Budget 2017-18: Equality Impact Assessments – Service-Users and Staff

The council is legally required by the Equality Act 2010 to evidence how it has rigorously considered its equality duties in the budget-setting process. To achieve this, Equality Impact Assessments (EIAs) have been completed on all budget proposals with a potential impact on service-users, related to their legally protected characteristics. Further assessment will be made through the budget consideration process and in relation to implementation, if budget proposals are accepted. An assessment of the cumulative impacts across proposals will also be available with the budget papers for full council in Appendix 9.

Members are referred to the full text of s149 of the Equality Act 2010 – included at the end of this document – which must be considered when making decision on budget proposals.

Service-user impact assessment		
Directorate	Service	EIA number
	Disability and mental health contracted services	1
	Residential and short breaks provision	2
	Community Care – learning disabilities	2a
	Adult Learning Disability community support service	3
	PROPOSAL DELETED	4
Families, Children &	Learning Disabilities Accommodation Services – Supported Living	5
Learning	Music and Arts	6
	Youth Service	7
	Children's Centres - universal groups and income	8
	Early Years and Childcare qualification bursary, database, sustainability funding	9
	Early Help, Integrated Team for Families and Parenting Services (ITFPS), and Early Help Hub	10
	Living Without Violence Programme	11
Health & Adult Social	Physical Disability and sensory loss and Mental Health services: Community	12

Care	Care Budget	
	PROPOSAL DELETED	13
	Ireland Lodge Residential Unit	14a
	Wayfield Avenue Residential Unit	14b
	Easylink Service for shopping trips operated by Community Transport	15
	Re-procurement of the Self-Directed Support Service	16
	Community Meals	17
	Community substance misuse services (Pavilions)	18
	Sexual Health	19
	Public Health nursing contracts for Healthy Child Programme 0-19	20
	Public Health improvement budget	20a
	Parking & Network Operations	21
	Supported Bus Services	22
Economy, Environment,	Subsidy for provision of sport and leisure activities within city parks	23
and Culture	Public conveniences	24
	Royal Pavilion & Museums	25
	Housing options and housing needs	25a
	Libraries	26
Neighbourhoods, Communities and	Third sector investment programme	27
Housing	Regulatory Services	28
nousing	LGBT Community Safety Officer	29
	Communities against drugs work	29a
Finance & Resources	Revenues and Benefits: roll-out of Digital First	30
T mance & Resources	Revenues and Benefits: Council Tax Reduction	31
	Democratic Services: print and services	32
Strategy, Legal &	Democratic Services: Members' Allowances	33
Governance	Life events: Bereavement and Registration Services	34
	EIA NOT REQUIRED: NO IMPACT ON SERVICE-USERS	35

Housing Revenue Account	Housing: service charge for door entry systems	36
Staffing impact assessmen	nt	
Directorate	Service	EIA number
	City Early Years & Childcare Workforce Development Team	S1
Families, Children &	Disability Services Management	S2
Learning	Early Help	S3
	Youth Service	S4
Foonemy Fryingsmant 9	City Regeneration	S5
Economy, Environment & Culture	Transport	S6
Culture	Premises, Facilities and Building Services	S7
Neighbourhoods,	Civil Contingencies Team	S8
Communities & Housing	Communities, Equality & Third Sector	S9
	Financial Services	S10
Finance & Resources	ICT	S11
rinance & Resources	Internal Audit	S12
	Procurement	S13

1. Service Area	Families Children & Learning Directorate - Health, SEN & Disability	2. Proposal No. 1	
3. Head of Service	Regan Delf, Assistant Director, Health, SEN & Disability		
	What is the proposal? Use the savings proposal wording and more detail if ne	eded	
4. Budget Proposal	Review of contracted services to ensure value for money and effective service delivery in the areas of disability and mental health. Proposed reduction of £86,000 in 2017/18		
	Highlight the most significant disproportionate impacts on groups		
 5. Summary of impacts Disproportionate impacts identified: Age, Disability and Carers Disability: These savings have already been negotiated with contracted services with minimal in One larger contract with AMAZE has been retendered and a further large contract will be retendered (Barnardo's). 		•	
	Savings have been planned to have minimal impact on any group.		
6. Assess level of impact (1= low; 5= high)	1		
7 Kou options to	What actions are planned to reduce/avoid negative impacts and increase pe	ositive impacts?	
7. Key actions to reduce negative impacts Disability: Some services, particularly training for parents, are being broudeliver and therefore the service will not be lost. Funding for support to fair Disability Living Allowance via AMAZE will be continued for a further year			

	Age: this proposal affects children and young people with disabilities we will work collaboratively with community and voluntary sector groups to minimise any negative impacts : Other: Carers of children and young people with disabilities will continue to be supported.		
8. Full EIA?	No		
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?		
9. Monitoring and Evaluation	 Working together with the CCG and Public Health, data will be gathered from JSNAs and service user feedback to enable the most effective joint commissioning of services with funding from across agencies. Data collated monthly on numbers of disabled children in need, on the Child Protection Register and in care are collected to ensure there is no unanticipated rise in numbers. Additionally work with AMAZE and the Parent and Carers Council will ensure parents and carers are able to give feedback on the impact of proposals so these can be kept under review and action taken as needed. 		
10. Cumulative impactsMight related proposals from other service areas (or other changes) worsen or mitigate impacts for your proposal? Please explain these impacts.Benefit caps and reductions in welfare payments are likely to impact on families of disabled children as the families may not be able to work for as long hours or at all on account of extra caring responsibilities and thus more often in poverty.			

1. Service Area	Families Children & Learning Directorate - Health, SEN & Disability	2. Proposal No. 2	
3. Head of Service	Regan Delf, Assistant Director, Health, SEN & Disability		
	What is the proposal? Use the savings proposal wording and more detail if nee	eded	
	Reduction in short breaks and respite care for disabled children - budget saving local provision options and thus reducing further the need for independent and n		
4. Budget Proposal	The current provision of in-city residential and short breaks provision to be re-str resource for long term full-time residential support thus preventing the need for a for children in care or needing residential provision - better and more flexible use families needing short breaks.	agency out of city placements	
	A reduction in agency placement costs will be achieved by creating a further small number of additional full time beds within Drove Road/Tudor House residential homes - this will reduce the need for external agency places and will increase the opportunity for disabled children and young people to stay in the local area.		
	This may require some further internal building work within Drove Road to accommodate more young people and is likely to require the use of some current office accommodation on the top floor.		
	A reduction in the need for four-five independent and non-maintained residential this savings to be made.	placements is likely to enable	
	Highlight the most significant disproportionate impacts on groups		
5. Summary of impacts	Disproportionate impacts identified: Age (young people), Disability and Ca Age & Disability : This proposal impacts on children and young disabled people	e. There will be some positive	
	impacts from this proposal, particularly enabling more disabled children and you residential and care provision being able to receive this in the city closer to home rather than in out of city independent placements		

	However increasing full time beds at Drove Road and Tudor House will have an impact on availability of overnight short breaks (ie one or two nights a week) – steps will be taken to mitigate this as far as possible.
	Other impacts : Family Carers of disabled children may have reduced ability to work and can be financially disadvantaged. This is particularly the case for single parent families where the additional care needs of children may not be shared to the same extent. Although proposals are designed to avoid reduction in front line services and support for families with disabled children it may not be possible to mitigate this entirely
6. Assess level of impact (1= low; 5= high)	2
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?
7. Key actions to reduce negative impacts	To mitigate the impact of a reduction in short break residential options at Drove Road and Tudor House, plans are in place to offer an extension of other short break options, to increased extended day provision from the new special school integrated hubs, and better use of direct payments will be put in place with improved recruitment and training of personal assistants.
	The Children's Disability Service has adopted the FACE resource allocation system which provides a transparent and equitable system for allocating short break and respite provision. Particular stresses and burdens on families are picked up through this assessment system and will allocate differential resource for eligible families accordingly.
8. Full EIA?	Not needed at this stage – will be produced before the beginning of the new financial year.
How will you monitor the impact of this proposal and the success of your mitigating actions groups over the coming year (or more)?	
9. Monitoring and Evaluation	Impact on all service users will be monitored via single assessments and annual care plan reviews. Additionally monthly data and performance reports will check that there is no negative impact on children on child protection register or needing to come into care.
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.

No direct connection to other actings areas at present though it is expected there will be increased demand on
No direct connection to other savings areas at present though it is expected there will be increased demand on
the Direct Payments Budget.

1. Service Area	Families Children & Learning Directorate - Health, SEN & Disability	2. Proposal No. 2a
3. Head of Service	Regan Delf	
	What is the proposal? Use the savings proposal wording and more detail if n	eeded
4. Budget Proposal	end on the Learning Disabilities	
	Highlight the most significant disproportionate impacts on groups	
5. Summary of impacts	Disproportionate impacts identified: Disability, Ethnicity, Gender Reassig Carers	gnment, Sexual Orientation,
	Vulnerable people in the City are assessed in accordance with the Care Act 20 need to be met with care and support.	014 to see if their eligible needs
	850 adults with a learning disability and / or autism have eligible needs and are paid for via the Community Care budget. Services being provided are: Resider Community Support and Day Options.	
	Any reduction in the community care budget will have a direct effect on the am is offered.	nount or the way support and care
	Care costs are steadily increasing and there is an increasing level of complex higher care costs. This is a trend reflected nationally as well as locally. For pe be a perceived reduction in the level of service they receive or potentially a cha which can be unsettling for users and families.	ople and their families there could
	Disability : How to manage new conversations will require staff to manage any carefully and skilfully. Direct payments must continue to be promoted (Care Ac creative and sustainable modes of support and care, however these are not apprendice upper 2017.19	ct 2014) as a way to deliver more

	Service Users with higher support needs.		
	Ethnicity : People from minority ethnic groups may continue to face disproportionate impacts, for example reduction in budgets for translators or for more in-depth work.		
	Gender reassignment : As we are trying to increase engagement with this group, and recent research shows that despite the city being 'trans-friendly' for people identifying as trans discrimination, abuse and isolation is still a problem, thus any reduction in funding may impact negatively on any extra initiatives in this area.		
	Sexual orientation : Some LGB people still remain silent or hidden. At a time of resource realignment there is a risk that these groups become more distant or marginalised.		
	Other groups : People with Learning Disabilities who are in transition from Children's to Adults services at this time of resource realignment may be adversely affected as transition can take longer if not managed creatively and resources are not targeted effectively. This can mean young people with Learning Disabilities could experience a delay in accessing services they are entitled to when reaching 18, such as extra benefits.		
	The Care Act 2014 places a requirement on Local Authorities to assess Carers. Work provided by carers in the city is of huge value, representing a huge saving. Any threat including any funding restrictions could have a direct effect on carers to continue in their caring role.		
6. Assess level of impact (1= low; 5= high)	2 – There is an obligation to meet statutory need and there is a clear plan to implement a method of operating using the wellbeing and prevention approach as well as an asset based approach to our support and care offer - see below		
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?		
7. Key actions to reduce negative impacts	The Care Act asks for more than just Adult Social Care to look to offer support to people, instead recognising that a city-wide approach much be embraced encompassing all services from housing through to leisure to enhance the lives of vulnerable people.		
	Therefore, a new asset based approach is needed, a fundamental and radical rethink to help develop a new conversation with the public about how people, friends and families as well as communities can help people to		

remain independent.

The integration agenda with health gives opportunities to reduce duplication and work in a more joined up way to proactively identify those people who may be at risk of going into hospital or residential care and thus manage risk, help people to live life and have a good death. Together we will ensure improvements in consistency particularly around the giving of information and advice to service users in how to access information, and get support to manage their own care needs.

We aim to carry this out by:

- Providing individuals living with families support to manage and sustain their care arrangements for as long as possible.
- Ensuring the right level of support takes place in the most appropriate setting; maximising independence, health and wellbeing.
- Continuing to offer personal budgets to clients to meet support needs in cost effective way, and
 promoting direct payments as a means of stimulating more creativity and choice about how people can
 meet their eligible needs.

Technology must be available for people to be supported remotely and in a modern way from telecare through to telehealth and other technologies and a raft of equipment which can help people remain independent.

A new reviewing framework will invite our partners to join us in reviewing people in a timely way and is intended to release care capacity and target those most in need.

New and VFM commissioning of appropriate supported living and accommodation services for people with Learning Disabilities will add to the savings in the long term and increase the quality of life for a small but significant cohort of people.

A new reviewing framework across Adult Social Care of our Independent Sector Providers, which includes integrating a digital platform for Performance, Activity and Quality information, will invite our partners to join us in ensuring we only gather and report on information that is needed in a timely way, and help us to ensure support is outcome focused, and resources are directed to those that are most in need.

	An enhanced crisis provision service within CLDT will provide targeted prevention work to the highest need service users in the city, working to prevent hospital admissions and placement breakdowns, which can result higher cost placements being required in the future. The Service will comply with the new Accessible Information Standards (S.250) of Health and Social Care Act 2012.	
	Commissioners across Children's and Adults services will work together with providers to prioritise assignment of resources, and ensure that the additional focus on all protected groups can continue.	
8. Full EIA?	Not needed	
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
9. Monitoring and Evaluation	 Service users will have their statutory individual Care Reviews Contracts will be monitored via the Commissioning and Performance Team 	
	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
10. Cumulative impacts	Housing is a key player to deliver good support and care. Any significant reduction in access to suitable housing will have a direct effect on the CCB	
	Public health as a partner is key in promoting wellbeing and healthy lives this is critical to stem any future and immediate demand.	
	The CCG are a key partner and currently there are some joint funding arrangements in place to share some community care costs for people being discharged from specialist LD hospitals. Any reductiton in funding from the CCG would have a direct effect on the community care budget.	

1. Service Area	Families Children & Learning Directorate - Learning Disability – Adults Provider – Community Support Service	2. Proposal No. 3	
3. Head of Service	Regan Delf – Assistant Director Health, SEN & Disabilities		
	What is the proposal? Use the savings proposal wording and more detail if ne	eded	
	Savings £30,000 from a budget of £196,000 – 15.3%		
4. Budget Proposal	This service provides support & advice to adults with learning disabilities who n relating to mental health and/or substance misuse who are living independently		
	Highlight the most significant disproportionate impacts on groups		
5. Summary of impacts	Disproportionate impacts identified: none specifically		
All service users are disabled – however, there is no reduction to front line service minimal impact to users of the service.		ice provision so there will be a	
6. Assess level of impact (1= low; 5= high)	1		
7 Kou ootiono to	What actions are planned to reduce/avoid negative impacts and increase p	ositive impacts?	
7. Key actions to reduce negative impacts	All service users who have a statutory entitlement to ASC and who need Comm their needs, will continue to receive this service	nunity Support provided to meet	

8. Full EIA?	Not needed
9. Monitoring and	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
Evaluation	Review of changes after 6 months will highlight any unanticipated adverse impact which can then be minimised.
10. Cumulative	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
impacts	None envisaged

EIA 4 – PROPOSAL DELETED

1. Service Area	Families Children & Learning Directorate - Learning Disabilities Accommodation Services – Supported Living	2. Proposal No. 5	
3. Head of Service	Regan Delf - Assistant Director Health, SEN & Disabilities		
	What is the proposal? Use the savings proposal wording and more detail if needed		
4. Budget Proposal	Learning Disability directly provided supported living services £223,000 from a learning Disabilities Accommodation services is the Council's directly provided living service for people with a learning disability. The proposal is that the Council's of its Supported Living services and these services will be re-provided through Following consultation to implement outcomes/model to deliver the savings requires service is currently in progress with contract start dates for new providers being	residential care and supported cil will no longer directly provide the independent sector. uired. The re-procurement of this	
	Highlight the most significant disproportionate impacts on groups		
5. Summary of	 Disproportionate impacts identified: Age (older people), Disability (Learning Disability), Carers In future service users will not be able to choose accommodation provided directly by the Council Some people may have their care and support provided by the independent sector rather than the Council's directly provided service. 		
impacts	Specific impacts		
	 Age: Some service users are older and may have a dementia diagnosis Disability: All service users affected have learning disabilities some also have physical disabilities and some may be on the autistic spectrum. Support required to cope with change which will be kept to a minimum as care staff will be transferring to new care provider. Carers: Family Carers may be anxious about change of care provider 		

6. Assess level of impact (1= low; 5= high)	2		
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?		
	 All service users with a learning disability who have a statutory entitlement to ASC and who need accommodation provided to meet their needs will continue to receive services. 		
7. Key actions to reduce negative	• There has been a three month consultation with service users to ensure that their service can continue to meet their needs.		
impacts	 The three month consultation included Carers advocates and their families 		
	 It will also look at needs on an individual basis 		
	Ensure good handovers to new care providers.		
	Plan transition to new accommodation where there is a relocation of the service planned (one service)		
8. Full EIA?	Completed in 16/17 as part of the consultation process		
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?		
9. Monitoring and Evaluation	Comise wears will have their statuter via dividual Care Deviaus		
Evaluation	 Service users will have their statutory individual Care Reviews Contracts will be monitored via the Professional Standards, Safeguarding and Quality Monitoring Team 		
	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.		
10. Cumulative	 There could be further delays to the re-procurement processes 		
impacts	 The costs of the re-procured services will be met via the Learning Disability Community Care Budget and budgets for the transferred In House Provision will be transferred to this budget minus required savings. There are pressures on the Community Learning Disability Team which could potentially impact upon 		
	monitoring of new providers for individual service users.		

1. Service Area	Families Children & Learning Directorate - Music & Arts	2. Proposal No. 6	
3. Head of Service	Peter Chivers		
4. Budget Proposal What is the proposal? Use the savings proposal wording and more detail if needed The majority of council funding to Brighton & Hove Music & Arts ceased from April 2016. The service sustainable if proposed plans to council are implemented.			
Highlight the most significant disproportionate impacts on groups Disproportionate impacts identified: none specifically • A potential reduction in funding should not impact on any one group more than ability of the service to provide such a broad range of music opportunities could on the amount of funding reduction			
	 The ability of the service to provide such a range of subsidies for famil affected with a reduction in funding 	ies on low incomes could be	
	 The ability of the service to provide good quality instruments for loan a reduction in funding and these are prioritised for families on low incom 		
6. Assess level of impact (1= low; 5= high)	2		
7. Key actions to reduce negative impacts	What actions are planned to reduce/avoid negative impacts and increase positive impacts?		

	 Whilst ensuring that opportunities provided by the service are sustainable the fee structure will be set so that any increases in charges will kept to an absolute minimum The service will retain subsidies for families on low incomes of 80%, 50% and 20% to support access to music opportunities in the city The service will continue to offer a first access programme to every Primary school of a minimum of one term's instrumental tuition for each child in a specified year group, free at the point of delivery The service has developed a service level agreement with the Virtual School for Children in Care that prioritises opportunities for Looked After Children and ensures that tuition is provided free of charge The service will continue to signpost families to organisations that can support with grant funding such as the Brighton & Hove Music Trust, Encore and the Pebble Trust The service will be continuing to prioritise opportunities for children with SEN/D and individual tuition is also offered where this better meets individual needs. Targeted programmes will be offered to schools identified as having the lowest numbers of pupils engaging in music The service will explore other potential sources of funding such as working with schools to use Pupil Premium as a means of supporting access to tuition.
8. Full EIA?	The last service EIA was completed in December 2013 and a further EIA will be undertaken once the outcome of the tender process is known.
How will you monitor the impact of this proposal and the success of your mitigating groups over the coming year (or more)?	
9. Monitoring and Evaluation	 Service data on the uptake of activities by different protected groups Service data on the number of families accessing subsidised tuitions schemes Evaluation of service activities by different stakeholders including parents/carers, children and young people, Parents and Friends Association
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.

