lives Carers
Budget saving for this financial year:	£145,000

Description of the proposal:

Growing the Shared Lives scheme to provide more placements across adult care as an alternative to residential options.

Summary of changes:

Clients with a learning disability are accommodated wherever possible within the Shared Lives service, this service is similar in nature to a fostering arrangement, providing long term and short term, placements. Cost and volume work indicates that shared lives placements are more cost effective than traditional residential based services, and provide excellent outcomes for service users, often leading to greater independence and life opportunities.

The aim is to ensure that we: offer shared lives to more people; increase the number of carers recruited, and; expand into other client groups (including people with poor mental health and older people). This will be a very positive initiative and will offer people alternative options to residential care.

Is this a continuation of a previous medium term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people		X			X		
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income				X			
People in particular age groups		X			X		
People in particular faith groups				X			

People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:				X			

3. Explanation of customer impact

Overall clients will benefit from an increase in choice and independence, service is registered by Care Quality Commission (CQC) and commissioned all providers of care are vetted and commissioned by Social Services. It is anticipated that these changes will result in a positive impact for service users, as the shared lives service provides services with a positive impact.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

An additional shared lives coordinator post has been put in place for 12 months to ensure there is sufficient capacity in the service for recruitment, training and support of new carers.

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily. 1 FTE 12 Month JG6 Shared Lives Co-ordinator post

5. Consolidation savings – please complete for medium or high impact areas

None

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 23rd November 2018

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed? N/A

Service Manager: Martin Hawketts
Date: 23rd November 2018

**Medium Term Financial Plan
Initial Equality Impact Assessment 2019/20**



1. The Proposal

Service area:	People and Communities - Adult Social Care
Budget reference:	PCA6
Budget reduction proposal:	Re-commission accommodation-based Supporting People contracts
Budget saving for this financial year:	£150,000

Description of the proposal:

To re-commission the existing Supporting People accommodation based, support service contracts with 8 Housing providers by the end of June 2019. The proposal will focus on ensuring greater use of these resources are made with those with greatest need, to more closely align these preventative services with cost avoidance on more expensive residential care packages that are often out of the District.

The new contracts will focus on needs led, outcome focused offer, with clarity between low, medium and high support needs and the accommodation. This will be achieved through a clearer offer from providers of the current service to meet people’s needs, by providing tailored support for each service users rather than the existing generic support and accommodation model offer currently in place.

Summary of changes:

The new outcome focused contract will provide support for eligible service users (people with high and medium support needs including those people eligible under the Care Act 2014 and the Children and Families Act 2014). Accommodation which meets the needs of service users with low support needs would no longer be funded but providers would be able to continue to access enhanced levels of Housing Benefit and people with lower support needs will be directed towards these schemes. This will be achieved through much closer co-ordination between Commissioners and Housing Benefit, to ensure the most appropriate provision is accessing eligible support.

The proposed changes will reduce direct spend on the existing accommodation-based support contracts, as well as generating opportunities to reducing future complex care packages for adult and children’s social care. Successful implementation will demonstrate opportunities to reinvest in supported accommodation through reducing the need for high cost out of county placements, by providing local support services to meet higher support needs.

Is this a continuation of a previous medium term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X				X
People from different ethnic groups			X				X
Men or women (including pregnant women or those on maternity leave)			X				X
Lesbian, gay or bisexual people			X				X
People on a low income			X				X
People in particular age groups			X				X
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people			X				X
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:				X			

3. Explanation of customer impact

The proposed changes should result in an enhanced local offer to meet more complex needs of people requiring support and accommodation, enabling people to be better supported within their local community, as well as building on local networks of family and friends in their local area; with clear support plans and move on plans from supported accommodation into independence.

The new contracts will ensure providers are clear in their offer of accommodation type and support levels based on a person-centred approach with clear pathways to independence for customers including; training, work, education and accommodation offer.

The recommission will not change North Somerset's position under legislation to provide accommodation for those where the council has a duty under homelessness legislation. The current Accommodation based Support providers will continue with their accommodation-based offer but funded solely through housing benefit for those with low support needs and people with medium and high support needs will continue be funded through Supporting People.

There is some risk that the recommission could have an initial negative impact associated with any recommission whereby the outcome could have a destabilising impact on existing providers. The redirection of resources towards those in most need could also impact negatively on

provision as could the recently announced Government review of higher HB levels which might reduce or change the circumstances in which Housing Benefit maybe paid for support. These risks will be mitigated as far as possible by working with providers as part of the remodelling to help them deliver efficient sustainable support services and focus all available resources to support needs across all levels of need.

4. Staff equality impact summary

Are there any staffing implications for this proposal? Yes No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily - See above.

5. Consolidation -savings – please complete for medium or high impact -areas

None

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 23rd November 2018

Is a further detailed equality impact assessment needed? Yes No

If 'yes', when will the further assessment be completed?

