

**Meeting of the Council – 1<sup>st</sup> March 2021**  
**Revenue Budget Strategy and Setting the Council Tax 2021/22**  
**Equality Impact Assessments**

**Adult Social Care**

- Acquired Brain Injury Service - cease SLA with Dudley CCG (page 2)
- Streamline the Lye Community Project (page 8)
- Cease moving and handling team; transfer to Occupational Therapy (page 17)
- Glebelands contract remodelling (to follow)
- Supported Living Package reviews in Mental Health (page 19)
- Contract out aspects of the money management function (page 23)
- Reduce a Supported Living contract by 50% when current extension ends (Mental Health) (page 26)
- Integrated Commissioning Hub restructure (page 29)
- Restructure of Mental Health Team and efficiencies from exit of Section 75 agreement (page 32)
- Streamline of the invoice processing functions following the implementation of Successor Social Care IT system (page 36)
- Reduction of 50% of the budget for hospital avoidance placements (page 39)
- Reduce the Residential Care Placement for older people budget by 5% to reflect the increasing shift to domiciliary care (page 41)
- Residential Care Charging Fraud Initiative - Tackle fraudulent asset disposal in regard to Residential Care financial assessment and charging (page 43)

**Children's Services**

- Reduced contribution to the Regional Adoption Agency (page 48)
- Vacancy review (page 51)
- Removal of low level weekend working (Restructuring the intervention and prevention service) (page 56)
- Managed step down from external residential placements (page 61)
- Movement of external placements into internal residential placements (page 68)
- Transfer of children to Special Guardianship Order status (page 75)
- Review of Independent Fostering Agency placements (page 83)
- Review of home to school transport for SEND children (page 91)

**Commercial and Customer Services**

- Closure of Dudley Council Plus on Saturdays (page 99)

**Regeneration and Enterprise**

- Leisure Centres: Options Plus Discount scheme - reduce or remove certain categories (page 103)

## Equality impact assessment

**Name of policy, service or decision: Acquired Brain Injury (ABI) Service**

**Lead directorate: Adult Social Care**

<p><b>1. Description – what is being assessed?</b> Acquired Brain Injury (ABI) Service – impact on the health service when Adult Social care (ASC) staff are withdrawn and DMBC's involvement is dissolved.</p>
<p><b>2. Lead officer on assessment:</b> Julie Cox</p>
<p><b>3. Head of service:</b> Santokh Dulai</p>
<p><b>4. Members of assessment team:</b> Amanda Marshall – DDS TM Ron Burton – DDS ATM Julie Austin – BCT Abbie Goodwin – HR Kully Samra – Legal</p>
<p><b>5. Date assessment began:</b> 04.03.2020</p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b> The recommendation by the Dudley Disability Service (DDS) Head of Service and the project group formed is that involvement of DDS staff to be dissolved from the health service and reallocated within the DDS Social Care Team with the necessary support and training that will be needed.</p>
<p><b>7. Who is it intended to affect or benefit (the target population)?</b> The main aim is to successfully rehabilitate a person with a brain injury to gain greater independence, giving them a better quality of life.  Social care needs will also be assessed by the DDS Assessor involved with that same person.  This will benefit the person, their support network and the service that is allocated to that person.</p>
<p><b>8. What are the main potential equality issues to be looked at?</b> That the individual people with an ABI and their support network around them are not discriminated by in any way and that their individual transfer of care and support needs to DDS Social Care Team are dealt with seamlessly, in an efficient and harmoniously manner.  Ensuring that at the same time as improving the services DDS are meeting its legal duties under the Equality Act 2010 public sector equality duty (PSED).</p>

## **Evidence gathering**

### **9. Provide details of all information about the policy, service or decision which will help with the assessment.**

The ABI Team assessors and the health professionals involved in each case will work together towards the same objective: To successfully rehabilitate a person with a brain injury to gain greater independence, giving them a better quality of life.

This includes:

- Prevention of inappropriate hospital readmission.
- Improve the individual's skills
- Improve confidence and self-esteem
- Provide opportunities for the individual to move into community interaction
- Retraining of skills to support with education and work/employment
- Maximise all financial brain injury resources
- Complete Care Act Assessment to ensure health and social care needs are accounted for and put in place to increase independence

All assessment follows the Council's asset-strength based approach.

#### **Equality monitoring data:**

##### **What monitoring data is collected for each of the protected characteristics?**

##### **Set out relevant details of this data.**

A comparison of what the equality impact is now against what it is likely to be after a change is made in redesigning the service has been considered.

Work has been carried out on existing policies to understand the impact these are having and has helped identify any improvements or retargeting of resources.

#### **Engagement and customer feedback:**

##### **What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

A wide range of staff from the teams responsible for service with equality expertise, and others were involved to offer an independent view.

The staff involved have been carrying out effective engagement with the people with ABI on their caseload who might use or who are affected by the service, or decision, looking at the equality implications involved.

##### **What evidence is missing? What will be done to collect it?**

Job Descriptions for each member of staff that are being deployed into DDS.

Abbie Goodwin, HR and OD Business Manager is working with Santokh Dulai, Head of Service for DDS, to compile new job descriptions for each member.

All staff involved did have the same Job Description as that of a Senior Social Worker.

**Data analysis**

**10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?**

Evidence from monitoring, engagement and feedback shows there is no significant impact on any protected groups as to the individuals involved in their care and support needs will not be affected. This change will improve the quality of care due to consistency of staff involvement.

**11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.**

Evidence from monitoring, engagement and feedback shows there is no significant impact on any protected groups as to the individuals involved in their care and support needs will not be affected. This change will improve the quality of care due to consistency of staff involvement.

All protected characteristics	The current service provided by Dudley Adult Social Care does not discriminate based on any protected characteristic and the project will not change that, they are aimed at increasing the quality of life for individuals with ABI to provide an improved social care service for these people.
Age	The current service provided by Dudley Adult Social Care does not discriminate based on age and the project will not change that, they are aimed at increasing the quality of life for individuals to provide a more innovative way of living for those involved. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Disability	The current service provided by Dudley Adult Social Care does not discriminate based on disability and the project will not change that, they are aimed at increasing the quality of life for individuals to provide a more innovative way of living for those involved. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Gender reassignment	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that, they are aimed at increasing the quality of life for individuals to provide a more innovative way of living for those involved.

	Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Marriage or civil partnership	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that, they are aimed at increasing the quality of life for individuals to provide a more innovative way of living for those involved. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Pregnancy or maternity	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that, they are aimed at increasing the quality of life for individuals to provide a more innovative way of living for those involved. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Race	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that, they are aimed at increasing the quality of life for individuals to provide a more innovative way of living for those involved. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Religion or belief	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that, they are aimed at increasing the quality of life for individuals to provide a more innovative way of living for those involved. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Sex	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that, they are aimed at increasing the quality of life for individuals to provide a more innovative way of living for those involved. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Sexual Orientation	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that, they are aimed at increasing the quality of life for individuals to provide a more innovative way of living for those involved. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>	
No	

**Identifying adverse impacts**

**12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.**

There are no main potential adverse impacts on particular protected characteristics.

The person with ABI, their care and treatment will be effective and appropriate to their needs, delivered by the allocated assessors with the right skills and experience, delivered in the right place, and at the right time. Overall improving the quality and performance in the environment that will help external services with reliable, cost-effective and sustained health and social care processes and enable them to achieve their goal of improving care delivery and enhancing the person's outcomes. This will increase the likelihood of desired outcomes and are consistent with current professional knowledge for the individuals involved.

Provide a comprehensive and empathic approach to the support needs for the individuals involved. Offering positive care will enhance well-being as part of an excellent standard of care.

Provide quality care that is safe, effective, patient-centred, timely, efficient, and equitable. Patient safety is an important aspect of health and care needs and a priority for all involved.

Provide high-quality health and social care that is effective, safe, timely, efficient, equitable, and delivered by professionals who are respectful, communicate clearly, and involve the individuals in decision-making.

**Alternatives/mitigating actions**

**13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.**

Complete involvement with the individual and their support network. Empowering people to be at the centre of their own decision making for social care and health choices.

**Monitoring arrangements**

**14. How will the equality impact of the policy/service be monitored in future?**

Continue to identify trends or patterns such as high/low take-up by particular groups compared e.g. to the background population, other groups, and/or to previous years' data.

Continue to carry out equality monitoring of the service to understand its ongoing impact on different groups.

**Action planning**

**15. Provide details of actions or improvements identified during the EIA.**

Additional support will need to be made available to the ABI social care staff to enable successful relocation back into the LA practice methods and systems, some of which was already underway to avoid duplication of tasks and roles.

A key improvement arising from the relocation of ABI staff will be reduced duplication of job roles/tasks, reduced pressure on the staff within DDS who were undertaking Care Act assessments on clients they were not fully sighted on, improved governance and activity performance data for the LA.

**Decision making**

**16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?**

Cabinet

*Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).*

**Signed assessment lead officer:**

**Date:**

**Chief officer/head of service:**

**Date:**

**01.02.2021**



Version: February 2019

# Equality Impact Assessment



**Name of policy, service or decision: Lye Community Project – Medium Term Financial Strategy Savings (MTFs)**

**Lead directorate: Adult Social Care –Access and Prevention**

<p><b>1. Description – what is being assessed?</b></p> <p>To review existing provision provided by Dudley MBC at Lye Community Project and provide an alternative offer / model that delivers identified savings of £50k 2021/22; £100k 2022/2023; £100k 2023/2024 whilst achieving the following</p> <ul style="list-style-type: none"><li>• Maximises Access to Adult Social Care services through the SPA screening providing information, Advice and Guidance.</li><li>• Addresses MTFs identified whilst ensuring identified savings are realised.</li><li>• Continues to provide a resource that supports Adult Social Care services in the Borough</li></ul>
<p><b>2. Lead officer on assessment:</b> Amrik Dhesy – Team Manager</p>
<p><b>3. Head of service:</b> Marie Spittle</p>
<p><b>4. Members of assessment team:</b> Head of Service, Team Manager, Assistant Team Manager, representation from staff / attendees / carers and significant stake holders</p>
<p><b>5. Date assessment began:</b> January 2021</p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p><b>Lye Community Project</b> (LCP) offers a single point of access to ensure appropriate services are accessed in the locality for signposting and referrals to appropriate internal teams. Whilst the project essentially provides a social care service in a community setting. It offers a one-stop shop facility that enables a broader holistic wrap around person-centred service. The team offers Information, advice and guidance across a number of domains, such as, housing, immigration (advice no recourse to public funds), domestic violence advice, safeguarding, welfare, benefits, general health and wellbeing and Honour based violence. If needed service users are signposted to external appropriate specialist support where required.</p> <p>The Lye Community Project is managed and supported by a Team Manager and Assistant Team Manager and staffed by a total of 7 staff. There are 2 Senior Social Workers, 4 Assistant Care Coordinators who are supported by 1 Business support worker.</p>



There is a requirement to achieve moderate savings between 2021/2022 – 2022/23. The remodelling of the service will be achieved with minimal impact on front line services as far as possible whilst achieving sustainability for five – ten years.

The remodelling of the service area will aim for the retention of all the existing staff of 2 Senior Social Workers and 4 Assistant Care Coordinators with a focus on retraining to ensure service continuity.

The required savings will be made through existing vacancies in the wider Access Team with the need to refocus and provide an integrated approach to the Access Team offer in maintaining a quality person centred service.

The one stop information, advice and guidance together with the support to individuals needing support for those that do have “No Recourse to Public Funds” will be maintained with all the Access Team Social Workers and staff being trained to provide an integrated joined up approach across the team.

The Access duty screening and triage system will be retained to ensure that appropriate support and interventions are provided in a timely manner for all citizens of Dudley including those from Lye.

A definitive model has not yet been identified as this will require input from staff, as well as consultation with key stakeholders and partners across the Health, Social Care and Voluntary sector.

However, there is a need to meet statutory duties as to ensure that those who require access to services are screened and referred for assessment.

Although it is envisaged that the suggested savings can be achieved through repositioning of the service delivery model for the Access and Lye community team currently financial modelling is being undertaken to underpin this proposal.

The aim of is now to ensure that services are maintained and delivered whilst mitigating against any staff redundancies within Lye Community Project.

## **7. Who is it intended to affect or benefit (the target population)?**

Whilst remodelling proposals will look to reduce impact to local people, the realignment of this service will have some minimal impact on users accessing support via LCP. The proposals will refocus the way in which Dudley citizens from Lye are able to access information, advice and guidance via the single point of access and if appropriate referred to both internal and external support services with specialist advice as required.

All the Access Team (including those staff currently based at LCP) will be supported with appropriate training to ensure all staff are able to meet the requirements of those needing support to access services or information advice and guidance.

As the Impact of Brexit and the legislative process becomes clearer especially for people who have NRPF and the need to carry out Human Rights Assessments is clarified by Government. The Access Team will build on its existing knowledge base in this and its other core functions to ensure we meet the needs of all vulnerable groups that may be at risk.

Directorate savings strive to be achieved with minimal direct impact on current service users, their families or the existing frontline staff, the level of savings that are required suggests this is achievable.

Change is ongoing and the Access Team will endeavour to remain relevant. The successor programme is driving the change in our culture and the way we work. To ensure this is rooted in a strength-based approach and is firmly imbedded within our working practices and in the changes to our IT systems. The Access Team will embrace the opportunities for change in a positive way by working closely with professional colleagues via ICTs and other partners to constructively meet the challenges facing us all. In particular, the Access Team will work to help shape the future partnership working that is responsive to the needs of the population in the area.

## **8. What are the main potential equality issues to be looked at?**

If the service develops a model that embraces the single point of access introduced in line with successor this will meet both statutory support and prevention requirements aimed at those vulnerable groups both based within Lye and the wider Dudley borough. This is especially true for those who find it difficult to access information advice and guidance or support when they may have No recourse to public funds (NRPF) or other honour-based violence issues. There would be a need to consider an corporate approach for citizens to have access via other statutory providers or non-statutory providers to refer via the single point of access via the Access Team for screening and providing the information, advice and guidance with support.

the Access Team will ensure that all the citizens for Dudley regardless Age, Religion, Race, Gender, Disability and or Sexual orientation.

In particular the data concludes between 01/01/2019 and 31/12/2020 LCP supported the following:

<b>Ethnicity Description</b>	<b>No Of People</b>	<b>No Of Contacts</b>
Any Other Ethnic Group	9	10
Any Other Ethnic Group - Arab	1	1
Asian or Asian British - Indian	4	11
Asian or Asian British - Other Asian	6	9
Asian or Asian British - Pakistani	59	99
Black or Black British - African	8	12
Black or Black British - Caribbean	4	4
C - Not Provided by Referring Agency	1	1
Gypsy/Roma	2	2
Information not yet obtained	4	5
White - British	69	106
White - Other Cultural Background	232	269

<b>No Of People</b>	<b>No Of Contacts</b>
399	529

<b>Gender Description</b>	<b>No Of People</b>	<b>No Of Contacts</b>
Female	185	235
Male	214	294

Given the work under taken by LCP the repositioning of the process of accessing the screening process via the single point of access will enable all the Access Team to ensure that individuals regardless of Age, Religion, Race, Gender reassignment, Disability and or Sexual orientation will be supported with information, advice and guidance and supported with issues such as NRPF and Human Rights assessments. The Access Team will continue to offer onward referral for a range of advice and guidance across a number of domains, such as; housing, immigration, domestic violence advice, safeguarding, welfare and benefits and general health and wellbeing.

During the Covid Pandemic work has continued to be undertaken the Access Team continues to work across the voluntary sector, health, police, private sector, housing and the general public ensuring that services are accessed, and support maintained in these challenging times.

Our team members attend ICT meetings to enable a closer working relationship with our partners in the health services.

