

Appendix I – Equality Impact Assessment

Covered within this document is the Level 2: Full Impact Assessment of the new proposed integrated commissioning model (from p.1), and the linked Level 1: Public Health Impact Assessment (from p.13)

Impact Assessment Level 2: Full impact assessment

Subject of assessment:	To assess the impact of an integrated commissioning model for those with needs around Homelessness, Domestic Abuse, Sexual Violence and Substance Misuse Services			
Coverage:	Cross-cutting.			
This is a decision relating to:	<input type="checkbox"/> Strategy	<input type="checkbox"/> Policy	<input type="checkbox"/> Service	<input type="checkbox"/> Function
	<input type="checkbox"/> Process/procedure	<input type="checkbox"/> Programme	<input checked="" type="checkbox"/> Project	<input checked="" type="checkbox"/> Review
	<input type="checkbox"/> Organisational change	<input type="checkbox"/> Other (please state)		
It is a:	New approach:	<input checked="" type="checkbox"/>	Revision of an existing approach:	<input type="checkbox"/>
It is driven by:	Legislation:	<input type="checkbox"/>	Local or corporate requirements:	<input checked="" type="checkbox"/>

<p>Description:</p>	<p>Key aims, objectives and activities</p> <p>To provide a more effective and efficient way of commissioning services for homelessness services, domestic abuse, sexual violence and substance misuse provision within a new model. In this new approach to commissioning of these services, consideration has been given to mitigate any reductions in budgets where duplication and inefficient use of resources has previously led to an unsatisfactory outcome for the end user. As part of this model there will be a reduction of £370,000 taken from budgets of £2.5m currently in place for homelessness, domestic abuse and sexual violence.</p> <p>To adopt a partnership approach with providers and commissioners that places the person at the centre of planning and shares responsibility for risks and outcomes, moving from individual packages of support currently in place for people with highly complex presentations.</p> <p>Statutory drivers include, but are not exclusive to, a statutory obligation through the Homeless Reduction Act 2017 to prevent and relieve homelessness. To prevent homelessness for all eligible applicants threatened with homelessness, regardless of priority need.</p> <p>Differences from any previous approach</p> <p>Currently the Council and partners commission a range of services individually, leading to duplication and gaps in provision. Existing services do not always effectively and efficiently support people with multiple needs and are not integrated around the needs of the person. It is difficult to measure the impact on improving individual outcomes or ensure the best use of resources. Under the new proposal one coherent system would be put in place.</p> <p>Key stakeholders and intended beneficiaries</p> <p>Internal -Public Health, Adult’s Social Care, Children’s Social Care, Early Help, Economic Development, Welfare Rights, Housing Benefits</p> <p>External – Current and potential future customers, existing Allied Services, Health, Best Practice/Academia/Research, Criminal Justice, Landlords, Service Providers, Local and Central Government, Voluntary Sector</p> <p>Intended outcomes</p> <p>To establish a more collaborative, integrated and strategic approach to how the organisation commissions and delivers services, with the aim of improving service user experience, improving outcomes of local residents and reducing costs.</p>
<p>Live date:</p>	<p>September 2020</p>
<p>Lifespan:</p>	<p>September 2020 – March 2024</p>

Next review:	A desktop review will be undertaken in September 2021 to identify whether there are any unintended consequences and/or identify whether expectations around efficiencies being achieved to fully mitigate impacts of reducing global budgets have not been realised.
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Assessment issue	Impacts identified					Rationale and supporting evidence
	None	Positive	Negative		Uncertain	
			Justified	Mitigated		
Human Rights						
Engagement with Convention Rights (as set out in section 1, appendix 2 of the Impact Assessment Policy).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The long-term joint-commissioning proposal will be designed to ensure human rights are continuously supported through delivery of services that are person-centred. The initial recommended savings and variance of spend options have been chosen to avoid adversely impacting on human rights.
Equality						
<p>The Public Sector Equality Duty (PSED) requires that when exercising its functions the Councils must have due regard to the need to:-</p> <ul style="list-style-type: none"> eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act; advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and foster good relations between persons who share a relevant protected characteristic and persons who do not share it. <p>In having due regard to the need to advance equality of opportunity, the Council must consider, as part of a single equality duty:</p> <ul style="list-style-type: none"> removing or minimising disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic; taking steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of people who do not share it; and encouraging people who share a protected characteristic to participate in public life or in any other activity in which participation is low. 						