Not at this time, more detailed EIA will be completed as a part of the re-commissioning process.

Service Manager: Gerald Hunt, Head of Commissioning

Date: 12th November 2018

Medium Term Financial Plan

Initial Equality Impact Assessment 2019/20



1. The Proposal

Service area:	People and Communities - Adult Care
Budget reference:	PCA7
Budget reduction proposal:	Reviews of Supported Living Schemes
Budget saving for this financial year:	£150,000

Description of the proposal:

The project will examine and reassess all current supported living shared homes within the Community Team for People with Learning Disabilities (CTPLD). It has been identified that the process by which these have previously been assessed and reviewed has not considered shared support to the degree that could be expected. By streamlining these services cost savings can be achieved and provider capacity increased.

Summary of changes:

North Somerset Council CTPLD has a number of customers in shared homes. These homes support between 2-12 customers. Each customer has a personalised package of support and as a result their review has historically been viewed singly and as such the scope for shared support has not been maximised.

Utilising the collated data of those supported living placements that meet the above criteria; each placement will be reviewed as a “whole home”, as well as each customer singly. This enables the identification of support which can be shared at a higher ratio.

It is not expected for there to be reductions in the volume of care provision to individuals, but rather to promote the more effective delivery of the care.

Is this a continuation of a previous medium term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people				X			
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income				X			

People in particular age groups				X			
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:				X			

3. Explanation of customer impact

The review initiative is not expected to impact on the nature of the care packages received by those under review, who will continue to receive an equivalent level of support as before. There may be some minor changes to staff personal and timings of care in some circumstances,

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

The project will be initiated and maintained within the team; utilising existing capacity with the view to achieving an ongoing continuation of a streamlined approach to support.

A Team Leader will lead on the project and oversee all strands of the project, including the data collation to measure performance and outcomes, this will require the ‘acting up’ of a post from a JM1 level to a JM2 level for a period of 12 months. This is all containable within existing salary budget.

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily.

1 post temporarily acting up from JM1 to JM2 (1 FTE)

5. Consolidation savings – please complete for medium or high impact areas

None



6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 23rd November 2018

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed? N/A

Service Manager:

Martin Hawketts

Date:

12th November 2018

Medium Term Financial Plan

Initial Equality Impact Assessment 2019/20



1. The Proposal

Service area:	People and Communities – Adult Care
Budget reference:	PCA8
Budget reduction proposal:	Provision management (reviews and assistive technology)
Budget saving for this financial year:	£150,000

Description of the proposal:

The council recognises that capacity to undertake reviews has been limited given the demand pressures and safeguarding responsibilities within locality social work teams. The Adult Care workforce is subject to a current restructuring exercise which will increase available resources for reviews these changes will seek to resolve some of these concerns. In addition, an opportunity arises when working with our strategic domiciliary care providers, to align their own assessment requirements to assess the needs and environment and health and safety concerns they will have to undertake as providers of care services, with the initial assessment process for reablement. This would not preclude the need for statutory care assessments but align the timing of the full social work assessment to the point (anytime up to six weeks) after which the provider has provided intensive support based on a reablement ethos, to the individual to maximise independence and allow the social worker to assess longer term care need once initial reablement has taken place.

The council is looking to pilot Assistive Technology which will look to deliver more innovation in developing the reablement offer to offer a digital support assessment. Based on identifying a target cohort of the reablement service, namely elderly clients living alone, who may benefit from enhanced digital support to improve their reablement outcome, improving wellbeing and offering enhanced monitoring of health and social care indicators that might lead to reduced domiciliary care visits.

This will build on the current projects with Alliance at Tamar Court and discussions with Notaro on how a digital offer can reduce formal care packages and have a significant impact on individuals overall wellbeing, prompting medication checks, monitoring movements and other health indicators to reduce hospital admissions and falls. These pilots have recently gained the financial support of the Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group (NSSG CCG) who recognise the potential of the initiatives.

Summary of changes:

The council will undertake more reviews of packages of care but will also give increased delegation for the provider to increase or decrease reablement packages to encourage greater independence and target a digital support offer as part of this package. This model is referred to as 'Trusted Assessor'. This does not mean that the council will delegate its responsibility to providers to review people's packages, it means that we will work with providers to ensure that people's packages of care are adequate to meet their needs but not excessive. This approach will also not replace many of the care activities required by individuals but will offer a risk-based approach to care priorities when domiciliary care capacity is stretched. This fits with the vision for adult social care, maximising independence and wellbeing.