The shared use of the current building has contributed towards some of the operational costs

1. Service Area	Families Children & Learning Directorate - Youth Service	2. Proposal No. 7	
3. Head of Service	Rachel Carter		
What is the proposal? Use the savings proposal wording and more detail if needed			
4. Budget Proposal	The 2015 Youth Review proposed a youth work model of in-house provision of targeted youth work, youth engagement and central support/coordination, and for commissioning of open access provision for targeted neighbourhoods/communities from CVS providers. There was a reduction to the in-house budget by £400,000 in 2015/16 and a service redesign took place. The intention was to develop a wider trust arrangement. It is now proposed that more significant savings are made which would lead to the overall budget being just over £200,000. The reduced budget will need to pay for a service that the Council must provide under the law - advocacy services to all looked after children in the care of the council. If the cut proposed were made the current in house provision will need to be significantly re-designed and, youth work provided by CVS currently funded by this budget will be impacted as described below.		
Highlight the most significant disproportionate impacts on groups Disproportionate impacts identified: Age (young people), Disability, Et		city, Gender (boys and girls),	
5. Summary of impacts	Gender Reassignment, Child Poverty The in-house council youth services that are likely to be cut are targeted youth information bus; 1-1 and group work around resilience on issues such as risk ta esteem, anger management and risk taking; Duke of Edinburgh for those outsid people with SEND; Youth Arts Award. The provision of confidential advice, sign reduction work, social education provision, one to one support and identification longer be available in their current form by a dedicated in-house service.	aking, mental health and self- de mainstream school and young posting to other services, harm	
	The cuts will affect the work of community based organisations which receive fu	unding from this budget. There is	

likely to be a reduction in the delivery offered by the Crew Club, the Deans Youth Project, Brighton Youth Centre, the Tarner Community Project, the Trust for Developing Communities, the Hangleton and Knoll Project, the YMCA and the Young People's Centre. Some of those services may not be able to continue in their current form or at all unless they can find alternative sources of funding.
Youth work takes place in different areas across the city, including areas of high deprivation and poverty such as Whitehawk, Moulsecoomb, Hangleton and Knoll, Tarner and areas of the city centre. Economically disadvantaged people / young people and the most vulnerable people in our communities will be affected.
Cuts to youth services will specifically impact on young people and their families. By stopping the in-house and commissioned youth work this will reduce the numbers of young people able to access this support.
Disability : Young disabled people, or with a learning disability, mental health condition or a long-term illness may face additional physical and social barriers to accessing services and may be disproportionately affected the reduction in some of the services likely to be impacted by the proposed cuts
Ethnicity : Reduction in support may impact on accessibility. BME young people report their main issues are education, employment, racism and racial discrimination and mental health and well-being.
Gender : The closure or reduction in open-access youth services may disproportionately impact on boys since they tend to use youth services the most. There is a higher need for girls around support with bullying, smoking and alcohol whereas for boys more support is needed with discouraging the misuse of prescription drugs
Gender reassignment : The Trans Needs Assessment states that 55 young trans people are in contact with local specialist youth provision. Transgender young people leave school earlier than any other group and are more likely to report bullying and harassment at school. Trans young people are more likely to suffer from social isolation, exclusion and bullying, so a reduction in youth support services may exacerbate this.
Child poverty : 3,333 young people aged 13-18 years were identified as living in one of the 20% most deprived Lower Super Output Areas in England. Schools in East Brighton report more bullying than the rest of the city – possibly linked to higher levels of deprivation. Carers in vulnerable communities or families with low income will have reduced options for their children to be involved in positive activities.
Increased vulnerability of young people, including those with protected characteristics following the closure or reduction of youth work provision where they can access confidential support and guidance from an adult with respect to exploring their identify, finding acceptance or finding out about other services.
Decisions on funding have not been made regarding targeted work for disabled, LGBT and BME young people.

6. Assess level of impact (1= low; 5= high)	5
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?
7. Key actions to reduce negative impacts	A consultation with young people is underway and will inform an understanding of the impact and inform any service redesign. The outcome of the consultation will be made available to inform the decision on the budget, and be utilised to update the EIA as needed.
	Identify funding that we believe is going to be available locally to ensure that it meets the needs of the most vulnerable young people and protected groups. Influence and shape funding and other activities to ensure that they meet the needs of diverse young people, especially those who are most vulnerable. Specifically as part of the City Employment and Skills Plan a Services Action Group has been established which has as one of its core aims to identify current funding regimes and explaining emerging ones with specific reference to the projects funded through the Building Better Opportunities Programme which is European Social Fund match funded by the Big Lottery, which are starting to roll out in the Coast to Capital area. There are six projects which cover the Brighton & Hove area and the primary project delivering to young people is being run by Barnardo's and aimed at 16-24. There is a further call out via the Local Enterprise Partnership (LEP) for applications to support young people in the area, who are not in education employment or training, with specific reference to Special Educational Needs and care leavers.
	There is an opportunity to work with Sussex Learning Network who have been granted significant funding to support young people in the most deprived areas of Sussex including Brighton and Hove, into higher education. This is part of the National Collaborative Outreach Programme funded by HEFCE. There is scope to deliver this in ways to support re-engagement, resilience and keeping young people in an educational setting.
	Support from organisations such as Community Works will continue to be available to CVS to explore alternative funding strategies which are less / non reliant on LA funding. Council will communicate opportunities for alternative funding where available. Information and links will continue to be available for young people friendly activities provided by other BHCC departments, and organisations in the city such as uniformed and faith based groups, the music and arts service

	The Outdoor Education Advisory support service has moved into a traded service for schools and other cen		
	The Duke of Edinburgh award scheme will continue to be delivered by schools in Brighton & Hove Schools. The in-house support to vulnerable young people who can't access the award through schools, e.g. those attending the PRU or special needs schools, will be cut.		
	Where possible the intention is to protect funding for work with young people with specific protected characteristics. From the available budget priority will be given to the funding of targeted work relating to disabled, BME and LGBT young people, informed by consultation with providers.		
	This budget is not the only budget which funds services for young people. Specialist services for vulnerable young people in the city will remain notwithstanding the current budget cuts. These include the Extended Adolescent service, the Youth Offending Service (YOS), RU-OK?, the social work Adolescent Pod, the Youth Employability Service (YES), the youth advocacy service for looked after children, Cherish, Extratime Ltd, CAMHs.		
8. Full EIA?	The EIA will be updated and refreshed following a decision about the budget for youth services.		
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?		
	The impacts on the wellbeing of young people, envisaged as a result of the cuts will be monitored via the remaining youth services such as RuOK, Youth Offending Service, and specialist services in schools, such as drug and alcohol programmes.		
9. Monitoring and Evaluation	Assurances will be sought from the Coast to Capital LEP to be fully briefed on impact of Building Better Opportunities (BBO) Big Lottery Fund bids in the region with attendance at the Steering Group for these bids.		
	Working in partnership with local CVS organisations to be fully briefed on impact of their activities with protected groups.		
	Participation in steering groups where appropriate to ensure organisations are meeting the local requirements and supporting vulnerable young people in the city.		

10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
	 There will be other proposed reductions to services to families from other departments that may impact on families and therefore indirectly to young people in those families. Further cuts to preventative work will impact on those specialist services who are under most pressure. Impact of budget proposals for sports development and the reduction overall therefore of non-educational development opportunities for young peoples (non-youth work) in the city may impact on their physical and mental well-being, general development, socialising skills.
	The proposed additional reduction in funding for the Third Sector Commission would impact on the ability of CVS groups to address impacts outlined above.

1. Service Area	Families Children & Learning Directorate - Children's Centres - universal groups and income	2. Proposal No. 8	
3. Head of Service	Caroline Parker		
	What is the proposal? Use the savings proposal wording and more detail if needed		
4. Budget Proposal	 Income from midwifery for clinics and running cost savings (£40,000) Review of universal groups run in children's centres and play and learn groups in libraries, reducing funding for the Brighton & Hove Unemployed Centre and reduction in administration (£60,000). 		
	Highlight the most significant disproportionate impacts on groups		
	Disproportionate impacts identified: Age (young people), Ethnicity, Gender Poverty	r, Religion/Belief, Child	
	The additional income from midwifery, running cost savings and reduction in adn impact.	ninistration will not have an	
5. Summary of	The other services are aimed at children under 5 so there would be an impact on this group, women and families living in poverty if the funding reduction leads to the closure of the Brighton Unemployed Centre Crèche or a reduction in the number of open access groups.		
impacts	Age: children under 5 years		
	Disability: Children's Centres offer specific groups for disabled children and their parents which will not change.		
	Ethnicity : The majority of children using the Brighton Unemployed Centre Crèche are from BME groups so there would be an impact if the crèche closed. Monitoring of universal groups shows that across the city a third of children are BME. The largest group is White Other (13%) followed by Other Mixed (4%). There is a variation in attendance across the city with the Tarner children's centre having the largest attendance.		
	Gender : The vast majority of parents using the services are women. Any chang disproportionally on women who have young children.	es to the service will impact	

	Religion/Belief : Monitoring shows that around 40% of all children's centre users have no religion, around 25% are Christian and 10% Atheist. There could be a disproportionate an impact if the Brighton Unemployed Centre Crèche closed.
	Sexual orientation: There are no proposals to change the children's centre LGBT Rainbow Families Group.
	Child poverty : The reduction in funding for the Brighton Unemployed Centre will impact on families living in poverty whose children are not eligible for free childcare places for 2, 3 or 4 year olds. For example younger children or where children are already receiving funding with another childcare provider. Any reduction in open access groups may impact on families living in poverty as they are less able to travel to attend other groups
	Other groups : The reduction in funding for the Brighton Unemployed Centre could impact on families living in poverty whose children are not eligible for free childcare places for 2, 3 or 4 year olds. For example younger children or where children are already receiving funding with another childcare provider.
6. Assess level of impact (1= low; 5= high)	2: Overall the funding reduction is small so will have a minimal impact on a small number of people. There could be a more significant impact on vulnerable people if the Brighton Unemployed Centre Crèche closes.In that circumstance we anticipate that the impact would be at level 3.
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?
	The Brighton Unemployed Centre Crèche is registered to receive funding for free childcare places for two year olds and will be encouraged to increase the use of this funding in the future.
7. Key actions to reduce negative impacts	Reviewing universal groups will take account of the number and level of disadvantage of children and families attending the groups, whether more groups can be supported by volunteers and what other groups are available locally.
	All disabled two year olds eligible for the Disabled Living Allowance are entitled to free childcare places.
	From September 2016 3 and 4 year olds with working parents can access 30 hours of free childcare a week – helping families living in poverty to access work.

8. Full EIA?	Not needed at present. This will be kept under review.	
9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
	Future monitoring of the use of universal groups and Brighton Unemployed Centre Crèche.	
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
	Other changes to early help services may impact on women, BME families and families living in poverty.	

1. Service Area	Families Children & Learning Directorate - Early Years and Childcare: qualification bursary, database and sustainability funding	2. Proposal No. 9	
3. Head of Service	Caroline Parker		
	What is the proposal? Use the savings proposal wording and more detail if nee	eded	
4. Budget Proposal	 Reduction of qualification bursary scheme for private, voluntary and independent early years and childcare providers – saving £30,000 Reduce administration by introducing a self-service database for childcare providers – saving £20,000 No longer offer sustainability funding for voluntary childcare groups – saving £10,000 Saving of £60,000 in total. 		
5. Summary of impacts	Highlight the most significant disproportionate impacts on groups		
	Disproportionate impacts identified: Age (young people), Gender (women)		
	The early years and childcare workforce is predominantly female so a reduction on spend on bursaries may have a disproportionate impact on women if apprenticeship funding is insufficient.		
	There is also a (slight) risk that children attending early years and childcare settings in the city may be affected if quality is reduced through lack of qualified staff.		
	There is a slight risk that no longer offering sustainability funding could reduce the number childcare places available to young children and their parents.		
	It is unlikely that any other groups will be disproportionally affected by these pro	posals.	
6. Assess level of impact (1= low; 5= high)	1		

	What actions are planned to reduce/avoid negative impacts and increase positive impacts?	
7. Key actions to reduce negative impacts	New apprenticeship funding mechanisms should provide suitable alternative funding for childcare qualifications. There is, however, current uncertainty about how this will affect childcare providers and whether the funding will be enough. The Government is expected to publish a workforce strategy for the sector which may clarify the funding situation. The local authority will lose any influence on the quality of the provision of early years qualifications in the city but will seek to work with training providers to keep courses affordable and will actively promote apprenticeship funding to childcare providers in the city.	
	Early Years and Childcare team will work with providers to ensure apprenticeship funding is accessible for all people and quality is maintained	
	The Early Years and Childcare Team provides training and sign posting to business support for childcare providers to increase their sustainability.	
8. Full EIA?	No	
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
9. Monitoring and Evaluation	As we are completely removing the bursary funding it will be difficult to monitor the impact as we will have no role in qualification provision. However, we will try to engage with training providers to encourage good take up of apprenticeship funding and ensure childcare providers can contact us regarding funding issues. We will continue to monitor the number and location of childcare places in the city,	
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
	The proposals will result in greater numbers of apprentices in the city.	

1. Service Area	Families Children & Learning Directorate - Early Help, Integrated Team for Families and Parenting Services (ITFPS), Early Help Hub,	2. Proposal No. 10	
3. Head of Service	Emma Cockerell and Caroline Parker.		
	What is the proposal? Use the savings proposal wording and more detail if ne	eeded	
	Integrated Team for Families and Parenting Service (ITFPS) & Early Help I	Hub:	
4. Budget Proposal	 There are three proposals in the Budget: Integrated Team for Families and Parenting Service - To restructure the staffing of the service and reduce running costs. (£80,000) Early Help Hub and the Family Information Service - to restructure the service (£100,000) Redesign of early help services across Families, Children & Learning (£300,000) to include the Early Help Hub, Parenting, Family coaching and the repercussions of the ending of the Troubled Families programme by 2020. Currently available resources by 2020 will reduce by two thirds. Services will focus on those children at risk of escalating need to meet social work thresholds by delivering family support through community provision as part of the as part of the neighbourhood strategy based in children's centres. If all savings were accepted then the total reduction in council funding would be £480,000. 		
	Highlight the most significant disproportionate impacts on groups		
5. Summary of impacts	Disproportionate impacts identified: Age (young people), Disability, Gend Carers The proposal is to reduce funding by restructuring and redesigning early help s Team for Families and Parenting Service, the Early Help Hub and the Family In services deliver the Government's 'Troubled Families' programme which support disadvantage. While there are some efficiencies that can be made from different in funding will lead to an overall reduction in services which will impact on protein	ervices including the Integrated formation Service. These orts families facing multiple nt ways of working the reduction	

disproportionate impact is likely to be on:

- Children and young people
- Women
- Disabled children, young people and adults
- Families living in poverty
- Other groups Children aged 0-17 & Parents and carers of all ages

ITFPS and the Early Help Hub work with families who have multiple complex needs that generally fall just below the social work threshold. The Family Coaches, Early Help co-ordinators and Parenting Practitioners work with individuals within families of all ages as well as all other protected groups. A reduction in the ITFPS and overall Early Help budget will result in a reduced number of workers. Consequently the current service offer will need to reduce which will impact on all protected groups.

There is currently a high demand for the service (all referrals to ITFPS are screened to identify level of need at the Early Help weekly allocation meeting) with waiting times of between 4-6 weeks. Increased waiting times or rejecting referrals with this level of need due to lack of resource is likely to result in increased pressure on social work teams i.e. families referred to MASH as situation escalates and social workers not being able to step down to Early Help due to ITFPS or the Early Help Hub not being able to pick up this work. The increase in referrals to social work is likely to lead to an increase in children subject to a child protection plan and to becoming Looked After as the lack of prevention services results in family problems worsening and increasingly expensive resources required to address.

The Early Help Hub and ITFPS will have to reduce the number of staff it employs, and as a result there will be a reduction in the number of people they can support, and the areas of support they cover.

There may be increased waiting times to access services, which will lead to an increase in re-referral rates to the MASH (Key Performance Indicator). This is as a result of remaining staff being required to support greater numbers of service users and professional groups to effectively co-ordinate planning and in such circumstances they could feasibly struggle to adequately meet and stem needs. This in turn will increase pressure upon Children's Social Work, Health, Education partners and Police colleagues.

Age: Both the ITFPS and Early Help Hub work with children and young people 0-19 and their families. Children are entirely dependent upon others to have their needs met and in many cases are dependent upon a professional network for those needs to be identified and acted upon by others. A reduction in staff identifying need, assisting other professionals in managing needs and providing early help is likely to lead to an increase in the numbers of children referred for higher levels of intervention.

Age potential impact – significant – Level 5.

Disability: The majority of families worked within ITFPS and the Early Help Hub are affected by a substantial and long term health issue (both physical or mental impairment). A large number of secondary school age children/young people worked with have mental health issues that are disrupting their social life, emotional wellbeing and education that will impact on them in the long term. Engaging and supporting them and their parents, including accessing specialist services is crucial in minimising future adverse outcomes. In addition many of the parents/carers that we are working with have health conditions that are severely impacting on their and their children's lives. A reduction in funding will impact on the ability to deliver this service and is likely to increase pressure on adult social care as well as children's social work

Disability potential impact - significant - Level 5.

Ethnicity: The service works with families and individuals within families from a range of ethnic backgrounds therefore a reduction in funding will impact on the ability to deliver this service. The extent to which this is a disproportionate will depend on the outcome of the redesign.

There is evidence that children subject to a BME background are proportionately more likely to become subject to Child Protection Plans. ITFPS and the Early Help Hub are currently engaged in tackling inequality of provision within preventative services to BME groups.

The school preference advisor has a particular role in navigating and supporting children to access education across the city. The advisor works predominantly with BME and travelling families (only 13% of his caseload is White British). This role is cited as particularly helpful for families who are new to the city. If the service redesign concluded that this role should end then there would be a disproportionate impact on BME families.

Ethnicity potential impact - Level 4

Gender: There are a disproportionate number of women accessing ITFPS and Early Help interventions and specific provision has been put in place to engage more men onto programmes and work with fathers not living in the family home to positively engage with their children. A reduction in funding will impact on the ability to deliver this service. The recent welfare reforms brought into being through government policy have been demonstrated to disproportionately fall upon single households, which are in the main predominantly headed up by single mothers. A key aspect of the work of the Early Help Hub is assist families in navigating the complex world of welfare reform through the provision of support to access education, training and employment and in preventing crisis in respect of a family's housing.

Gender potential Impact – Level - 5

Gender reassignment: The service works with individuals within families who are intending, started or completed the process to change gender. Workers have been trained in gender reassignment and have knowledge of specialist services that are able to offer further support. A reduction in funding will impact on the ability to deliver this service.

Gender reassignment potential impact – Level 4.

Religion/belief: The service works with families and individuals within families from a range of religions and belief systems therefore a reduction in funding will impact on the ability to deliver this service. Due to the work of Prevent and Channel, early identification of people at risk of radicalisation requires early intervention in order to prevent harm.

Religion/belief potential impact - Level 4.

Sexual orientation: The service works with individuals within families within this protected group therefore a reduction in funding will impact on the ability to deliver this service.

Sexual orientation potential impact – Level 4.

Child poverty: Currently 63% of the families being worked with within ITFPS are regarded as being 'financially excluded', the majority living on benefits. Family Coaches are working hard to support and seek specialist services that will progress them into to work, reduce their debt and sustain their tenancies in order to avoid homelessness. A reduction in funding will impact on the ability to deliver this service.

Much of the work of the Early Help Hub is aimed at alleviating the impact of poverty upon children and their families in the city. A lack of access to resources can create additional stresses that can lead a parent to struggle in providing a safe and consistent home life as the impact of multiple stressors take hold upon family life. Additionally the impact of ever increasing rents and welfare reform is creating a high level of inequality between those children in the city that have and those that do not. This has potential significant implications for children's sense of themselves as they grow.