Assessment issue	Impacts identified					Rationale and supporting evidence
	None	Positive	Negative		Uncertain	
			Justified	Mitigated		
Age	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The proposal is relevant to this characteristic because of the nature of some of the needs of current and potential future service users. In this case there is a need to support young people in particular to live independently and safely within the community, providing extra support where they have additional needs. While the proposed model will change the way in which services are provided there are no concerns that the proposed changes will result in a negative impact on thresholds or outcomes although there is a reduction in the global budget available.</p> <p>Evidence used to inform this assessment includes analysis of demand, feedback from consultation, engagement with partners, engagement with current and potential future providers of services, engagement with current and potential future service users.</p>
Disability	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The proposal is relevant to this characteristic because a number of clients will also have a disability, in particular a significant number of clients may have mental health needs. Transition to the new model will have a positive impact on this group because the improved data sharing and data recording practices that will be implemented will support a better understanding of the whole needs of an individual. While not within the scope of this blended commissioning model, mental health services access will be improved as a result. Needs will be identified at the front door, supporting a focus on prevention and early intervention around needs.</p> <p>While the proposed model will change the way in which services are provided there are no concerns that the proposed changes will result in a negative impact on thresholds or outcomes based on analysis of demand although there is a reduction in the global budget available.</p> <p>Evidence used to inform this assessment includes analysis of demand, feedback from consultation, engagement with partners, engagement with current and potential future providers of services, engagement with current and potential future service users.</p>

Assessment issue	Impacts identified				Rationale and supporting evidence	
	None	Positive	Negative			Uncertain
			Justified	Mitigated		
Gender reassignment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>By moving to a person centred commissioning model, the Council and its partners will be better able to respond to the individual needs that may be presented arising from in this case, gender reassignment, rather than attempting to fit individuals into standard packages of support that may not meet their needs.</p> <p>While the proposed model will change the way in which services are provided there are no concerns that the proposed changes will result in a negative impact on thresholds or outcomes based on analysis of demand although there is a reduction in the global budget available.</p> <p>Evidence used to inform this assessment includes analysis of demand, feedback from consultation, engagement with partners, engagement with current and potential future providers of services, engagement with current and potential future service users.</p>
Pregnancy / maternity	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The proposal is relevant to this protected characteristic because a number of current and potential future clients will be pregnant or recent mothers.</p> <p>By changing to a blended commissioning model, the Council will be better placed to put in place support, wrapped around those individuals that better meets their needs and improve outcomes for women and their families, rather than traditional packages of care.</p> <p>While the proposed model will change the way in which services are provided there are no concerns that the proposed changes will result in a negative impact on thresholds or outcomes based on analysis of demand although there is a reduction in the global budget available.</p> <p>Evidence used to inform this assessment includes analysis of demand, feedback from consultation, engagement with partners, engagement with current and potential future providers of services, engagement with current and potential future service users.</p>

Assessment issue	Impacts identified					Rationale and supporting evidence
	None	Positive	Negative		Uncertain	
			Justified	Mitigated		
Race	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The proposal is relevant to Race and Religion or belief. The current model provide specialist BAME domestic violence support. This will continue, however funding levels will be reduced to reflect current demand levels for Middlesbrough residents. It was identified that current funding was being used to support wide Tees Valley residents. While this is an adverse impact in terms of funding, it is justified as the funding was provided to fund support for Middlesbrough residents. The organisation is being encouraged to seek funding sources for non-Middlesbrough residents from other local councils.</p> <p>Evidence used to inform this assessment includes analysis of demand, residential status of current and potential supported individuals, feedback from consultation, engagement with partners, engagement with current and potential future providers of services, engagement with current and potential future service users.</p>
Religion or belief	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Sex	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The proposal is relevant to this characteristic because of the nature of the needs individuals have which can differ because of gender. Transition to the new model will have a positive impact on this group because the improved data sharing and data recording practices that will be implemented will support a better understanding of the whole needs of an individual. Needs will be identified at the front door, supporting a focus on prevention and early intervention around needs.</p> <p>While the proposed model will change the way in which services are provided there are no concerns that the proposed changes will result in a negative impact on thresholds or outcomes based on analysis of demand, although there is a reduction in the global budget available.</p> <p>Evidence used to inform this assessment includes analysis of demand, feedback from consultation, engagement with partners, engagement with current and potential future providers of services, engagement with current and potential future service users.</p>