The council will pilot increased delegation for the provider to increase or decrease reablement packages to encourage greater independence and target a digital support offer as part of this

package. This will offer wireless connectivity to clients who have little or no contact with the digital opportunities many of us take for granted. These will include assessments of particular interest to them (e.g. audio books, relaxation techniques and music therapies) to maximise engagement in areas of interest to the client, a focus on reconnecting those individuals via Alexa/skype etc with family and friends, and to nudge clients to establish online prescription, medication prompts, as well as developing skills to nudge clients in hot weather to drink more fluids. It will provide monitoring devices and voice recognition applications to allow the cares to talk to clients, to assess immediate needs on a more dynamic basis.

This approach will not replace many of the care activities required by individuals but will offer a risk-based approach to care priorities when domiciliary care capacity is stretched. The exact deployment of these ideas will be shaped by the test and learn pilot at Tamar Court Extra Care Scheme where the council is working collaboratively with Sparks Compass a digital company developing application skills for Alexa with a voice active functionality to allow carers and the council to assess clients wellbeing to deliver a daily triage of care priorities.

Is this a continuation of a previous medium term financial plan saving?

Yes No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X		X		
People from different ethnic groups			X		X		
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income				X			
People in particular age groups			X		X		
People in particular faith groups			X		X		
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:							

3. Explanation of customer impact

The ethos of reablement is to provide short term care and support to bring people back to their maximum level of independence and wellbeing. The use of digital solutions as part of the reviewing process will offer many of the benefits of digital technology to those who have not experienced its value. The cohort most likely to benefit from this pilot is the frail elderly particularly those who do not have local family and friends to support.

The initial target areas are likely to be rural settings where domiciliary care is even more challenging to deliver and the wrap around support of a digitally enabled care offer to complement the traditional care package will be most cost effective to deliver.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily.

5. Consolidation savings – please complete for medium or high impact areas

None

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 23rd November 2018

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager:

Gerald Hunt

Date:

12th November 2018

Medium Term Financial Plan

Initial Equality Impact Assessment 2019/20



1. The Proposal

Service area:	People and Communities - Adult Care
Budget reference:	PCA9
Budget reduction proposal:	Increased income from Continuing Health Care/Joint Funding
Budget saving for this financial year:	£300,000

Description of the proposal:

Introduce more effective review mechanisms to ensure that health care needs are identified and applications for Continuing Health Care (CHC) are made where appropriate and challenged when required. Develop clear pathways for joint funding with the Clinical Commissioning Group for those who are not CHC eligible.

Summary of changes:

Clients whose primary needs are in regard to their health care needs are entitled to CHC funding, this is paid by the Clinical Commissioning Group (CCG), this proposal includes:

- Identification of individuals in the Community Team with learning disabilities formally funded via the previous 'joint funding mechanism' and ensure these individuals are screened for CHC funding
- Ensuring that all assessments and reviews consider CHC funding.
- Development of a 'dispute' protocol and 'joint funding' protocol with the Clinical Commissioning Group
- Realign the workforce to create Continuing Health Care Specialist roles to support applications.

Is this a continuation of a previous medium term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people				X			
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income				X			

People in particular age groups				X			
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:				X			

3. Explanation of customer impact

The decision for either an individual to be CHC funded, or joint funded does not affect their care delivery, which will remain consistent – it is clear in statute that no funding can be withdrawn by either party without clear agreement and that any disputes over funding cannot interrupt or delay care provision. It is not envisioned to have any impact on the care received.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

As part of the workforce proposals for adult social care, roles will be created from existing resources to work on CHC cases as part of a restructure.

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily. No overall changes to staff Full Time Equivalent.

5. Consolidation savings – please complete for medium or high impact areas

None

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 23rd November 2018

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed? N/A

Service Manager: Martin Hawketts
Date: 12th November 2018



Medium Term Financial Plan

Initial Equality Impact Assessment 2019/20



1. The Proposal

Service area:	People and Communities – Carlton Centre
Budget reference:	PCA10
Budget reduction proposal:	Review costs and income in relation to the Carlton Centre
Budget saving for this financial year:	£50,000

Description of the proposal:

The Carlton Centre delivers a range of Mental Health support and training activity including those experiencing substance misuse, self-harm, autistic spectrum conditions and other mental health diagnosis. The building and support staff are funded by the council, Avon and Wiltshire Mental Health Partnership (AWP) delivers the mental health operation resources and running costs of the building, the Clinical Commissioning Group (CCG) provides therapeutic services, and other partner agents include Adult Learning Service and Team North Somerset. The acquisition of the building was subject to Mental Health Capital Grant awarded to the council fifteen years ago. The proposal is to reduce the size of the council contribution based on generation of more fee income or reduced support resources.

Summary of changes:

The council has provided support to deliver the administration of the centre, this has grown over years based on increased income from course activity and partnership contributions. The growth in income has not stood pace with the administration costs and the council contribution is no longer affordable. The council currently contributes a net budget of £50,000 with a contribution from fees of £85,000. This funds in total five staff or 4.1 full time equivalents, which includes receptionists, administrators and course co-ordinators.