We support students and newly qualified workers.

We are undertaking initial CHC assessments and reviews which has resulted in savings to the department.

LCP was established in 1992 as a service with particular focus on improving access for the BME community. Since then, in response to the changes in makeup of the local population, it has evolved into a generic access, prevention and information point for the whole community.

With the successful implementation of LAS and clearly defined processes the work undertaken by LCP will be closely aligned to the Access Social Work Team and its duty screening with a view to providing high quality information, advice and guidance as well as on ward referrals internally or to appropriate preventative services.

BAME and vulnerable members of the community will be provided a high-quality service and data scrutinised via LAS providing a more detailed picture by Age, Religion, Race, Gender reassignment, Disability and or Sexual orientation.

The Access Social Work Team will look to ensure there is the right skills mix within the Team to meet the needs of individuals that could face a barrier to accessing services the appropriated support needed.

### **Evidence gathering**

#### **9. Provide details of all information about the policy, service or decision which will help with the assessment.**

##### **Equality monitoring data:**

**What monitoring data is collected for each of the protected characteristics?**

**Set out relevant details of this data.**

Adult Social Care has updated its systems and the LAS will be able to provide information by Age Group; whether the person is male or female, their ethnicity, Disability, and Religion.

LAS provides further information relating to the protected characteristics of people who are known to us.

PIMs holds staff details that would identify the associated protected characteristics

There will be records made of informal meetings, formal consultation meetings and individual formal consultation meetings These meetings will be held stakeholders and partners and staff. Any such documentation will be recorded and stored in an appropriate manner to reflect Data Protection requirements.

##### **Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

- Staff teams opportunity for group and individual discussion with notes and a frequently asked question sheet developed
- Human Resources
- Finance

- Unions
- Key Partners

The emphasis will be on MS Teams meeting due to COVID 19 restrictions.

The themes of the consultations planned aim to focus on:

- alternative models to be considered.
- Realignment of the staffing resource

At the point of implementation of the realignment of the service the policy associated with managing employees at risk of redeployment or redundancy will be followed, supported by Officers from Human Resources

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

In order to achieve changes the principles of person centred planning and person led ethos will be observed to ensure that the evolving service operates within the successor model and the single point of access.

**What evidence is missing? What will be done to collect it?**

Currently no evidence has been identified that is missing from the data provided. However there may be further information that may come to light as part of the consultation process but it is envisaged that this will have little or no impact in the delivery model and the SPA to a route into appropriate screening and onward referral to assessment or preventative services.

**Data analysis**

**10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?**

Key factors from the Dudley 2011 census that are taken into account include: 24.8% of the borough population is aged 60+ years or over, an increase greater than the England figure of 22.4%

People from ethnic groups other than White British has increased from 7.5% in 2001 to 11.5%, the national figure is 20.2%

People in employment who work 31 hours or more per week is 70.2%, however there is a corresponding increase in part time employment.

**11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.**

All protected characteristics	
Age	The remodelling of this service will continue to provide Age appropriate services to Adults ensuring their assessed needs are supported or referred to non-statutory alternative preventative service if appropriate.
Disability	The remodelling of the service will help to support people regardless of their disability and ensure that services are sensitive to meeting their needs and if appropriate referred to non-statutory preventative services.
Gender reassignment	There is no known negative or potential impact on this protected group in relation to proposed changes to the model of support
Marriage or civil partnership	There is no known negative or potential impact on this protected group in relation to proposed changes to the model of support
Pregnancy or maternity	There is no information relating to the sexual orientation of people who use the service.
Race	The remodelling of the service supports all people and makes no distinction regarding race. The majority of people known to the service describe their ethnic origin as White British or white other cultural background 301 with 81 identifying as Indian, Pakistani, Black or Asian origin.
Religion or belief	The remodelling of the service will help to support people regardless to their Religion or Belief and ensure that services are sensitive to meeting their needs and if appropriate referred to non-statutory preventative services.
Sex	The service is applied fairly and consistently irrespective of gender. Women are often defined by their caring roles however it is unrealistic to assume that all women are happy to undertake the caring role and will be supported to access the service provision needed or alternative non statutory provision as required.

Sexual Orientation	There is no information relating to the sexual orientation of people who use the service. The remodelling of the service will be applied fairly and consistently irrespective of sexual orientation.
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**Identifying adverse impacts**

**12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.**

Ensuring that service remodelling is reflective of support required for people from Black, Asian, Gypsy and Roma and other minority communities to reflect the changing demographic of the Borough.

The remodelling of the service needs to offer a range of support options, whether via internal provision or by helping to stimulate the external market place, that aims to further reduce impact on domiciliary care organisations and residential care.

If the revised service provision can offer flexed hours over seven days this should be a positive outcome for carers, whether they are of working age or not

**Alternatives/mitigating actions**

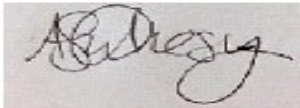

**13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.**

The Access Team has adopted new ways of working using the DMBC's agile working policy and in response to the COVID pandemic most but not all work is now undertaken remotely or with appropriately agreed levels of protection and in line with COVID guidance.

Once COVID restrictions are eased a evaluation will be undertaken to establish the best methods to continue to provide a person centred approach. The impact given the current clement will be reduced or removed.

Through financial modelling and listening to the outcome of the consultation sessions it is possible that solutions will be identified to minimise the impact on individuals i.e agreement on how to manage new referrals to the most appropriate preventative services.

The consultation process will be key to raising concerns about future service whilst ensuring the voice key stakeholders/partners within statutory/voluntary/community organisations have opportunity to influence any change in provision.

<b>Monitoring arrangements</b>	
<b>14. How will the equality impact of the policy/service be monitored in future?</b>	
<p>The use of highlight reporting to review progress against impact on any of the protected characteristics will be used with the equality impact assessment providing the focus for the regular review. The information is captured within the requirements of the management information system (LAS)</p>	
<b>Action planning</b>	
<b>15. Provide details of actions or improvements identified during the EIA.</b>	
<p>The prime requirement of current actions is to ensure a successful consultation process with key stakeholders. It is that a three month engagement proposed that a plan is identified, clear key messages identified, clarity of information to be sourced. MS Team will be used in line with current work practices due to Covid 19 restrictions in face to face discussions with minutes taken of any discussions.</p>	
<b>Decision making</b>	
<b>16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?</b>	
<p>The Cabinet on 11<sup>th</sup> February 2021 will make recommendations on the budget for 2021/22 and the medium term financial strategy to the meeting of the Council on 25<sup>th</sup> February 2021</p> <p>Tier five and four managers will be responsible for ensuring that Chief Officers are suitably briefed via the agreed protocol on progress, developments and issues that arise.</p> <p><i>Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).</i></p>	
<b>Signed assessment lead officer:</b>	<b>Date:</b>
	<b>01/02/2021</b>
<b>Chief officer/Head of Service:</b>	<b>Date:</b>
	<b>02/02/2021</b>



## Initial assessment or screening

Name of policy, service or decision: **Assessment and Independence**

Lead directorate: Adult Social Care

<b>1. Description – what is being assessed?</b>	
The withdrawal of the Moving and Handling Team	
<b>2. Lead officer on assessment:</b>	Joanne Vaughan
<b>3. Head of service:</b>	Joanne Vaughan
<b>4. Members of assessment team:</b>	Christine Outhwaite, Emma Matthews
<b>5. What are the main issues relating to each protected characteristic? Consider all three parts of the public sector equality duty.</b>	
<b>Protected characteristic</b>	<b>Issues</b>
<b>All protected characteristics</b>	N/A the services and support to the public will continue within the generic setting of therapy services. There will be a saving of 60K through the ending of 3 posts.
<b>Age</b>	
<b>Disability</b>	
<b>Gender reassignment</b>	
<b>Pregnancy or maternity</b>	
<b>Race</b>	
<b>Religion or belief</b>	
<b>Sex</b>	
<b>Sexual Orientation</b>	
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>	
No issues	
<b>6. Outline any information, such as from data collection, engagement feedback or complaints, which indicates a differential impact on particular protected groups.</b>	
No issues	

<b>Conclusions</b>			
<b>7. On the basis of sections 5 and 6, is an equality impact assessment required? Provide a justification for your answer.</b>			
The support and expertise of the moving and handling team will be developed within the wider offer of therapy services across Access and Prevention and Assessment and Independence services.			
<b>8. If no, list any actions identified. If yes, what priority do you assign to the EIA (high, medium, low) and why?</b>			
3 officers of the council will have their posts put at risk.			
<b>Signed assessment lead officer:</b>	<b>Joanne Vaughan</b>	<b>Date:</b>	19.1.21
<b>Signed head of service:</b>	<b>Joanne Vaughan</b>	<b>Date:</b>	19.1.21

## Equality impact assessment

**Name of policy, service or decision: Supported Living Package reviews in Mental Health**

**Lead directorate: Adult Social Care**

<p><b>1. Description – what is being assessed?</b> MGM</p> <p>This service will be subject to a robust review, this assessment will be informed by the outcome of this process</p>
<p><b>2. Lead officer on assessment: Stephen Lonsdale (Adult Safeguarding)</b></p>
<p><b>3. Head of service: Stephen Lonsdale (Adult Safeguarding)</b></p>
<p><b>4. Members of assessment team:</b></p> <p>To be agreed</p>
<p><b>5. Date assessment began:</b> ongoing and subject to review</p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p>Develop a robust recovery service</p>
<p><b>7. Who is it intended to affect or benefit (the target population)?</b></p> <p>Individuals who have secondary mental health difficulties and require specialist support to recover and achieve where possible independence</p>
<p><b>8. What are the main potential equality issues to be looked at?</b></p> <p>Reduction of stigmatisation associated with mental illness</p>
<p><b>Evidence gathering</b></p>
<p><b>9. Provide details of all information about the policy, service or decision which will help with the assessment.</b></p>

**As stated robust review of the current service and delivery model**

**Equality monitoring data:**

**What monitoring data is collected for each of the protected characteristics?**

**Set out relevant details of this data.**

To be agreed

**Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

Service user forums, discussions with stakeholders and professionals. Discussion with elected members. Information to be disseminated when appropriate

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

Accessing or developing a specialist recovery service

**What evidence is missing? What will be done to collect it?**

To be established/collated

### **Data analysis**

**10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?**

Narratives of service users, carers and family members. Consultation with professionals and commissioning colleagues, elected members and advocates

<b>11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.</b>	
All protected characteristics	This will be informed by the review
Age	
Disability	
Gender reassignment	
Marriage or civil partnership	
Pregnancy or maternity	
Race	
Religion or belief	
Sex	
Sexual Orientation	
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>	
As stated individuals who experience severe and enduring mental health illness	

<b>Identifying adverse impacts</b>	
<b>12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.</b>	
Not having an appropriate and proactive recovery service	
<b>Alternatives/mitigating actions</b>	
<b>13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.</b>	
Review to be completed	
<b>Monitoring arrangements</b>	
<b>14. How will the equality impact of the policy/service be monitored in future?</b>	
Quality and assurance visits, panel arrangements and service user consultation	
<b>Action planning</b>	
<b>15. Provide details of actions or improvements identified during the EIA.</b>	
Review to be completed	
<b>Decision making</b>	
<b>16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?</b>	
Reviewing team once agreed	
<i>Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).</i>	
<b>Signed assessment lead officer: Stephen Lonsdale (Adult Safeguarding)</b>	<b>Date: 18/02/2021</b>
<b>Chief officer/head of service: Stephen Lonsdale (Adult Safeguarding)</b>	<b>Date: 18/02/2021</b>

## Initial assessment or screening

**Name of policy, service or decision:** Money Management Team – redirection of complex and high value cases to a Panel Deputy

**Lead directorate:** Adult Social Care

<p><b>1. Description – what is being assessed?</b></p> <p>The introduction of the ability/option to use Panel deputies to support people who lack mental capacity, whose case meets certain criteria, by helping them make decisions about their finances in the same way as the councils' Management of Finances Team.</p>	
<p><b>2. Lead officer on assessment:</b></p> <p>Mark Painting</p>	
<p><b>3. Head of service:</b></p> <p>Marie Spittle</p>	
<p><b>4. Members of assessment team:</b></p>	
<p><b>5. What are the main issues relating to each protected characteristic?</b></p> <p><b>Consider all three parts of the public sector equality duty:</b></p> <ul style="list-style-type: none"> <li>• eliminating discrimination, harassment and victimisation,</li> <li>• advancing equality of opportunity, and</li> <li>• fostering good relations</li> </ul>	
Protected characteristic	Issues
All protected characteristics	<p>Due to both increasing complexity of cases and demands of The Office of the Public Guardian (OPG), ASC Finance Management of Finances Team intend to recommend the use of a Court Appointed Panel Deputy for cases requiring full Deputyship support that meet certain stringent criteria, such as:</p> <ul style="list-style-type: none"> <li>- High value (e.g. assets over £85k and/or owns a property)</li> <li>- In receipt of NHS CHC funding</li> <li>- Family conflict</li> <li>- Safeguarding issues</li> <li>- Complexity</li> <li>- Litigation/legal issues</li> <li>- Overseas assets/travel/residence</li> <li>- Property issues/landlord</li> </ul>

	<p>These cases are often beyond the capability and expertise of both the Management of Finance Team and the Councils own Legal Team.</p> <p>Subject to Court of Protection approval, this will involve transfer of some existing cases and referral of some new cases referred to the Client Management of Finances Team.</p> <p>JMW Solcs 1, Byrom Place, Manchester, M3 3HG offer full support in the redirection of any cases. They also offer onsite support and training to assist Council Teams with their ongoing cases (at no cost to the authority).</p> <p>JMW Solcs work with The Money Carer Foundation, who look to take over as Appointee within 6 weeks, thus ensuring bills can be paid and financial support is provided to the person pending JMW becoming full deputy.</p> <p>A panel deputy charges more for their service than the council is allowed to. However, it is only those cases that meet stringent criteria that would be referred. These cases would benefit from greater legal support, the ability to deal with the complexities of their case and appropriate investment of any large sums of capital held.</p> <p>The benefits of using Panel Deputies are simply that every client will have someone to act appropriately for their property and affairs, regardless of the complexities of their circumstances. Referral of cases to JMW Solcs will only be considered where it is deemed to be in the persons best interests.</p> <p>There is no cost to the Council. There is no contract or procurement of service with JMW Solcs, merely a recommendation to the Court of Protection for JMW Solcs to take on identified cases. The Court ultimately decides who should act as Court Deputy.</p>
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**6. Consultation**

Regional Local Authorities that refer cases for panel deputy include Birmingham, Solihull, Wolverhampton, Worcestershire, Shropshire and Hereford. There are various sets of criteria used by these Authorities but in the main these centre on clients with property, high value assets and/or involve issues beyond the expertise of the teams.



All individuals (and relevant family and involved or interested individuals) whose case meets the stringent criteria for re-direction or referral are required to be appropriately notified in writing of the intention and will be given sufficient time to submit any objections to the Court of Protection.

Cases will only be referred for JMW involvement where it is deemed in the best interests of the person who lacks capacity.

## Conclusions

### 7. On the basis of sections 5 and 6, is an equality impact assessment required? Provide a justification for your answer.

**No**, cases to be recommended for involvement of the Panel Deputy are determined only by a strict set of criteria. Each person concerned is individually deemed to be consulted via appropriate written notification and it is the Court of Protection who ultimately decide who should act as Court Deputy.

In the recent case of Cumbria County Council v A [2020] EWCOP 38 there had been a suggestion before the court that it could examine whether the approach taken by Cumbria County Council in identifying groups of people where it no longer wished to act as deputy complied with s.149 Equality Act 2010 (i.e. the Public Sector Equality Duty). However, Hayden J made clear that the Court of Protection could not undertake such a review.