Child poverty potential Impact level - 5

Other groups: domestic violence, Children aged 0-17 & Parents and carers of all ages: A large number of families and children worked with are affected by domestic violence and we provide direct support and support to access specialist agencies to reduce the risk to both the victim and their children. Direct support is provided to perpetrators of domestic violence and young people and their parents where child to parent abuse is present. The service (via individual parenting support and specific interventions) also provides support to families that

	have children that are on a Child Protection Plan and at risk of becoming looked after. A reduction in funding will impact on the ability to deliver this service
	The Early Help Hub currently offers targeted phone and direct work support to parents and professionals to divert a family from going into crisis. They support families who are being stepped out of social work, they pick up on cases that need to be escalated back to social work. They work to support families who are disadvantaged as a result of their circumstances where there are young carers in the household, there has been domestic violence, previous substance misuse problems, problems related to parenting and attachment (particularly with adolescents) and related to preventing homelessness/mitigating the impact of multiple house moves caused by instable and insecure housing market.
6. Assess level of impact (1= low; 5= high)	Overall level of potential impact is assessed to be significant - 5
	In any reduction to the Early Help Hub and ITFPS it is important to remain mindful that 88% of child deaths that result in a Serious Case Review taking place i.e. unexpected and caused by harm, were children defined as being in need/open to Early Help or closed to SW, having previously been open. (Triennial Review of SCRs). The impact of a reduction in services currently known as Early Help could therefore have significant implications for the safety and wellbeing of children who are currently just below the threshold for social work intervention, as there will be a reduction in the service that identifies need and responds to it at an early point in time – reducing both the financial and human costs of harm reaching a significant level.
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?
7. Key actions to reduce negative impacts	 To redesign early help services to deliver the most effective interventions To take account of the impact on protected groups as part of the re-design process. To introduce one front door bringing together the Multi-Agency Safeguarding Hub and the Early Help Hub to enhance and simplify a family's journey through services. Reducing systems and processes to a minimum and introducing one assessment framework across social work and early help services To promote a council and citywide whole family approach. Making the most of digital platforms to provide information to families and practitioners To ensure that children and young people can access the new Emotional and Mental Health well-being service including single point of access for referrals and on-line counselling being developed.

8. Full EIA?	Yes: this will be completed as part of the redesign process.	
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
9. Monitoring and Evaluation	The redesign of the early help service including a review of IT systems will include equalities monitoring for protected groups. The impact will be reported as part of quarterly reporting on equalities actions as part of the business planning process on interplan.	
	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
10. Cumulative impacts	The proposal to end funding for a council run youth service will have a significant impact on young people and their families.	
	Impact of government policy in respect of a family's access to benefits and welfare reforms including the benefit cap. The population of Brighton & Hove are reported to be the second hardest hit, outside of London as a result of the benefit cap, the full impact of which will not be fully comprehended until 2017/18 as the year progresses.	
	Impact of council social housing allocations policy could worsen or mitigate circumstances for some families.	
	Increasing caseloads within children's social work are likely to impact on the quality of assessment and planning to address concerns via step-downs to reduced capacity within the Early Help service.	
	Impact of growing levels of inequality within Brighton & Hove alongside decreasing access to services to mitigate levels of inequality, is likely to lead to challenges and greater levels of demand upon statutory services.	

1. Service Area	Families Children & Learning Directorate - Living Without Violence Programme	2. Proposal No. 11		
3. Head of Service	Tom Stibbs			
	What is the proposal? Use the savings proposal wording and more detail if ne	eeded		
4. Budget Proposal	 Proposal The following savings are proposed for 2017/8: The ending of the Living Without Violence programme – budget saving of £50,000 identified A transition plan to be put in place – consideration of costs to be met from within existing Clermor Centre budget A new aligned delivery model for services to address violence and abusive behaviour to be developed 			
	Highlight the most significant disproportionate impacts on groups			
5. Summary of impacts	Disproportionate impacts identified: Age (young people), Ethnicity, Gende	er (women and men)		
	The loss of a domestic violence and abuse perpetrator programme will have a specific impact on men since there will be reduced opportunities to hold perpetrators accountable and provide effective interventions to change their behaviour; and for women and girls in terms of the disproportionate risk to them as victims of domestic violence and abuse.			
	Specific impacts : Age : A more flexible delivery will allow interventions to support perpetrators of all ages, for example boys and young men who are perpetrators. However, the loss of the service could also lead to a disproportionately increased risk of exposure of children (girls and boys) to violence and abuse.			
	Ethnicity: Our services have ongoing challenges in engaging those from a BME background and more flexible delivery of service should allow greater opportunity for engagement			
	Gender : The proposed loss of a service specifically working to address the viol to be addressed in the development of alternative services. The loss of the service services.			

	partner support functions, could also lead to a disproportionately increased risk of violence towards women and girls.	
	Other impacts: The loss of a perpetrator programme could increase the risk of violence towards victims of domestic violence and abuse	
6. Assess level of impact (1= low; 5= high)	2	
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?	
7. Key actions to reduce negative impacts	Commissioners to work with providers to develop aligned programmes and 1:1 work that engage more men more flexibly and that include engagement with men who have been sentenced, those who have substance misuse issues, fathers and with different forms of domestic violence and abuse. Commissioners to ensure that partner support functions are sustained, to prioritise victim safety. More flexible delivery of interventions should also provide increased opportunities to engage with those with additional needs	
8. Full EIA?	A full EIA was completed for the service redesign in October 2015 and this is subject to ongoing review.	
9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
	A project plan will be developed for March 2017 and this will be subject to ongoing review during 2017-8, including via the VAWG Commissioning Group.	
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
	Loss of support for the victims of domestic violence and abuse via RISE could exacerbate the risk to these victims if appropriate alternative models are not implemented	

1. Service Area	Health & Adult Social Care - Physical Disability and sensory loss Mental Health services	2. Proposal No. 12	
3. Head of Service	Brian Doughty		
	What is the proposal? Use the savings proposal wording and more detail if	needed	
4. Budget Proposal	A proposal of a saving of £1.425m is planned by reducing the spend on the Community Care Budget for adults, including physical disability and sensory loss, and a further £0.293 for mental health.		
	Highlight the most significant disproportionate impacts on groups		
5. Summary of impacts	 Disproportionate impacts identified: Age (older people), Disability, Ethn Reassignment, Religion/Belief, Sexual Orientation, Carers Vulnerable people in the City are assessed in accordance with the Care Act 2 need to be met with care and support. Presently over 3000 people receive care and support in some way paid for vithe City. A proportion of these are older people and people with physical disability. 	2014 to see if their eligible needs a the Community Care Budget in bilities or mental health problems,	
	who receive care and support both at home and in residential settings. Any reduction in the community care budget will have a direct effect on the amount or the way support and care is offered, and there is a risk that unmet need may rise. We will continue to provide statutory services and to target those in greatest need and those at risk but there is likely to be reduced universal provision.		
	Care costs are steadily increasing with a provider market which is under pressure nationally.		
	The Equality Act 2010 (s129) states that a public authority, in the exercise of its functions, must have due regard to eliminating discrimination, harassment and victimisation, advancing equality of opportunity and fostering good relations. People experiencing mental health problems are often subject to stigma, and when this is coupled with other protected characteristics, can lead to multiple levels of discrimination. By reducing the Community Care Budget, there is a risk that people experience greater levels of social isolation which may increase the risk of mental health problems.		

Specific impacts:

Age: There is a significant proportion of older people in the City, and people are living longer with a growing population who are 90+. Demographic trends also indicate an increase in people presenting with dementia. Budget savings will impact on the level of service provision to this group.

Disability: Many people who are known to Adult Social Care are disabled given the eligibility criteria under the Care Act 2014. Mental health problems impact negatively on physical co-morbidity and mortality rates. Budget savings will impact on the level of service provision to this group.

Gender: Women tend to live longer than men and thus may experience the need for longer funded care. Women overall have lower incomes and a generally form a larger proportion of people known to Adult Social Care and carers, and there will therefore be an indirect impact from changes in Adult Social Care.

Gender reassignment: Trans people, already one of the most marginalised groups, may be further marginalised. There is a need for non-core activity such as tackling transphobia, awareness raising, building self esteem etc and we are trying to increase engagement with this group, but any reduction in funding may impact on extra initiatives to do this.

Ethnicity: Brighton & Hove is a diverse city and we need to ensure that people living in the City from all ethnicities are able to access assessment and support from Adult Social Care. There is a risk that with reduced resource this lessens our ability to engage with, and outreach into, different community groups.

Religion/belief: There is some evidence that some specialist faith homes are more costly than "mainstream" and this could be a risk in meeting individuals' faith or religious needs.

Sexual orientation: Some LGBTQ people still remain silent or hidden. At time of resource realignment there is a risk that these groups become more distant or marginalised.

Other groups: Carers have a significant role in caring for people in the City. Any funding restrictions could have a direct effect on whether carers are able to continue in their caring role.

Brighton has significant people who are street homeless (no fixed abode) and a reduction in resources may

	mean that initiatives to engage with and outreach to rough sleepers are reduced.		
	Level of impact: 4		
6. Assess level of impact (1= low; 5= high)	The impact on individuals is potentially high as there is a large number of people currently supported by the community care budget. Mitigating factors will be working alongside health partners to successfully implement the wellbeing and prevention approach in order to reduce demand. Additionally an asset based approach to our support and care offer which embraces an integrated approach to assessment and support with our partners – see below.		
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?		
	Commissioners will work with providers to prioritise assignment of resources, to ensure that the additional focus on identified groups can continue. There will be an increased focus on joint commissioning with Health.		
7. Key actions to reduce negative impacts	A new asset based approach will be implemented to help develop a new conversation with the public. This is fundamental to a radical rethink about how people, friends and families as well as communities can help people to remain independent. The Care Act asks that Adult Social Care do not only look to offer support to people but embraces the offer from housing through to leisure to enhance the lives of vulnerable people.		
	We will work closely with internal and external partners to ensure high quality efficient services which are evidence based, for instance working with Sussex Partnership Foundation Trust and the CCG around dementia pathways.		
	The ongoing integration agenda with health gives opportunities to reduce duplication and work in a more joined up way to proactively identify those people who may be at risk of going into hospital or residential care and thus manage risk, and help people to live life and have a good death.		

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Technology must be available for people to be supported remotely and in a modern way from telecare through to telehealth and other technologies and a raft of equipment which can help people remain independent.

A new reviewing framework will invite our partners to join us in reviewing people in a timely way and is intended to release care capacity and target those most in need.

We continue to work towards making our organisational structures more effective whilst aiming to minimise the impact on frontline services.

New and value for money commissioning for people with head injuries will add to the savings and increase the quality of life for a small but significant cohort of people.

Extra care housing has been made available to be a real alternative to residential care.

The Council has an ongoing commitment to tackling inequality as evidenced by the Fairness Commission whose report was released in June 2016.

Specific actions:

Age: The City has made a commitment to becoming an Age Friendly City. The local authority have funded a new dementia friendly Extra Care housing facility which is targeted at people with mild to moderate dementia. This is aimed at enabling people to live independently in the community for longer and reducing admissions to residential care.

Disability: New conversations will need some careful handling and expectations will need to also be managed. Direct payments must be promoted (Care Act 2014) as a way to deliver more creative and sustainable modes of support and care. The above proposals above are key in maximising recovery and social inclusion.

Gender: Adult Social Care will continue to work closely with its partners to maintain a focus on supporting carers.

Gender reassignment: Adult Social Care will continue to engage with people who they come into contact with to ensure that we are trans friendly in our approach and work with people to address discrimination and stigma, along with maximising people's opportunities and life chances.

	Ethnicity: We will continue our commitment to an assessment process which is anti-oppressive and which tackles discrimination and inequality as we encounter it.
	Religion/belief: We will continue to work with faith groups where possible to ensure we meet the needs of people with different religions/belief systems.
	Sexual orientation : Adult Social Care will ensure that we enable a safe space for people who identify as LGBTQ to engage with us and we will challenge discriminatory practice along with stigma.
8. Full EIA?	As the year progresses and redesign takes shape a full EIA will be required to measure the impact of budget reductions.
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
9. Monitoring and Evaluation	Ongoing monitoring and evaluation will need to take place via the General Manager and Assistant Director meetings
	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
10. Cumulative impacts	Housing is a key player to deliver good support and care. Given that there is already a critical shortage of affordable housing in Brighton and Hove, any significant reduction in access to suitable housing will have a direct effect on the Community Care Budget.
	Public health as a partner is key in promoting wellbeing and healthy lives, and this is critical to stem future and immediate demand.
	Resource pressures within the NHS on primary and secondary health services has an impact on people known to Adult Social Care.
	There is intense pressure nationally on the provider market which has a direct impact on the Community Care Budget.
	Brighton & Hove has a strong and vibrant voluntary sector but funding pressures on the third sector will

potentially result in an impact on people known to Adult Social Care as building community resilience is a critical factor in preventing the growing health, social and economic inequalities in our City.

EIA 13 – PROPOSAL DELETED

1. Service Area	Health and Adult Social Care - Ireland Lodge Residential Unit	2. Proposal No. 14a	
3. Head of Service	Brian Doughty		
	What is the proposal?		
	Reduce overall budget to our in house mental health units by £121,000, average savings of £61,500 for Ireland Lodge		
4. Budget Proposal	 Physical Support – CQC registered Residential Unit. Ireland Lodge is a residential care facility supporting individuals who have a diagnosis of Dementia. There are 23 beds within the unit which is located in the Woodingdean area of Brighton and Hove. The proposal is for the service to work with the CCG and SPT to review and commission services to changing demands in mental health service across the City. Average saving of £60,500 (total of £121,000 across both Wayfield Avenue and Ireland Lodge) is all successful review and commissioning of services. 		
	Saving opportunities on this budget include: CCG and potential for other investment opportunities supporting with an increase in funding for Ireland Lodge to support direct care staffing levels. CCG and SPT supporting with an increase in funding for specialist clinical staff to support complex cases and		
	decision making. A review of the number of beds to ensure safe levels of care if additional funding is not available. Consideration of outsourcing provision to an Independent provider if savings cannot be identified by keeping the service in house.		
5. Summary of impacts	Highlight the most significant disproportionate impacts on groups		

	Disproportionate impacts identified: Age (older people)
	The Council has a statutory duty to meet the needs of people who are assessed as requiring adult social care, and this includes providing 24hr support where appropriate within a residential setting.
	The people who will be affected are people with a diagnosed condition of Dementia.
	If services were to reduce, the most significant impact would be a reduction of beds available within Ireland Lodge, leading to an inevitable increase in stay for patients in hospital. This would affect patients requiring specialist support via a transitional period of support, monitoring and review between hospital and home.
	Reduction in support for people living in the community who are experiencing a deterioration in their mental health and require a period of support, monitoring and review within a residential facility.
	Possible detrimental impact on wellbeing of family carer / informal carer, who without support, would be unable to continue to provide care within the community. Possible increase in Long Term Care placements.
	Currently limited 24hr resources available across the City for people requiring support within a residential placement.
	Due to decreases in beds available, it may be necessary for BHCC residents to receive care outside of the City, which may impact on their support networks, family visiting and general wellbeing due to possible isolation.
	The impact of outsourcing Ireland Lodge, is the instability of the market and an alternative provider not having the flexibility required to "flex" the criteria to meet changing demands.
	Outsourcing would impact on the whole staff team with TUPE implications.
	The impact includes a personalised assessment and the opportunity to consider other options that meet individual needs.
6. Assess level of impact (1= low; 5= high)	4: Reduction in beds has significant impact due to the vulnerability of individuals with dementia.

	What actions are planned to reduce/avoid negative impacts and increase positive impacts?		
7. Key actions to reduce negative impacts	 Work with the CCG & SPFT to review the requirements of specialist beds across the City and actively engage in a commissioning process to include Ireland Lodge. Review staffing levels within the unit to ensure safe levels of staffing remain. Review referrals into the unit to better screen dependency level requirements. Engage and as required complete a staff consultation to determine staffing levels for reduced level of service. Service users will have a review to ensure that their needs can be met if a change of facility is required. Any consultation process will include Carers, advocates and their families. 		
8. Full EIA?	Full EIA to commence following confirmation of planned future of services.		
9. Monitoring and Evaluation	 How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)? Completion of full EIA following the review of this service to consider the impact of any proposed changes. Monitor demand and capacity against referrals received and declined, to evaluate loss of bed days. Monitor quality of direct care to ensure compliance with CQC. To include mediation, accident and incident reports, safeguarding, comments and complaints. Monitor levels of front line management to ensure supervision, professional development, employee relations tasks are completed within time scales agreed to meet quality standards. Monitor levels of staffing and input by health partners to support wellbeing of users of the service. Service User Questionnaires will be used to capture service user's views on services and individual needs. This will include equality monitoring information. Improve questionnaire return rates and encourage completion of equalities information. Ensure that information from referring agency/professional includes appropriate information on how to best meet individual needs including ethnicity, faith religious needs, communication issues, specific individual health needs etc. Follow-up Equalities related actions identified in QA work. 		

	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
10. Cumulative impacts	 People with a diagnosis of Dementia will have limited In-House service in the future and the vast majority of people will receive services from the Health provider, Private companies or from the Voluntary sector. Provision of beds for people with a Dementia are limited and some reduction of services has been seen due to home closures over the last few years. This could have a cumulative impact on what resources are available across the City. Joint working with CCG and SPT to reduce the impact of any saving proposals. Consider development of the building to increase bed capacity by using the vacant day centre space and the community space on the lower group level.

1. Service Area	Health and Adult Social Care - Wayfield Avenue Residential Unit	2. Proposal No. 14b	
3. Head of Service	Brian Doughty		
	What is the proposal?		
	Reduce overall budget to our in house mental health units by £121,000, average savings of £61,500 for Wayfield Avenue.		
	Physical Support – CQC registered Residential Unit. Wayfield Avenue is a residential care facility supporting individuals who have mental health needs. There are 24 beds within the unit which is located in the Hove area of Brighton.		
4. Budget Proposal	The proposal is for the service to work with the CCG and SPT to review and commission services to meet the changing demands in mental health service across the City. Saving of £60,500 (total of £121,000 across both Wayfield Avenue and Ireland Lodge) are aligned to the successful review and commissioning of services.		
	Saving opportunities on this budget include: CCG and SPT supporting with an increase in funding for Wayfield Avenue to support direct care staffing levels. CCG and SPT supporting with an increase in funding for specialist clinical staff to support complex cases and decision making.		
	Review the number of beds to ensure safe levels of care if additional funding is not available. Consider outsourcing of the service to an Independent provider if savings cannot be secured by keeping the service in house. Consider the closure of the Day Centre as part of the service review.		
5. Summary of impacts	Highlight the most significant disproportionate impacts on groups		

	Disproportionate impacts identified: Disability	
	The Council has a statutory duty to meet the needs of people who are assessed as requiring adult social care, and this includes providing 24hr support where appropriate within a residential setting.	
	The people who will be affected are people with a mental health condition.	
	If services were to reduce, the most significant impact would be a reduction of beds available within Wayfield Avenue, leading to an increased stay for patients in hospital. This would affect patients requiring specialist support via a transitional period of support, monitoring and review between hospital and home.	
	Currently limited 24hr resources available across the City for people requiring support within a residential placement.	
	Due to decreases in beds available, it may be necessary for BHCC residents to receive care outside of the City, which may impact on their support networks, family visiting and general wellbeing due to possible isolation.	
	The impact of outsourcing Wayfield Avenue, is the instability of the market and an alternative provider not having the flexibility required to "flex" the criteria to meet changing demands.	
	Outsourcing would impact on the whole staff team with TUPE implications.	
	The impact includes a personalised assessment and the opportunity to consider other options that meet individual needs.	
6. Assess level of impact (1= low; 5= high)	4: Reduction in beds significant impact due to the vulnerability of individuals with a mental health condition.	
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?	
7. Key actions to reduce negative impacts	Work with the CCG & SPT to review the requirements of specialist beds across the City and actively	
• • • •	 engage in a commissioning process to include Wayfield Avenue. Review staffing levels within the unit to ensure safe levels of staffing remain. 	
	 Review stanling levels within the unit to ensure sale levels of stanling remain. Review referrals into the unit to better screen dependency level requirements. 	

