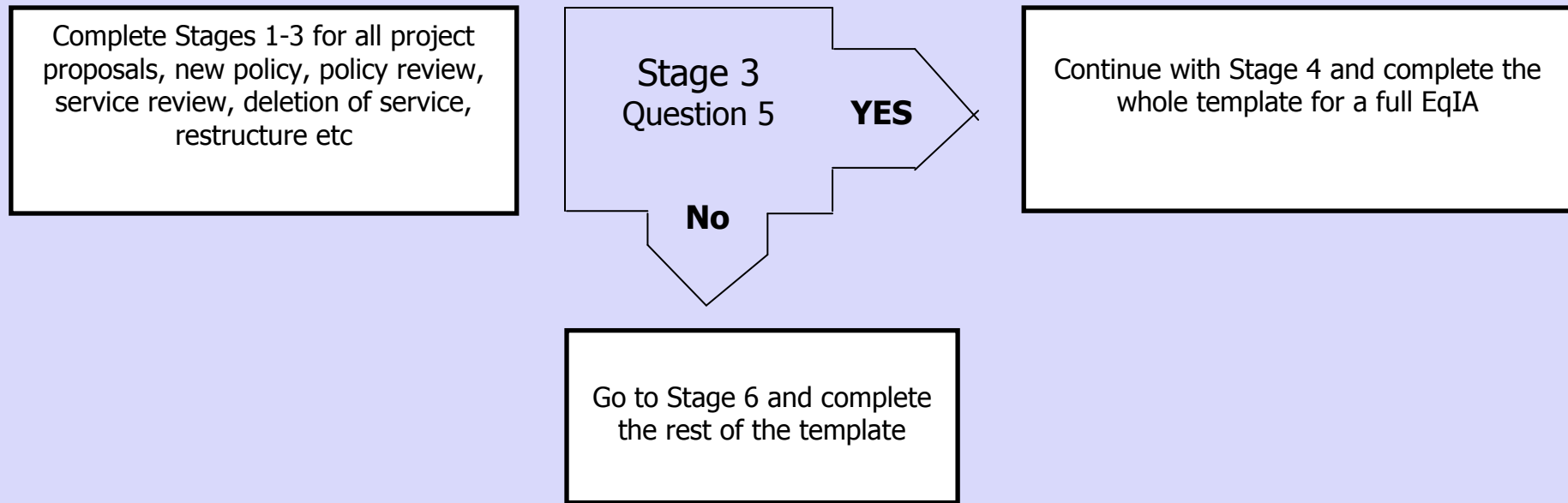


Equality Impact Assessment Template

The Council has revised and simplified its Equality Impact Assessment process (EqIA). There is now just one Template. Lead Officers will need to complete **Stages 1-3** to determine whether a full EqIA is required and the need to complete the whole template.



- In order to complete this assessment, it is important that you have read the Corporate Guidelines on EqIAs and preferably completed the EqIA E-learning Module.
- You are also encouraged to refer to the EqIA Template with Guidance Notes to assist you in completing this template.
- **SIGN OFF:** All EqIAs need to be signed off by your Directorate Equality Task Groups. EqIAs relating to Cabinet Reports need to be submitted to the EqIA Quality Assurance Group at least one month before your Cabinet Report date. This group meets on the first Monday of each month.
- Legal will NOT accept any reports without a fully completed, Quality Assured and signed off EqIA.

The EqIA Guidance, Template and sign off process is available on the Hub under Equality and Diversity

Equality Impact Assessment (EqIA) Template

Type of Decision: Tick ✓	✓	Cabinet		Portfolio Holder		Other (explain)	
Date decision to be taken:							
Value of savings to be made (if applicable):	£70K						
Title of Project:	Transition of funding responsibility of precaution service to Harrow C.C.G						
Reference:	PA_17						
Directorate / Service responsible:	Adult Social Care						
Name and job title of Lead Officer:	Visva Sathasivam						
Name & contact details of the other persons involved in the assessment:	Visva Sathasivam and Shaun Riley						
Date of assessment (including review dates):	August 2015						