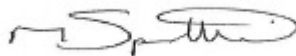
### 8. (a) If no, list any actions identified:

#### (b) If yes, what priority do you assign to the EIA (high, medium, low) and why?

All Deputyship cases are monitored by the Office of the Public Guardianship and any Public Deputy must meet certain standards.

JMW Solcs will provide regular reports on performance to ASC Finance Management of Finances Team on all cases that are referred to them.

Signed Head of Service:



Date: 02/02/2021

## Initial assessment or screening

*(to be used to decide whether or not an equality impact assessment is needed)*

**Name of policy, service or decision:** Reduction in Mental Health Provision

**Lead directorate:** People – Integrated Commissioning

<p><b>1. Description – what is being assessed?</b></p> <p>Reduction of contract level for low-level floating mental health support provision to achieve savings of £80,000 in 2020/21 and £160,000 in 2021/22 achieving a total saving of £240,000 in 22/2023</p>	
<p><b>2. Lead officer on assessment:</b> Julie Cox</p>	
<p><b>3. Head of service:</b> Inderjit Lahel</p>	
<p><b>4. Members of assessment team:</b></p> <p>Julie Cox</p> <p>Inderjit Lahel</p> <p>Julia Simmonds</p>	
<p><b>5. What are the main issues relating to each protected characteristic?</b>  <b>Consider all three parts of the public sector equality duty.</b></p>	
Protected characteristic	Issues
All protected characteristics	<p>Current service provision strives to be accessible to everyone who meets the eligibility criteria, including people from protected groups. The proposed changes to delivery/commissioning model is not expected to have a disproportionate impact on any group.</p> <p>The proposed changes to contract value may see a reduction of the physical capacity available to clients with Mental Health in the Borough.</p> <p>However, smarter working and streamlined approaches linked to parallel programmes (Voluntary Community Provider model / Voluntary Sector Innovation Fund) will see provision for support services for clients with Mental Health increase in the Borough although targeted at more innovative and community-based approaches. Support offered throughout covid has shown a stronger voluntary sector offer. The VCP model will be shaped</p>

	and steered co-productively with providers, partners and communities to ensure the model captures and meets emerging demand and responds with strength-based/ asset-based local offer.
Age	There will be no targeted reductions of capacity within the scope of the project against Age.
Disability	The project will see a reduction of funding for people with a mental health in the Borough as part of this contract
Gender reassignment	There will be no targeted reductions of capacity within the scope of the project against Gender reassignment.
Pregnancy or maternity	There will be no targeted reductions of capacity within the scope of the project against maternity issues
Race	There will be no targeted reductions of capacity within the scope of the project against any race.
Religion or belief	There will be no targeted reductions of capacity within the scope of the project against religion or beliefs
Sex	There will be no targeted reductions of capacity within the scope of the project against the sex of clients
Sexual Orientation	There will be no targeted reductions of capacity within the scope of the project against sexual orientation
<p><b>6. Outline any information, such as from data collection, engagement feedback or complaints, which indicates a differential impact on particular protected groups.</b></p> <p>Further user and carer consultation to identify key target arrangements for funding envelope is required. At this stage and from the information available the proposed changes to delivery/commissioning model is not expected to have a disproportionate impact on any group.</p>	
<p><b>Conclusions</b></p>	
<p><b>7. On the basis of sections 5 and 6, is an equality impact assessment required? Provide a justification for your answer.</b></p> <p>No. Although the proposed changes to contract value may see a reduction of the physical capacity available to clients with Mental Health in the Borough, the process of setting the original budget for the service was relatively arbitrary with no clear rationale or analysis assigned to this.</p>	

As at the start of May 2018 the service has scope to increase activity with capacity available. With the new referral routes / eligibility and service model this was expected and part of the project outline. It is anticipated that smarter working and streamlined approaches linked to parallel programmes (Voluntary community Provider models / Voluntary Sector Innovation Fund) will see provision for support services for clients with Mental Health increase in the Borough although targeted at more innovative and community based approaches.

**8. If no, list any actions identified. If yes, what priority do you assign to the EIA (high, medium, low) and why?**

User and carer consultation to identify key target arrangements for funding envelope.

On-going monitoring will be present throughout the life of the project/contract and partnership. This will include monitoring any adverse impact and will address any issues that arise to remove or reduce any adverse impact.

The provider will be expected to routinely review policies, procedures and practices, to make sure they do not discriminate against any person from protected groups and to report on this at monitoring reviews.

Updates through Portfolio Holders and Cabinet Members / Leader where needed to ensure communication and progress are detailed.

**Signed assessment lead officer:** Julie Cox

Date: 26 / 1/ 2021

**Signed head of service:** Inderjit Lahel

Date:

## Initial assessment or screening

**Name of policy, service or decision: Restructure of Integrated Commissioning HUB (Phase 3)**

**Lead directorate: Adult Social Care – Integrated Commissioning**

<p>1. Description – what is being assessed?</p> <p>The impact of the proposed restructure of the Integrated Commissioning HUB on staff / business and end users (including providers).</p>	
<p>2. Lead officer on assessment: Inderjit Lahel</p>	
<p>3. Head of service: Inderjit Lahel</p>	
<p>4. Members of assessment team:</p> <p>Inderjit Lahel</p>	
<p>5. What are the main issues relating to each protected characteristic? Consider all three parts of the public sector equality duty:</p> <ul style="list-style-type: none"> <li>• eliminating discrimination, harassment and victimisation,</li> <li>• advancing equality of opportunity, and</li> <li>• fostering good relations</li> </ul>	
<p><b>Protected characteristic</b></p>	<p><b>Issues</b></p>
<p>All protected characteristics</p>	<p>The restructure proposes: -</p> <ul style="list-style-type: none"> <li>- Opportunities for staff who may previously have little manoeuvre for progression in the ICH</li> <li>- Opportunities for staff at more senior levels to acquire service leads roles</li> <li>- A stronger sense of integration across the ICH with Business Support being key to supporting change</li> <li>- New functions within ICH to bring SEND and Programme Management Capacity within the team</li> </ul>
<p>Age</p>	<p>There are a range of people who could be affected by the proposed restructure which has no discrimination to age.</p> <p>Positively the proposal has 4 apprentices assigned to support the function of which one will be a Care Leaver. It is anticipated</p>

	<p>that apprentices in the main will be aged 18 – 24 yrs but this can be a wider age range.</p> <p>The restructure will ensure a more integrated approach to commissioning is in place with coverage across all 3 Directorates / COVID impact / strategic delivery of significant projects.</p>
Disability	<p>There is one person classed as disabled who may be affected by the restructure (mobility).</p> <p>There are a select number of people who will be affected by the restructure who have a disability but the restructure does not discriminate / target any particular area.</p>
Gender reassignment	<p>There is no known negative or potential impact on this protected group from the proposed changes in the service.</p>
Pregnancy or maternity	<p>Currently there is, at the time of writing and to the authors knowledge, no one pregnant within the team. If through consultation it became known that a member of staff who became pregnant or on maternity leave due attention will be given to ensure they are not discriminated against unfavourably</p>
Race	<p>The realignment of the service supports all people and makes no distinction regarding race.</p> <p>The majority of the workforce (ICH) is White British.</p>
Religion or belief	<p>The realignment of the service makes no distinction relating to Religion or Belief.</p>
Sex	<p>The realignment of the service will be applied fairly and consistently irrespective of gender.</p> <p>The majority of officers within the ICH are female.</p>

Sexual Orientation	There is no information relating to the sexual orientation of staff. This realignment of service will be applied fairly and consistently irrespective of sexual orientation.
<p>6. Outline any information, such as from monitoring, consultation feedback or complaints, which indicates a differential impact on particular protected groups.</p> <p><b><u>Business Support</u></b></p> <p>All employees in this area are female and there are a number of part time posts.</p>	
<b>Conclusions</b>	
<p>7. On the basis of sections 5 and 6, is an equality impact assessment required? Provide a justification for your answer.</p> <p>It is not believed that an EIA is required as the proposal does not adversely seek to discriminate against those with protected characteristics.</p> <p>The service will positively impact on end users and carers through the smarter commissioning of services.</p>	
<p>8. (a) If no, list any actions identified:  (b) If yes, what priority do you assign to the EIA (high, medium, low) and why?</p>	
Signed assessment lead officer:	Date:
Signed head of service: Inderjit Lahel	Date: 31/1/2021

## Equality impact assessment

**Name of policy, service or decision: Restructure of Mental Health Team and efficiencies from exit of Section 75 agreement**

**Lead directorate: Adult Social Care**

<p><b>1. Description – what is being assessed?</b></p> <p>Social Care Mental Health Services</p>
<p><b>2. Lead officer on assessment: Stephen Lonsdale</b></p>
<p><b>3. Head of service: Stephen Lonsdale</b></p>
<p><b>4. Members of assessment team:</b></p> <p>Stephen Lonsdale, Helen Kane, Michelle Thompson and Angela Reed</p>
<p><b>5. Date assessment began: 01/01/2021</b></p>
<p><b>Background</b></p> <p>Mental Health Social workers have returned to the Local Authority as the Section 75 agreement has been ended.</p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p>This social care mental health service will strictly adhere to the requirements of the Care Act 2014. As such, the service aims to support people who experience mental health illness from primary to secondary mental health levels. There will be a clear focus on prevention, support and recovery. Working in partnership with 3<sup>rd</sup> sector organisations will facilitate community cohesion, by connecting communities.</p>
<p><b>7. Who is it intended to affect or benefit (the target population)?</b></p> <p>Individuals who experience mental illness and have social care needs across the life course</p>
<p><b>8. What are the main potential equality issues to be looked at?</b></p> <p>Understanding the community and its needs and engaging with hard to reach or hidden individuals and or groups. Staff will be required to be culturally aware and sensitive.</p>



## **Evidence gathering**

**9. Provide details of all information about the policy, service or decision which will help with the assessment.**

**Audits on interventions delivered, timescales and types will be vital**

**Equality monitoring data:**

**What monitoring data is collected for each of the protected characteristics?**

**Set out relevant details of this data.**

All characteristics required by equality and diversity monitoring and by legislation for example protected characteristics

**Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

Service users forums, digital platforms and learning from compliments and complaints

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

Staff need excellent knowledge of culturally sensitive approaches

**What evidence is missing? What will be done to collect it?**

Audit to be completed

## **Data analysis**

**10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?**

This has not been undertaken at this juncture due to the close proximity of mental health social workers returning to the local authority, this will need to be arranged

**11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.**

All protected characteristics	As stated not known at this juncture
Age	
Disability	
Gender reassignment	
Marriage or civil partnership	
Pregnancy or maternity	
Race	
Religion or belief	
Sex	
Sexual Orientation	
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>	
Work required to fully understand the community	
<b>Identifying adverse impacts</b>	
<b>12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.</b>	

Not known at this juncture but may mean that individuals and or groups are not receiving the interventions required

**Alternatives/mitigating actions**

**13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.**

Appropriate intervention will be identified and delivered

**Monitoring arrangements**

**14. How will the equality impact of the policy/service be monitored in future?**

Audit process to be developed and utilised

**Action planning**

**15. Provide details of actions or improvements identified during the EIA.**

Identify the needs of the community  
Arrange for governance to be implemented  
Train staff  
Engage and consult with the community  
Develop policies and guidance as required

**Decision making**

**16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?**

ASLT, DIRECTOR, CABINET MEMBER,

*Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).*

**Signed assessment lead officer: Stephen Lonsdale**

**Date: 18/02/21**

**Chief officer/head of service: Stephen Lonsdale (Adult Safeguarding)**

**Date: 18/02/2021**

## Equality impact assessment

**Name of policy, service or decision:** Streamline Invoice and Processing Team  
**Lead directorate:** Adult Social Care

<p><b>1. Description – what is being assessed?</b></p> <p>Streamline Invoice and Processing Team</p>
<p><b>2. Lead officer on assessment:</b> Joanne Vaughan</p>
<p><b>3. Head of service:</b> Joanne Vaughan</p>
<p><b>4. Members of assessment team:</b>  Mark Kedwards  Emma Matthews</p>
<p><b>5. Date assessment began:</b> 19.1.21</p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p>To streamline the payment of care invoices for home care and placements for the public will continue within the enhancements made to the IT systems. There will be a saving of £60K through the ending of 3 posts.</p>
<p><b>7. Who is it intended to affect or benefit (the target population)?</b></p> <p>Financial saving.</p>
<p><b>8. What are the main potential equality issues to be looked at?</b></p> <p>None as the service will continue with no impact.</p>
<p><b>Evidence gathering</b></p>
<p><b>9. Provide details of all information about the policy, service or decision which will help with the assessment.</b></p> <p><b>Equality monitoring data:</b>  <b>What monitoring data is collected for each of the protected characteristics?</b>  <b>Set out relevant details of this data.</b></p> <p>N/A</p>

**Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

Users of the IT system have been consulted in procurement and implementation.

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

N/A

**What evidence is missing? What will be done to collect it?**

None

**Data analysis**

**10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?**

N/A

**11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.**

All protected characteristics	The payment of care invoices for home care and placements for the public will continue within the enhancements made to the IT systems. There will be a saving of 60K through the ending of 3 posts.
Age	None
Disability	None
Gender reassignment	None
Marriage or civil partnership	None
Pregnancy or maternity	None
Race	None
Religion or belief	None
Sex	None

Sexual Orientation	None
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>	
No	
<b>Identifying adverse impacts</b>	
<b>12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.</b>	
None	
<b>Alternatives/mitigating actions</b>	
<b>13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.</b>	
N/A	
<b>Monitoring arrangements</b>	
<b>14. How will the equality impact of the policy/service be monitored in future?</b>	
It will be reviewed at the end of the implementation.	
<b>Action planning</b>	
<b>15. Provide details of actions or improvements identified during the EIA.</b>	
N/A	
<b>Decision making</b>	
<b>16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?</b>	
Matt Bowsher	
<i>Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).</i>	
<b>Signed assessment lead officer: Joanne Vaughan</b>	<b>Date: 19/1/21</b>
<b>Chief officer/head of service: Joanne Vaughan</b>	<b>Date: 19/1/21</b>

## Initial assessment or screening

**Name of policy, service or decision: Assessment and Independence - reduction of 50% of the budget for hospital avoidance placements**

**Lead directorate:** Adult Social Care

<b>1. Description – what is being assessed?</b>	
Reduction (50%) of Hospital Avoidance beds. Saving of 209K	
<b>2. Lead officer on assessment:</b>	Joanne Vaughan
<b>3. Head of service:</b>	Joanne Vaughan
<b>4. Members of assessment team:</b>	Wendy Malpass, Emma Matthews
<b>5. What are the main issues relating to each protected characteristic? Consider all three parts of the public sector equality duty.</b>	
<b>Protected characteristic</b>	<b>Issues</b>
<b>All protected characteristics</b>	<p>N/A</p> <ul style="list-style-type: none"> <li>• The public will continue to receive support and input from urgent care services to assist unnecessary admissions to hospital.</li> <li>• Offer of support will evolve to increase the options of support at home within their own home setting and for the person to be receiving wrap around services.</li> <li>• Fewer people will experience the disruption of a need to have to transfer to a care setting to receive the wrap around support.</li> <li>• There will be an availability of Diversion beds for people requiring more complex support.</li> </ul>
<b>Age</b>	
<b>Disability</b>	
<b>Gender reassignment</b>	
<b>Pregnancy or maternity</b>	
<b>Race</b>	
<b>Religion or belief</b>	
<b>Sex</b>	
<b>Sexual Orientation</b>	