The proposal is to review the activities and contributions to the service, with a focus on generating more income from partnership or fee income and or reducing current commitments, which could but not necessarily involve a reduction in the staffing complement. The service reflects a strong partnership ethos, but lacks a clear strategic direction, and the review of costs will seek to restore the principal originally intended for these resources of financial self-sufficiency.

Is this a continuation of a previous medium term financial plan saving?

Yes No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X				X
People from different ethnic groups			X				X

Men or women (including pregnant women or those on maternity leave)			X				X
Lesbian, gay or bisexual people			X				X
People on a low income			X				X
People in particular age groups			X				X
People in particular faith groups				X			
People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:							

3. Explanation of customer impact

The impacts whilst anticipated to be relatively low, could dependent on the review lead to higher fee costs or reduced activity and support to the users of the Centre.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

It is not clear yet what the reduction would require which will range from zero staffing effect to a reduction of up to 1.5fte posts.

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily.

The posts are filled with the exception of a 0.65 f.t.e co-ordinator post, which is currently vacant.

5. Consolidation savings – please complete for medium or high impact areas

None

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 23rd November

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager:

Gerald Hunt

Date:

12th November 2018

Medium Term Financial Plan

Initial Equality Impact Assessment 2019/20



1. The Proposal

Service area:	People and Communities - Housing and Strategy
Budget reference:	PCA11
Budget reduction proposal:	Directorate Strategy & Policy and Housing Teams
Budget saving for this financial year:	£65,000

Description of the proposal:

Reduction in staffing costs and increased income in the directorates Strategy and Policy Development team, alternative funding sources for homeless prevention in the light of Discretionary Housing Payments/other supplementary funding

Summary of changes:

Reduction in staffing costs in the directorates Strategy and Policy Development team (£50,000) - reduction in hrs (12) of 1 Strategy and Policy Development Officer post resulting from the flexible retirement of a member of staff, deletion of the apprenticeship post at the completion of the current programme and savings from the recent replacement of one vacant Strategy and Policy Development Officer post (JM3) with an Engagement & Participation Officer (JM1) post. The People & Community policy and strategy development work programme will be reprioritised/reduced and realigned in the light of the reduced staffing resource available and the revised skill mix.

Increased income in the Directorates Strategy and Policy team (£10,000) - Increased income in relation to the work of the team in delivering the Trusted Relationships programme. This funding will be available for at least the next 2 years and maybe extended for a further 2 years.

Alternative funding sources for the provision for homeless prevention (£5,000) in the light of Discretionary Housing Payments funding which is now delegated to the team and other supplementary homelessness prevention funding.

Is this a continuation of a previous medium term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people			X				X
People from different ethnic groups			X				X
Men or women (including pregnant women or those on maternity leave)			X				X
Lesbian, gay or bisexual people			X				X

People on a low income			X				X
People in particular age groups			X				X
People in particular faith groups			X				X
People who are married or in a civil partnership			X				X
Transgender people			X				X
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:							

3. Explanation of customer impact

The Strategy and Policy Development team provide a policy and strategy development service for People and Communities directorate as well as supporting customer engagement and developing new service initiatives. People and Communities service users comprise a wide range of vulnerable people. The reduction in the staffing levels will mean that the Strategy and Policy Development work programme will be revised and there will be a small reduction in the scale of policy development work that can be undertaken. The restructuring of the team will reduce the team’s capacity to undertake some of the more complex workstreams, particularly those linked to user engagement. All these changes could adversely affect services for vulnerable people from a range of diverse groups in a proportionate way. To mitigate the risks as far as possible the work plan for the team will be reprioritised and regularly monitored to ensure that priority service developments can be taken forward. In addition, duties will be realigned across the remaining roles within the team and the post of Engagement and Participation Officer has been recruited to initially on a temporary basis and the role will be further reviewed at the end of the contract to ensure it best meets the service needs.

Similarly, there is a risk that the income received is insufficient to meet the budgeted figures. If this occurred and the impact could not be mitigated in another way, it is likely there would need to be a reduction in the scale of policy and development work which could adversely affect services for vulnerable people from a range of diverse groups in a proportionate way and would be mitigated as far as possible as set out above.

The homelessness service provides a wide range of services for vulnerable people. Alternative sources of homeless prevention funding are proposed in the light of Discretionary Housing Payments funding which has recently been delegated to the team and other supplementary homelessness prevention funding. It is anticipated the revised budget provision will meet the service’s needs. There is a risk that funding from these sources reduces or that demand exceeds the available resources in future. If this occurred and could not be mitigated in another way, it is likely there would be an adverse service impact affecting vulnerable people from a range of diverse groups in a proportionate way. The impact would be mitigated as far as possible by prioritising expenditure.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

12 hours reduction in 1 post of Strategy and Policy Development Officer as a result of the post holder taking flexible retirement. Deletion of the apprentice post at completion of the current programme. 1 post of Policy and Strategy Development Officer (JM3) recently became vacant and has been replaced with new post of Engagement and Participation Officer (JM1). This post has been recruited to on a temporary basis initially and the role will be further reviewed at the end of the contract.