Stage 1: Overview

<p>1. What are you trying to do?</p> <p>(Explain your proposals here e.g. introduction of a new service or policy, policy review, changing criteria, reduction / removal of service, restructure, deletion of posts etc)</p>	<p>This proposal is one of the projects falling within the minimising adults work stream under 'Project Infinity', and as such should not be viewed in isolation and instead as one part of a package of savings to be made by Adults.</p> <p>The Precaution service is a short-term home based care service that is provided free of charge for people who have been discharged from hospital and are diagnosed with a temporary disability, this is normally as a result of a fracture or following a surgical procedure. Whilst Health provide a reablement type service (STARRS) in recent years, the period of support is not sufficient resulting in a need for additional support which has historically been provided by Adult Social Care. This service is usually offered for up to 12 weeks, providing extra support to help them to complete their personal and daily living tasks during their recuperation period.</p> <p>As an intermediate care service, which cuts across both health and social care, under current legislation it cannot be a chargeable service.</p> <p>The Precaution service falls within the umbrella of intermediate care services. Intermediate care aims to offer care and support services to enable service users to maintain or regain the ability to live independently in their own home and is a time limited intervention. The support provided depends on service user's needs and the ability to meet identified outcomes.</p> <p>However in Harrow this type of intermediate care service (Precaution service) has been delivered and funded solely by the Local authority for a number of years.</p>
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	<p>Savings Proposal:</p> <p>This proposal is to cease the provision of the precaution service in 2016/17 and fully transfer all responsibility of this service to health under the umbrella of intermediate care (STARRS). This will provide Harrow council with a savings of £70K full year effect.</p> <p>This proposal achieves savings by transferring responsibility for the service from Social Care, back to Health.</p>
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<p>2. Who are the main people / Protected Characteristics that may be affected by your proposals? (✓ all that apply)</p>	Residents / Service Users	x	Partners	x	Stakeholders	x
	Staff		Age	x	Disability	x
	Gender Reassignment		Marriage and Civil Partnership		Pregnancy and Maternity	
	Race		Religion or Belief		Sex	
	Sexual Orientation		Other			

<p>3. Is the responsibility shared with another directorate, authority or organisation? If so:</p> <ul style="list-style-type: none"> Who are the partners? Who has the overall responsibility? How have they been involved in the assessment? 	<p>The line of overall responsibility to be transferred to our partners Harrow C.C.G through management negotiation, at the point of assessment CCG have not been consulted, but it is expected that they will be if the proposal is accepted.</p>
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Stage 2: Evidence & Data Analysis

4. What evidence is available to assess the potential impact of your proposals? This can include census data, borough profile, profile of service users, workforce profiles, results from consultations and the involvement tracker, customer satisfaction surveys, focus groups, research interviews, staff surveys, press reports, letters from residents and complaints etc. Where possible include data on the nine Protected Characteristics.

(Where you have gaps (data is not available/being collated for any Protected Characteristic), you may need to include this as an action to address in your Improvement Action Plan at Stage 6)

Protected Characteristic	Evidence	Analysis & Impact
Age (including carers of young/older people)	Service user information (Framework i)	<u>Age:</u>

		<p>18-24: 0</p> <p>25-64: 27</p> <p>65+ : 115</p> <p>The data collected from 2014 shows that the majority of clients using this service are 65+ This is a representative sample of service users over the last 12 months.</p>
Disability (including carers of disabled people)	Service user information (Framework i)	<p>Of the 142 client sampled:</p> <p>132 - physical disability,</p> <p>6 – Sensory disability</p> <p>3 – Require social support</p> <p>1 – Require memory and cognition support</p> <p>All service users have some form of disability.</p>
Gender Reassignment	This information is not available	N/a
Marriage / Civil Partnership	Service user information (Framework i)	<p>Of the 142 clients sampled:</p> <p>10 – Divorced</p> <p>43 – Married</p> <p>11 – Single</p> <p>20 – Widowed</p> <p>58 – Not declared</p> <p>The marital status of the sampled service users is very spread, with the majority of service users choosing not to</p>

		declare their marital status.
Pregnancy and Maternity	Not collected	n/a
Race	Service user information (Framework i)	<p>Of the 142 clients sampled:</p> <p>7 – Did not wish to reply</p> <p>2 – African</p> <p>5 – Any other Asian Background</p> <p>4 – Any other Ethnic Background</p> <p>14 – Any other White Background</p> <p>3 – Caribbean</p> <p>73 – English</p> <p>22 – Indian</p> <p>4 – Irish</p> <p>3 – Pakistani</p> <p>1 – Scottish</p> <p>2 – Somali</p> <p>1 – Sri Lankan</p> <p>1 – White/ Black Caribbean</p> <p>The majority of service users who have used the service in the last 12 months were English, with 22 Indian service users. This shows that the majority of service users impacted are English or Indian, and are likely to be</p>

		impacted more than other Races.
Religion and Belief	Service user information (Framework i)	<p>Of the 142 service users sampled:</p> <p>7 – Catholic</p> <p>30 – Christian</p> <p>23 – Hindu</p> <p>1 – Jainism</p> <p>23 – Jewish</p> <p>5 – Muslim</p> <p>1 – Sikh</p> <p>42 – Not Recorded</p> <p>4 – Other</p> <p>6 – No Religion</p> <p>The majority of service users did not record their religion, of those that did record their religion 30 are Christian and 23 are Hindu, and 23 are Jewish. These three Religions therefore will be impacted more than the other religions.</p>
Sex / Gender	Service user information (Framework i)	<p>Of the 142 service users sampled:</p> <p>103 – Female</p> <p>39 – Male</p> <p>The majority of service users are Female, and as such Females will be impacted more than Males.</p>

Sexual Orientation	Not collected	n/a
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Stage 3: Assessing Potential Disproportionate Impact

5. Based on the evidence you have considered so far, is there a risk that your proposals could potentially have a disproportionate adverse impact on any of the Protected Characteristics?