<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>			
<b>6. Outline any information, such as from data collection, engagement feedback or complaints, which indicates a differential impact on particular protected groups.</b>			
<b>Conclusions</b>			
<b>7. On the basis of sections 5 and 6, is an equality impact assessment required? Provide a justification for your answer.</b>			
<ul style="list-style-type: none"> <li>• The public will continue to receive support and input from urgent care services to assist unnecessary admissions to hospital.</li> <li>• Offer of support will evolve to increase the options of support at home within their own home setting and for the person to be receiving wrap around services.</li> <li>• Fewer people will experience the disruption of a need to have to transfer to a care setting to receive the wrap around support.</li> <li>• There will be an availability of Diversion beds for people requiring more complex support.</li> </ul>			
<b>8. If no, list any actions identified. If yes, what priority do you assign to the EIA (high, medium, low) and why?</b>			
<b>Signed assessment lead officer:</b>	<b>Joanne Vaughan</b>	<b>Date:</b>	19.1.21
<b>Signed head of service:</b>	<b>Joanne Vaughan</b>	<b>Date:</b>	19.1.21



## Initial assessment or screening

Name of policy, service or decision: **Assessment and Independence - Reduce the Residential Care Placement for older people budget**

Lead directorate: Adult Social Care

<b>1. Description – what is being assessed?</b>	
Reduction of Residential Care Placements 120K	
<b>2. Lead officer on assessment:</b>	Joanne Vaughan
<b>3. Head of service:</b>	Joanne Vaughan
<b>4. Members of assessment team:</b>	Wendy Malpass, Emma Matthews
<b>5. What are the main issues relating to each protected characteristic? Consider all three parts of the public sector equality duty.</b>	
<b>Protected characteristic</b>	<b>Issues</b>
<b>All protected characteristics</b>	<p>N/A</p> <ul style="list-style-type: none"> <li>• The public will continue to receive support and input from residential care services to assist people with care and support needs</li> <li>• Offer of support will evolve to increase the options of support at home within their own home setting and for the person to be receiving wrap around services.</li> <li>• Fewer people will experience the disruption of a need to have to transfer to a care setting to receive the wrap around support.</li> <li>• There will be an availability of residential care beds for people requiring more complex support.</li> <li>• National good practise guidelines for Health and Social care providers of care for older people encourages people with care and support needs to have input within their own home setting wherever possible to enable the person to remain in control of their lives as much as possible.</li> <li>• Virement of budget from residential care placements to home care support will enable more people to be supported at home.</li> </ul>
<b>Age</b>	
<b>Disability</b>	
<b>Gender reassignment</b>	
<b>Pregnancy or maternity</b>	
<b>Race</b>	
<b>Religion or belief</b>	

<b>Sex</b>			
<b>Sexual Orientation</b>			
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>			
<b>6. Outline any information, such as from data collection, engagement feedback or complaints, which indicates a differential impact on particular protected groups.</b>			
<b>Conclusions</b>			
<b>7. On the basis of sections 5 and 6, is an equality impact assessment required? Provide a justification for your answer.</b>			
<ul style="list-style-type: none"> <li>• The public will continue to receive support and input from residential care services to assist people with care and support needs</li> <li>• Offer of support will evolve to increase the options of support at home within their own home setting and for the person to be receiving wrap around services.</li> <li>• Fewer people will experience the disruption of a need to have to transfer to a care setting to receive the wrap around support.</li> <li>• There will be an availability of residential care beds for people requiring more complex support.</li> <li>• National good practise guidelines for Health and Social care providers of care for older people encourages people with care and support needs to have input within their own home setting wherever possible to enable the person to remain in control of their lives as much as possible.</li> <li>• Virement of budget from residential care placements to home care support will enable more people to be supported at home</li> </ul>			
<b>8. If no, list any actions identified. If yes, what priority do you assign to the EIA (high, medium, low) and why?</b>			
<b>Signed assessment lead officer:</b>	<b>Joanne Vaughan</b>	<b>Date:</b>	19.1.21
<b>Signed head of service:</b>	<b>Joanne Vaughan</b>	<b>Date:</b>	19.1.21

## Equality impact assessment

**Name of policy, service or decision: Residential Fraud**

**Lead directorate: Adult Social Care**

<b>1. Description – what is being assessed?</b> Residential Fraud – deliberate deprivation of assets
<b>2. Lead officer on assessment: Stephen Lonsdale</b>
<b>3. Head of service:</b> Stephen Lonsdale – Head of Adult Safeguarding & Marie Spittle Head of Access and Prevention
<b>4. Members of assessment team:</b> Martin Granger – Corporate Fraud Manager Gayna Phelps – Assistant Team, Manager Welfare Benefits Office Mark Painting – Team Manager, Finance Sarah McDonald – Senior Principle Accountant Chris King – Public Protection Manager Julie Austin – Business Change Team
<b>5. Date assessment began:</b> May 2019
<b>Background</b>
<b>6. What are the aims and objectives or purposes of the policy or service?</b> The aims of the service will not change.  Deprivation of assets is where a person intentionally deprives themselves of or decreases their assets to reduce the amount they are charged for their care. A person(s) cannot deliberately look to avoid care fees by gifting their property or putting a house in trust to avoid care home fees.  There is no time limit to deprivation of assets, meaning any past disposal of assets could be considered. However, the local authority must provide evidence of motive and consider if the amount made any substantial difference to the capital limit.  A new robust Financial Assessment was created and put in place to ensure that no fraud or deprivation has taken place.
<b>7. Who is it intended to affect or benefit (the target population)?</b> This will affect the decisions taken by the individuals involved and outcomes could benefit the said individuals as well as the local authority.
<b>8. What are the main potential equality issues to be looked at?</b> That the individual people involved which may include their family and friends around them are not discriminated by in any way and any transfer of funds are dealt with seamlessly, in an efficient and harmoniously manner. Ensuring that at

the same time as improving the services DMBC teams involved are meeting its legal duties under the Equality Act 2010 public sector equality duty (PSED).

### **Evidence gathering**

#### **9. Provide details of all information about the policy, service or decision which will help with the assessment.**

Cases are identified by the Adult Social Care Finance team to where possible deprivation may have taken place. These are sent to Panel for further scrutiny.

Panel advises on which cases are to undergo a further review.

Each individual identified from Panel is contacted directly. These cases are reviewed accordingly using the new process and Financial Assessment.

#### **Equality monitoring data:**

##### **What monitoring data is collected for each of the protected characteristics?**

##### **Set out relevant details of this data.**

A comparison of what the equality impact is now against what it is likely to be after a change is made in using the new Financial Assessment and review process has been considered.

Work has been carried out on existing policies to understand the impact these are having and has helped identify any improvements or retargeting of resources.

#### **Engagement and customer feedback:**

##### **What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

A wide range of staff from the teams responsible for service with equality expertise, and others were involved to offer an independent view.

The staff involved have been carrying out effective engagement with the people reviewed who might use or who are affected by a service, or decision, looking at the equality implications involved.

##### **What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

None

##### **What evidence is missing? What will be done to collect it?**

None

### **Data analysis**

#### **10. What does the information tell you? What patterns or trends are there?**

##### **What comparative data is there - how does your data compare with**

**background data e.g. from the Census, national data or research, or other authorities?**

Evidence from monitoring, engagement and feedback shows there is no significant impact on any protected groups as to the individuals involved and will not be affected.

**11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.**

Evidence from monitoring, engagement and feedback shows there is no significant impact on any protected groups as to the individuals involved their care and support needs will not be affected.

All protected characteristics	The current service provided by Dudley Adult Social Care does not discriminate based on any protected characteristic and the project will not change that. This project is aimed at increasing the quality of life for individuals. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Age	The current service provided by Dudley Adult Social Care does not discriminate based on age and the project will not change that. This project is aimed at increasing the quality of life for individuals. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Disability	The current service provided by Dudley Adult Social Care does not discriminate based on disability and the project will not change that. This project is aimed at increasing the quality of life for individuals. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Gender reassignment	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that. This project is aimed at increasing the quality of life for individuals. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Marriage or civil partnership	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that. This project is aimed at increasing the quality of life for individuals. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Pregnancy or maternity	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that. This project is aimed at increasing the quality of life for

	individuals. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Race	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that. This project is aimed at increasing the quality of life for individuals. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Religion or belief	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that. This project is aimed at increasing the quality of life for individuals. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Sex	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that. This project is aimed at increasing the quality of life for individuals. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.
Sexual Orientation	The current service provided by Dudley Adult Social Care does not discriminate based on gender and the project will not change that. This project is aimed at increasing the quality of life for individuals. Quality of Care will remain the same if not increased as a more efficient way of working will be implemented.

**Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?**

No

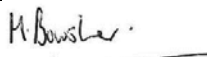
**Identifying adverse impacts**

**12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.**

There are no main potential adverse impacts on particular protected characteristics.

The council will look at the person's income and capital to decide how much they have to pay towards their care costs at home or in a care home. Having all the correct information of assets will enable the assessor to advise on the best possible care that is available to that person.

Deprivation of assets could potentially lead to someone who needs care and support to be told they do not qualify for Social Services funding, even if they no longer have enough money to pay for their care.

<p>If the local authority believe that the gift or transfer was made to protect family inheritance, refusal to pay for any of the care costs can happen and action will be taken to recover the asset from the person who received the gift.</p>	
<p><b>Alternatives/mitigating actions</b></p>	
<p><b>13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.</b></p> <p>Complete involvement with the individual and their support network. Empowering people to be the centre of their own decision making for care and health choices.</p> <p>An adverse impact could possibly be unavoidable if it is proved a person has deliberately deprived themselves of assets.</p>	
<p><b>Monitoring arrangements</b></p>	
<p><b>14. How will the equality impact of the policy/service be monitored in future?</b></p> <p>Continue to identify trends or patterns such as high/low take-up by particular groups compared e.g. to the background population, other groups, and/or to previous years' data.</p> <p>Continue to carry out equality monitoring of the service to understand its ongoing impact on different groups.</p>	
<p><b>Action planning</b></p>	
<p><b>15. Provide details of actions or improvements identified during the EIA.</b></p> <p>A systematic process was put in place to identify, predict and evaluate the environmental effects of proposed actions in order to aid decision making regarding the significant environmental consequences of projects, developments and programmes.</p>	
<p><b>Decision making</b></p>	
<p><b>16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?</b></p> <p>Matt Bowsher</p> <p><i>Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).</i></p>	
<p><b>Signed assessment lead officer:</b></p>	<p><b>Date:</b></p>
<p><del>Chief officer/head of service:</del> </p> <p><b>Director of Adult Social Care: Matt Bowsher</b></p>	<p><b>Date: 29/01/2021</b></p>

Version: February 2019

## Initial assessment or screening

*(to be used to decide whether or not an equality impact assessment is needed)*

### Name of policy, service or decision:

Reduction of £50k in the financial contribution to the Regional Adoption Agency A@H during 2021/22

### Lead directorate:

Children's Social Care

<p><b>1. Description – what is being assessed?</b>          To adjust the financial contribution made by Dudley MBC to more appropriately reflect the service required of Adoption@Heart.</p> <p>A@H became operational on 1<sup>st</sup> April 2019; it brings together the core adoption services across 4 separate children's services (Dudley, Walsall, Wolverhampton and Sandwell). It is hosted by Wolverhampton City Council.</p> <p>The initial financial planning in preparation for go live of the agency (2019/20) included support for a number of children who had been waiting for their adoptive families. The arrangement for these children has now been progressed (A@H service report December 2020), which allows for this adjustment.</p>	
<p><b>2. Lead officer on assessment:</b> Andrea Stone, Director, Children's Social Care</p>	
<p><b>3. Head of service:</b> Karen Graham, Children and Families</p>	
<p><b>4. Members of assessment team:</b>          Mark Tobin, Head of Service, Adoption@Heart          Jane Davidson, Senior Principal Accountant DMBC</p>	
<p><b>5. What are the main issues relating to each protected characteristic?</b>  <b>Consider all three parts of the public sector equality duty.</b>  <i>Eliminating unlawful discrimination; advancing equality; fostering good relations</i></p>	
Protected characteristic	Issues
All protected characteristics	There is no impact on protected characteristics in the adjustment of the financial commitment to A@H; the agency is specifically targeted to progress adoption applications by families and to ensure good matches for our children.



	<p>The protected characteristics are appropriately governed by regulation and guidance for the Regional Adoption Agency as they recruit adopters and oversee family finding for our children</p> <p>The National Adoption and Special Guardianship Leadership Board has set out a National Scorecard; this requires submission from each local authority and through the Regional Adoption Agencies and includes key protected characteristics:  Gender  Disability  Age  Ethnicity  as well as particularly significant features when considering adoption for children including whether they are part of sibling group</p>
Age	Children over the age of 5 are identified as 'harder to place'; of the children from Dudley adopted in 2020, 28% were older than 5 yrs ( <i>MIT info as at 26.1.21</i> ) which gives confidence to our ability to continue to place older children
Disability	
Gender reassignment	
Pregnancy or maternity	It would not be usual for pregnant women to be assessed as adopters during pregnancy
Race	
Religion or belief	
Sex	
Sexual Orientation	
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>	

This adjustment of financial commitment will not impact the recruitment arrangements of A@H, who are specifically charged with finding a good range of adopters across the local geography of the four authorities.

**6. Outline any information, such as from data collection, engagement feedback or complaints, which indicates a differential impact on particular protected groups.**

It should be noted that during the course of the COVID pandemic, the Family Court has not heard Adoption Applications for much of the year. This has been part of the Family Justice capacity arrangements to ensure Court availability in changed circumstances, and will have a significant impact (reduction) on the number of adoption orders made in 2020.

**Conclusions**

**7. On the basis of sections 5 and 6, is an equality impact assessment required? Provide a justification for your answer.**

There is no identified requirement for a full equality impact assessment to be undertaken. The reduction in financial commitment to A@H reflects the clearer analysis available since the go live of this agency in April 2019.

We have worked closely with our partners in Adoption @ Heart to identify this appropriate adjustment in financial contribution

**8. If no, list any actions identified. If yes, what priority do you assign to the EIA (high, medium, low) and why?**

There are no further actions required

**Signed assessment lead officer:**

Date:

**Signed head of service:** Karen Graham

Date: 31<sup>st</sup> January 2021

**Signed Acting Director of Children's Services:**  
**Helen Ellis**

1<sup>st</sup> February 2021



## Equality impact assessment

**Name of policy, service or decision:**

Identification of a 50k saving from an ongoing vacancy review that is taking place within Childrens Social Care.

**Lead directorate:**

Childrens Services

<p><b>1. Description – what is being assessed?</b></p> <p>Through a review of current vacancies we are seeking to identify a 50k saving from the current staffing budget within Childrens Social Care. The vacancy review is currently underway and whilst we have identified a proportion of the 50k saving we are yet to realise the full saving required.</p>
<p><b>2. Lead officer on assessment:</b> Andrea Stone</p>
<p><b>3. Head of service:</b> Karen Graham</p>
<p><b>4. Members of assessment team:</b></p> <p>Children’s Services Directorate Management Team including representatives from HR, Finance and legal</p>
<p><b>5. Date assessment began:</b> 29<sup>th</sup> January 2021</p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p>Childrens Social Care has a number of vacancies that sit across the service area. There are a number of part time and full time positions in this area. We have already merged two team manager vacancies into one post thus creating a large proportion of the 50k saving through the merge. The remaining savings will be made through consolidation of part time/full time positions once the vacancy review is complete. We are confident that the 50k saving will be met whilst having no impact on service delivery.</p>
<p><b>7. Who is it intended to affect or benefit (the target population)?</b></p> <p>Through the merging of roles there will be little impact on how we deliver our services. The saving of 50k is achievable within the current climate but due to the vacancy review taking longer than anticipated we have not identified the full amount as yet but do not foresee any negative or detrimental impact to staff, service users or partners in making this saving.</p>

**8. What are the main potential equality issues to be looked at?**

In undertaking the vacancy review the focus is on vacancies rather than filled positions, therefore there will be no impact on the current workforce. Demand will also be taken into account when identifying these savings. They will not impact adversely on service users.