	 Engage and as required complete a staff consultation to determine staffing levels for reduced level of service. Service users will have a review to ensure that their needs can be met if a change of facility is required. Any consultation process will include Carers, advocates and their families.
8. Full EIA?	Full EIA to commence following confirmation of planned future of services.
9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
	 Completion of full EIA following the review of this service to consider the impact of any proposed changes. Monitor demand and capacity against referrals received and declined, to evaluate loss of bed days. Monitor quality of direct care to ensure compliance with CQC. To include mediation, accident and incident reports, safeguarding, comments and complaints. Monitor levels of front line management to ensure supervision, professional development, employee relations tasks are completed within time scales agreed to meet quality standards. Monitor levels of staffing and input by health partners to support wellbeing of users of the service. Service User Questionnaires will be used to capture service user's views on services and individual needs- This will include equality monitoring information. Improve questionnaire return rates and encourage completion of equalities information. Ensure that information from referring agency/professional includes appropriate information on how to best meet individual needs including ethnicity, faith religious needs, communication issues, specific individual health needs etc. Follow-up Equalities related actions identified in QA work.
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts. People with mental health needs will have limited In-House service in the future and the vast majority of people will receive services from the Health provider, Private companies or from the Voluntary sector. Over the last 2 years, 24hr specialist residential care has reduced and this has a cumulative impact on what resources are available across the City. Joint working with CCG and SPT to reduce the impact of any saving proposals.

Health & Adult Social Care - Commissioning & Performance	2. Proposal No. 15	
Andrew Witham		
What is the proposal?		
The Easylink Service for shopping trips operated by Community Transport (Brighton, Hove & Area) Ltd - a reduction of funding to ensure that services commissioned link with commissioning plans in Health & Adult Social Care and Brighton & Hove CCG (joint funding) in delivering good health and social care outcomes for people. Until September 2015, this contract in conjunction with one commissioned by the CCG was overseen by the council Public Transport team. With effect from 1 September 2015 a new contract was negotiated with Community Transport combining the council and CCG funding and including savings absorbed by Community Transport. The new combined contract is valued at £125,596 in a full year, of which £107,000 is funded by the City Council and £18,596 is funded by the CCG. The council funding is a subsidy for the Easylink passenger shopping service and a contribution towards the costs of Community Transport running the brokerage/booking service that enables users to get access to individual journeys. The CCG funding is a contribution to Community Transport's Core Costs for the group hiring of minibuses.		
The proposal is for savings of £82,000 of the council's funding (65% of the 2017/18 financial year. At this time the contract runs to 30 June 2017		
	Andrew Witham What is the proposal? The Easylink Service for shopping trips operated by Community Transpor reduction of funding to ensure that services commissioned link with com Care and Brighton & Hove CCG (joint funding) in delivering good health Until September 2015, this contract in conjunction with one commissione council Public Transport team. With effect from 1 September 2015 a new Community Transport combined contract is valued at £125,596 in a full yea City Council and £18,596 is funded by the CCG. The council funding is a shopping service and a contribution towards the costs of Community Tra- service that enables users to get access to individual journeys. The CCG Transport's Core Costs for the group hiring of minibuses. In early 2016 ASC and the CCG asked Community Transport to come up shopping trips as part of the process of responding to the changing trans- redirection of the funding. Examples were to identify the least popular da did not feel that they could do this. Community Transport Ltd did not trad the minibus service (other than number of people using each bus route). requirement in the new contract despite concerns expressed by Commu people from using the service. The first data arrived in June 2016 based Transport in May 2016 sent to the 382 residents of Brighton & Hove who the organisation and who were believed to be currently active as passen Easylink services. 107 responses were received for analysis by 01/06/16 The proposal is for savings of £82,000 of the council's funding (65% of the	

	 month for 3 months. Split between the council and CCG the council's proportion is £8,916 per month or £26,748. The proposed savings thus create a pressure on the contracted sum. A reduction in funding of this size is likely to lead to the end of the Easylink contracted shopping routes unless significant changes are made such as reducing the routes, reducing the days it runs and increasing the charge to users (currently set at no more than £3.50 for over 15 years).
	Highlight the most significant disproportionate impacts on groups
	Disproportionate impacts identified: Age (older people), Disability
5. Summary of impacts	 Based on the 107 responses gathered by Community Transport Ltd in June 2016 (figures below are based on where people answered the question): All people who used the service were aged over 55 6 were between the ages of 60-69 24 were between the ages of 70-79 56 were between the age of 80-89 14 were over the age of 90 92 responses were from women, 12 from men 102 identified as English/Welsh/Scottish/Northern Irish/British, 2 as Other White, 3 chose not to answer. 81 people identified as heterosexual (remainder chose not to say). When asked if day-to-day activities were limited because of a health problem/disability which has lasted, or is expected to last, at least 12 months 88 people said yes, of which 57 said they were impacted a lot. 61 people identified as having a Physical Impairment, 8 a sensory impairment, 33 a long standing illness and 1 a mental health condition. 61 people used a walking aid, 5 used a wheelchair, 37 people used neither. 97 people did not need a carer to help them use the service. 3 people identified as carers of a partner or spouse. 58 people use the service once a week, 24 more than once a week, the rest less than once a week.
	As can be seen the biggest impact is on older people and those with a physical disability/health problem which is as expected. Very few people have other protected characteristics that would impact on the use of the Easylink service.

	Impact is 2 and for some people 3.
	It is difficult to assess the impact on people who use the Easylink service as we don't know if they have alternative options regarding shopping and options to engage socially. The survey undertaken by Community Transport clearly identified that the key reasons for using the service were (in order of importance): 1. Door-to-Door Travel
	2. Friendly Service
	3. Quality of Driver
	4. Reliability
6. Assess level of impact (1= low; 5= high)	5. Reasonable Fare
	6. Easy Access to Shops
	7. Vehicle is Accessible
	8. Assistance with Journey
	9. Meeting Other People
	It is unknown how many of the regular users of the service have assessed social care needs and are in receipt of packages of care. Although Easylink refer to people qualifying to use the service this is self-identified and is not based on an assessment.
	Neither, is it clear as to the real numbers who currently use the service – the questionnaire organised by Community Transport had a final return of 137 of the 382 sent out but it is unknown whether this reflects the number of current service users (35% of those who received the survey) or is only a proportion.
7. Key actions to reduce negative impacts	What actions are planned to reduce/avoid negative impacts and increase positive impacts?

It is believed that many people have used the service for a substantial number of years – pre-dating the introduction of free bus passes in 2008 and pre-dating current requirements for buses with more than 22 seats to be accessible to people using wheelchairs. Shopmobility services have also expanded significantly over the past few years offering much more than shopping access. However, it is recognised that people will be affected by the loss/reduction of the Easylink service as it has been in place since 1997 with little change; there is no reason why people who have used it for many years would stop using it despite alternatives being available.

Although people's access to shopping opportunities may reduce if the Easylink service ends/is reduced there are now many alternatives as regards food/other shopping including delivery options from supermarkets, local shops and hot and frozen meal delivery. A recent survey into the impact of ending another long term contract for Community Meals (31/03/2016) revealed positive outcomes in that people have begun to do more cooking, are going out more to eat, are supported by carers, family and friends etc.

Work was already underway to re-direct the work of the Easylink contract which had been due to expire on 31 August 2016 but was extended until 30 June 2017 with a redirection (since September 2016) of £20,000 of the council funding into a pilot scheme for the following as the first stage of redistributing the funding away from shopping trips into aspects more aligned with social care and health commissioning plans and funding:

support for residents in areas where GP practices are closing where there are identified transport needs;

transport for socially isolated individuals for area based work, aligned to older people's locality hub areas;

iii. creating links with other local service providers to better fulfil the aims of i. and ii. above. This work is ongoing.

To find out more about potential impacts on service users Healthwatch have agreed to undertake a piece of work with service users, either on the minibus journeys or at the cafés situated at most of the shopping venues. A questionnaire is being drawn up to find out the impact on service users should the service be withdrawn. This would also be an opportunity to provide information or signposting in a face-to-face environment.

It is also hoped to do a mailout of information about activities, lunch clubs etc. available in the city to all Easylink members should Community Transport agree.

If people are already in receipt of an ASC package then they would need to contact their support worker to have their needs reviewed. If people are not already known to ASC and identify that they needed additional support they would need to contact ASC individually via Access Point. Again this information would be shared.

Where people identify that their main reason for using Easylink is largely social (friendly service, meeting other people) then they can be signposted into the Older People's commissioned services which cover all areas of the city.

i.

ii.

	It is suggested that the loss of the Easylink service will lead to social isolation and impact on the health of service users. However, this is an issue that has been taken up by the Citywide Connect commission which aims to reduce social isolation for older people in the city. The Autumn 2016 Locality Hub events had a focus on travel and included the distribution of a 'To and From' questionnaire to identify barriers and solutions to older people engaging in activities. 200 questionnaires have been returned, the first findings being made available at the end of December 2016; a key finding is that 40% of respondents don't attend activities because it is too difficult to get there. This is now being progressed by the Transport Group set up by Health and ASC (operating as a sub-group of the Citywide Connect work) and Community Works have recently applied for external funding to tackle social isolation at a neighbourhood level using a partnership approach of Health, ASC and the voluntary sector. Also in support of this approach is the re-direction of funds since September 2016 as mentioned above (pilot schemes to improve health and reduce social isolation). It should also be mentioned that 94 people answering the 'To and From' questionnaire wanted to talk further about the issues, providing names and phone numbers for follow-up. Supporting people to get to local activities by operating at a neighbourhood/ local level would also reduce potential impact on the environment and improve community cohesion and integration. This was also identified in the 'To and From' questionnaire findings: "Generally people wanted a wider choice of activities which are closer to home with someone to support them to get there. They would also like to know that they will be welcomed at the activity".
	There is also work being undertaken with bus operators on increasing access to the commercial and supported bus network with accessible bus stops, talking bus stops, the Helping Hands scheme and discounts for carers travelling with and without those they care for. There is also good access to accessible licensed taxis within the city and when evidencing how the council meets its statutory duties under the Transport Act 1985 it is important that all the different services provided/available are considered and not just the provision of one specific service.
8. Full EIA?	At this time, no.
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
9. Monitoring and Evaluation	The contract will continue until the end of June 2017, which gives more time to monitor impact and develop the mitigating actions as in 7 above.

	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
10. Cumulative impacts	It is possible that the 10% reductions being made in Public Health funding for the Older People's Commission to reduce social isolation could have a potential impact. However, it is not known if any of the people who use the Easylink shopping service are engaged in any of the activities/services funded via this. Where people identify that their main reason for using Easylink is largely social (friendly service, meeting other people) then they can be signposted into the Older People's commissioned services. It is not known if there are any other transport implications for the service users – at this time the ASC funding commitment to Shopmobility remains the same.	

1. Service Area	Health & Adult Social Care - Commissioning & Performance	2. Proposal No. 16	
3. Head of Service	Andrew Witham		
	What is the proposal? Use the savings proposal wording and more detail if needed		
4. Budget Proposal	To re-procure the Self-Directed Support Service with the Children's Service and East Sussex County Council in a more efficient and value for money way, and ensuring that the services commissioned link with commissioning plans & deliver good outcomes for people.		
	The service is subject to a budget EIA due to the reduction by £19,000 on the to £390,000 to achieve value for money; the service itself is not under threat in an		
	Highlight the most significant disproportionate impacts on groups		
5. Summary of impacts	 Disproportionate impacts identified: Age (older people)< Disability, Carers Self-directed support is about people being in control of the support they need to live the life they che Any changes to funding may impact on individuals and their support plans. By re-procuring the service it is planned to make budget savings of £19,000. The current block control 		

8. Full EIA? 9. Monitoring and	No, as the service is being recommissioned; the only impact is the budget reduction How will you monitor the impact of this proposal and the success of your mitigating actions on these
7. Key actions to reduce negative impacts	 Commissioners from Adult Social Care, Children's Services and East Sussex CC commissioners will be working together to commission services that meet outcomes & achieve more efficient use of resources Service users and carers & the community & voluntary sector would be involved in decision making; any changes to services would be fully communicated. Adult Social Care will continue to commission services with an emphasis on meeting the outcomes of individuals. Services will be commissioned based on any relevant commissioning plans & reviews for services. Parent Carers will be fully involved assessment & review processes for individuals. The needs of carers are fully considered in any assessment of an individual.
6. Assess level of impact (1= low; 5= high)	1: Ideally there should be no impact on the client group who should receive a continuous service. By reprocuring the service the intention is to gain better value for money not reduce the level of service. What actions are planned to reduce/avoid negative impacts and increase positive impacts?
	 All people in receipt of Direct Payments are older people, people with a learning or physical disability or people with a mental health need. Most people will have physical health and mobility needs, including children. The current provider has provided the service since the council began funding SDS as a pilot scheme in 1999 so potential changes may be a challenge. However, any changes in the way services are procured will enable individuals to have their needs met in a way that ensures that the outcomes they want to achieve. Proposed plans include the option for two providers of the service which would also increase the opportunity for client choice. Parent Carers are significantly involved as the holders of Direct Payments for their disabled children. Many may be concerned about the impact of any change to services, and also what it may mean for them in terms of the support they receive as carers.

	The recommissioning will lead to a full contract and all contracts are subject to rigorous performance monitoring which would include the impact on all client groups
	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
10. Cumulative impacts	Commissioners are working together to consider mitigating factors. However, at this time there is no other identified impact on other departments/service areas. The current provider has a high profile and variety of services in the BHCC area working with many vulnerable people. As regards the current provider organisation a financial analysis suggests that it has the resources to both expand and take on more business. In terms of losing the contract the organisation appears to be trying to improve their ability to protect against fluctuations in grants by increasing their trading activities, however cost structures may need to be reviewed to ensure sustainability.

1. Service Area	Health & Adult Social Care – Community Meals	2. Proposal No. 17		
3. Head of Service	Andrew Witham			
	What is the proposal? Use the savings proposal wording and more detail if needed			
4. Budget Proposal	Community Meals – reduction of budget At the end of 2015/16 the contract for the Community Meals Service (provision of a meals service at home for vulnerable people) came to an end, being replaced by a Menu of Providers who had satisfied a series of criteria covering nutritional quality of food and the promise of providing a 'Safe & Well check' to ensure people receiving a meal are adequately cared for. The B&H Food Partnership was involved in this process and an EIA was completed at this time.			
5. Summary of impacts Disproportionate impacts identified: none specifically				
	 As the council no longer has a contract for a community meals service, there i However, the council recognises its responsibility for vulnerable people and has 			

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	 Assessors who work for Impact Initiatives to undertake a phone survey in October 2016. It is hoped that 100 people will be contacted (there were 171 customers at the end of March 2016 when the contract ended of which 80 were in receipt of Adult Social Care services) and a report is due in mid-November 2016; findings will be added to this EIA in January 2017. Conclusions from this would be actioned as necessary although it is believed that any social care problems would have already been raised via AccessPoint. The positive impact is that people will have more options to have their nutritional needs met. 		
6. Assess level of impact (1= low; 5= high)	1		
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?		
7. Key actions to reduce negative impacts	 Last year's EIA had the action to work with Public Health and the B&H Food Partnership to ensure a wider range of options available for people to access healthy food alternatives. Both Adult Social Care and Public Health attend the Food Partnership and engage in this. An example of work undertaken in 2016/17 is the development of 'to-go' food bags for people leaving hospital to return home. Assessment teams in ASC will continue to work with the most vulnerable people to ensure their needs are met. 		
8. Full EIA?	No – there is no contract in place and thus there are no service users. The planned retention of £10k is to ensure funding to follow-through any identified issues via the phone survey taking place in October 2016.		
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?		
9. Monitoring and Evaluation	Report to the Older People's Council in May 2016, commissioning of lay assessors to undertake phone survey in October 2016.		
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.		

	Health & Adult Social Care are proactive partners in the B&H Food Partnership which leads on reducing food inequalities across the city. The Food Partnership were a participant in the earlier work on Community Meals that changed the process to a menu of providers to mitigate impacts. In 2016/17 the funding proposed to be savings has not been used.
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1. Service Area	Health & Adult Social Care - Substance Misuse, Public Health	2. Proposal No. 18		
3. Head of Service	Peter Wilkinson			
	What is the proposal? Use the savings proposal wording and more detail if needed			
4. Budget Proposal	Community substance misuse services - £600,000 against overall budget of £4.7m			
	Highlight the most significant disproportionate impacts on groups			
5. Summary of impacts	Disproportionate impacts identified: Disability, Child PovertyAll substance misuse services should be available equitably across the spectrum of individuals production in spend on substance misuse services should not impact on any one group of people another but there could be an overall reduction in service availability for any individual requiring su drug or alcohol addiction. All providers are required to ensure that their services are accessible to of interest, and some providers have targets on increasing the number of BME and LGBT individual services. This work will continue regardless of budget reductions.ry ofThe services will have to reduce the number of staff they employ. However, the initial planned satisfies the made from management and administration costs rather than from frontline delivery. Future impact on frontline costs.In recent years commissioners and providers have been trying to encourage individuals from speci into services. E.g. older people with alcohol issues, younger people using 'legal highs', BME people trans people, people of diverse religions/beliefs, and LGB people. With a reduction in funding, cont innovative ways of interacting with these individuals will be more challenging in the future.Specific impacts: Disability: One of the key focal points of the re-tendered substance misuse service was the develor integrated dual diagnosis service (for people with a dual substance misuse and mental health need integrated dual diagnosis service (for people with a dual substance misuse and mental health need			

	 were identified to ensure adequate staffing capacity is in place to meet the demand for services Child poverty: Children with a parent/parents that abuse substances may live in poverty as a result. Community substance misuse services are required to identify service users with children and ensure the right support is in place. Other groups: Individuals with substance misuse issues often have associated issues e.g. are victims or perpetrators of domestic/sexual violence, be inadequately housed or sleeping rough, have children who are considered to be at risk, etc.
6. Assess level of impact (1= low; 5= high)	2
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?
7. Key actions to reduce negative impacts	Commissioners will work with providers to prioritise areas for service delivery e.g. improved access generally, and for all protected groups. Innovative ways of working will be explored including group based programmes or work, or online recovery tools.
8. Full EIA?	Full EIAs are taken when a service is being re-tendered
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
9. Monitoring and Evaluation	Quarterly contract reviews are held with all service providers. Performance reports (both national and local) will be discussed at these meetings and the impact will be monitored there.
10. Cumulative	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
impacts	Reductions to housing related services may impact on this client group, who will often be vulnerably housed.

1. Service Area	Health & Adult Social Care - Sexual Health	2. Proposal No. 19		
3. Head of Service	Stephen Nicholson			
	What is the proposal? Use the savings proposal wording and more detail if needed			
4. Budget Proposal	 Savings of £112,434 will be realised from HIV prevention, sexual health promotion and HIV social care services through: Re-designing sexual health promotion and HIV prevention for men who have sex with men and black African communities; Achieving efficiency savings through a re-procurement of HIV prevention and social care services; Stopping HIV prevention funding for generic lesbian, gay, bisexual and transgender (LGBT) counselling. 			
5. Summary of impacts	Highlight the most significant disproportionate impacts on groups			
	Disproportionate impacts identified: Age (older people), Disability, Ethnici Orientation	ty, Gender (men), Sexual		
	Men who have sex with men (MSM) and black African communities are disproportionately affected by poor sexual health including HIV. A reduction in access to information, advice and resources to promote good sexual health and safer sex could result in increased incidence of STIs and HIV.			
	Other specific impacts: Age: Older people living with HIV often have greater social care needs. Reducing social care services could impact on this group.			
	Disability: For some people, living with HIV long-term can result in the development of significant disability.			
	Ethnicity : Black Africans are disproportionately affected by HIV infection and high rates of sexually transmitted infections are observed in those with a black ethnicity.			