	Age (including carers)	Disability (including carers)	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation
Yes	✓	✓							
No			✓	✓	✓	✓	✓	✓	✓

YES - If there is a risk of disproportionate adverse Impact on any **ONE** of the Protected Characteristics, continue with the rest of the template.

- **Best Practice:** You may want to consider setting up a Working Group (including colleagues, partners, stakeholders, voluntary community sector organisations, service users and Unions) to develop the rest of the EqIA
- It will be useful to also collate further evidence (additional data, consultation with the relevant communities, stakeholder groups and service users directly affected by your proposals) to further assess the potential disproportionate impact identified and how this can be mitigated.
- **NO** - If you have ticked 'No' to all of the above, then go to **Stage 6**
- Although the assessment may not have identified potential disproportionate impact, you may have identified actions which can be taken to advance equality of opportunity to make your proposals more inclusive. These actions should form your Improvement Action Plan at Stage 6

Stage 4: Further Consultation / Additional Evidence

6. What further consultation have you undertaken on your proposals as a result of your analysis at **Stage 3**?

Who was consulted? What consultation methods were used?	What do the results show about the impact on different groups / Protected Characteristics?	What actions have you taken to address the findings of the consultation? E.g. revising your proposals
It is the intention of the proposal that the CCG will pick up the Precautions service, and as	If the CCG agree to take over the service, it is unlikely that any of the protected	The need for further consultation, and next steps planning will be considered if the CCG

such will need to be consulted on the proposal.	characteristics will be impacted.	review.

Stage 5: Assessing Impact

7. What does your evidence tell you about the impact on the different Protected Characteristics? Consider whether the evidence shows potential for differential impact, if so state whether this is a positive or an adverse impact? If adverse, is it a minor or major impact?

Protected Characteristic	Positive Impact ✓	Adverse Impact		Explain what this impact is, how likely it is to happen and the extent of impact if it was to occur. Note – Positive impact can also be used to demonstrate how your proposals meet the aims of the PSED Stage 7	What measures can you take to mitigate the impact or advance equality of opportunity? E.g. further consultation, research, implement equality monitoring etc (Also Include these in the Improvement Action Plan at Stage 6)
		Minor ✓	Major ✓		
Age (including carers of young/older people)		✓		<u>Age:</u> 18-24: 0 25-64: 27 65+ : 115 The data collected from 2014 shows that the majority of clients using this service are 65+ This is a representative sample of service users over the last 12 months.	The intention is for the CCG to take over this service, and as such the impact on the different ages should be nothing. Conversations will need to happen early on to ensure the CCG are willing to take over the service in the same form that it is currently.
Disability (including carers of disabled people)		✓		Of the 142 client sampled: 132 - physical disability, 6 – Sensory disability 3 – Require social support 1 – Require memory and cognition support	The intention is for the CCG to take over this service, and as such the impact on the different ages should be nothing. Conversations will need to happen early on to ensure the CCG are willing to take over the service in the same form that it is currently.

				All service users have some form of disability.	
Gender Reassignment				No information available	n/a
Marriage and Civil Partnership				No information available	n/a
Pregnancy and Maternity				No information available	n/a
Race				<p>Of the 142 clients sampled:</p> <p>7 – Did not wish to reply</p> <p>2 – African</p> <p>5 – Any other Asian Background</p> <p>4 – Any other Ethnic Background</p> <p>14 – Any other White Background</p> <p>3 – Caribbean</p> <p>73 – English</p> <p>22 – Indian</p> <p>4 – Irish</p>	<p>The intention is for the CCG to take over this service, and as such the impact on the different ages should be nothing.</p> <p>Conversations will need to happen early on to ensure the CCG are willing to take over the service in the same form that it is currently.</p>