**Evidence gathering**

**9. Provide details of all information about the policy, service or decision which will help with the assessment.**

**Equality monitoring data:**

**What monitoring data is collected for each of the protected characteristics? Set out relevant details of this data.**

Demographic service user information is collected and stored via our case management system Liquidlogic. Demand is also monitored on a regular basis and this will be used to identify areas where roles could be merged or vacancies made into savings. We will not be looking to reduce the workforce where roles are currently filled.

**Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

Service user feedback was not sought for the review based on the fact that there would be no reduction or change in the provision or support they would be receiving.

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

There are no barriers to any groups accessing services due to the fact that any savings identified are from vacancies. There will be no detrimental impact on those groups accessing services as a result of any of the identified savings.


**What evidence is missing? What will be done to collect it?**

At this stage of the review there is no evidence missing. The majority of savings have been identified through the merging of a team manager position and we are in the process of assimilating the remaining vacancies and identifying the areas where these vacancies can be turned into savings without any adverse impacts on service delivery.

<b>Data analysis</b>	
<p><b>10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?</b></p> <p>Data analysis is fundamental to identification of any areas where demand is reduced or open vacancies are not required. In the case of the merging of two team manager posts there was no requirement for two managers when one could manage the workload, therefore the other post can be an identified saving. In the same vein, any further savings identified to meet the 50k target will take into account both current and future demand data so that informed decisions can be made.</p>	
<p><b>11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.</b></p>	
All protected characteristics	This decision has not impacted adversely on staff or service users. Service users will still receive the same level of service there is little to consider that would adversely impact all protected characteristics.
Age	No Impact
Disability	No Impact
Gender reassignment	No Impact
Marriage or civil partnership	No Impact
Pregnancy or maternity	No Impact
Race	No Impact
Religion or belief	No Impact
Sex	No Impact
Sexual Orientation	No Impact

<p><b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b></p>
<p>Childrens Social Care remains a cross borough service and is accessible and available as and when required. This saving will have no impact on the levels or coverage of service that we provide.</p>
<p><b>Identifying adverse impacts</b></p>
<p><b>12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.</b></p> <p>There will be no adverse impact on people with protected characteristics as a result of this action due to the fact that service delivery will continue, and staff employed to deliver that service will also been maintained.</p>
<p><b>Alternatives/mitigating actions</b></p>
<p><b>13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.</b></p> <p>Not applicable as there are no foreseeable adverse impacts.</p>
<p><b>Monitoring arrangements</b></p>
<p><b>14. How will the equality impact of the policy/service be monitored in future?</b></p> <p>The service is subject to line management supervision and regular performance scrutiny by the Head of Service. Childrens Services wide audits will also capture quality of the work as well as legal services quality checking reports. All previous monitoring arrangements will continue and indeed develop further as we begin to utilise the functionality of our new case management system Liquidlogic and demand profiles can be developed.</p>
<p><b>Action planning</b></p>
<p><b>15. Provide details of actions or improvements identified during the EIA.</b></p> <p>No actions identified other than to conclude the current staffing review as soon as possible.</p>
<p><b>Decision making</b></p>
<p><b>16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?</b></p>

*Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).*

<b>Signed assessment lead officer:</b>	<b>Date:</b>
<b>Head of service:</b>	<b>Date:</b>
<b>Signed Acting Director of Children's Services Helen Ellis</b>  	<b>1<sup>st</sup> February 2021</b>

Version: February 2019

## Equality impact assessment

**Name of policy, service or decision:**

Budget reductions as a result of restructuring the intervention and prevention service and savings relating to changes in service delivery brought about by the COVID pandemic.

**Lead directorate:**

Children’s Services

<p><b>1. Description – what is being assessed?</b></p> <p>Savings made as a result of service redesign in order to contribute to the directorate’s medium-term financial savings. These reductions also concern ongoing savings brought about by the changed working arrangements that have ensued since the COVID pandemic started. These new and refined working arrangements are likely to remain in place as they have become embedded in practice and have sought to deliver a more efficient service.</p>
<p><b>2. Lead officer on assessment:</b> Scott Jones</p>
<p><b>3. Head of service:</b> Scott Jones, Head of Family Solutions</p>
<p><b>4. Members of assessment team:</b></p> <p>Children’s Services Directorate Management Team including representatives from HR, Finance and legal</p>
<p><b>5. Date assessment began:</b> 29<sup>th</sup> January 2021</p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p>Family Solutions provides a range of services to children and families in the borough including early help support services and targeted interventions. The Intervention and Prevention team (I &amp; P) provide structured assessments of parent’s ability to parent children appropriately in order to support frontline social workers in their broader assessment of the child/children and their family. This service was reviewed in 2020 with a view to improving service delivery and create efficiencies that could translate into financial savings. This has been achieved without detriment to the service or the children and families of Dudley.</p> <p>Additional savings have been made through changes to working practices i.e. a significant reduction in mileage claims and use of office facilities i.e. photocopying and associated resources.</p>



**7. Who is it intended to affect or benefit (the target population)?**

The redesign of I and P will create a more effective and efficient service model that will benefit children and families served by the team. From a service users perspective there will be no visible impact to the way in which members of the public receive services. This will benefit the target audience as the potential savings generated from this review could be used elsewhere in Childrens Services to improve and develop other areas of service delivery. As a developing and improving Childrens Services Department we will also look to create efficiencies where we can deliver the same service to the same high standard but at a reduced cost to the taxpaying public.

**8. What are the main potential equality issues to be looked at?**

The main issues that could arise are equality issues relating to those staff employed within I & P and also the service users that receive I & P support. Other key stakeholders such as partner agencies, case holding social workers or other Early Help staff are not directly impacted by these changes so we foresee no equality impact issues would be prevalent.

**Evidence gathering**

**9. Provide details of all information about the policy, service or decision which will help with the assessment.**

**Equality monitoring data:**

**What monitoring data is collected for each of the protected characteristics?**

**Set out relevant details of this data.**

This is not relevant as there is no impact on service users. Data that the team collates will still be collated but this remains as basic service user demographic information and any related case information plus assessment details.

**Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

Service user feedback was not sought for the review based on the fact that there would be no reduction or change in the provision or support they would be receiving. Staff were spoken to and engaged actively in the consultation process and feedback was positive. All staff understood the rationale for the decision and why a review was required and input was positive around suggestions for continuing to deliver services in the same way as had been done throughout the COVID pandemic. Customer feedback in the form of compliments and complaints is collected regularly by the team and is continually monitored to identify any

issues, problems or equally areas of good practice. Since delivering in this new way the team have not received any complaints about service delivery.

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

No barriers currently exist to groups accessing this service. Service requests are made via social workers who are the dedicated lead worker for particular cases therefore there are no barriers to access and demand is manageable for the team in its current guise.

**What evidence is missing? What will be done to collect it?**

There is no missing evidence at this stage. The service is robustly monitored by the lead for I and P and is also subject to scrutiny from social care team managers and heads of service who also see the assessments that are produced by the team. Legal Services are also there to scrutinise the work of I & P through the legal documentation they produce. We are currently awaiting an amendment to the Liquidlogic system which will change the formatting of I & P court reports so that they meet the standards our legal team recommends. This will be implemented once the current change freeze ends.

**Data analysis**

**10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?**

Data analysis tells us that the work of I & P is continuing as it should with no lags in producing reports or assessments and that demand is being managed effectively. The reporting data from I & P shows no dip or lag in team productivity.

**11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.**

All protected characteristics	This decision has not impacted adversely on staff or service users. Current staff still deliver the same service they always have, just in a different way and service users still receive the same level of service there is little to consider that would adversely impact all protected characteristics.
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Age	I & P work with families of all ages but there are no issues or reductions to this within scope of the savings therefore there are no issues relating to this area.
Disability	I & P will remain accessible to children regardless of disability and the identified savings will not have an impact on frontline delivery.
Gender reassignment	No impact
Marriage or civil partnership	No impact
Pregnancy or maternity	No impact
Race	No impact
Religion or belief	No impact
Sex	No impact
Sexual Orientation	No impact
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>	
I & P are a borough wide team. Pre COVID the team were based at Stourbridge Family Centre but are now home based. This does not impact on parts of the borough as service coverage is maintained.	
<b>Identifying adverse impacts</b>	
<b>12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.</b>	

There will be no adverse impact on people with protected characteristics as a result of this action due to the fact that service delivery will continue, and staff employed to deliver that service will also be maintained.

**Alternatives/mitigating actions**

**13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.**

Not applicable as there are no foreseeable adverse impacts.

**Monitoring arrangements**

**14. How will the equality impact of the policy/service be monitored in future?**

The service is subject to line management supervision and regular performance scrutiny by the Head of Service. Childrens Services wide audits will also capture quality of the work aswell as legal services quality checking reports. All previous monitoring arrangements will continue and indeed develop further as we begin to utilise the functionality of our new case management system Liquidlogic.

**Action planning**

**15. Provide details of actions or improvements identified during the EIA.**

Improvements required to formatting of court reports. This has been addressed and is awaiting implementation.

**Decision making**

**16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?**

*Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).*

**Signed assessment lead officer:**



**Date:** 01.02.2021

**Chief officer/head of service:**



**Date:** 1/2/21

## Equality impact assessment

**Name of policy, service or decision:** Managed step down from external residential placements

**Lead directorate:** Children Services

<p><b>1. Description – what is being assessed?</b></p> <p>The impact of managed step down from external residential placements to deliver savings £425k in 2021/2022 and a further £425k in 2022/2023</p>
<p><b>2. Lead officer on assessment:</b> Heidi Henderson</p>
<p><b>3. Head of service:</b> Heidi Henderson</p>
<p><b>4. Members of assessment team:</b></p> <p>Gayle Barry, Service Manager Menna Davies, Service Manager Wendi Grizzle, Service Manager Tom Huntbatch, Principal Accountant Andrew Wright, Head of Virtual School</p>
<p><b>5. Date assessment began:</b> January 2021</p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p>A cabinet report was approved on 20<sup>th</sup> January 2021 detailing the proposals for budget savings to be made in the 2021/2022 financial year.</p> <p>This Equality Impact assessment details the impact of budget savings on children who are looked after in external residential placements, staffing, education, therapeutic input and children’s access to resources if those children are stepped down from external residential placements.</p> <p>Dudley MBC is signed up to a regional arrangement through the Big Fostering Project alongside other Local Authorities and an alliance with independent fostering agencies nationally to help step down children and young people who are defined as ‘hard to place’ due to their adverse experiences, repeated placement breakdown and moves, strong and unhealthy sense of loyalty to their birth families and usually additional emotional, mental and learning needs. The project aims to work</p>

intensively with children in residential care with the aim to prepare them for family life.

### **7. Who is it intended to affect or benefit (the target population)?**

Currently, there are 42 children and young people looked after in external residential placements as follow:

- 13 young people aged 18 await housing allocating as adult care leavers. Due to housing availability and delays attributed to Covid-19, Children Social Care continue to fund their placements at £180k
- Of the 15 young people aged 17 are in transitions planning with the view to obtain housing when they turn 18. Five of these young people are placed outside of the Local Authority and three of them are enjoying placement stability. Two young people have experienced multiple placement disruption with limited opportunity for alternative placements that will accept them.
- Four young people are remanded to young offender units awaiting trial £195k
- One young person is looked after in a secure children's home, with the view to step down to residential care following transition and discharge of the secure order, 64k. Depending on safety for other children at Maitland Road, he could potentially be appropriately matched as a step down from secure.
- One young person is cared for in a secure mental health unit. Once fit for discharge, consideration would be given to supported accommodation in the community for adults with additional mental health needs.
- Two babies are being assessed alongside a parent in residential family settings at 179k pending the outcome of care proceedings. The babies will either be reunified or achieve permanence outside of residential care.
- Two young people are being looked after in external residential settings pending the outcome of care proceedings. One child has disability needs and could potentially be matched to Tipton Road. The other young person could potentially be matched to Maitland Road or St James' Road.
- Two young people are subject of full care orders and placed outside of the Local authority boundaries. They could potentially be matched to Maitland Road, St James' Road or foster placements as a step down from external residential care.

### **8. What are the main potential equality issues to be looked at?**

Children placed in external residential placements frequently have additional emotional and/or mental health needs requiring careful matching.

In the cohort of 42 children, there are 18 females and 24 males. 27 Children are white British, Irish or European. 9 children are of mixed parentage. 5 Children are black British, Caribbean or African. 1 Child is Asian. 4 Children have a registered disability. 16 Children have Special Educational Needs of whom 12 have education health care plans.

### **Evidence gathering**

**9. Provide details of all information about the policy, service or decision which will help with the assessment.**

#### **Equality monitoring data:**

**What monitoring data is collected for each of the protected characteristics? Set out relevant details of this data.**

Each child has individual assessments of their identity, including culture, religion, ethnicity, race, gender identity and sexuality, disability and mental health needs. Any matching must consider the individual needs of the child against the needs of any other children in inhouse provisions.

#### **Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

27 of the children are subject of Care Orders or Interim Care orders, ten young people are subject of Section 20 Voluntary Care to the Local Authority and five young people are remanded into Local Authority Care.

The 29 children and young people under 18's care plans are regularly reviewed by Independent Reviewing Officers, who will seek their views and that of their parents (where appropriate) prior to any proposed moves. The children and young people have the right to independent advocacy and support from the Children's Participation service. Independent Reviewing Officers can appoint solicitors on behalf of children. Social workers and other professionals working with children are required by law to seek their views about their care plans which will inform and influence decision making.

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

None

**What evidence is missing? What will be done to collect it?**

None

**Data analysis**

**10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?**

The yearly [Stability Index for children in care](#) (November 2020) produced by the Children’s Commissioner for England shows that 1 in 10 children in care experience two or more home moves during a year, and more than half of children in care will have at least one home move in three years. Over 30,000 children in care are living in out of area placements – including 2,000 children who are more than a hundred miles away from home.

In her report into Private providers, the Children’s Commissioner evidences that private providers (November 2020) of children’s social care make significant profits. The best available estimates indicate that certain large providers have a profit margin of around 17% – in total around £240 million across the providers considered here – on fees from local authorities; and may have been seeing a return on investment at above market rates in recent years. The largest providers own a substantial minority share of the national market. The largest 5 residential providers run just under a quarter of children’s homes Local authority commissioners face limited (or even no) choice in their local market, especially if they need to place a child with specific needs.

13.7% of children in Out of Area residential placements have had two or more moves in the last year. In the cohort of 42 children in Dudley, 31 have experienced more two or more placement moves in the last 12 months.

8,904 children in 2018/19 experienced a mid-term school move.

**11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.**

All protected characteristics

Age

29 children and young people are between the ages of 0 and 18, therefore children. 13 young people are adults.

Disability

4 Children have registered disabilities, however 16 have additional educational needs.



Gender reassignment	None, but three children in care are in social transitioning and want to be known as a different gender from gender at birth.
Marriage or civil partnership	None
Pregnancy or maternity	Two mothers are being assessed with their children at Family Assessment Centres.
Race	27 Children are white British, Irish or European. 9 children are of mixed parentage. 5 Children are black British, Caribbean or African. 1 Child is Asian.
Religion or belief	14 Children are Christian (including Catholic and Pentecostal) 1 Child is Muslim 16 Children are not religious 6 Children do not have religion recorded 5 Children have undefined religion recorded
Sex	18 females 24 males
Sexual Orientation	Child level information is kept as part of individual assessment for matching and support services
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>	
All the children are looked after and predominantly from poor, working class communities in Dudley.	
<b>Identifying adverse impacts</b>	
<b>12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.</b>	
<p>Many children will have had instability in care and the impact of further disruption could result in poor outcomes in all areas of their lives, including mental health and educational achievement.</p> <p>Some children placed in external provision experienced sexual and other criminal exploitation within the local authority boundaries. Returning to Dudley may result in push/pull factors for further grooming into exploitation. This may result in further criminalisation for children and poor outcomes in all areas of their lives.</p>	

The children are from Dudley and their families and connections are in Dudley. Returning to Dudley means that meaningful family relationships can be assessed and supported to provide children and young people with a sense of identity and belonging.