	Gender : In relation to men who have sex with men being at increased risk of sexually transmitted infections (STI) and HIV.
	Sexual orientation: Men who have sex with men are at the highest risk of STIs and HIV
6. Assess level of impact (1= low; 5= high)	2
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?
7. Key actions to reduce negative impacts	Service re-design to ensure the most efficient and cost effective services that are targeted towards those most at risk of sexual ill health, or have the greatest HIV-related need, are delivered within available budget.
	Commissioners will work with providers to prioritise assignment of resources to those at greatest need
8. Full EIA?	Not needed
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
9. Monitoring and Evaluation	 Contract monitoring data Sexual health service activity HIV and STI diagnosis rates Chlamydia screening coverage and detection rates
10. Cumulative	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
impacts	None

1. Service Area	Health & Adult Social Care - Public Health nursing contracts for Healthy Child Programme 0-19	2. Proposal No. 20	
3. Head of Service	Peter Wilkinson, Director of Public Health Kerry Clarke, Children, Young People and PH Schools Commissioner.		
	What is the proposal? Use the savings proposal wording and more detail if needed		
4. Budget Proposal	During 2016/17, Public Health re-commissioned a new Public Health Community Nursing Services, Children and Young People aged 0-19 Service which was previously spent across the following separate contracts:		
	 Health visiting service with the Family Nurse Partnership (FNP being a targeted service for first time pregnant mothers under the age of 19) that was agreed to be de-commissioned by March 2017 Breastfeeding support service (Peer Support Programme; targeted work in areas of inequalities); School nursing service. 		
	The savings made from the recommissioning of these services is £798,000 in 2017-18.		
	Highlight the most significant disproportionate impacts on groups		
	Disproportionate impacts identified: Age (young people)		
5. Summary of impacts	Age : The balance of delivery across the four levels of need will be influenced by the projected changes to the population figures. In 2012 there were almost 59,000 children and young people aged 0-19 years in the city. This number is expected to rise to 60,500 by 2020. Plus, at present there is no service from $16 - 19$.		
	Disability : The balance of delivery will be influenced by health impact of disability on children and young people. Applying national estimates to Brighton & Hove suggests between 3% and 5.4% of children in the city are disabled. People with physical and learning disabilities are more likely to suffer discrimination, poor access to some health services and worse employment prospects as a result of their disabilities, and these factors all impact negatively on their health.[Brighton and Hove JSNA 2013]. We will require the service provider to undertake an audit of service users regarding disability and any impacts on access to the service		

Ethnicity: The balance of delivery across the four levels of need will be influenced by the population % and level of health needs identified by ethnicity /race for children and young people in the full EIA for the Healthy Child Commissioning process. 25% of the city's school and pre-school pupils are from a black or minority ethnic (BME) background. Around a third of the city's under 5 population are BME. We will need to work with the provider to recognise and respond appropriately across the ages so that BME children and young people's needs are recognised and supported.

Gender: The balance of delivery across the four levels of need will be influenced by the population % and level of health needs identified by gender for children and young people in the full EIA for the Healthy Child Commissioning process.

Religion/belief: The level of need for this population group is less understood. We will ensure that the service provider audits service use and performance by protected characteristic groups including religion or religious belief.

Sexual orientation: The balance of delivery across the four levels of need will be influenced by the population % and level of health needs identified by sexual orientation for children and young people in the full EIA for the Healthy Child Commissioning process. There is an estimated 3,200 (16%) LGBT young people aged 13 to 24 in Brighton & Hove. Note that this data is not recorded on the census or collected in a systematic way. However, young people are more likely to identify as LGB and regard their sexuality as fluid.

Child poverty: The balance of delivery across level of need is influenced by poverty. Around 20% (8,600) children live in poverty (lower than across England). Child poverty varies widely; East Brighton has 47% and Withdean just 7%. [Brighton & Hove City Council. Joint Strategic Needs Assessment 2013. Brighton & Hove: Brighton & Hove City Council; 2013.]

Other groups:

The rate of family **homelessness** is worse than England, with 302 statutory homeless households with dependent children/pregnant women (2012/13). [Public Health England. Child Health Profiles. London: Public Health England; 2014.]

We have higher rates of **children in care** than the national average. For every ten thousand children in the city, 95.2 are in care compared with 60 in every ten thousand children across England.

Compared to the England average, we have a higher rate of children in need (361 versus 332 per 10,000 children), and a higher rate of children who are the subject of child protection plans (66 versus 46 per 10,000 children). In 2013, 52% of children who were subject to a Child Protection Plan had domestic violence/abuse recorded as a contributory factor.

There are significantly higher rates of **hospital admissions for both self-harm and alcohol** for young people in Brighton & Hove. [Public Health England. Child Health Profiles. London: Public Health England; 2014.]

6. Assess level of impact (1= low; 5= high)	2	
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?	
7. Key actions to reduce negative	The performance framework and KPI measures recently set for the service through the commissioning process have taken into account level of need and whilst the savings direct impact will remain unknown, this is now being finalised through the mobilisation negotiations. We will ensure that resources are based on levels of need whilst retaining a balance in universal provision.	
impacts	PH Commissioner will work with the provider during mobilisation to ensure the learning from the EIA is included in the agreed targets attached to the KPIs. This will ensure the balance of resources is not disproportionality allocated across the four levels of need.	
	PH Commissioner will also formalise the agreement of KPIs that will address the level of need identified in the full EIA, to ensure that the additional focus on these groups can continue.	
8. Full EIA?	Completed: Re-commissioning of Public Health Community Nursing Services 2016	
9. Monitoring and	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
Evaluation	Through quarterly performance and evaluation meetings with the provider.	
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	

There may be a cumulative impact with:
 the review of Children Centres as health visiting team are based within children centres and the service delivered in an integrated way with children services, for example: if there are fewer Children Centres, does this mean some of the health visiting teams will have to re located? If this is the case there will be financial implications in terms of premises and overheads for the providers which will impact on the commissioning budget.
2) The recommissioning of youth services does mean there may be a risk through a reduction in early help support, resulting in an increase need for specialist support potentially transferring the pressure to the move the key universal support provided from the Public Health Community Nursing Children and Young People Services 0 – 19 to a higher level.

1. Service Area	Health & Adult Social Care - Health Improvement	2. Proposal No. 20a	
3. Head of Service	Peter Wilkinson		
	What is the proposal? Use the savings proposal wording and more detail if no	eeded	
 What is the proposal? Use the savings proposal wording and more detail if needed Savings of £190,023 will be realised from the public health improvement budget through: Retendering the Oral Health Promotion service with a 20% reduction in budget - £26,000 sa A 10% reduction in the public health contribution towards funding older people's activities pr day centres - £32,000 saving Ending the public health Checks Community Health Fund - £50,000 saving Not renewing the NHS Health Checks Community Service contract set up as a short term in increase uptake within primary care - £30,000 saving A reduction in funding the Weight Management Programme by 10% - saving £50,000 (partiby an underspend of £30,000) A 25% reduction in funding of TAKEPART leading to an overall reduction in both publicity m the number of events and activities delivered through the festival directly by the Council – sa Not renewing the contracts with Albion in the Community to deliver the Make A Change and Youth Champions initiatives saving £48,000. Not renewing the contract to provide Citizens Advice Bureau sessions within 5 GP practices £30,000. The remaining savings will be found by not filling vacancies, a reduction in office running cos bringing forward planned reductions in programme budgets from 2018/19 and 19/20. 		budget - £26,000 saving people's activities provision within 50,000 saving up as a short term initiative to aving £50,000 (partially mitigated n in both publicity materials and y by the Council – saving £2,500. Make A Change and Community within 5 GP practices – saving in office running costs and	
	Highlight the most significant disproportionate impacts on groups		
5. Summary of impacts	 Oral Health Promotion should continue to be delivered equitably across vulnerable groups but with a possible reduction in overall activity in terms of number of training sessions delivered to other professionals or visits to schools or nurseries for the delivery of oral health promotion. 		
	2. The reduction in the contribution made by public health towards the join	t funded (Adult social care, CCG	

	and public health) older people's activities in Day Centres may have an impact on older people using day centres.
	3. Small community groups will have to find alternative sources of funding for health initiatives
	4. The community outreach service supports GP practices following up with patients in the most deprived/harder to reach areas and ensures that the NHS Health Checks are targeted and delivered to those that are not currently accessing the service and living in deprived areas. Men are already less likely to attend NHS Health checks
	5. A reduction in spend on weight management services should not impact on any one group of people or organisation e.g. school more than another but there could be an overall reduction in service availability for any individuals/organisations requiring support for their weight management/nutritional needs. Brighton and Hove residents living in the most deprived areas are 1.7 times more likely to be obese than those in the most affluent. As we are trying to increase engagement with this group, any reduction in funding may impact on extra initiatives to do this.
	 The TAKEPART Festival predominantly engages residents experiencing the highest levels of inequality. Those who currently experience barriers to participation and living in the least active communities are likely to be most affected.
	7. Not renewing the contracts with Albion in the Community will result in teachers having to deliver all the physical activity and nutrition curriculum sessions which had previously been supported by external coaches (Make a Change) and reduction in children football sessions in the community (Little Kicks Projects) that are supported and co-delivered by young people who gain Youth Sports Awards (Youth Champions).
	8. CAB advice sessions are run in some of the more deprived/harder to reach areas of the city and residents will have to travel further to access the service.
6. Assess level of impact	2
7. Key actions to reduce negative impacts	What actions are planned to reduce/avoid negative impacts and increase positive impacts?

- 1. Service re-design to ensure the most efficient and cost effective Oral Health Promotion (OHP) services that are targeted towards those most in need, e.g. early years / children under 5, Gypsies and Travellers.
- 2. The older people's programme will be recommissioned over 2017/8, with new contracts in place for April 2018. There will be consultation with providers and older people to inform the new commission, which will provide an opportunity to revise approaches to ensure that learning from this phase is integrated into the new programme, ensuring that it is effective and cost effective. Locality hubs are working to minimise gaps in service, engage a wide range of providers and integrate services to broaden the offer to older people needing day care support.
- 3. The Council Communities and Third Sector Commissioning Prospectus 2017-2020 includes a focus on supporting people living in the city's areas of highest deprivation.
- 4. All GP practices in the City are signed up to provide NHS health checks as a mandatory delivery outcome within the 6 clusters; Allocation of 2 days per month of health improvement nurse time to deliver outreach community Health checks in targeted areas to patients who are not able to access their GPs for their NHS health check.
- 5. The providers have planned to spread the changes over an 18 month period rather than 12 month period to minimalize overall impact to the weight management service delivery.
- 6. TAKEPART will try to mitigate the impact of the budget reduction by sourcing external funding. Using alternative approaches (such as increased digital marketing) and effective collaboration with partners to disseminate information about the TAKEPART festival and inclusive opportunities to take part.
- 7. The procuring of the tier 2 weight management contract and working alongside schools under the Public Health Schools umbrella to achieving the outcomes required under the schools PE and sports premium may provide new opportunities in the future.
- 8. Patients at the affected surgeries will be signposted to the CAB services run within the city.

8. Full EIA?	No
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
9. Monitoring and Evaluation	 Monitoring and evaluation is built into interventions with vulnerable groups as part of the service reprocurement specification where these are being reprocured. Through monitoring contract data and service activity
	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
10. Cumulative impacts	Possibly – but we work closely with the providers to ensure that resources are shared and impacts of any funding reductions are minimised. The improved partnership working which has developed via the locality hub and citywide connect programmes is bringing in additional resources for older people, which will help to mitigate any reduction.

1. Service Area	Economy, Environment and Culture - Parking & Network Operations	2. Proposal No. 21	
3. Head of Service	Charles Field / Paul Nicholls		
4. Budget Proposal	 What is the proposal? Use the savings proposal wording and more detail if needed The saving achieved per year in parking income by having one current blue badge fraud investigator. This is due to blue badges being confiscated by the investigator and additional income has been received from spaces where the blue badges may have been used. Increase tariffs further and consider current income. Any increase in fees & charges would be above 2% inflationary increase of £463,840 to meet traffic management objectives, including achieving a higher turnover of spaces and supporting economic growth in the city. Any increase in price allows for a decrease in demand from users. Some areas will be affected and not others, as areas with specific issues will be targeted – eg. Area M. There will not be an increase across the board which will require changes to Conditions of Use signage and more negative impacts on certain groups. 		
5. Summary of impacts	Highlight the most significant disproportionate impacts on groupsDisproportionate impacts identified: Age (older people), disabilityIn regard to the potential increase of parking fees this may have an impact on all groups within society as the amount they pay to park on street would increase. This is necessary to support the Council's traffic management objectives, including those of supporting sustainable transport options, reducing vehicle emissions, achieving a higher turnover of spaces and supporting economic growth in the city.Age: Members of the public may choose not to pay to park on street due to price increase. This could lead to inclusion issues for older people.		

	Disability : Identifying blue badge fraud frees up parking spaces for eligible blue badge holders.		
	In terms of blue badge fraud then the impact is positive as identifying blue badge fraud frees up parking spaces for eligible blue badge holders who would otherwise not be able to access services		
6. Assess level of impact (1= low; 5= high)	2		
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?		
7. Key actions to reduce negative impacts	Officers will work to ensure any increase in fees will avoid negative impacts as much as possible. Fee increases are being targeted at areas where parking is at capacity to help provide drivers with better access to currently congested areas. Surplus parking income is mainly spent on providing free bus passes for elderly and disabled people. If we remove the 50% discount for suspensions which applies after 8 weeks as proposed in the fees and charges report, the saving generated could be used to introduce a 50% discount for community organised events of an estimated attendance of less than 15,000.		
8. Full EIA? Not needed.			
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?		
9. Monitoring and Evaluation	Regular review meetings are held to review on-street and off-street parking usage. We have recently applied for and been awarded People's Parking accreditation. This scheme was set up by Helen Dolphin MBE, disability rights campaigner to provide independent feedback about the facilities and public car park experience from a disabled user perspective, with regular monitoring and reviews.		
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.		

	Impacts of other proposals should not worsen the impacts identified above.

1. Service Area	Economy, Environment and Culture - Transport – Supported Bus Routes	2. Proposal No. 22
3. Head of Service	Mark Prior	
4. Budget Proposal What is the proposal? Reduction of Revenue expenditure by decreasing Supported Bus Services budget by £170,000		
	Disproportionate impacts identified: Age (older and young people), Disabili Religion/Belief, Child Poverty	ty, Ethnicity, Gender (women)
	Supported Bus routes are provided for areas of the city that are geographically isolated from the network. They provide sustainable travel options in areas of high car use and provide access to e training and employment to those without access to private vehicles.	
5. Summary of impacts	Z V V V V V V V V V V V V V V V V V V V	
	Cuts to services will particularly impact negatively on those with fewer transport choices e.g. without access to or finances for private vehicles and travelling to locations they have little control over such as schools and hospitals. Evidence for this EIA is based on:	
	 2014 Supported Bus route passenger survey¹ Background research used to compile the latest Local Transport Plan (LTI The National Highways and Transportation Public Satisfaction Survey² Passenger and operator surveys undertaken by DfT related to the introduce 	

¹ Passenger survey carried out on commercial routes only, for BHCC. ² A statistically robust national survey <u>http://nhtsurvey.econtrack.co.uk/</u> Budget EIAs (staff and service-users) 2017-18

Cuts to the supported bus route services will affect a number of groups in relation to their protected characteristic because they are more reliant on good local bus services than the general population².

Specific impacts:

Age: Older People: A higher than average percentage of older people use supported bus services and would be at particular risk from social isolation and being cut off from independent access to a wide range of services

Younger People show the highest levels of importance for good local bus services^{3.} Cuts to services will create barriers to accessing education, training and employment as well as social and leisure activities particularly for those young people living in geographically isolated communities.

The council could provide pre-paid key cards for pupils with a long home-to-school distance but operators have advised that there is not the capacity on the commercial network during peak hours to accommodate this increase in passengers. This would result in young people not being able to board buses, left at stops and late for school or unable to get home in the evenings.

Disabled people: People with certain impairments can be more reliant on buses than the general population and, for many the supported bus network will be their only method of travel. Reductions in services would become a barrier to access education training and employment, as well as shopping and leisure and other aspects of independent living. Levels of mental health illness in the wider region, are generally higher than national levels³. Any reduction in bus services will reduce opportunities for getting out and about for people with disabilities, leading to social isolation. These issues could result in increased demand of care provision across the city.

Race/ethnicity: A higher percentage of people from ethnic minorities have been recorded as users of supported bus network (20%). The geographical areas served by the supported network have high percentages of residents identifying a part of an ethnic minority group and as such reduction in these services would be greatest felt in these groups.

Gender: Women are over-represented as users of the Supported Network. In cutting these they would be disproportionately affected which would have a knock on effect for other services in the city as over 15% of women travellers reported travelling for the purpose of care responsibilities. Reducing their access to travel could have negative impacts on the Care provision for the city as a whole.

Religion/belief: There are a limited number of faith schools and religious buildings and sites such as cemeteries in the city which may warrant longer travel distances to attend these or them being located in locations not easily accessible from the commercial bus network. A reduction in bus services, particularly those that stop near faith

	schools or religious buildings/sites, may have a disproportionate effect on faith groups.		
	Child poverty : The loss of the supported network in particular areas of the city may disproportionately impact children from family units where the family is living on less than 60% of NMI. The reduction in services would see a decrease in access to education, training and employment as the commercial network does not have peak hou capacity to accommodate the additional passenger volume at this time.		
	 Other impacts: Changes in the ratio of car ownership levels and bus patronage. The city has lower than average car ownership levels and a corresponding higher than average levels of bus patronage. Any cuts to bus services are likely to result in increasing levels of car use. 		
	 Health and well-being: cuts to bus services may lead to social isolation and in turn impact in additional pressure on NHS and public health and local Care services for adults and young people. Education, Training and Employment: Peak hour capacity does not exist on the commercial network to absorb the displacement of large volumes of passengers. This would lead to longer journeys and potentially Safeguarding issues. Where trips are then replaced by car there may be more congestion on roads and less independence for children and other vulnerable users. Economic: Cuts would create barriers to Education Training and Employment for those with limited transport choices (Older people, younger people, disabled people, women) and have impacts of the demand for Care services across the city. 		
6. Assess level of impact (1= low; 5= high)	4 : The numbers are small in comparison with the wider population, but the loss of the services could cause significant impact and complicate travel for vulnerable groups and could have significantly negative impacts on the wider commercial bus network and levels of peak traffic congestion which would impact on the wider population.		
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?		
 7. Key actions to reduce negative impacts Due to the geography of the city and the outlying areas that are served by these services there is council could do to offset the impacts of cuts to these. The council has a statutory obligation to p school-transport where the distance is over three miles. However this can be in the form of a key the use of commercial services where available. 			
	A full EIA on the impacts relating to all protected characteristics would be required if the termination of these services is agreed as part of the budget saving		

8. Full EIA?	If the budget saving is agreed then a full EIA would be required.		
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?		
9. Monitoring and Evaluation	It would be anticipated that residents would contact both their ward councillors and the council direct to express concerns and this information would be monitored. No mitigating actions have been suggested.		
10. Cumulative	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.		
impacts	Currently unknown		

1. Service Area	Economy, Environment and Culture - Cityclean and City Parks – sport and leisure facilities	2. Proposal No. 23		
3. Head of Service	Richard Bradley			
	What budget changes are proposed? (Use the savings proposal wording and m	nore detail if needed)		
4. Budget Proposal	dget Proposal Currently the council subsidises provision of sport and leisure activities within city parks. The income ge does not cover the cost of maintaining the facilities. The budget proposal is to reduce subsidies. The detail for each service/ type of facility needs to be worked out and the exact impacts are unknown a stage (e.g. if a facility is taken over by a community group there may be no impact but if it is closed there significant impact)			
	Highlight the main / most significant potential impacts which will need to be mitigated or avoided			
	Disproportionate impacts identified: Age (older people), Disability, Child Por	verty		
5. Summary of	 Impacts will vary for different groups. Some facilities and organisations will be able to become autonomous from 	the council as has already		
impacts	 happened with a number of cricket clubs and continue to operate. Change of management to alternative providers may make them less acce impact on disabled people) and more costly for service users (with a potent lower incomes). Closure of facilities will reduce availability for all service users. However, the older people, disabled people (with physical and mental impairments) and particularly significant. 	tial specific impact on people on e benefits of this provision to		
6. Assess level of impact (1= low; 5=	2			

high)	
7. Key actions to reduce negative impacts	What actions will you take to reduce / avoid potential negative impacts and increase positive impacts?
	Opportunities for alternative service delivery will be explored with stakeholders and will vary depending on the service or facility.
	Alternative methods of service provision will be explored with stakeholders to try to prevent closure of facilities and where possible improve access. For example sports groups can take over certain facilities and have done so successfully in a number of cases including a number of bowls clubs.
	In relation to allotments subsidies are in place for people in receipt of disability benefit and these should be retained to minimise impacts.
	Phasing of proposals over a number of years will maximise opportunities for transition rather than closure.
	Some of the traditionally male dominated sports clubs that have gone for greater autonomy have made major progress in getting women involved in the sports since they have had greater control, this is particularly evident in rugby and cricket. Other clubs will be encouraged to follow this example.
8. Full EIA?	Specific EIAs will be required for individual proposals as the impacts will vary.
9. Monitoring and	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
Evaluation	To be confirmed
10. Cumulative impacts	Are any cumulative impacts identified across your service area from proposals in other departments OR from other service areas? Please explain what these might be
	Reducing outdoor sports facilities and reducing subsidies for allotments can have a cumulative impact on public health as these facilities help people engage in healthier life styles and can reduce healthcare costs and anti-social behaviour.