			<p>3 – Pakistani</p> <p>1 – Scottish</p> <p>2 – Somali</p> <p>1 – Sri Lanken</p> <p>1 – White/ Black Caribbean</p> <p>The majority of service users who have used the service in the last 12 months were English, with 22 Indian service users. This shows that the majority of service users impacted are English or Indian, and are likely to be impacted more than other Races.</p>	
Religion or Belief			<p>Of the 142 service users sampled:</p> <p>7 – Catholic</p> <p>30 – Christian</p> <p>23 – Hindu</p> <p>1 – Jainism</p> <p>23 – Jewish</p> <p>5 – Muslim</p> <p>1 – Sikh</p> <p>42 – Not Recorded</p> <p>4 – Other</p> <p>6 – No Religion</p>	<p>The intention is for the CCG to take over this service, and as such the impact on the different ages should be nothing.</p> <p>Conversations will need to happen early on to ensure the CCG are willing to take over the service in the same form that it is currently.</p>

				The majority of service users did not record their religion, of those that did record their religion 30 are Christian and 23 are Hindu, and 23 are Jewish. These three Religions therefore will be impacted more than the other religions.	
Sex				Of the 142 service users sampled: 103 – Female 39 – Male The majority of service users are Female, and as such Females will be impacted more than Males.	The intention is for the CCG to take over this service, and as such the impact on the different ages should be nothing. Conversations will need to happen early on to ensure the CCG are willing to take over the service in the same form that it is currently.
Sexual orientation				No information available	n/a

<p>8. Cumulative Impact – Considering what else is happening within the Council and Harrow as a whole, could your proposals have a cumulative impact on a particular Protected Characteristic?</p> <p>If yes, which Protected Characteristics could be affected and what is the potential impact?</p>	Yes	✓	No	
	<p>It is expected that this service will be taken over by the CCG and as such there will be no cumulative impact. However, this proposal should be seen in connection with the reduction in reablement, and as such may impact the general availability of intermediate care services in Harrow.</p>			
<p>9. Any Other Impact – Considering what else is happening within the Council and Harrow as a whole (for example national/local policy, austerity, welfare reform, unemployment levels, community tensions, levels of crime) could your proposals have an impact on individuals/service users socio economic, health or an impact on community cohesion?</p> <p>If yes, what is the potential impact and how likely is it to happen?</p>	Yes		No	✓

Stage 6 – Improvement Action Plan

List below any actions you plan to take as a result of this Impact Assessment. These should include:

- Proposals to mitigate any adverse impact identified
- Positive action to advance equality of opportunity
- Monitoring the impact of the proposals/changes once they have been implemented
- Any monitoring measures which need to be introduced to ensure effective monitoring of your proposals? How often will you do this?

Area of potential adverse impact e.g. Race, Disability	Proposal to mitigate adverse impact	How will you know this has been achieved? E.g. Performance Measure / Target	Lead Officer/Team	Target Date
All Protected Characteristics	However to ensure this happens there will need to be a discussion with Harrow CCG regarding transferring responsibility as they are financially challenged	On - going monitoring	Joint executive meeting/HWBB meeting	16/17

Stage 7: Public Sector Equality Duty

<p>10. How do your proposals meet the Public Sector Equality Duty (PSED) which requires the Council to:</p> <ol style="list-style-type: none"> 1. Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010 2. Advance equality of opportunity between people from different groups 3. Foster good relations between people from different groups 	<p>The proposal aims for the CCG to take over the service, and as such the PSED should be met. However, there will be a negative impact on the PSED should the CCG decide not to take over the service.</p>
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Stage 8: Recommendation

<p>11. Please indicate which of the following statements best describes the outcome of your EqIA (✓ tick one box only)</p>	
<p>Outcome 1 – No change required: the EqIA has not identified any potential for unlawful conduct or disproportionate impact and all opportunities to advance equality of opportunity are being addressed.</p>	<p style="text-align: center;">x</p>
<p>Outcome 2 – Minor Impact: Minor adjustments to remove / mitigate adverse impact or advance equality of opportunity have been identified by the EqIA and these are listed in the Action Plan above.</p>	

<p>Outcome 3 – Major Impact: Continue with proposals despite having identified potential for adverse impact or missed opportunities to advance equality of opportunity. In this case, the justification needs to be included in the EqIA and should be in line with the PSED to have 'due regard'. In some cases, compelling reasons will be needed. You should also consider whether there are sufficient plans to reduce the adverse impact and/or plans to monitor the impact. (Explain this in Q12 below)</p>	
<p>12. If your EqIA is assessed as outcome 3 explain your justification with full reasoning to continue with your proposals.</p>	

Stage 9 - Organisational sign Off

<p>13. Which group or committee considered, reviewed and agreed the EqIA and the Improvement Action Plan?</p>			
<p>Signed: (Lead officer completing EqIA)</p>		<p>Signed: (Chair of DETG)</p>	
<p>Date:</p>		<p>Date:</p>	
<p>Date EqIA presented at the EqIA Quality Assurance Group (if required)</p>		<p>Signature of DETG Chair</p>	