As Dudley children, they will have access to existing resources to meet their health (including mental and emotional health), socialisation, education, identity, disability and other individual needs. Their independent reviewing officers, social workers, young persons advisors and professional network will be closer to them and more readily available to develop essential, protective and restorative relationships.

#### **Alternatives/mitigating actions**

**13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.**

All Dudley's children's homes have matching procedure as part of Ofsted regulation. Decisions for children to return to Dudley will be independently ratified as part of their Child in Care Reviews. Senior Management oversight is provided through the Access to Resources Panel chaired by the Service Director for Children. Decisions must be in the child's best interest.

#### **Monitoring arrangements**

**14. How will the equality impact of the policy/service be monitored in future?**

The impact to individual children is monitored through their Child in Care Reviews. Weekly budget meetings and Best Value Panel, further consider the impact of financial decisions on children individually and as a group.

#### **Action planning**

**15. Provide details of actions or improvements identified during the EIA.**

Recording and capturing Special Educational Needs and Education and Health Care Plans as part of Annex A, statutory data.

#### **Decision making**

**16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?**

Cabinet.

*Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).*

**Signed assessment lead officer:** Heidi Henderson

**Date:** 30.01.2021

**Head of service:** Heidi Henderson

**Date:** 30.01.2021



**References:**

<https://www.childrenscommissioner.gov.uk/wp-content/uploads/2020/11/cco-stability-index-2020.pdf>



cco-stability-index-  
2020.pdf

<https://www.childrenscommissioner.gov.uk/report/private-provision-in-childrens-social-care/>



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n-in-childrens-socia

## Equality impact assessment

**Name of policy, service or decision:** • **Movement of external placements into internal residential placements**

**Lead directorate:** Children Services

<p><b>1. Description – what is being assessed?</b></p> <p>The impact of movement for external placements to internal residential settings to deliver savings £375k in 2021/2022 and a further £375k in 2022/2023</p>
<p><b>2. Lead officer on assessment:</b> Heidi Henderson</p>
<p><b>3. Head of service:</b> Heidi Henderson</p>
<p><b>4. Members of assessment team:</b></p> <p>Gayle Barry, Service Manager  Menna Davies, Service Manager  Wendi Grizzle, Service Manager  Tom Huntbatch, Principal Accountant  Andrew Wright, Head of Virtual School</p>
<p><b>5. Date assessment began:</b> January 2021</p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p>A cabinet report was approved on 20<sup>th</sup> January 2021 detailing the proposals for budget savings to be made in the 2021/2022 financial year.</p> <p>This Equality Impact assessment details the impact of budget savings on children who are looked after in external residential placements, staffing, education, therapeutic input and children’s access to resources if those children are stepped down from external residential placements.</p> <p>Maitland Road Children’s Home, Dudley MBC’s internal provision, following inspection on 16<sup>th</sup> January 2020, closed on 21<sup>st</sup> March 2020 Further refurbishment, recruitment and bespoke training, the home aims to open by 15<sup>th</sup> February 2021. Maitland Road is registered to provide care of 4 children aged 12 to 15 on admission.</p>

Work is ongoing to develop Maitland Road under the principals of the No Wrong Door (social work innovations) model, with a focus of reunifying children within their family network. The aim is to draw on existing services (Family Solutions, Dudley Lighthouse Links, CART and youth services) to strengthen parenting capacity after time limited and intensive intervention with children and their families. To achieve this, children with a clear care plan of a reunification with parents or connected people is required. Children will need to be carefully matched so as not to disrupt progress for each other.

St James' Road Children's Home, Dudley MBC internal provision looking after 6 children aged 8 to 17 (on admission). One vacancy will be become available on 13<sup>th</sup> February 2021.

Tipton Road Children's Home, an internal provision, looks after 6 children with additional health needs and disability aged 8 to 17 (on admission). The home currently have two vacancies.

#### **7. Who is it intended to affect or benefit (the target population)?**

Currently, there are 42 children in external residential settings and 198 children are placed with foster carers through independent fostering providers of whom 106 are matched to their carers as a permanent home.

This report will focus on 60 children placed outside of local authority boundaries in external residential settings and those who are not living in their permanent matched home.

#### **8. What are the main potential equality issues to be looked at?**

Children in care need permanence and residential care is not suitable to most children. A small cohort of children achieve better outcomes in residential care in the long term. Some children benefit from short term residential care to help stabilise negative attachment strategies with the view to step down to foster care or reunification as part of their care plan.

When considering making changes to a child's placement involving a transition from external care to internal provisions, full consideration must be given to the impact on the child. Any move must be in the best interest of the child and there can be no effect in relation to any protected characteristics.

## **Evidence gathering**

**9. Provide details of all information about the policy, service or decision which will help with the assessment.**

### **Equality monitoring data:**

**What monitoring data is collected for each of the protected characteristics? Set out relevant details of this data.**

Each child has individual assessments of their identity, including culture, religion, ethnicity, race, gender identity and sexuality, disability and mental health needs. Any matching must consider the individual needs of the child against the needs of any other children in inhouse provisions.

### **Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

49 of the children are subject of Care Orders and six young people are subject of Section 20 Voluntary Care to the Local Authority and five young people are remanded into Local Authority Care.

The children and young people's care plans are regularly reviewed by Independent Reviewing Officers, who will seek their views and that of their parents (where appropriate) prior to any proposed moves. The children and young people have the right to independent advocacy and support from the Children's Participation service. Independent Reviewing Officers can appoint solicitors on behalf of children. Social workers and other professionals working with children are required by law to seek their views about their care plans which will inform and influence decision making.

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

None

**What evidence is missing? What will be done to collect it?**

None

**Data analysis**

**10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?**

The yearly [Stability Index for children in care](#) (November 2020) produced by the Children’s Commissioner for England shows that 1 in 10 children in care experience two or more home moves during a year, and more than half of children in care will have at least one home move in three years. Over 30,000 children in care are living in out of area placements – including 2,000 children who are more than a hundred miles away from home.

Most children in care in England – almost 55,000 – are in foster care. Here private provision takes the form of independent fostering agencies (IFAs) from which local authorities can commission a foster placement. Nationally, around 35% of fostering households are registered with an IFA, but there is significant variation across the country with as many as 60% of foster carers working with IFAs in some areas. 65 out of 684 Children in care in Dudley live in IFA placement that are not a permanent match and therefore consideration can be given for them to be moved into inhouse provision, including inhouse residential provisions.

In her report into Private providers, the Children’s Commissioner evidences that private providers (November 2020) of children’s social care make significant profits. The best available estimates indicate that certain large providers have a profit margin of around 17% – in total around £240 million across the providers considered here – on fees from local authorities; and may have been seeing a return on investment at above market rates in recent years. The largest providers own a substantial minority share of the national market. The largest 5 residential providers run just under a quarter of children’s homes while the largest 5 fostering providers account for just under a half of fostering placements. Local authority commissioners face limited (or even no) choice in their local market, especially if they need to place a child with specific needs.

**11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.**

All protected characteristics

Age	58 children between the ages of 3 and 17. Two young people are 18
Disability	One child has a registered disability, 13 children have special educational needs and 13 children have education health care plans.
Gender reassignment	None, but 3 children in care are socially transitioning and want to be known as a different gender from gender at birth.
Marriage or civil partnership	None
Pregnancy or maternity	None of the children are pregnant or parents.
Race	38 children are white British or European 12 children are of mixed parentage 3 children are Asian 3 children are black British Caribbean 2 children are classed as other.
Religion or belief	18 Children are Christian 5 Children are Muslim/Islam 16 Children are not religious 11 Children do not have a religion recorded 12 Children have an undefined religion recorded
Sex	31 children are female 29 children are male
Sexual Orientation	Information individually captured for those children with individual needs and reported as part of their individual assessments.
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>	
All the children are looked after and predominantly from poor, working class communities in Dudley.	
<b>Identifying adverse impacts</b>	
<b>12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.</b>	
Many children will have had instability in care and the impact of further disruption could result in poor outcomes in all areas of their lives, including mental health and educational achievement.	



Some children placed in external provision experienced sexual and other criminal exploitation within the local authority boundaries. Returning to Dudley may result in push/pull factors for further grooming into exploitation. This may result in further criminalisation for children and poor outcomes in all areas of their lives.

Some of the children are part of sibling groups and unless it is unsafe for them to remain placed together, it would not be in children's best interest to separate them.

Some children are living with their permanent Independent Fostering families, but formal matching and presentation to fostering panel has yet to take place.

The children are from Dudley and their families and connections are in Dudley. Returning to Dudley means that meaningful family relationships can be assessed and supported to provide children and young people with a sense of identity and belonging.

As Dudley children, they will have access to existing resources to meet their health (including mental and emotional health), socialisation, education, identity, disability and other individual needs. Their independent reviewing officers, social workers, young persons advisors and professional network will be closer to them and more readily available to develop essential, protective and restorative relationships.

#### **Alternatives/mitigating actions**

**13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.**

All Dudley's children's homes have matching procedure as part of Ofsted regulation. Decisions for children to return to Dudley will be independently ratified as part of their Child in Care Reviews. Senior Management oversight is provided through the Access to Resources Panel chaired by the Service Director for Children. Decisions must be in the child's best interest.

#### **Monitoring arrangements**

**14. How will the equality impact of the policy/service be monitored in future?**

The impact to individual children is monitored through their Child in Care Reviews. Weekly budget meetings and Best Value Panel, further consider the impact of financial decisions on children individually and as a group.

#### **Action planning**

**15. Provide details of actions or improvements identified during the EIA.**

Recording and capturing Special Educational Needs and Education and Health Care Plans as part of Annex A, statutory data.

### Decision making

**16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?**

Cabinet.

*Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).*

**Signed assessment lead officer:** Heidi Henderson

**Date:** 30.01.2021

**Head of service:** Heidi Henderson

**Date:** 30.01.2021



Version: February 2019

### References:

<https://www.childrenscommissioner.gov.uk/wp-content/uploads/2020/11/cco-stability-index-2020.pdf>



cco-stability-index-2020.pdf

<https://www.childrenscommissioner.gov.uk/report/private-provision-in-childrens-social-care/>



cco-private-provision-in-childrens-social-care-report.pdf

## Equality impact assessment

**Name of policy, service or decision:** Transfer of Children to Special Guardianship Order Status, No Detriment Special Guardianship Decision

**Lead directorate:** Children Services

<p><b>1. Description – what is being assessed?</b></p> <p>The impact of transferring children subject of Care Orders in long-term fostering arrangements with either mainstream of family foster carers to Special Guardianship Orders to deliver savings £40k in 2021/2022.</p>
<p><b>2. Lead officer on assessment:</b> Heidi Henderson</p>
<p><b>3. Head of service:</b> Heidi Henderson</p>
<p><b>4. Members of assessment team:</b></p> <p>Gayle Barry, Service Manager  Menna Davies, Service Manager  Wendi Grizzle, Service Manager  Tom Huntbatch, Principal Accountant  Andrew Wright, Head of Virtual School</p>
<p><b>5. Date assessment began:</b> January 2021</p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p>A cabinet report was approved on 20<sup>th</sup> January 2021 detailing the proposals for budget savings to be made in the 2021/2022 financial year.</p> <p>This Equality Impact assessment details the impact of budget savings on children who are subject of full Care Orders and looked after by Dudley MBC foster carers (including mainstream and connected people) and Independent Fostering Agency carers.</p> <p>The Special Guardianship No Detriment Policy came into force on 14<sup>th</sup> December 2020, following Cabinet approval on 4<sup>th</sup> December 2020. The aim is to provide children with permanence with their permanently matched carers, without the continued involvement of the state in their day-to-day care. A previous, means-tested policy, meant that foster carers faced financial losses, should they want to provide children with permanence and minimise state interference into children's</p>

lives. Any carer can apply to provide a child with permanence under a Special Guardianship Order after the child has continuously lived with them for a year. Considering the loss of income and the lack of fast access to support services, many carers chose to remain foster carers.

The savings in moving children into permanence under special guardianship are as follow:

- The cost of allocated social workers, supervising social workers, Independent Reviewing Officers, Foster Carer Independent Reviewing Officers and Virtual School teachers.
- Reduction in mileage cost spent by social workers, supervising social workers, Independent Reviewing Officers and Virtual School teachers to undertake statutory visits, reviews and direct work.
- The cost of fostering panel in annual review of foster carers and associated agency decision maker and panel adviser time.
- Additional health cost through annual health assessments, strengths and difficulty questionnaires and foster carers medicals.
- The cost of bi-annual Disclosure and Barring Checks of foster carers and adults living with foster carers i.e. adult children or adults supporting carers.
- The cost of agency fees to Independent Fostering Agencies.
- The cost of Care Leaving fees, step-up Foster Carers for post 18, housing cost for young people in supported accommodation.
- The cost of Special Guardianship assessments in the longer term. Due to the sheer number of connected people carers currently allocated to social workers, the capacity to undertake assessments is diminished and outsourced at £3000 per assessment. As allocated carers reduce, the capacity to undertake inhouse assessments will increase.

#### **7. Who is it intended to affect or benefit (the target population)?**

Out of 684 children in care, 492 are looked after by foster carers, of whom 384 are subject of care orders with the plan for long-term care. 219 of the children are already living with their long-term, permanently matched carers and within this cohort, 189 children have experienced placement stability in the last 12 months. 38 young people are over the age of 16 and qualify for support as relevant children under the Care Leaver's Act. 151 children are under the age of 16 young people are 15 years old and the courts and children's guardians are likely to consider Dudley as obfuscating responsibility to these children as care leavers if applications are made for Special guardianship, unless these are solely the wishes of the child.

This report will therefore focus on the 132 children under the age of 14 years who have had placement stability with relative carers or foster carers, inhouse and through independent fostering agencies and subject of full care orders.

Within this cohort of children, there are:

- 45 children living in a long-term foster care with a relative or friend.
- 34 children living with relatives or friends in foster care, but the family members have not been matched as long-term permanent carers.
- 87 children living with long-term foster carers of whom 47 are independent fostering agency carers.

### **8. What are the main potential equality issues to be looked at?**

Children in care have suffered significant harm in the care of their parents. Due to adverse early childhood experiences, they are vulnerable throughout their childhood and often later in life. Overall their outcomes poorly compare to the average child, although the gap between the average child and children have reduced in recent years, with greater emphasis on ambitions for children in care, their health and education attainment.

The 132 children come from diverse background, race, ethnicity, culture, religion, sexuality, sexual orientation, gender, disability and social class.

### **Evidence gathering**

#### **9. Provide details of all information about the policy, service or decision which will help with the assessment.**

##### **Equality monitoring data:**

**What monitoring data is collected for each of the protected characteristics?  
Set out relevant details of this data.**

Each child has individual assessments of their identity, including culture, religion, ethnicity, race, gender identity and sexuality, disability and mental health needs. Any matching must consider the individual needs of the child against the needs of any other children in inhouse provisions.

##### **Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

All the children are subject of Care Orders, which means that Dudley MBC holds overriding parental responsibility for them and are their corporate parents. The children's care plans are regularly reviewed by Independent Reviewing Officers, who will seek their views, the views of their carers and that of their parents (where appropriate).