1. Service Area	Economy, Environment & Culture – public conveniences	2. Proposal No. 24	
3. Head of Service	Richard Bradley		
	What is the proposal? Use the savings proposal wording and more detail if needed		
4. Budget Proposal	Public conveniences £100,000 reduction in 2017/18 The savings will be identified through procurement of a new contract to be awarded prior to the end of the current contract in February 2017. The new contract will include retaining the current level of toilets in the city. There are no proposed closures, reduction in opening times, or service provision. The new contract is expected through procurement to identify significant savings and maintain the existing level of service. We therefore envisage that for 2017/18, no sites will be affected.		
	Highlight the most significant disproportionate impacts on groups		
5. Summary of impacts Disproportionate impacts identified: none identified			
	The impacts are reduced and minimal with savings created by new contract whic provisions and also maintain the level of service.	ch will protect the current	
6. Assess level of impact (1= low; 5= high)	1		

7. Key actions to reduce negative impacts	What actions are planned to reduce/avoid negative impacts and increase positive impacts?	
	no mitigating actions are needed as impacts will not be felt by service-users	
8. Full EIA?	Not needed	
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
9. Monitoring and Evaluation	This will be monitored by ensuring the contractor will provide a high level of service, be proactive in driving improvements to the 37 sites and providing regular reporting of their success.	
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
	None	

1. Service Area	Economy, Environment and Culture - Royal Pavilion & Museums	2. Proposal No. 25	
3. Head of Service	Janita Bagshawe		
	What is the proposal? Use the savings proposal wording and more detail if needed		
4. Budget Proposal	New income through hiring of spaces to language schools, CCTV monitoring, functions, guiding. Reduce audio contract.		
	Highlight the most significant disproportionate impacts on groups		
	Disproportionate impacts identified: Disability, Ethnicity		
5. Summary of that impacts	Hiring our rooms to increase income impacts negatively on work with community groups, as it might reduce opportunities for activities with community groups. However, there are no plans to charge community groups coming to work with collections.		
	Reducing audio contract impacts negatively on those with certain impairments eg: people with learning difficulties (easy English guide) and the deaf community (the BSL guide), also those from different ethnic backgrounds who are speakers of other languages eg: Mandarin, Hindi guides.		
6. Assess level of impact (1= low; 5= high)	1		
7. Key actions to reduce negative impacts	What actions are planned to reduce/avoid negative impacts and increase positive impacts?		

	Continue to ensure that rooms used for work with community groups are primarily used for this purpose and hirings to other groups (eg: language schools) are at times when community work doesn't take place (school holidays etc) - monitor impact of this.	
	The guide for visually impaired people is a different unit from standard audio guide stock so levels on site of these units will not be reduced. There will be fewer audio guides available to hire. Explore book ahead options for audio guides publicised via the website to ensure units reserved and monitor impact. Mobile app use is being explored and extended, providing another option to download the audio guide.	
8. Full EIA?	EIA? Not needed with existing mitigating actions. Impacts will be monitored.	
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
9. Monitoring and Evaluation	Monitoring of community work with community Engagement Officer who will alert if there is an impact on room usage Complaint monitoring from visitors regarding audio guide Visitor Services staff feedback at meetings	
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
	ΝΑ	

1. Service Area	Neighbourhoods, Communities & Housing - Housing – housing options and housing needs	2. Proposal No. 25a
3. Head of Service	Tracy John	
	What is the proposal? Use the savings proposal wording and more detail if ne	eded
4. Budget Proposal	Reduce staffing by a Housing Options Officer and Housing Needs officer	
	Highlight the most significant disproportionate impacts on groups	
5. Summary of impacts	Disproportionate impacts identified: Disability, Child Poverty Reduction of front line officers providing advice and assessment of homeless households. This will impact as it may take longer to undertake casework to achieve prevention and /or statutory assessments as to the homelessness duty owed. Homeless households who are owned a housing duty are vulnerable by definition and so a reduction in staff may impact on groups such as families with dependent children or pregnant – or vulnerable due to mental or physical problems that make then less able to manage than the average person; people leaving care; institutions or armed forces.	
6. Assess level of impact (1= low; 5= high)	5 - impacts on very vulnerable people	
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?	
7. Key actions to reduce negative impacts	We are upstreaming prevention working with Adult Social Care, Children's Servi indicators that someone will become homeless in order to try and prevent it. Als work away form reactive responses and are channel shifting where possible to a efficient methods. We have delivered a service redesign to remove duplication a service.	o to better manage and move assist more people through more

8. Full EIA?	Not required as actions to manage reduced staffing are in place	
9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
	Monitoring performance indicators relating to time taken to make decisions; impact on ability to prevent homelessness.	
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
	We have cumulative impacts from the loss of multiple staff in Housing Needs at a time when we are anticipating an increased need for the service due to the impact of welfare reforms taking place in a very high housing cost economy, which reduces the potential prevention solutions for people.	

1. Service Area	Neighbourhoods, Communities & Housing - Libraries	2. Proposal No. 26
3. Head of Service	Sally McMahon	
	What is the proposal? Use the savings proposal wording and more detail if nee	ded
	 Budget proposals for Libraries for 2017-18 are: Reduce bookfund spending in Hove Library by £30,000 Seek better deal on utilities for Jubilee Library saving an estimated £20,000 Part year saving on staffing – as a result of the restructure in August 2016 (£45,000) Further staff savings as a result of closing Hove Library on Sundays (£37,000) Increase in income of £10,000 	
4. Budget Proposal	 Key background information These savings proposals are in keeping with the Libraries Plan 2016-20, approved by Council in March 2016. The detail of the restructure and the service changes were covered in two EIAs earlier this year: Libraries Redesign/Restructure (ref: NCH 03) and Libraries Extra EIA (ref: ACE 18) Income generation is largely an increase in commercial activity, so there are no equalities implications Reduction in Hove bookfund was also covered in the Libraries Plan as the Service Review and Needs Analysis which preceded it identified an excess of bookfund spending in Hove in relative terms, and given the reducing use of this library. The proposal to close Hove Library on Sundays is a new proposal, and is covered in this EIA. Hove Library only opened on Sundays for the first time in August 2016, so this use is relatively new. 	
5. Summary of impacts	Highlight the most significant disproportionate impacts on groups	

	Disproportionate impacts identified: Disability, Child Poverty	
	 <u>Reduction in Bookfund in Hove Library:</u> The reduction in spend will be focused on the adult non-fiction stock (though all areas of stock will be affected). This will be reducing those areas of stock least used. Much of this stock is a duplicate of stock available in Jubilee Library, and we know that many (40%) of library users already use Jubilee Library as well as Hove Library. Potentially, those who are adults, or those who are disabled and find it hard or expensive to travel to another library, may be affected by this change. 	
	<u>Close Hove Library on Sundays</u> This proposal does not disproportionately impact on specific people as it affects all users. All Hove Library users on Sundays can visit another library and there is evidence to show that 47% of them already do use another library (40% use Jubilee). Already, Sundays have less than half the visits than any other day of the week with an average of 318 people using the library each Sunday. This represents only 6.5% of the total Hove Library usage over the week. However, there could be more impact on those who find it hard or expensive to travel to another library.	
6. Assess level of impact (1= low; 5= high)	1	
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?	
7. Key actions to	For both of the proposed changes above (Reduction in Bookfund in Hove Library) and (Close Hove Library on Sundays) the mitigating actions are the same:	
reduce negative impacts	 Those who are disabled and find it hard or expensive to travel to another library can request the stock to be delivered to Hove for them. There is a charge for this but those who are in receipt of benefits can obtain reduced or waived charges, by registering for a concessionary or exemption membership. Hove Library will remain open six days a week, and there will be a re-invigoration of the service there for instance by the introduction of a café (under consideration) 	
8. Full EIA?	Not needed.	
9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
	Monitoring customer feedback and complaints	

	Monitoring level of stock reservations to see if these go up
10. Cumulative	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
impacts	None

1. Service Area	Neighbourhoods, Communities & Housing - Communities, Equality and Third Sector Team	2. Proposal No. 27	
3. Head of Service	Emma McDermott		
	What is the proposal? Use the savings proposal wording and more detail if ne	eded	
4. Budget Proposal	 Increase the reduction in the third sector investment programme budget from £ 2017/18. The programme consists of the Communities and Third sector Prospec Communities Fund. The prospectus invests strategically in the third sector to de for the council as well infrastructure support to CVS, community development in citywide and a community banking partnership to deliver the outcomes of the costrategy. The Communities Fund provides an annual fund for grassroots activity and pump priming collaborations to respond to gaps in and improve service procestrategy for the prospectus are predominantly equality groups – they a People who experience additional vulnerability or risk of exclusion linked characteristics: age, sex, gender identity, sexual orientation, disability, letenhnicity, faith; People in poverty or on low income; Carers and young carers; Children in care and/or leaving care; People struggling with addictions; Individuals in insecure housing or at risk of homelessness or homeless; Survivors and/or perpetrators of domestic violence & sexual violence; Ex-offenders; Individuals not in work or at risk of unemployment. Refugees and asylum seekers; IMD top ranking neighbourhoods; Pockets of deprivation; 	ectus 2017 -2020 and an annual elivery against priority outcomes opriority neighbourhoods and buncil's financial inclusion y, growing third sector resilience, evision. are as follows: to their protected arning disabilities, marital status,	

	Highlight the most significant disproportionate impacts on groups
5. Summary of impacts	Disproportionate impacts identified: across all protected characteristics
	The Third Sector Programme is designed to target the council's corporate priorities which focus on the most vulnerable individuals and communities, increasing fairness and promoting social capital and resilience. The organisations funded through the programme are groups/organisations that work with and support communities with legally protected characteristics, and those who are marginalised and vulnerable, including those experiencing poverty/financial exclusion.
	The proposed reduction in the programme's funding will directly result in:
	 decreased capacity to meet some corporate priorities with specific impacts on characteristics protected in law
	 reduced capacity for CVS groups which support community resilience and reduce reliance on statutory services: reducing the budget could result in increased demand for council services especially relating to young people and older people
	 potential wider impact on ability to attract additional match funding
6. Assess level of impact (1= low; 5= high)	4
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?
7. Key actions to reduce negative impacts	The commission has now completed and announcements on awards have been made subject to budget decision. The application of the additional saving has been modelled. Assuming the preferred option of applying the saving equally across the prospectus, the reduction does not unfairly affect one protected characteristic more than another, but will affect the VCS's support for people with all protected characteristics. In addition, the unsuccessful applicants have been offered support from council and/ or the commissioned infrastructure service.
8. Full EIA?	An EIA was undertaken as part of developing the prospectus.

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9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
	Feedback will be sought from the infrastructure organisations in the city on the impact of the reduction on VCS organisations at all levels – grassroots through to large organisations as well as on themselves.	
	Feedback will be sought from commissioners across the council and other public bodies especially the CCG as the strategic investment underpins organisations delivery of other contracts in the city.	
	Feedback will be sought from unsuccessful applicants to the commission.	
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
	Reduction in the third sector investment programme will likely impact on other budget proposals that may be looking to the VCS to help mitigate the impact. It may also jeopardise the delivery of other commissions, especially if those budgets are being reduced.	
	Other proposals that impact on this proposal for example the deletion of the youth services budget, will influence what VCS organisations are able to deliver through the third sector investment programme.	

1. Service Area	Neighbourhoods, Communities & Housing - Regulatory Services	2. Proposal No. 28	
3. Head of Service	Jo Player, Annie Sparks and Nick Wilmot, Joint Acting Heads of Regulat	nt Acting Heads of Regulatory Services	
What is the proposal? Use the savings proposal wording and more detail if needed		needed	
4. Budget Proposal	£60,000 management saving following management restructure £36,000 realigning animal welfare service budget following budget saving from 2016/17 £20,000 increased income from pest control service £44,000 trading standards deletion of vacant post and reduction in supplies budget £60,000 civil contingencies potential restructure following modernisation programme		
	Highlight the most significant disproportionate impacts on groups		
5. Summary of impacts	Disproportionate impacts identified: Child Poverty		
	Reduction in investigation resource and increase in charges for pest control s	ervice	
6. Assess level of impact (1= low; 5= high)	1: Minimal but may impact on lower income families requiring pest control services resulting in health issues if unable to pay for pest removal.		
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?		
7. Key actions to reduce negative impacts	Targeted enforcement and advice at those independent small and medium siz Modernisation programme to explore field officers undertaking some parts of duplication so that officers are able to concentrate on undertaking statutory w Work with partners to deliver animal welfare service	regulatory services role to avoid	

8. Full EIA?	Not required
9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
	Will monitor impacts via Interplan
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
	Modernisation programme for neighbourhoods communities and housing directorate may mitigate impacts from proposals as mentioned above with the creation of field officer posts.

1. Service Area	Neighbourhoods, Communities & Housing - Community Safety	2. Proposal No. 29
3. Head of Service	Peter Castleton	
4. Budget Proposal	What is the proposal? Use the savings proposal wording and more detail if nee	eded
	Reduced capacity to work with LGBT community reducing LGBT Community Safety Officer from full time to part time (50% cut)	
	Highlight the most significant disproportionate impacts on groups	
5. Summary of impacts	Disproportionate impacts identified: Sexual Orientation Trust and confidence with the LGBT community and particularly the LGBT Community Safety Forum may fall. This may lead to fewer reports if victims have less confidence in the council. Victims of LGBT incidents and the wider LGBT community may lose trust and confidence in the council.	
6. Assess level of impact (1= low; 5= high)	2	
	What actions are planned to reduce/avoid negative impacts and increase po	sitive impacts?
7. Key actions to reduce negative impacts	Other community safety staff have a positive relationship with key members of the LGBT Community Safety Forum, other teams will need to establish their own relestakeholders.	5
	Head of Community Safety will develop relationship with key LGBT community s and confidence.	stakeholders and monitor trust

8. Full EIA?	No
9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
	Head of Community Safety will maintain relationship with key LGBT community stakeholders and monitor trust and confidence.
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
	NA

1. Service Area	Neighbourhoods, Communities and Housing - Partnership Community Safety Team	2. Proposal No. 29a
3. Head of Service	Peter Castleton	
4. Budget Proposal	What is the proposal?	
	Stop communities against drugs work currently a 0.6 part-time post.	
E. Cummons of	Highlight the most significant disproportionate impacts on groups	
5. Summary of impacts	Risk is that drugs litter and use is on the rise, communities will become more vulnerable to drugs litter and less resilient to drug use in neighbourhoods. Drugs litter may not be removed as quickly.	
6. Assess level of impact	1	
7. Key actions to reduce negative impacts	What actions are planned to reduce/avoid negative impacts and increase p	ositive impacts?
	Cityclean will continue to collect needles when incidents are reported to them, we swiftly the associated ASB will be reported to the Community Safety Casework	
8. Full EIA?	No	
9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your groups over the coming year (or more)?	mitigating actions on these
	Monitoring will be by analysis of the associated ASB that is reported to the Com	nmunity Safety Casework Team

10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
	None	

1. Service Area	Finance & Resources - Revenues & Benefits – digital programme	2. Proposal No. 30
3. Head of Service	Graham Bourne	
	What is the proposal? Use the savings proposal wording and more detail if need	led
4. Budget Proposal	The Revenues & Benefits function is moving towards an on-line service as part of The proposed savings reflect the reduction in supplies and services costs and ad programme is rolled out over the next three years. Over the three years there will mean an incremental reduction in face to face opening hours and eventually a red However if the digital programme is introduced effectively these changes should r demand.	ministrative resources as the be a channel shift that will duction in telephone capacity.
	Highlight the most significant disproportionate impacts on groups	
5. Summary of impacts	 Disproportionate impacts identified: Age (older people), Disability, Ethnicity Any reduction in Benefit Administration capacity has the potential to impact on the service and therefore must be delivered with improved efficiency in place. The sar implementation of digital services providing this efficiency. The Benefit customer I those on low incomes and a high proportion of vulnerable customers. The program that the service will be 100% digital and there will still be a telephone service and service change needs to be supported and the Digital First programme recognise groups may be less able to engage with a digital service. Mitigation and support is digital inclusion issues and to be effective this will include a requirement to build it provision. Citizens online research identified the following: The key figure that our baseline analysis came up with was 16% of the Brighton & digital exclusion i.e. lacking internet access at home or not possessing all of the figure that our baseline analysis came up with was 16% of the Brighton & digital exclusion i.e. lacking internet access at home or not possessing all of the figure that our baseline analysis came up with was 16% of the Brighton & digital exclusion i.e. lacking internet access at home or not possessing all of the figure that our baseline analysis came up with was 16% of the Brighton & digital exclusion i.e. lacking internet access at home or not possessing all of the figure that our baseline analysis came up with was 16% of the Brighton & digital exclusion i.e. lacking internet access at home or not possessing all of the figure that our baseline analysis came up with was 16% of the Brighton & digital exclusion i.e. lacking internet access at home or not possessing all of the figure that our baseline analysis came up with was 16% of the Brighton & digital exclusion i.e. lacking internet access at home or not possessing all of the figure that our baseline analysis came up with was 16% of the Brighton & digital exclusio	e speed and quality of the vings are designed around the base naturally encompasses mme to 2020 does not advocate a limited face to face one. The s this. As explained below some s being designed to address the n equalities monitoring into the A Hove population at risk of ve key digital skills:

	The groups most affected are: Low income households, Retired people, and Older workers (50+) These people are more likely than average to be frequent users of public services such as HB or adult social care. So the active customer base for Council services will have higher levels of digital exclusion than the average for the population.	
	The areas where these people are most concentrated are: Hangleton, Moulsecoomb, Whitehawk, North Portslade, Woodingdean, Hollingbury and Central Brighton (parts of Regency, St. Peter's & North Laine and Queens Park wards)	
	There is no equality data on footfall in the customer service centre to identify any differentials in the use of service but it's not believed that any age group would be disproportionately impacted by reduced opening hours. Current statistics also show that with the proposed change in 2017/18 the service would still have the capacity to meet current footfall.	
	Specific impacts: Disability: The Citizens Online research does not identify disabled people as one of the most impacted groups. However some of the factors identified in their research in relation to the correlation with social inclusion and low income would suggest that there would be an impact. There is also the position regarding the type of impairment and the suitability of digital as a communication channel.	
	Race/ethnicity : The Citizens Online research does not identify ethnicity/race as one of the most impacted groups. However some of the factors identified in their research in relation to the correlation with social inclusion and low income would suggest that there would be an impact. It has been reported from Benefit Officers that face to face is a preferred option for many citizens for whom English is not their primary language.	
	Child poverty: there is a correlation between low income and digital exclusion.	
6. Assess level of impact (1= low; 5= high)	2	
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?	
7. Key actions to reduce negative impacts	The service has direct awareness through its benefit and welfare reform work and the capacity to recognise cases of potential digital exclusion and adapt its individual or collective service accordingly.	
	As with any change in the benefits service there has been careful consideration in the proposals to the impact on service capacity. Not only are there customer implications in under resourcing the service or not having resilience to deal with increases in demand, but significant financial repercussions that could be counter productive to the	

saving intent and impact on other council services.