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily - See above.

5. Consolidation -savings – please complete for medium or high impact -areas

None

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 11 November 2018

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager: Mark Hughes

Date: 9th November 2018 (updated 18 January 2019)

Medium Term Financial Plan

Initial Equality Impact Assessment 2019/20

1. The Proposal

Service area:	People and Communities – Improved Better Care Fund
Budget reference:	PCA15
Budget reduction proposal:	Improved Better Care Fund Government Grant
Budget saving for this financial year:	£940,000

Description of the proposal: This entry in the MTFP reflects the proposed changes in the level of income to be received through the government grant in relation to the Improved Better Care Fund (IBCF).

Summary of changes: The levels of additional income are as follows, and detailed spending plans have been agreed.

	2018/19	2019/20	Diff 2019/20 to 2018/19
IBCF (original)	2,300	4,554	2,254
IBCF supplementary)	2,617	1,303	-1,314
TOTAL	4,917	5,857	940

Is this a continuation of a previous medium term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact type				Positive	Neutral	Negative
	High	Medium	Low	None			
Disabled people				X			
People from different ethnic groups				X			
Men or women (including pregnant women or those on maternity leave)				X			
Lesbian, gay or bisexual people				X			
People on a low income				X			
People in particular age groups				X			
People in particular faith groups				X			

People who are married or in a civil partnership				X			
Transgender people				X			
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:				X			

3. Explanation of customer impact

There is no customer impact as a result of this change.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

If yes, how many posts could be affected? State whether they are current vacant or filled permanently or temporarily.

5. Consolidation savings – please complete for medium or high impact areas

None

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? No

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

Service Manager:
Date:

Katherine Sokol
18th December 2018

Medium Term Financial Plan

Initial Equality Impact Assessment 2019/20



1. The Proposal

Service area:	People and Communities - Public Health
Budget reference:	PCPH1
Budget reduction proposal:	Contract savings, efficiencies and use of reserves
Budget saving for this financial year:	£426,000

Description of the proposal:

Annual Government reductions to the ring fenced Public Health Grant have been in place since 2015/16 to 2019/20. The proposal is to manage the 2019/20 reduction to the Public Health Grant primarily through using the public health reserve plus planned contract savings and efficiencies in service delivery.

Summary of changes:

Growth		Savings	
Public Grant reduction	250	Substance Misuse	-45
Salary inflation	26	Sexual Health	-50
Family Peer Support	50	0-19s	-25
Health Checks	50	Staffing	-150
Smoking cessation	50	Obesity	-30
		Use of reserve (additional)	-126
	426		-426

- **Substance misuse savings** – The proposed £45,000 saving against the substance misuse budget will be achieved by reducing the annual cost of the Substance Misuse Service (delivered by Addaction) by reducing the capacity and reach of the service. The detail of how to do this will be negotiated with the provider.
- **Sexual health contract and efficiency savings** – the specialist sexual health contract awarded in 2017/18 included planned savings in the first three years of the contract. The year three saving for 2019/20 is £30,000. This has previously been assessed as low impact because it is based on service efficiencies being realised by the provider through a larger scope contract. A remaining £20,000 saving will be made after not repeating some one-off costs, for example, training programmes and setting up new technologies for community delivery.
- **0-19 service efficiencies** – these savings will be delivered through increased joint-working with children’s centres with services delivered in-house to the same target audiences rather than using outside contractors, for example, developing peer support for families around healthier behaviours and attachment.
- **Staffing** – this saving will be met following consultation on a restructure of the public health team, including a review of currently vacant posts and a reduction in current spending levels in the salary budget.
- **Obesity unallocated budget** – this saving will be achieved through the use of unallocated budget previously used for two short term initiatives. The first was to support a weight loss pilot for men which is now provided on a commercial basis independent of council funding. The second use was a one-off grant scheme for school initiatives to support healthy weight.

- **Use of public health reserve** – the use of this money will not have any impact on current service delivery.

Is this a continuation of a previous medium term financial plan saving?

Yes

No

2. Customer equality impact summary

Will the proposal have a disproportionate impact on any of these groups?