The children and young people have the right to independent advocacy and support from the Children's Participation service. Independent Reviewing Officers can appoint solicitors on behalf of children. Social workers and other professionals working with children are required by law to seek their views about their care plans which will inform and influence decision making.

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

None

**What evidence is missing? What will be done to collect it?**

None

**Data analysis**

**10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?**

The Nuffield Foundation completed an evidence review of Special Guardianship in 2019 and found:

The findings from the studies are broadly consistent. Using Department for Education (DfE) data on 5,921 children placed on SGOs between 1 December 2005 and 31 March 2011, found:

- The risk of disruption judged by return to local authority care was 5.7% over five years.
- The five-year rate is higher than for adoption (0.72%), but it is substantially below that for residence orders/child arrangements orders (14.7%).

Using the Cafcass dataset based on a total of 140,059 children in 81,758 cases that concluded between 2010/11 and 2016/17:

- The risk of return to court for further care proceedings within five years of making the SGO was approximately 5%.
- The five-year rate is lower than for residence orders/child arrangements orders (approximately 10.5%)

**The review concluded that:**

The review has found that the evidence on the stability of special guardianship is consistent and robust. The impacts on special guardians are consistent in demonstrating the positive benefits of special guardianship but there are also negative effects on the health and wellbeing of these carers. The most marked gaps in knowledge relate to children’s developmental outcomes and experiences and how to effectively manage contact. Despite these gaps, the evidence has highlighted the need for social workers and courts to pay particular attention to child risk factors, particularly older age groups of children and those with emotional and behavioural difficulties, in their assessments and support plans. The evidence indicates that risks can be mitigated by helping special guardians to fully understand their role via appropriate preparation, legal advice and tailor-made support for them and their children.

**11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.**

All protected characteristics	
Age	Twelve children are aged 5 and younger, 41 children are aged between 6 and 11 and 58 children are between 12 and 14.
Disability	8 children have a registered disability, however 34 have special educational needs and 25 an education health care plan.
Gender reassignment	None, but two children in foster care are in social transitioning and want to be known as a different gender from gender at birth.
Marriage or civil partnership	None
Pregnancy or maternity	No children or young people in this cohort are pregnant or are parents.
Race	100 Children re white British and 5 classed white other. 23 Children are of mixed parentage

	2 Children are Asian 2 Children are black Caribbean
Religion or belief	39 Children record undefined religion. 33 Children are Christianity (including Catholicism) 6 Children are Muslim/Islam 3 Children are Jehovah's Witnesses 24 Children have no religion recorded 27 children do not practice religion
Sex	61 females and 71 males
Sexual Orientation	Information individually captured for those children with individual needs and reported as part of their individual assessments.
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>	
All the children are looked after and predominantly from poor, working class communities in Dudley.	
<b>Identifying adverse impacts</b>	
<b>12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.</b>	
<b><u>Impact on Children:</u></b>	
<ul style="list-style-type: none"> <li>• Most children fare well in special guardianship in relation to their safety, wellbeing and developmental progress.</li> <li>• Children enjoy far greater stability and fewer disruption and placement move.</li> <li>• DfE data has shown that children on SGOs have better educational outcomes at key stages 2 and 4 than children who are looked-after.</li> <li>• A strong pre-existing relationship between the child and the carer when the Order is made contributes to good outcomes</li> <li>• Greater integration of the child into the family is associated with better child outcomes</li> <li>• The child's older age when a SGO is made is a risk factor for poorer child outcomes</li> <li>• Emotional and behavioural difficulties are a major risk factor for poor placement progress and child well-being outcomes.</li> </ul>	
<b><u>Impact on Special Guardians:</u></b>	



- Legal security and enhanced parental decision-making powers.
- Special guardians frequently experience a wide range of stresses across all areas of life. They include financial and housing issues, as well as impacts on family life and wellbeing and emotional and behavioural difficulties of the children in their care.
- Contact with the child's birth parents is a major source of strain for a significant minority of special guardians.
- A lack of legal and social work advice affected prospective special guardians' ability to advocate for financial and other support.
- Carers want their special guardianship support plans to include provision for allowances, other finances and clear specification of ongoing support arrangements for themselves and the child when needed.

#### **Alternatives/mitigating actions**

**13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.**

#### **Mitigating Adverse impact**


- The No Detriment policy mitigates against the potential financial impact of a permanent order.
- With the savings in providing long-term social work supervision, statutory child social work, independent reviewing officers and independent fostering reviewing officers and outsourcing assessments, the service can focus on developing a bespoke special guardian support offer.

#### **Monitoring arrangements**

**14. How will the equality impact of the policy/service be monitored in future?**

The impact to individual children will initially be ratified at their Child in Care Review. The appropriateness of a special guardianship order will be assessed and judged by the family courts with the independent advice of a children's guardian, provided by Cafcass.

It is predicted that Dudley's children, returning for further intervention would reflect national numbers, approximately 6% over five years. Out of the cohort of 132 children, that equates to 4.5 children.

<b>Action planning</b>	
<b>15. Provide details of actions or improvements identified during the EIA.</b>	
Recording and capturing Special Educational Needs and Education and Health Care Plans as part of Annex A, statutory data.	
Further work to Liquid Logic (the children's electronic case files) to track progress in the application of, monitoring and support to special guardians.	
<b>Decision making</b>	
<b>16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?</b>	
Cabinet.	
<i>Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).</i>	
<b>Signed assessment lead officer:</b> Heidi Henderson	<b>Date:</b> 31.01.2021
<b>Head of service:</b> Heidi Henderson 	<b>Date:</b> 31.01.2021

Version: February 2019

**Reference:**

[https://www.nuffieldfjo.org.uk/files/documents/Nuffield%20FJO\\_Special%20guardianship\\_English%20research%20studies\\_final.pdf](https://www.nuffieldfjo.org.uk/files/documents/Nuffield%20FJO_Special%20guardianship_English%20research%20studies_final.pdf)



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## Equality impact assessment

**Name of policy, service or decision:** Review of IFA placements

**Lead directorate:** Children Services

<p><b>1. Description – what is being assessed?</b></p> <p>The impact of reviewing the appropriateness of Independent Fostering placements to achieve £80k savings 2021/2022.</p>
<p><b>2. Lead officer on assessment:</b> Heidi Henderson</p>
<p><b>3. Head of service:</b> Heidi Henderson</p>
<p><b>4. Members of assessment team:</b></p> <p>Gayle Barry, Service Manager  Menna Davies, Service Manager  Wendi Grizzle, Service Manager  Tom Huntbatch, Principal Accountant  Andrew Wright, Head of Virtual School</p>
<p><b>5. Date assessment began:</b> January 2021</p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p>A cabinet report was approved on 20<sup>th</sup> January 2021 detailing the proposals for budget savings to be made in the 2021/2022 financial year.</p> <p>This Equality Impact assessment details the impact of budget savings on children who are looked by foster carers who are employed by independent fostering agencies (IFA). Consideration must be given to children being appropriately linked and matched to IFA placements and that IFAs deliver for our children.</p> <p>The Children’s Commissioner of England published a report into private provisions of care to children and found that over the last decade, the challenge of providing capacity to care for the most vulnerable children has increasingly fallen to the private sector as the demand for care has grown and local authority provision has not kept pace, or even shrunk. There were over 11,000 more children in care in 2019 than there were in 2011 – 73% of those additional children were cared for by private organisations.</p>

The report further found that information on the ownership, accountability, profits, costs, prices of different providers is rare and opaque, requiring detailed and complex investigation in order to get a clear picture – which can then change in a matter of months. There is a clear lack of planning and oversight for the market as a whole, leading to an increasingly fragmented, uncoordinated and irrational market that ultimately does not meet the needs of children.

In December 2020, Wolverhampton Children's Services entered and was granted a bid for a formal alliance and collaborative approach to fostering in the region on behalf of Dudley, Sandwell, Walsall and Wolverhampton, thus the same local authorities aligning to the Regional Adoption Agency, Adoption at Heart.

### **7. Who is it intended to affect or benefit (the target population)?**

Out of the 685 children in care on 31<sup>st</sup> January 2021, 194 children and young people are not yet matched for permanence and this report will focus on permanence for the 192 who are children.

- 57 children are subject of ongoing care proceedings with parallel planning for reunification with a parent or parents, reunification with wider family, relative fostering, long-term care or adoption.
- 124 children are subject of full care orders and Dudley MBC shares overriding parental responsibility for them.
- 61 children placed with short-term internal carers and not matched for permanence.
- 63 children are placed with short-term IFA carers and not matched for permanence.
- 3 young people are over 16 and have requested Dudley MBC to look after them. They are all placed with short-term IFA carers.
- 4 young people are Unaccompanied asylum-seeking children and placed with short-term IFA carers.
- 2 young people have reached the age of 18.

Dudley MBC currently has 256 mainstream foster carers looking after 182 children. 81 of the children are matched for permanence to their inhouse carers and 101 await long-term matching and care. 194 children are cared for by IFA carers of whom 102 are not matched for permanence.

### **8. What are the main potential equality issues to be looked at?**

Within the Black Country Fostering alliance, partners are committed to compliance with the Equality Duty and the project will fully comply with the duty in respect of the nine protected characteristics. We will have due regard for advancing equality, including removing or minimising disadvantages suffered by people due to their protected characteristics, taking steps to meet the needs of people from protected groups, and encouraging people from protected groups to participate in relevant activities.

### **Evidence gathering**

**9. Provide details of all information about the policy, service or decision which will help with the assessment.**

#### **Equality monitoring data:**

**What monitoring data is collected for each of the protected characteristics? Set out relevant details of this data.**

Each child has individual assessments of their identity, including culture, religion, ethnicity, race, gender identity and sexuality, disability and mental health needs. Any matching must consider the individual needs of the child against the needs of any other children in inhouse provisions.

Each foster carer is assessed for approval, including all protected characteristics including culture, religion, ethnicity, race, gender identity and sexuality, disability and mental health needs.

Children must be matched with carers who can meet their diverse needs. Where matching cannot meet cultural needs, carers must be equipped with the right skillset and knowledge base to meet children's identity needs through community and specialist resources.

#### **Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

All 194 children are subject of statutory review by Independent Reviewing Officers, who will seek their views, carer's views and where appropriate the views of their parents in matching consideration. The children and young people have the right to independent advocacy and support from the Children's Participation service. Independent Reviewing Officers can appoint solicitors on behalf of children. Social workers and other professionals working with children are required by law to seek their views about their care plans which will inform and influence decision making.

The 57 children subject of interim care orders have Children's Guardian, appointed by the family courts to ensure that their views are represented and influence decision making.

Fostering Panel recommends and the Agency Decision Maker ratifies matching in accordance to strict fostering guidance, which considers all protected characteristics. Foster carers represent their views at foster panel. The quality of care provided by foster carers is annually reviewed by Independent Fostering Reviewing Officers.

The Black Country Fostering Alliance used expertise to develop the model including the views of:

- Extensive engagement with a huge range of stakeholders throughout the feasibility study, providing essential intelligence from a wide range of perspectives. These included foster carers, young people in care, fostering managers, social workers, commissioning, marketing and health colleagues, independent reviewing services and virtual school heads.
- Expertise from Good or Outstanding Ofsted rated local IFAs participating in the implementation phase and Black Country market position statement.
- Intelligence from the four commissioning teams on relationships with IFAs.

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

None

**What evidence is missing? What will be done to collect it?**

None

#### **Data analysis**

**10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?**

Most children in care in England – almost 55,000 – are in foster care. Nationally, around 35% of fostering households are registered with an IFA, but there is significant variation across the country with as many as 60% of foster carers working with IFAs in some areas. 65 out of 684 Children in care in Dudley live in IFA placement that are not a permanent match and therefore consideration can be given for them to be moved into inhouse provision, including inhouse residential provisions.

In her report into Private providers, the Children’s Commissioner evidences that private providers (November 2020) of children’s social care make significant profits. The best available estimates indicate that certain large providers have a profit margin of around 17% – in total around £240 million across the providers considered here – on fees from local authorities; and may have been seeing a return on investment at above market rates in recent years. The largest providers own a substantial minority share of the national market. The largest 5 fostering providers account for just under a half of fostering placements. Local authority commissioners face limited (or even no) choice in their local market, especially if they need to place a child with specific needs.

The Black Country Fostering (BCF) Feasibility Study identified some workable solutions to the identified problem that there are insufficient local authority foster care placements in the Black Country to meet the needs of children and young people in care (CiC).

One of the key aims of the proposed Black Country Fostering model is that through working as an alliance, we will work in a more efficient and aligned way across the region, better using existing resources, creating efficiencies through economies of scale, and seeking joint commissioning opportunities to create a more local, responsive service. This will of itself create sustainability as well as improved services for foster carers and children and young people in foster care.

The planned co-delivery and co-commissioning of training is highly sustainable due to strengthened purchasing power and opportunities afforded for achieving better value for money.

**11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.**

All protected characteristics	
Age	192 children between ages 0 and 18
Disability	7 children have registered disability however, 18 of the children have special educational needs including education health care plans for emotional/behavioural or mental health needs.
Gender reassignment	None, but two children in foster care are in social transitioning and want to be known as a different gender from gender at birth.

Marriage or civil partnership	None
Pregnancy or maternity	None at this time
Race	138 children are white British 5 children are classed white other. 32 children are of mixed parentage 6 children are Asian 7 children are black African or black Caribbean 2 children are Chinese 2 children are classed as Other.
Religion or belief	Information individually captured for those children with individual needs and where possible matched to foster carers who share their religious persuasion.
Sex	99 children are female 93 children are male.
Sexual Orientation	Information individually captured for those children with individual needs and reported as part of their individual assessments.

**Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?**

All the children are looked after and predominantly from poor, working class communities in Dudley.

**Identifying adverse impacts**

**12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.**

The 192 children are not in formally matched or permanence placements. Further work is required to identify which of these children should be formally matched to their existing carers and presented to Fostering Panel and ratified by the agency decision making. Children should not be moved from carers where they have developed lasting, resilience building and caring relationships.

Some of the children are part of sibling groups and unless it is unsafe for them to remain placed together, it would not be in children’s best interest to separate them.

Being formally matched to carers in Dudley or as part of the Black Country alliance means that children are closer to people who are important to them. Meaningful



family relationships can be assessed and supported to provide children and young people with a sense of identity and belonging.

As Dudley children, they will have access to existing resources to meet their health (including mental and emotional health), socialisation, education, identity, disability and other individual needs. Their independent reviewing officers, social workers, young persons advisors and professional network will be closer to them and more readily available to develop essential, protective and restorative relationships.

As part of the Black Country alliance, children and their carers will have access to jointly commissioned support services, training, activities and opportunities through the alliance.

#### **Alternatives/mitigating actions**

**13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.**

Children have the right to achieve permanence. As part of Dudley Children's Service improvement plan, permanence is a priority improvement area. A key consideration to the improvement is identifying those children who have experienced delay in care and appropriately achieve permanence for them.

In the short term, the work is labour intensive and additional short-term cost may be incurred, however, in the long term, children will be safer, enjoy more security and stability.

#### **Monitoring arrangements**

**14. How will the equality impact of the policy/service be monitored in future?**


The impact to individual children is monitored through their Child in Care Reviews, individual service reviews, review of the Local Authority improvement journey, including regular reporting to the Department of Education and Ofsted.

#### **Action planning**

**15. Provide details of actions or improvements identified during the EIA.**

Recording and capturing Special Educational Needs and Education and Health Care Plans as part of Annex A, statutory data.

Improvements identified are captured in the existing Children's Services Improvement Plan.