The service has a continual programme that focuses on the rationalisation of existing resources to maximise the value of first contact with the customer and minimise double handling, error and cost. This work encompasses the intelligent use of technology in terms of automated communication with other benefit agencies and online claiming.

In terms of the transformation careful consideration has to be given to how this is supported in terms of the operational and cultural changes for staff and in terms of the service provision change for customers and their behavioural change to adapt to it.

The service is being supported in delivering its digital programme by Digital First (it is effectively one of the pioneer services for the corporate programme) and Customer Insight who are supporting the transformation. Lessons learnt are being compiled from other authorities who are further ahead on their digital transformation. The progression is iterative and incorporates learning and adaptation as it progresses. In June 2016 Digital First produced an Equalities Audit Report with an action plan based on recommendations to improve data collection and reporting on protected characteristics.

The key service for the support of digital delivery is the Library Service. The Library Service has been redesigned to an enabling with the strategic intent of working with the voluntary sector across the cities libraries to support citizens in becoming confident to self help using services and accessing information on the internet. This network provides the platform for the digital transformation of revenues & Benefits and the services that follow it. It is designed to be inclusive and tackle the identified groups of digital exclusion.

The transition to a full digital offer will take 3+ years and it is only in 2019/20 that other options for customer contact are sizeably reduced. Consequently the impact on those who are currently digitally excluded will be minimal.

Specific actions:

Disability: The corporate approach to digital support through the libraries reaches out into communities and is designed to improve customer digital confidence and competence. The service is often aware of individual disabilities, normally because of benefit entitlement, and provides and has access to specialist support around vulnerabilities. The digital rollout will use this information to ensure suitable sensitivity and support.

Child poverty: For low income families the corporate approach to digital support may extend to identification of digital exclusions in Families, Children and Learning and specific actions as a result. The service has direct awareness through its benefit and welfare reform work and the capacity to recognise cases of potential digital exclusion and adapt its individual or collective service accordingly. Managing this group as part of the

	transformation is important to the success of the programme.
8. Full EIA?	Not needed at this stage
9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
	The Digital First Team and the Service are discussing how to monitor rollout impact with a view to setting a template for future digital rollouts across other services.
	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
10. Cumulative impacts	The Digital Delivery coincides with a downsizing of the service to reflect reduced caseload because of the introduction of Universal Credit, and to make budget savings. This may increase pressure on the capacity to support the transformation particularly if workloads do not decrease at the predicted speed. The realisation of a programme of national welfare reforms will also put further pressure on the service.

1. Service Area	Finance & Resources - Revenues and Benefits – council tax reduction	2. Proposal No. 31
3. Head of Service	Graham Bourne	
	What is the proposal? Use the savings proposal wording and more detail if n	eeded
	Council Tax Reduction (CTR) – This EIA is in relation to changes to the CTR s agreed at Full Council on 15 th December 2016. The changes are:	cheme for 2017/18 which were
4. Budget Proposal	 To increase the amount that CTR goes down by for every extra £1 increase in the income a household receives (known as 'the taper') from 20p to 25p 	
	 To set the maximum rate CTR to the amount payable for a Council Tax Band D property with no one paying more than £10 as a result of this change in 17/18. 	
	 To set the minimum amount of CTR to £5 per week, meaning the less than £5 a week will pay the full amount of Council Tax 	at households entitled to CTR of
Highlight the most significant disproportionate impacts on groups		
	Disproportionate impacts identified: Gender (women), Child Poverty	
5. Ouror and a f	The main findings from the EIA are:	
5. Summary of impacts	 That, as a proportion of the caseload, households with a disabled membrore Council Tax as a result of these changes than households without As a proportion of the caseload households where the claimant is femal more Council Tax as a result of these changes than households where As a proportion of the caseload people in different sex relationships are Council Tax as a result of these changes than people in same sex relationships are Council Tax as a result of these changes than people in same sex relationships are council Tax as a result of these changes than people in same sex relationships are council Tax as a result of these changes than people in same sex relationships are council Tax as a result of these changes than people in same sex relationships are council Tax as a result of these changes than people in same sex relationships are council Tax as a result of these changes than people in same sex relationships are council Tax as a result of these changes than people in same sex relationships are council Tax as a result of these changes than people in same sex relationships are council Tax as a result of these changes than people in same sex relationships are council Tax as a result of the caseload households where the claim is from a council Tax as a result of the caseload households where the claim is from a council Tax as a result of the caseload households where the claim is from a council Tax as a result of the caseload households where the claim is from a council Tax as a result of the caseload households where the claim is from a council Tax as a result of the caseload households where the claim is from a council Tax as a result of the caseload households where the claim is from a council Tax as a result of the caseload households where the claim is from a council Tax as a result of the caseload households where the claim is from a council Tax as a result of the caseload households where the claim is from a council Tax as a result of the caseload households where the claim	a disabled member e are more likely to have to pay the claimant is male more likely to have to pay more onships.

	 pay more Council Tax than households where the claim is made by a single person. Case level data on the number of trans recipients of CTR is requested but the recorded numbers of replies does not allow us to draw a firm conclusion as to whether this group is disproportionately impacted. 	
6. Assess level of impact (1= low; 5= high)	 3: Households affected by the possible change to the taper would have to pay approximately £1.60 per week more in Council Tax Households affected by the possible change to restrict CTR to the amount payable for a Band D property would have to pay between £2.08 and £10.00 per week more in Council Tax. Households affected by the possible change to set a minimum amount of CTR at £5 would have to pay between £0.01 and £4.99 per week more in Council Tax. 	
7. Key actions to reduce negative impacts		
8. Full EIA?	A full EIA was be published with the CTR report which went to P,R&G on 8th December and Council on 15th December	

9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?	
	They will be reviewed quarterly during 17/18	
	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.	
	There are no known other proposals from service areas which might worsen or mitigate the impacts of these proposals. However there are a number other welfare changes are due to start in late 2016/early 2017. They include:	
10. Cumulative impacts	The decrease of the household Benefit Cap from November from £500 per week to £385 per week for families and from £350 per week to £258 per week for single people.	
	The restriction of Benefits to the levels for two children from April 2017.	
	The reduction in the amount people on Employment and Support Allowance Work Related Activity group will receive from April 2017.	

1. Service Area	Strategy, Legal & Governance - Democratic Services – print budget	2. Proposal No. 32
3. Head of Service	Abraham Ghebre-Ghiorghis / Mark Wall	
	What is the proposal? Use the savings proposal wording and more detail if ne	eded
4. Budget Proposal	A saving of £30,000 against an overall budget of £609,030 is proposed for 2017/18 from the Democratic Services team. This includes a 33.5% saving against the print budget and the remainder of the saving from vacancy management and supplies & services budgets.	
	Highlight the most significant disproportionate impacts on groups	
 5. Summary of impacts 5. Summary of impacts The savings, especially the ones relating to printing, are dependent on the necessary investment a from ICT (eg tablets for electronic agenda access.) Support for non-decision-making meetings may withdrawn, greater pressure on staff and less support to members. Additional training will be given to enable them to use their devices and where extra features are required as reasonable adjustment have been included for those Members who have been identified. 		aking meetings may have to be raining will be given to Members
6. Assess level of impact (1= low; 5= high)	2	
7. Key actions to	What actions are planned to reduce/avoid negative impacts and increase positive impacts?	

reduce negative	
impacts	Democratic Services Officers will work with Members to enable greater flexibility and use of their tablet devices
	for agendas and committee papers, and with officers to ensure that they are more self-confident in using the
	report management system on the wave.
	A reduced number of hard copies of papers will be made available to those Members who require them,
	although it is hoped that as they become more adept at using their mobile devices in meetings, this need will
	decrease.

8. Full EIA?	An EIA for the team will be undertaken once the move to HTH has taken place and the rollout of mobile devices to Members has been completed.
	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
9. Monitoring and Evaluation	A review after each committee cycle will be undertaken to identify how many users are making use of the electronic agendas/papers and further training and help will be directed to those still taking hard copies.
10. Cumulative impacts	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
	The use of mobile devices will depend on sufficient wifi connections being available in council buildings and alternative provision may need to be available if it was to fail.

1. Service Area	Strategy, Legal & Governance - Democratic Services – members' allowances	2. Proposal No. 33
3. Head of Service	Abraham Ghebre-Ghiorghis / Mark Wall	
	What is the proposal? Use the savings proposal wording and more detail if nee	eded
4. Budget Proposal A saving of £24,000 against an overall budget of £965,450 is proposed for 2017/18 from the Allowances budget.		/18 from the Members
Highlight the most significant disproportionate impacts on groups		
5. Summary of	Disproportionate impacts identified: none identified	
	The savings directly affected current Members and could have impact on anyone considering whether to stand as a councillor in the future.	
impacts	The savings are subject to Member approval and may therefore be amended or not accepted. There is currently a £15,000 underspend that could be taken forward, whilst the proposal not to implement an inflationary increase amounting to £9,000 will be subject to the recommendations of the Independent Remuneration Panel; and the acceptance of Members at full Council. Any changes to the democratic structure of the council are not anticipated to come into effect until May 2019, which may then impact on the level and number of allowances being paid. An independent review of the structure is being investigated with a view to its findings be reported to council in due course.	
6. Assess level of impact (1= low; 5= high)	1	
7. Key actions to reduce negative impacts	What actions are planned to reduce/avoid negative impacts and increase positive impacts?	

The proposed savings will need to be taken to the Independent Remuneration Panel for consideration as there is a direct impact to the Members Allowances Scheme, as well as being discussed with Members who will need to support the proposed changes.
Not required.
How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?
The Independent Remuneration Panel is required to review the Members Allowances Scheme on a yearly basis and report its findings to the full Council.
Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
None

1. Service Area	Strategy, Legal & Governance - Life Events – bereavement and registration services	2. Proposal No. 34
3. Head of Service	Paul Holloway	
	What is the proposal? Use the savings proposal wording and more detail if needed	
4. Budget Proposal	 Bereavement Services Welfare Funerals in the Bereavement Services area Review of provision of welfare funeral services to operate in a different way and exploid operating costs. Potential use of external company for searches for next of kin may refureral. This may involve changes to delivery of welfare services - involving outside company The consideration will aim to reduce impacts on current staffing levels and continue to criteria working in a different way. Changes to service delivery are potentially high risk and need to be explored further - with stakeholders. Coroners Transfer Service (CTS) in the Bereavement Services area Consider review of service and tender to a Funeral Director service instead of using in mortuary. This will involve a review of service to work in a different way and consider external Fuprovide Coroners Transfer Service Funeral Directors have contracts with other Local Authorities and therefore there is colocal authority services that we can explore. We will look at working with procurement to agree a contract with reputable Funeral Director of new products and development of existing products Memorialisation in the Bereavement Services area Introduction of new products and development of existing products The aim is to generate an increase in sales through product review to promote a wide continue to promote existing products This will require research and an awareness of bereavement market. The service more 	educe need for public health considerations o provide services to specific including reputational risk n-house staff team from uneral Director service to ommon practice across other Directors who meets Coroner's

sales and promotion skills - essential to promote products and serv	ices.
There is a risk that ineffective skills development could impact on s	
Registration Services	
 Review of fees and charges in the Registration Services 	
Fees and charge review and regular increases backed up by bench	nmarking info' from other local authorities, taking
account of all unit costs.	
This requires a regular fee and charge increases in line with local a	rea and business requirements, and review of
unit costs. Options need to weighed up with a view to seeking men	nber support on fee and charge increases.
Business levels needs to be maintained. The service is reliant on c	
statutory fees but opportunities exist for other fees.	
statutory rees but opportunities exist for other rees.	
Highlight the most significant disproportionate impacts on gro	oups
Disproportionate impacts identified: Child Poverty	
Bereavement Services	
Welfare Funerals in the Bereavement Services area	
No impact on groups. Whilst this service is for people who do not h	any other means to arrange a funeral from within
	5
their estate, or amongst their relatives / friends, provision of a welfa	
therefore the service will remain unchanged to customers / service	
Coroners Transfer Service in the Bereavement Services	
5. Summary of No impact on groups. A Coroners Transfer Service would look to b	be procured and contracted out to a local Funeral
	e users.
impacts	
 Memorialisation in the Bereavement Services area 	
This is an area where staff training and commitment can ensure an	inclusive service, which will be available to all
budgets, depending on the product. Those with less financial mear	
memorial products, but every attempt will be made to accommodate	
are more financial means.	e sinalier budgets as well as ones where there
Registration Services	
Review of fees and charges in the Registration Services	area
Work is always undertaken to ensure a statutory registration service	
statutory rate. This will not change. As in previous years, benchma	•
members to decide whether increasing fees and charges for non-st	

	market for similar services provided by local and similar service providers. (other Registration Services.)
6. Assess level of impact (1= low; 5= high)	 Minimal impact for Welfare Funerals and Coroners Transfer Service as proposals are to do with service delivery – not service provision. Potential for impact in Memorialisation proposals but training in sensitivity and inclusive approach to product availability. Potential impact for those in financial hardship in Registration fees and charges proposal, but mitigated by statutory fee remaining.
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?
7. Key actions to reduce negative impacts	Some of the proposals are around marketing of products in sensitive service areas. Training needs to reflect the need for inclusive services that do not disproportionately affect customers.
	Bereavement Services continues to provide free burials and cremations for children up to 16 years of age – this is not affected by any of the proposals.
	All customers need to be made aware for the statutory fees and have the opportunity to consider this as an option. Training need to make sure staff are committed to ensuring customers can afford the services they purchase from us.
	Religion/belief : Whilst the first option for a Welfare Funeral will always be to offer a cremation, the service would look to do its best to take account of other religious beliefs or faith requirements. Where there is evidence or a specific request that a burial is more appropriate, the service would accommodate this under existing arrangements and in any proposed new working arrangements.
8. Full EIA?	To be considered as part of regular review on affects of proposals after monitoring – in particular of results on service provision following fee increases.
9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?

	Service provision will continue to be monitored and reported on. No's of Welfare Funerals and body collections through Coroners Transfer work are always recorded / reviewed. No's of memorial products and Registration fees and charges also monitored and recorded. These will have close scrutiny due to income targets – if services become less in demand, a review of the fee structure may be necessary. Statutory Register Office ceremonies reported up to the General Register Office, so reported on to Central Government.
	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts. Bereavement customers and Registration Service customers along with other LA customers are faced with paying more for services, or perhaps not receiving services they have been used to receiving.
10. Cumulative impacts	The sensitive areas of the service require thought and special consideration when reviewing how much a service costs. Proposals are therefore always based on benchmarking information from other service providers, and or are aligned to how much it costs the LA to provide the service. (unit costs)
	Statutory services remain available at lower rates but there are options for the higher end of budgets both in the memorials and the Registration Service fee increase proposals.
	Ongoing Welfare Reforms are likely to add to the possibility of increases in service charges having a cumulative affect on our customers.

EIA 35 – EIA NOT REQUIRED: NO IMPACT ON SERVICE-USERS

1. Service Area	Neighbourhoods, Communities & Housing - Housing (HRA) – door entry systems	2. Proposal No. 36		
3. Head of Service	Tracy John			
	What is the proposal? Use the savings proposal wording and more detail if needed			
4. Budget Proposal	Income of approximately £50,000 from the introduction of a service charge for the door entry systems to blocks of HRA flats.	ne servicing and maintenance of		
	This reflects services provided that benefit some tenants, and aren't provided to all tenants, and simply recovers the costs of the service.			
	Highlight the most significant disproportionate impacts on groups			
	Disproportionate impacts identified: Child Poverty			
	The positive impacts of door entry systems on all tenants irrespective of their protected characteristic, are their blocks of flats being more secure, residents being able to exercise control of who enters the internal communal area of their block, and a likely reduction in anti-social behaviour.			
5. Summary of impacts	There is the negative impact of tenants who are not in receipt of Housing Benefit needing to pay this charge – although this does not significantly impact one group disproportionately to another.			
	The HRA aims to deliver high quality services to meet the needs and aspirations of council tenants, many of whom are over-represented amongst elderly, female and disabled tenants, and/or vulnerable groups, or come from disadvantaged groups. In that comparative context to the general population in the city, any changes that require additional payments from them are arguably disadvantageous. However also in that wider community comparative context, the alternative perspective is that the aforementioned groups of people are arguably in a better position to some of their peers outside of council housing by virtue of their tenancy status.			
	86% of respondents to the 2016 STAR (survey of tenants and residents) custom their rent offered value for money (up from 84% in 2014).	ner satisfaction survey thought		

	74% were satisfied with their service charge in terms of value for money (up from 71% in 2014). 81% were satisfied with their housing service overall.
	Specific impacts: Disability: There are higher proportions of disabled people living in flats rather than in houses where the charge will not apply (54% compared to 38%). However the majority of our disabled tenants are on Housing Benefit.
6. Assess level of impact (1= low; 5= high)	2 - There are minimal impacts on the majority of tenants impacted as they will be covered by Housing Benefit, however of those who aren't there will be some impact on those who are just above the thresholds to claim Housing Benefit.
	What actions are planned to reduce/avoid negative impacts and increase positive impacts?
7. Key actions to reduce negative impacts	Communications sent to tenants about the proposed new charge will advise people about making welfare benefit claims and give contact details for sources of support. Continued communication with residents through Homing In, housing pages on the council's website, City Assembly, Tenant Associations, Tenant Disability Network and direct contact with affected tenants.
	Ensure information is available in a range of formats, and is communicated early to give people time to prepare. Translation and interpreting services available via Sussex Interpreting Service
	Officers are aware of the local Money Works service, and are able to direct people to the website, or advise on other ways they can access the service if they are not on the internet. They also have access to the contracted Money Advice Plus service for help with budgeting and other money matters.
	We will conduct further analysis of the people not on Housing Benefit to look at their likely eligibility to claim benefits. Contacts are made with tenants who we know are vulnerable, and they would be prioritised for action.
	Housing Benefit is payable on services charges apart from heating and water charges.
8. Full EIA?	For the introduction of a new service charge, a full EIA will be carried out early next year if the proposal is to be implemented.
Dudget ElAs (staff and	Dago 125 of 111

9. Monitoring and Evaluation	How will you monitor the impact of this proposal and the success of your mitigating actions on these groups over the coming year (or more)?This will be through our overall analysis of rent accounts, through tenancy visits, and through our focussed work on supporting vulnerable households.
	Might related proposals from other service areas (or other changes) worsen or mitigate impacts from your proposal? Please explain these impacts.
10. Cumulative impacts	There will be the cumulative impacts of welfare reforms as they impact on various groups of tenants, however there are lots of mitigations for those, and this additional charge of approximately £0.65 per household per week is covered by Housing Benefit.

Budget Staffing Equality Impact Assessments 2017-18 – Staff: identified impacts and actions

Overview

Individual equality impact assessments have been completed at this stage with the known data for all proposals that include a direct staffing impact and potential reduction in posts. The equality duty (in the Equality Act 2010) is an ongoing duty, therefore assessment of equality needs and impacts will continue through the consultation processes and in the implementation of any changes.

For any group over 20 staff affected an analysis of equalities data has taken place. This document identifies where the profile of the potentially affected staff varies from the Directorate and/or council profile. This has informed consideration of mitigating actions to address impacts.

Where there are fewer than 20 staff affected data has not been produced to protect the confidential sensitive equalities information provided by staff. EIAs have been completed in these instances with regard to known information about the staff group and proposals made.