Impact Level Insert X into one box per row, for impact level and type.	Impact Level				Impact type		
	High	Medium	Low	None	Positive	Neutral	Negative
Disabled people		*	X				X
People from different ethnic groups			X				X
Men or women (including pregnant women or those on maternity leave)		*	X				X
Lesbian, gay or bisexual people			X				X
People on a low income		*	X				X
People in particular age groups		*	X				X
People in particular faith groups				X		X	
People who are married or in a civil partnership				X		X	
Transgender people			X				X
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify: (For substance misuse service) Impact on carers. Impact on people suffering from mental or physical ill health. Impact on social excluded individuals.		*	X				X

Please note: The X relates to scoring for all public health services savings.

The * represent where there is a higher score for substance misuse savings only.

3. Explanation of customer impact

- Further reduction to the budget for the Substance Misuse Service is likely to make it more challenging to access treatment and support services and reduce the effectiveness of this provision. The Substance Misuse Service is predominantly used by white, males aged between 30 and 49, so any changes to service delivery will impact primarily on this group. Evidence suggests that certain groups, such as women and people who identify as LGBT+, are less likely to engage with a substance misuse treatment service and therefore any

further reductions to service provision may marginalise these individuals even more. The large majority of individuals that use the Substance Misuse Service are part of lower socio-economic groups and live within areas of high deprivation. Many of these individuals will be facing challenges as a result of mental ill health or physical impairments. Currently, the Substance Misuse Service is able to provide interventions and support in a flexible manner, meeting many of the needs of those using services. Further reductions to the service will lessen the ability of the service to do this.

- Although reductions in sexual health spending could be seen to have negative impact on groups who have higher rates of sexually transmitted infections (STIs) (such as people on a low income or lesbian, gay or bisexual people), there is assurance given through regular performance meetings with sexual health providers that services continue to be provided with innovation. For example, improve access to self-testing of STIs which reduces need to attend clinics or 3-hour diagnosis and treatment for higher risk individuals attending specialist clinics.
- Evidence shows obesity is higher among those on lower incomes; schools intervention can provide an opportunity to reach those individuals and families. The ending of one-off grants to schools around health weight could impact on children and young people’s health but grants were issued as part of a whole school approach to improving outcomes that should sustain beyond the grant spend.

4. Staff equality impact summary

Are there any staffing implications for this proposal?

Yes

No

Explanation of staff impact

Staff consultation will be used to develop a restructure of the public health team following new responsibilities being allocated to the Director of Public Health. Vacant post salary has been identified as an area of saving with potential savings from other posts to be explored through the consultation process.

5. Consolidation savings – please complete for medium or high impact areas

Does this budget saving include many service areas/savings/projects? If so, please identify the areas included in this proposal that could potentially have a medium or high impact for equality groups

Service area	Value of saving
Substance Misuse	£45,000
Total	£45,000

6. Review and Sign Off

Directorate Equality Group

When was this assessment reviewed by the Directorate Equality Group? 12 and 23 November 2018

Is a further detailed equality impact assessment needed?

Yes

No

If 'yes', when will the further assessment be completed?

The full EIA for substance misuse savings will be completed by 31 January 2019.

Service Manager: Matt Lenny

Date: 8 November 2018

Medium Term Financial Plan - Equality Impact Assessment 2019/20



Service area:	Public Health
Budget reference:	PCPH1
Budget reduction proposal:	Public Health - reduction to the substance misuse budget
Equality impact assessment owner:	Ted Sherman
Assistant Director/Director sign off:	Andrew Burnett
Review date:	27 November 2018

Budget Ref.	Budget Reduction Proposal	Budget Reduction £				Staffing Reduction (FTE)
		2019/20	2020/21	2021/22	2022/23	2019/20
PCPH1	Reduction to the Substance Misuse budget	£45,000				

Service User Impact (High, medium or low)	
Before mitigating actions	After mitigating actions
Medium	Low

Staff Impact (High, medium or low)	
Before mitigating actions	After mitigating actions
Low	Low

Section 1 – The Proposal

1.1 Background to proposal

As a result of a cut to the Public Health Grant (paid to North Somerset Council) a budget reduction of £45,000 in 2019/20 against the substance misuse budget has been proposed (the current contract value is £1,687,480). The current expectation is that this will be fully achieved by reducing the cost of the fifth and final contracted year of the Substance Misuse Service (delivered by Addaction). It is expected that this budget reduction will be achieved by not recruiting to two staff vacancies (an administrator post and a team leader post). Neither of these roles hold a client caseload so it is assumed that there will be minimal impact on service users, there will however need to be a re-organisation of the staffing structure.

1.2 Please detail below how this proposal may impact on any other organisation and their customers

No impact on other organisations or their customers is expected as a result of this proposal.

Section 2 – What Do We Know?