Decision making	
<p><b>16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?</b></p> <p>Cabinet.</p> <p><i>Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).</i></p>	
<b>Signed assessment lead officer:</b> Heidi Henderson	<b>Date:</b> 31.01.2021
<b>Head of service:</b> Heidi Henderson 	<b>Date:</b> 31.01.2021

Version: February 2019

**References:**

<https://www.childrenscommissioner.gov.uk/wp-content/uploads/2020/11/cco-stability-index-2020.pdf>



cco-stability-index-2020.pdf

<https://www.childrenscommissioner.gov.uk/report/private-provision-in-childrens-social-care/>



cco-private-provision-in-childrens-social-care



FINAL Black Country Fostering Project Brief

## Equality Impact Assessment

**Name of policy, service or decision: SEND Home to Schools Transport Programme**

**Lead directorate: People**

<p><b>1. Description – what is being assessed?</b></p> <p>A working group has been set up to review the policies covering the provision of home to school transport for those students eligible under current policy, up to age 25. The review has a savings target of £220k in FY 2021/2022 and this will be sourced via the following:</p> <ul style="list-style-type: none"> <li>- Reducing costs for over 16 yrs transport where there is no statutory requirement</li> <li>- Reducing costs for Early Years transport where there is no statutory requirement.</li> <li>- Reducing costs by optimising single routes.</li> <li>- Ensuring that the relevant Transport policy is robust, has clear decision-making criterion and is applied equitably.</li> <li>- Looking at reducing service provider costs where possible through renegotiation of contracts.</li> </ul>
<p><b>2. Lead officer on assessment: Helen Ellis</b></p>
<p><b>3. Head of service: Toni Dawodu</b></p>
<p><b>4. Members of assessment team:</b> Nigel Kletz, Michael Robinson, Lynnette Marks, Toni Dawodu, Stacey Carter, Mayuri Goodhand.</p>
<p><b>5. Date assessment began: December 2020</b></p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p>Parents and carers have a (legal) responsibility to ensure that their child/ children attend school regularly, regardless of the child's special educational needs or disabilities.</p> <p>For adults, councils have a legal duty to ensure that social care needs that meet the 2014 Care Act eligibility threshold are met.</p> <p>Therefore, current service provision strives to be accessible to everyone who meets the eligibility criteria, including people from protected groups.</p>

The service transports children to and from school using contracted taxi provision. Those children will be those who meet the eligibility criteria as set out in the Transport Policy.

The aim of the project is to maximise the efficiencies of the service through: -

- a) Route optimisation
- b) Ensuring that the eligibility criteria is applied correctly
- c) Tendering for a new framework to drive costs down and create greater transparency

#### **7. Who is it intended to affect or benefit (the target population)?**

Councils have a legal duty to provide transport assistance to eligible children and young people. For adults, local authorities have a legal duty to ensure any eligible social care needs identified through a Care Act assessment are met, which for some individuals might relate to transport.

#### **8. What are the main potential equality issues to be looked at?**

The project will aim to create an efficient delivery model for the provision of travel / transport to and from school. Any model will strive to

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act
- Advance equality of opportunity between those with ‘protected characteristics’ and those without them
- Foster good relations between those with ‘protected characteristics’ and those without them

Some children who currently receive transport will not be eligible for transport going forward. For those children, an exercise will be undertaken to support them look at a range of options to reduce them being dependent and utilise discretionary process to enable them access other options of support.

All transport arrangements will have a review process that is undertaken on a yearly basis and is an ongoing process in any case.

Those children who are eligible for transport will continue to be eligible and will receive a service.

Given the range of the SEND Reforms of 0- 25, those under 5 and post 16, will be seen as discretionary and therefore dealt with on a case by case basis. Under 5's will be supported through Early Help and social care processes, whilst the post 16 will be assessed through preparation for Independence, which includes Travel training and accessing DWP resources to support long term travel arrangements.

As part of the project it will review the initial applications and seek to provide alternative options for those requesting transport assistance. This will mean that the Council is not stopping transport for children but instead not awarding transport to those not eligible as other options will be awarded. This will assist the project have a clearer view of what options can be provided to be stated on the Local Offer.

For those inappropriate applications, the project will review why these are being made and provide a statement of options available, so it's clearly documented on the Local Offer.

A stream of the project will look towards Independent Travel Training which will positively impact those children both during their academic life and ongoing into adulthood.

The route optimisation will ensure that children receiving transport are on routes that are safe, coordinated and cost effective. This will show a shift in a number of routes with the focus on single person journeys and reviewing those children who may be amenable to different route options.

The tender process will bring a focus on completion in the marketplace across the taxi provider services with the output being a best value approach and quality services for people receiving the service.

A focus of the project will increase the Independent Travel Training (ITT) offer for children and young people which will focus on the 'travel' offer as opposed to the transport provision. This will provide a positive impact for the majority of children and young people as the 'travel offer' is intended to not only increase Independent Travel Training (ITT) but also consider offering more travel assistance options such as Personal Travel Budgets (PTBs) and travel cards for children and their carer, as well provision of information about how to build a child's confidence on using public transport and getting around.

The new updated policy will be based on the overall principle that travel assistance should aim to help children and young people with SEND to be as independent as possible. Information will be made available on the council website and on the DMBC Local Offer.

## **Evidence gathering**

**9. Provide details of all information about the policy, service or decision which will help with the assessment.**

### **Equality monitoring data:**

**What monitoring data is collected for each of the protected characteristics? Set out relevant details of this data.**

Equality monitoring data is collated in some of the services currently but not consistently across all contracts – this will be a requirement for the new arrangement / partnership to enable ongoing equality monitoring.

A key feature of the contracts moving forward will be ensuring ongoing engagement and customer feedback (both with contractors / pupils / schools and parents).

The SEND strategy focusses on promoting independence and inclusion which is consistent with the transport approach. The SEND strategy has been widely consulted on with parents / schools / partners in and is due to be reviewed in 2021 to ensure it captures the changes since its implementation.

Schools have been engaged as part of the initial transport review and have been positive in supporting the review.

### **Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

The service is fundamental to a number of key Dudley strands, which have changed over the years in nature and prominence. The SEND programme in line with the Written Statement of Action, supports and promotes independence and inclusion. Targeted feedback will be undertaken with those who will be affected by the change in policy namely the under 5 and over 16.

Users / carers / schools / families have been consulted on these agendas.

Similarly, further targeted work will be undertaken to get feedback on the proposals.

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

The policy provides the eligibility assessed against for pupils. There has been no change to this as part of the project. The eligibility criteria will be published on the Local Offer, so groups are clear on how to access.

### Data analysis

#### 10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?

The data below shows the high-level transport use in Dudley compared to an average of local and statistical neighbours and the key figure is the cost per child which is 16% higher than the average.

Further data analysis is required to identify the potential savings for each of the enablers described in this documents introduction which is currently ongoing by the project group.

	Good is....	Basket	Dudley
<b>Children per route</b>	Higher	3.90	3.26
<b>Single passenger journeys as % of all journeys</b>	Lower	28%	38%
<b>% children travelling without a Passenger Assistant.</b>	Higher	30%	19%
<b>% of total Passenger Assistants to total children.</b>	Lower	9%	22%
<b>Average cost per child (operational)</b>	Lower	£3,709	£4,400

#### 11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.

All protected characteristics	
Age	The service will still be available to children as per the current policy- statutory 5- 16 age group
Disability	<p>Those children eligible for transport will have a SEN, SEND or an eligible adult accessed under the Care Act. Where transport is removed as part of the yearly review process there will be an impact on those children and families, and alternatives will be considered.</p> <p>For those that are under 5's, these applications will be reviewed under a person-centred discretionary approach which could include Early Help support, consideration of travel passes, and or transport personal budgets.</p> <p>For those post 16's there could be consideration around Freedom travel passes for those attending FE college or a mainstream school and/or make use of their Personal Independence Payments (PIP) mobility component. Care Act eligibility may afford them other assistance they can draw on.</p> <p>However, the primary aim of the Transport Review is around the fundamental changes to commissioning / processes and application.</p>
Gender reassignment	No impact
Marriage or civil partnership	No impact
Pregnancy or maternity	No impact
Race	No impact
Religion or belief	No impact
Sex	No impact



Sexual Orientation	No impact
<b>Identifying adverse impacts</b>	
<p><b>12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.</b></p> <p><b><u>Positive impact</u></b></p> <ul style="list-style-type: none"> <li>1) Promotion and increase of Independent travel training</li> <li>2) Increased independence and preparing for adulthood</li> <li>3) Increased relationship building by changing route options (single to multiple)</li> </ul> <p><b><u>Adverse impact</u></b></p> <ul style="list-style-type: none"> <li>1) Removal of transport where people do not meet eligibility (although this is a standard review process)</li> <li>2) Some taxi companies may not be successful as part of the tender and / or have less volume through the contract</li> </ul>	
<b>Alternatives/mitigating actions</b>	
<p><b>13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.</b></p> <ul style="list-style-type: none"> <li>1) Removal of transport for non-eligible people is part of the standard review process</li> <li>2) Should taxi companies not be successful or receive less business from the Council – this is unavoidable as part of the tender process.</li> </ul>	
<b>Monitoring arrangements</b>	
<p><b>14. How will the equality impact of the policy/service be monitored in future?</b></p> <p>A key feature of the contracts moving forward will be ensuring ongoing engagement and customer feedback (both with contractors / pupils / schools and parents).</p>	

Detailed systems will be put in place on the Synergy System to ensure data on pupils is up to date.

**Action planning**

**15. Provide details of actions or improvements identified during the EIA.**

The development and collection of Transport data that will allow ongoing monitoring of transport / travel usage.

Actions to deliver the targeted savings following the Targeted feedback/survey for the under 5's and post 16's and the discretionary options to be made available

Review of the implementation of an ITT programme to promote and sustain independence. Timeframe for its implementation.

**Decision making**

**16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?**

The service is part of the MTFs for the Children Directorate.

*Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).*

**Signed assessment lead officer:**

<b>Head of service:</b> 	<b>Date: 01.02.2021</b>
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**Signed Acting Director of Children's Services and Service Director for Education, SEND & Family Solutions**

	<b>Date: 01.02.2021</b>
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## Equality impact assessment

**Name of policy, service or decision: Dudley Council Plus – Saturday Morning Permanent Closure for Budget Savings and Business Benefits**

**Lead directorate: Chief Executive’s**

<p><b>1. Description – what is being assessed?</b>            Closure of the Dudley Council Plus walk in centre and call centre on Saturdays - normally open 09:00 to 12:00 each week.</p> <p>The walk-in element has been closed since the start of the pandemic in February 2020 without incident or complaint.</p> <p>Call volumes on Saturday mornings have decreased.</p>
<p><b>2. Lead officer on assessment:</b> Jayne Catley &amp; Jennie Caladine</p>
<p><b>3. Head of service:</b> Jayne Catley</p>
<p><b>4. Members of assessment team:</b>            Jayne Catley &amp; Jennie Caladine</p> <p>Cabinet member Councillor Phipps consulted and in agreement.</p>
<p><b>5. Date assessment began:</b> 29 January 2021</p>
<p><b>Background</b></p>
<p><b>6. What are the aims and objectives or purposes of the policy or service?</b></p> <p>Dudley Council Plus traditionally opens from 09:00 to 12:00 on Saturday mornings.</p> <p>It requires 8 to 10 Customer Service Advisors (CSAs) to do so and 1 manager.</p> <p>All Dudley Council Plus CSAs work 1 in 6 Saturdays and work a reduced day during that week to ensure they work no more than 37 hours. This shorter weekday, when volumes of customer contact are far higher, can be detrimental to service delivery at that time, whereas Saturday mornings are traditionally quiet and the Saturday staff in are mainly utilised to cover admin and e-contact work that could be done any time during the week.</p> <p>In addition, all staff and management are paid an enhanced rate for the Saturday working of 0.25 for doing so, so in closing and utilising staffing resources on weekdays for all tasks, this would be a saving to the council.</p>

**7. Who is it intended to affect or benefit (the target population)?**

Residents in all wards of the borough.

**8. What are the main potential equality issues to be looked at?**

People effected by unpredictable/adverse situations (eg inclement weather). However, there is still access to assistance through emergency out of hours and Repairs Management teams – Dudley Council Plus deals with a range of services, but does not provide emergency/out of hour or 24 hour services.

**Evidence gathering**

**9. Provide details of all information about the policy, service or decision which will help with the assessment.**

**Equality monitoring data:**

**What monitoring data is collected for each of the protected characteristics? Set out relevant details of this data.**

No data collated as no reason to use it, therefore not appropriate to ask for it.

**Engagement and customer feedback:**

**What engagement has been carried out with users, customers, potential customers, employees as appropriate? What was the feedback?**

Due to Covid, the face to face element has been closed on Saturdays since March 2020, with no negative feedback received.

Although the call centre has remained open to date, volumes are decreasing as more people opt to self serve.

**What other relevant information do you hold e.g. are you aware of any barriers to any groups in accessing the service?**

None/no.

**What evidence is missing? What will be done to collect it?**

None.

<b>Data analysis</b>	
<b>10. What does the information tell you? What patterns or trends are there? What comparative data is there - how does your data compare with background data e.g. from the Census, national data or research, or other authorities?</b>	
Performance reporting – shows decrease in call volumes.	
Lack of any complaints or comments around face to face contact having been closed evidences no issues from the public or specific groups, plus an uptake in self service channels.	
<b>11. From your data analysis, what are the main issues relating to each protected characteristic (if any)? Consider all three parts of the public sector equality duty.</b>	
All protected characteristics	None in any characteristic – only data collected is overall volumes, which have reduced.
Age	
Disability	
Gender reassignment	
Marriage or civil partnership	
Pregnancy or maternity	
Race	
Religion or belief	
Sex	
Sexual Orientation	
<b>Are there any significant issues relating to other groups of people e.g. through social class or in particular parts of the borough?</b>	
No, as all emergency assistance can be facilitated through other channels – eg repairs, homelessness, urgent social care and similar (none of which come through Dudley Council Plus on Saturdays, service areas offer emergency access).	
<b>Identifying adverse impacts</b>	

**12. What are the main potential adverse impacts on particular protected characteristics that need to be taken into account in changing the service or policy/making a decision? Indicate any positive impacts.**

None.

**Alternatives/mitigating actions**

**13. How will any adverse impacts identified be reduced or removed? Explain if it is decided that an adverse impact is unavoidable.**

As above, emergency access is already available through other channels and service areas.

**Monitoring arrangements**

**14. How will the equality impact of the policy/service be monitored in future?**

Response to customer feedback or complaints.

**Action planning**

**15. Provide details of actions or improvements identified during the EIA.**

Covid transformation has helped us foresee the benefits of self service and therefore our action is to further develop these opportunities.

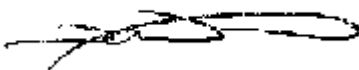
**Decision making**

**16. Who will be making a decision relating to the policy or service (e.g. the Cabinet, a Cabinet member through a decision sheet, a director or chief officer through delegated authority) and when will a decision be made?**

Cabinet.

*Note. The decision maker(s) need(s) to be briefed on the contents of the EIA. Include a summary of the main impacts in the 'Equality Impact' paragraph of any committee report or decision sheet (attach a copy of the EIA where appropriate).*

**Signed assessment lead officer:**



**Date: 29/01/2021**

**Chief officer/head of service:**



**Date: 29/01/2021**

## **Equality Impact Assessment**

### **Leisure Centres: Options Plus Discount scheme - reduce or remove certain categories**

A task and finish group has been set up to examine the options for achieving the proposed saving of £20,000 from the budget of the Regeneration and Enterprise Directorate. An equality impact assessment will be carried out as part of this process and proposals presented to elected members during 2020/21 for a decision on which changes will be made to the categories of those eligible to receive a discount after January 2022.