The outcome of EIAs will guide the consultation process and inform the implementation of changes. Broadly across all groups affected the following observations can be made:

- Overall the groups affected by budget proposals are broadly in line with the make up of the Council's workforce in terms of age, with over 51% of those at risk between the ages of 45 and 59. There is a higher proportion of staff between 50 and 59 at risk when compared to their representation in the workforce (34% of those affected compared to 30% representation in the workforce). There is also a higher proportion of younger staff in the 20-24 age range affected (2% of those at risk compared to 1.71% representation in the workforce). Whilst this is a small difference it further erodes the representation of younger staff who are already under represented.
- There is a higher proportion of males who are subject to formal consultation when compared to their profile in the workforce (52.68% of those at risk compared to 40.84% representation in the workforce).
- The proportion of BME and White Other staff at risk is marginally lower than representation across the council from these groups, although services will need to consider the potential that there will be further reductions of groups that are already under-represented. Longer term strategies to encourage recruitment of under represented groups will need to continue across the council and within directorates.
- The proportion of disabled staff affected by proposals is in line with the representation across the council. However it has become apparent in certain proposals that individual members of staff with disabilities need particular support, and this has been discussed through 121 meetings.
- There are fewer LGBT staff affected when compared to the make up of the workforce (10.26% of those affected by proposals compared to 12.02% representation in the workforce).

Whilst this describes groups affected in total, the individual EIA's consider impacts on those affected in the individual proposals.

In addition to the specific mitigations identified in each service area the Council has guidance, procedures and approaches for managing change that are designed to ensure change is managed fairly and groups with protected characteristics are not negatively impacted:

• Involve staff in discussions about service redesign and follow the principles and governance arrangements in the service redesign toolkit.

- When developing any further detailed proposals take account of the staffing equalities data to inform decision making and/or continue assessing staff equality impacts.
- Ensure the council's relevant policies and procedures are equitably and appropriately applied (management of change protocol, redeployment, job evaluation processes etc.) to ensure that no adverse impact is created for employees related to their protected characteristics.
- Review vacant posts, use of agency employees etc. to minimise the impact on current substantive post holders.
- Manage redeployment on a corporate level and ensure that all vacant posts are considered for redeployment.
- Where proposals may result in a reduction of posts consider the offer of voluntary severance (subject to robust business case) to mitigate the impact of potential compulsory redundancy processes.
- Where a reduction in posts will mean compulsory redundancy ensure that selection processes are clear and free from bias, and that processes take into account any individual needs.
- Ensure processes and criteria related to selection for voluntary redundancy are clear and transparent and use the compensation panel appropriately.
- Ensure managers involved in selection have completed corporate recruitment and selection training and are signposted to the Equality & Diversity e-learning module.
- Ensure that managers delivering service changes are appropriately supported and advised by HR in relation to all employee equalities issues.
- Ensure all employees are offered one to one meetings to discuss their circumstances and any concerns they may have, and are offered interview skills and CV writing training, including signposting to the HAYS career transition portal.
- Attach the summary EIA to each consultation document, and continue to assess equality impacts through the consultation process.

EIA No.	EIA Proposal		
S1	Families, Children and Learning - City Early Years & Childcare Workforce Development Team - The Council's budget proposals for 2017/18 include a proposal to reduce funding for Early Years and Childcare Workforce Development by £50,000. Part of this saving will be delivered by a reduction staffing. There will be a significant reduction in manual administration requirements due to the implementation of the new self-service Early Years channel of the Learning Gateway. Consequently two posts will be consolidated into one.		
Groups potentially impacted	Impacts identified	Specific Mitigating Actions (in addition to the generic actions identified above)	
As not more than 20 employees affected to preserve employee confidentiality, no employee equalities data has been gathered or analysed from the council's employee database. We know that	It is not known at this point precisely which posts might be affected and therefore it is difficult to determine what impact is going to be. It is difficult to be specific about the impact on each group.	No specific actions: relevant processes and procedures to be undertaken in an equitable manner.	

the council as a whole and in the directorate that most protected characteristics are under represented.			
EIA No.	EIA Proposal		
S2	Families, Children and Learning, Disability Services Management - The Council's budget proposals for 2017/18 include proposals to achieve savings in management across services for disabled children and adults with learning disabilities including considering the efficiencies that can be achieved through the bringing together of services for children and adults. The precise proposals for and therefore what savings can be achieved have not yet been developed.		
Groups potentially impacted	Impacts identified	Specific Mitigating Actions (in addition to the generic actions identified above)	
As not more than 20 employees affected to preserve employee confidentiality, no employee equalities data has been gathered or analysed from the council's employee database. We know that the council as a whole and in the directorate that most protected characteristics are under represented. There is generally significant over representation of women in the council and particularly so in the Families directorate.	No specific mitigation.	Council policies and support processes to be equitably applied.	
EIA No.	EIA Proposal		
S3	 Families, Children and Learning, Early Help - Financial savings to be achieved through a re-design of early help activity across Families, Children & Learning to include the Early Help Hub, Parenting, Family coaching and the repercussions of reducing income from the Troubled Families Programme. The total saving expected in 2017/18 is expected to be £640,000, around a third of the total budget. Services will focus on those children at risk of escalating need to meet social work thresholds by delivering family support through community provision as part of the neighbourhood strategy based in children's centres. These proposals affect circa 70 staff. 		

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Groups potentially impacted	Impacts identified	Specific Mitigating Actions (in addition to the generic actions identified above)
In broad terms the proposal to redesign the structure has the potential to have a disproportionately negative impact on the following protected characteristics: Age Ethnicity Gender Sexual Orientation Religion/Belief	The age of the workforce affected is generally slightly older than the age profile across the council and Families directorate with no staff aged under 30 in this area however there are also less staff affected in this area in the age brackets of 60+ than the council and directorate suggesting that staff in the age bracket 35-59 may be disproportionately affected. The service area employs a below average number of BME employees and employees identifying as White Other compared to the council and Families directorate as a whole. The service area employs significantly more female employees compared to the council and a higher proportion than the directorate as a whole with 83.33% of the affected workforce being female. Therefore the proposals are most likely to have a disproportionate impact on women employees because they are over significantly over represented. The service area employs a significantly lower average number of LGBT employees compared to both the council and Families directorate. A number of staff in affected posts maybe on maternity leave or other long term leave.	Offer all employees job application and interview support where selection processes might be required. Consider the need for appropriate support and training to re-skill employees in new working methods if necessary. Ensure that all appropriate reasonable adjustments are made for disabled employees. Utilise the support of the council's Supported Employment Team and appropriate non council agencies to support employees where appropriate and necessary. Positive action including skills interview training and internal coaching as well as signposting to Disability Workers Forum and Womens network. Review communications approach options (plain English etc.) and monitor understanding. Positive action to include training on interview skills, coaching and signposting to relevant forums e.g. BME workers forum. Review communications approach options (plain English etc) and monitor understanding. Positive action including skills interview training and internal coaching as well as signposting to LGBT Forum. Managers will ensure that staff on maternity leave or other long term leave are actively engaged to ensure they have equal opportunity to participate in the consultation process.
EIA No.	EIA Proposal	

S4	Families, Children and Learning – Youth Service - It is proposed that the council no longer provides or funds a youth service and so the 17/18 budget proposals include a reduction of funding of £695,000. A management post has been deleted (and there will need to be further consultation on the remainder of the youth service and consideration of commissioning provision with a particular focus on groups with protected characteristics. This will impact on staff within the in house Youth Service.	
Groups potentially impacted	Impacts identified	Specific Mitigating Actions (in addition to the generic actions identified above)
As not more than 20 employees affected to preserve employee confidentiality, no employee equalities data has been gathered or analysed from the council's employee database. We know that the council as a whole and in the directorate that most protected characteristics are under represented. There is generally significant over representation of women in the council and particularly so in the Families directorate.	The nature of the service means that younger employees may be over represented compared to the Council average, and there are a number of part- time staff.	Consider suitability of staff for apprenticeships, and consider pat-time opportunities via redeployment.
EIA No.	EIA Proposal	
S5	Economy, Environment and Culture - City Regeneration – The proposals for change within Regeneration is to merge Economic Development with the International & Sustainability Team to create a new Economic Growth Unit resulting in a reduction of 1 to 2 FTEs. Integration of work on economy and sustainability to provide efficiencies. There are no detailed proposals at present.	
Groups potentially impacted	Impacts identified Specific Mitigating Actions (in addition to the generic actions identified above)	

Since there are less than 20 employees impacted full equalities data was not run for this group of employees, it is difficult to be specific about the impact on each group other than gender where this is already known, generic measures will be followed to minimise any impact across all groups.	There are BME staff and men who are affected by this restructure. Both of these groups are under represented in the Council and therefore any negative impact could further erode representation.	In addition to the generic actions described above: Ensure the council's relevant policies and procedures are equitably and appropriately applied (e.g. development of new post details, selection interviews, flexible working arrangements etc. to ensure that no adverse impact is created for BME employees. Ensure managers involved in selection have completed Corporate recruitment and selection training and signposted to the Equality & Diversity e-learning module. Ensure that manages delivering service changes are appropriately supported and advised in relation to all employee equalities. Where employees are impacted offer one to one meetings to discuss their circumstances and any concerns they may have. Positive action to include training on interview skills, coaching and signposting to the BME Workers' Forum. A longer term issue for the service is to consider how to widen representation of ethnic groups and females.
EIA No.	EIA Proposal	
EIA No. S6	Economy, Environment and Culture - Tra	nsport - Budget savings of £150k have been identified in action in posts. The Service is undertaking a full Service
	Economy, Environment and Culture - Tra Transport that will be found through the redu	

significantly below the BME target and below 'White Other' target. Proposals may further impact on BME employee representation in Transport and EDH. White Other employees are also below target. It is worth noting that 14.56% is unknown in relation to ethnicity. Transport is above the male employee target. Females are under represented in the Upper grades. Compared to the Council the number of LGBT employees is lower. The proposals could further erode the representation of LGBT staff. It is worth noting that 16.46% is unknown and 9.49% of staff preferred not to say.	opportunity for females for these higher graded jobs.	created for Disabled, female and BME employees. Ensure managers involved in selection have completed Corporate recruitment and selection training and signposted to the Equality & Diversity e-learning module. Ensure that manages delivering service changes are appropriately supported and advised in relation to all employee equalities. Where employees are impacted offer one to one meetings to discuss their circumstances and any concerns they may have. Positive action to include training on interview skills, coaching and signposting to the Disabled Workers' Forum. Longer term review strategies to increase disabled staff at the more senior grades within Transport. Positive action to include training on interview skills, coaching and signposting to the Women's Network and the LGBT forums. A longer term issue for the service is to consider how to widen representation of females in senior posts. Change ring-fence proposals to ensure that there are opportunities for the wider team to go for promotion opportunities available in the structure.
EIA No.	EIA Proposal	
S7	 Economy, Environment and Culture - Premises, Facilities and Building Services - The council has set out a four year savings plan to address a large shortfall in its overall budget due to a significant reduction in government grants. For Property & Design this has meant identifying savings of £2.75m between 2016 and 2020. The Facilities & Building Services team has reviewed all of the services provided in collaboration with the Business Process Improvement (BPI) team resulting in the proposals to rationalise and change the way that the services are delivered whilst ensuring, wherever possible, that all teams remain efficient and cost effective. The proposal is for a number of posts to be deleted across Facilities & Building Services and the introduction of new posts including a Concierge Officer role. 	
Groups potentially impacted Impacts identified Specific Mitigating Actions (in additional generic actions identified above)		Specific Mitigating Actions (in addition to the generic actions identified above)

S8	Neighbourhoods, Communities and Housing - Civil Contingencies Team - In the Integrated Service and Financial Plans for 2016/17 – 2019/20 a 60K budget saving in the Civil Contingencies/Emergency Planning and Resilience Service was identified, and this was agreed at Budget Council in February 2016. To deliver the 60K saving it is proposed to delete the post of Emergency Planning and Resilience Team Manager from the existing structure.		
Groups potentially impacted	Impacts identified	Specific Mitigating Actions (in addition to the generic actions identified above)	
As not more than 20 employees affected to preserve employee confidentiality, no employee equalities data has been gathered or analysed from the council's employee database. We know that the council as a whole and in the directorate that most protected characteristics are under represented.	Potential impact in relation to age.	Generic actions will ensure process managed effectively and potential redeployment opportunities are explored.	
EIA No.	EIA Proposal		
S 9	Neighbourhoods, Communities and Housing, Communities, Equalities and Third Sector Team - Budget savings are being proposed within the overall team budget which will impact on staffing levels within this team. It is proposed that savings of approximately £127K (including on costs) are made.		
Groups potentially impacted	Impacts identified	Specific Mitigating Actions (in addition to the generic actions identified above)	
As not more than 20 employees affected to preserve employee confidentiality, no employee equalities data has been gathered or analysed from the council's employee database. We know that the council as a whole and in the directorate that most protected characteristics are under	There will be a higher proportion of female workers affected, and part time staff.	Follow generic actions. All affected members of staff will be sought redeployment across the Council in accordance with the Council's Redeployment Policy. This will include seeking part time opportunities as necessary.	

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represented.			
EIA No.	EIA Proposal		
S10	 Finance and Resources, Financial Services - The proposals for change within Financial Services are designed to ensure continued support to the different internal and external customers and wherever possible maintain the quality and standard of service, with changes to the model of provision in some areas. This includes: - automated and streamlined processes reducing the need for advice and support; reprioritisation and reallocation of work; MSA related savings and changes to reporting lines; aligning support to organisational structure and combined management; deletion of vacant posts; and minimising compulsory redundancy through voluntary severance. 		
Groups potentially impacted	Impacts identified	Specific Mitigating Actions (in addition to the generic actions identified above)	
The age profile for the workforce of	Potential impact on younger workers who	Offer all employees job application and interview support	
the Finance Service is the same as	are already under-represented across	and highlight training opportunities for apprenticeships for	
the Council, with the highest	finance and the wider Local Authority.	younger staff.	
proportion of employees between	it is likely disabled employees would be	Consider the need for appropriate support and training to	
45-54 years of age.	impacted by the proposals for change as	re-skill employees in new working methods.	
Finance is above the Council target for disabled employees.	this group is overrepresented in the service area.	Ensure that all appropriate reasonable adjustments are made for disabled employees.	
The council and Finance Service are	Disabled employees are more likely to	Utilise the support of the council's Supported	
both below the BME and White	Experience barriers to accessing	Employment Team and appropriate non council agencies	
Other group targets. The White Irish	information and getting their views heard.	to support employees where appropriate and necessary.	
group is overrepresented within the	Suffer from a lack of employer	Positive action including skills interview training and	
council and Finance Service.	awareness and information regarding	internal coaching as well as signposting to Disability	
Finance Service employs a balanced	disability.	Workers Forum.	
female / male employee profile	if BME or White Other staff are either	Review communications approach options (plain English	
compared to the council (less than	redeployed or made redundant as this	etc) and monitor understanding. Particular issues have	
1% difference in gender breakdown).	would further erode this under represented	arisen that has highlighted the importance of 121	
The service area employs a lower	group within the service area.	meetings in fully exploring individual circumstances.	
than average number of LGBT	If LGBT staff are made redundant or	Positive action to include training on interview skills,	
employees compared to the council.	redeployed outside of the service this	coaching and signposting to relevant forums e.g. BME	

	would further erode this under represented group within Finance.	workers forum. Review communications approach options (plain English etc.) and monitor understanding. Support to part-time staff in identifying opportunities and consideration of other roles as job share roles.	
EIA No.	EIA Proposal		
S11	Finance and Resources, ICT - The proposals for change within ICT are designed to ensure continued support to the customers and wherever possible maintain the quality and standard of service, with changes to the model of provision in some areas. This includes: - MSA related savings and changes to reporting lines; - aligning support to organisational structure and combined management; - deletion of vacant posts; and - minimising compulsory redundancy through voluntary severance. There are 2 full time equivalent (FTE) posts at risk of redundancy as a result of the 2017/18 budget proposals.		
Groups potentially impacted	Impacts identified	Specific Mitigating Actions (in addition to the generic actions identified above)	
The age profile for the workforce of the ICT Service is the same as the Council, with the highest proportion of employees between 45-54 years of age. The service area employs a lower than average number of disabled employees compared to the council. If disabled staff are made redundant or redeployed outside of the service this would further erode this under represented group within ICT. The council and ICT Service are both below the BME and White Other group targets. The White Irish group is overrepresented within the council and ICT Service. The service employs more males than females.	If disabled staff are made redundant or redeployed outside of the service this would further erode this under represented group within ICT. if BME or White Other staff are either redeployed or made redundant as this would further erode this under represented group within the service area. Potential disproportionate impact on female staff in part time roles.	Offer all employees job application and interview support and highlight training opportunities for apprenticeships for younger staff. Consider the need for appropriate support and training to re-skill employees in new working methods. Ensure that all appropriate reasonable adjustments are made for disabled employees. Utilise the support of the council's Supported Employment Team and appropriate non council agencies to support employees where appropriate and necessary. Positive action including skills interview training and internal coaching as well as signposting to Disability Workers Forum, BME forum Review communications approach options (plain English etc.) and monitor understanding. Support par-time staff in identifying opportunities and consideration of job share opportunities.	

Unlike the council and ICT Service are above the LGBT employee target.			
EIA No.	EIA Proposal		
S12	Finance and Resources – Internal Audit - The proposals for change within Internal Audit are designed to ensure continued support to the different internal and external customers and wherever possible maintain the quality and standard of service, with changes to the model of provision in some areas. This includes: - automated and streamlined processes reducing the need for advice and support; - reprioritisation and reallocation of work; - MSA related savings and changes to reporting lines; - aligning support to organisational structure and combined management; - deletion of vacant posts; and - minimising compulsory redundancy through voluntary severance. There is 0.3 full time equivalent (FTE) posts at risk of redundancy as a result of the 2017/18 budget proposals. This will likely impact one member of staff.		
Groups potentially impacted	Impacts identified	Specific Mitigating Actions (in addition to the generic actions identified above)	
As not more than 20 employees affected to preserve employee confidentiality, no employee equalities data has been gathered or analysed from the council's employee database. We know that the council as a whole and in the directorate that most protected characteristics are under represented.	The member of staff impacted is male, and no disability issues have been identified. As there is no data no other impacts have been identified.	Implementation of the generic actions will ensure the change is managed appropriately.	
EIA No.	EIA Proposal		

S13	Finance and Resources, Procurement - The proposals for change within Procurement Services are designed to ensure continued support to the different internal and external customers and wherever possible maintain the quality and standard of service, with changes to the model of provision in some areas. This includes: - automated and streamlined processes reducing the need for advice and support; - reprioritisation and reallocation of work; - MSA related savings and changes to reporting lines; - aligning support to organisational structure and combined management; - deletion of vacant posts; and - minimising compulsory redundancy through voluntary severance. There is 1 full time equivalent (FTE) posts at risk of redundancy as a result of the 2017/18 budget proposals.	
Groups potentially impacted	Impacts identified	Specific Mitigating Actions (in addition to the generic actions identified above)
As not more than 20 employees affected to preserve employee confidentiality, no employee equalities data has been gathered or analysed from the council's employee database. We know that the council as a whole and in the directorate that most protected characteristics are under represented.	It is difficult to be specific about the impact on each group.	Generic measures will be followed to minimise any impact across all groups.

149 Public sector equality duty

(1) A public authority must, in the exercise of its functions, have due regard to the need to—

- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

(2) A person who is not a public authority but who exercises public functions must, in the exercise of those functions, have due regard to the matters mentioned in subsection (1).

(3) Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to—

(a) remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;

(b) take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;

(c) encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

- ∞ particular, steps to take account
 - (5) Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to—
 - (a) tackle prejudice, and
 - (b) promote understanding.

(6) Compliance with the duties in this section may involve treating some persons more favourably than others; but that is not to be taken as permitting conduct that would otherwise be prohibited by or under this Act.

(7) The relevant protected characteristics are-

- age;
- disability;
- gender reassignment;
- pregnancy and maternity;
- race;
- religion or belief;
- sex;

- sexual orientation. ٠
- (8) A reference to conduct that is prohibited by or under this Act includes a reference to—
 - (a) a breach of an equality clause or rule;(b) a breach of a non-discrimination rule.

 - (9) Schedule 18 (exceptions) has effect.