2.1 Customer/staff profile details – what data or evidence is there which tells us who is, or could be, affected?

- **High percentage of males in service** – Males make up circa 65% of the Substance Misuse Service caseload (for both structured and unstructured treatment). However, this gender split does not necessarily reflect the make-up of the population with substance misuse problems who are not in treatment.
- **High percentage of white British people** - the majority of individuals accessing the Substance Misuse Service has been and remains white British, however since the commencement of this service in 2015/16 the number of individuals from other ethnicities has increased.
- **Ageing population** – individuals accessing the Substance Misuse Service tend to be between the ages of 35 and 54. Alcohol related hospital admission data shows that many of these admissions are for older people suggesting that there is a large unmet need amongst the older population. The demand for services for older people is clearly shown by Addaction's Horizons group (for abstinent alcohol users over 55) being very popular.
- **High levels of housing problems** - The number of individuals accessing the Substance Misuse Service between 1 November 2017 and 31 October 2018 who reported a housing problem was: 114 (9.6%) - No Fixed Abode (NFA); 173 (14.6%) - housing problem.

Medium Term Financial Plan - Equality Impact Assessment 2019/20



- **Parents** – 15.6% of the individuals accessing structured treatment at the Substance Misuse Service between 1 Jul 2017 and 30 June 2018 were living with a child below the age of 18. Addaction currently conduct home visits for all service users with children under 5, these visits are an important way to ensure medication is being stored safely and to highlight any safeguarding concerns.
- **Pregnant women have been and continue to access services** – There were 12 pregnant women that engaged with the Substance Misuse Service between 1 November 2017 and 31 October 2018. These women will have been intensely supported through a joint working arrangement between Addaction and the local specialist substance midwife.
- **Large numbers of individuals with mental health problems** – 52.9% of the individuals that began structured treatment at the Substance Misuse Service between 1 April 2018 and 30 June 2018 were recorded as having a concurrent mental health problem. The Substance Misuse service provides important mental health interventions and operates as the sole provider of mental health treatment for many individuals.
- **High proportion living in areas of high deprivation** – Circa 33% of those using the Substance Misuse Service population live in 2 wards in Weston-super-Mare (South and Central wards) which are in the 20% most deprived wards in the Country.
- **Physical health problems (including mobility issues)** – Individuals with substance misuse problems often experience other physical health problems. Outreach home visits provided through the Substance Misuse Service are an important and effective way of providing those who are unable to leave the house with the necessary treatment.
- **Families and carers** – The Substance Misuse Service provides families and carers with support.
- **Employment** – The majority of the individuals engaging with the Substance Misuse Service are not employed. Only 23% of those individuals engaged in structured and non-structured treatment between 1 November 2017 and 31 October 2018 were employed.
- **Sexual orientation** – “The Drugs Strategy 2010 acknowledges the need for services to be responsive to the needs of certain groups such as lesbian, gay, bisexual and transgender (LGBT) users. Evidence indicates that these populations are more likely to use alcohol and other substances, and to be using different drugs in different contexts to those typically seen in many drug services, with more emphasis on ‘party’ or ‘recreational’ drug use. LGBT service users may prefer services identified as specifically for LGBT people for reasons of safety, and due to a perception that these services will better understand their circumstances.

Medium Term Financial Plan - Equality Impact Assessment 2019/20

2.2 What does the data or evidence tell us about the potential impact on diverse groups, and how is this supported by historic experience/data?

With reference to the information provided in section 2.1. (see above):

- The users of the Substance Misuse Service have a large range of diverse needs.
- The Substance Misuse Service appears to currently meet many of the needs of the individuals that use it

2.3 Are there any gaps in the data, for example across protected characteristics where information is limited or not available?

There is limited information relating to the needs of and impact on local LGBT communities.

2.4 How have we involved or considered the views of the people that could be affected?

The content of this EIA has been guided by: a review of the demographic data for those individuals engaged with the Substance Misuse Service between 1 November 2017 and October 2018; the 2017 North Somerset Substance Misuse Needs Assessment; the data collection for the completion of the 2017/18 Substance Misuse EIA; and national research/guidance. In addition, this EIA was presented and discussed at the Council's EIA Stakeholder session which took place on the 14th January 2019. The proposal to achieve this budget reduction by not recruiting to the two staff vacancies will be presented at a service user event held by Addaction in February 2019, the feedback from this event will be considered and added to this EIA when available.

2.5 What has this told us?

In general terms, the information used to produce this EIA tells us that the Substance Misuse Service is currently meeting the diverse needs of the North Somerset substance misusing population (and their families) to a satisfactory standard.

The members of the EIA stakeholder group (consulted on the 14th January 2019) raised concerns about the capacity of the service to adequately manage more volunteers if the staff re-organisation requires additional volunteers to be used; they raise a concern about the impact on time available to case holding staff to see clients if administrative support reduced; they also asked what the impact of this budget reduction in combination with the previous budget cuts had been on the service's ability to engage with underserved groups.

The comments made by the members of the EIA stakeholder group and response to each of these are included in the table over the page.

Comment made	Response
Concerns raised about an increased use of volunteers, and the need to ensure that they are adequately trained and supported.	The Council will work with Addaction to ensure that any increase in the number of volunteers is accompanied by sufficient training and support systems.
Additional pressure placed on case holding staff if admin or support staff are reduced.	The Council will work with Addaction to ensure administrative duties are minimised and smart ways of working are employed.
Likelihood of vulnerable people (i.e. those with poor mental health) of them being willing to engage in group work.	The provision of one-to-one interventions will continue; this will ensure that those people for whom groups are not suitable continue to receive the necessary support.
Have reductions in the service over-time had an impact on the demographics of the service-users?	There is not currently the data available to answer this, however it is clear that the reductions to this budget have limited the development of interventions targeting underserved populations.
Using volunteers may reduce the opportunities for service users to become involved in the delivery of the service and accessing paid employment.	Addaction will continue to offer service users the opportunity to assist in the delivery of programmes (where this is appropriate) and will continue to support service users into paid employment.
Cumulative impact of funding changes to this and other services making it more difficult for vulnerable people to access the services they need.	There data required to respond to this is not currently available, however (as stated above) the ability to delivery programmes specifically for vulnerable and underserved groups has been reduced.
Concerns for the future funding levels of the service in line with re-commissioning due in 2020	The future funding levels are currently unknown. The recommissioning of the service in 2020 will ensure that provision matches the available monies and best meets local need.

2.6 Are there any gaps in our consultation, what are our plans for the future?

The feedback from the Addaction service user event in February 2019 will be considered and added to this EIA when available.

Medium Term Financial Plan - Equality Impact Assessment 2019/20



Section 3 – Assessment of Impact

Impact Level Insert X into one box per row, for impact level and type.	Impact type				Summary of Impact			
	High	Med	Low	No	Positive	Neutral	Negative	
Disabled people			X				X	A reduced ability to provide outreach session, including home visits, could make it more challenging for disabled individuals to access treatment. The introduction of more group-based interventions in place of one-to-one interventions may be make treatment access less appealing to individuals with problems such as autism, anxiety, and poor hearing
People from different ethnic groups				X				
Men or women				X				
Lesbian, gay or bisexual people				X				
People on a low income		X					X	A large proportion of the users of the Substance Misuse Service are not in employment and many live-in areas of high deprivation. The Substance Misuse Service provides not only important substance misuse focussed interventions but also many other complementary support programmes for this group, including mental and physical health care, family support, housing support, and education and training.
People in particular age groups				X				
People in particular faith groups				X				
People who are married or in a civil partnership				X				
Transgender people				X				

Medium Term Financial Plan - Equality Impact Assessment 2019/20



Women who are pregnant or whilst on maternity leave			X				
Other specific impacts, for example: carers, parents, impact on health and wellbeing. Please specify:		X				X	Families and carers. As one of the staff roles which are proposed to be left vacant is the Team Leader responsible for families and carers element of the service there may be reduction in the support offered to this group.

Does this proposal have any potential Human Rights implications? If 'yes', please describe	No
Could this proposal have a Cumulative Impact with any other budget savings? <i>This is an impact that appears when you consider services or activities together; a change or activity in one area may create an additional impact somewhere else</i> If 'yes', please describe?	No

Medium Term Financial Plan - Equality Impact Assessment 2019/20



Section 4 – Action Plan

Where you have listed that there will potentially be negative outcomes, you are required to mitigate the impact of these. Please detail below the actions that you intend to take.

Action taken/to be taken	How will it be monitored?
The Council will work with Addaction to ensure the staff re-organisation continues to allow for an adequate level of family and carer support to be provided.	The re-organisation will be agreed in the regular service planning meetings. The impact of these changes will be monitored during the quarterly performance review meetings and will be reported to the Director of Public Health.
The Council will work with Addaction to ensure case holding staff are working in the most time efficient manner possible. All opportunities to reduce the administrative burden placed on these staff will be taken, including the reduction in the scale and scope of the quarterly monitoring reports.	Smart and time efficient working practices will be discussed during the regular service planning meetings. The Council will produce a new and reduced quarterly reporting requirement.
The Council will review Addaction’s system for providing support to volunteers; this review will highlight any capacity issues and will ensure that any increase in the number of volunteers is accompanied by adequate training and management.	The Council will review the current systems for volunteer support during the regular planning meetings.
The recommissioning of the service for April 2020 will allow for new delivery methods to be introduced. This recommissioning will also ensure that the available budget is used in a way which best meets the needs of the local population.	The recommissioning process will commence in January 2019.
If negative impacts remain, please provide an explanation below.	
Whilst everything will be done to maintain the current levels of family and carer support, the loss of the Team Leader role may result in a slight reduction in this element of the service.	