Assessment issue	Impacts identified					Rationale and supporting evidence
	None	Positive	Negative		Uncertain	
			Justified	Mitigated		
Sexual Orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The proposal is relevant to this characteristic. Transition to the new model will have a positive impact on this group because the improved data sharing and data recording practices that will be implemented will support a better understanding of the whole needs of an individual, ensuring packages of care are built around the individual, rather than standard interventions.</p> <p>While the proposed model will change the way in which services are provided there are no concerns that the proposed changes will result in a negative impact on thresholds or outcomes based on current demand.</p> <p>Evidence used to inform this assessment includes analysis of demand, feedback from consultation, engagement with partners, engagement with current and potential future providers of services, engagement with current and potential future service users.</p>
Marriage / civil partnership**	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>There will be a positive impact on this protected characteristic. The new model will provide capacity to commission perpetrator Domestic Violence provision which is currently not in place. This will support work to improve outcomes for this protected characteristic and will complement existing domestic violence survivor support.</p> <p>Evidence used to inform this assessment includes analysis of demand, feedback from consultation, engagement with partners, engagement with current and potential future providers of services, engagement with current and potential future service users.</p>

** Indicates this is not included within the single equality duty placed upon public authorities by the Equality Act. See guidance for further details.

Assessment issue	Impacts identified				Rationale and supporting evidence	
	None	Positive	Negative			Uncertain
			Justified	Mitigated		
Dependants / caring responsibilities**	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The focus of the revised model will be on providing support for families to remain in existing settings where possible, therefore impacting positively on this protected characteristic. Where this is not practical or safe, the revised model will focus on supporting families to move into alternative settings that are secure and with the option to remain there long term, improving the stability which families will experience.</p> <p>While the proposed model will change the way in which services are provided there are no concerns that the proposed changes will result in a negative impact on thresholds or outcomes based on current demand although there is a reduction in the global budget available.</p> <p>Evidence used to inform this assessment includes analysis of demand, feedback from consultation, engagement with partners, engagement with current and potential future providers of services, engagement with current and potential future service users.</p>
Criminal record / offending past**	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The proposal is relevant to this protected characteristic as some service users will have a criminal / offending past. The new model will better support individuals leaving prison, transitioning from time limited, centralised support to a model in which individuals are supported to return back into their communities, within an appropriate support setting that better supports long term housing solutions, reducing uncertainty and increasing stability of placements. The proposal will increase the amount of offenders that can be supported through this scheme.</p> <p>While the proposed model will change the way in which services are provided there are no concerns that the proposed changes will result in a negative impact on thresholds or outcomes based on current demand although there is a reduction in the global budget available.</p> <p>Evidence used to inform this assessment includes analysis of demand, feedback from consultation, engagement with partners, engagement with current and potential future providers of services, engagement with current and potential future service users.</p>

Assessment issue	Impacts identified					Rationale and supporting evidence
	None	Positive	Negative		Uncertain	
			Justified	Mitigated		
Community cohesion						
Individual communities / neighbourhoods	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The proposal will have a positive impact on community cohesion. It will support more individuals to remain within their communities and/or successfully return to community based tenancies. Evidence used to inform this assessment includes analysis of demand, feedback from consultation, engagement with partners, engagement with current and potential future providers of services, engagement with current and potential future service users.
Relations between communities / neighbourhoods	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Next steps:

- ➡ If the answer to some questions remains Uncertain, then further work must be undertaken to clarify impacts. Repeat the process until there is certainty, but ensure that the amount of work undertaken is proportionate to the decision required. No relevant report should be submitted for approval until there is a satisfactory level of certainty around the impacts of the recommended decision.
- ➡ Be sure that any likely differential impacts identified through the process (positive or negative) are well evidenced and clearly marked in the template.
- ➡ Where the impact is negative, be clear that this can be justified with the justification outlined. If it cannot, the recommended decision must be reviewed.
- ➡ Where negative impacts are unjustified and *unavoidable*, actions must be put in place to remove or mitigate impacts. These should be listed in the action plan below.
- ➡ The results of the IA process (including changes made to the proposed approach and further actions) should be outlined the main body of the report, and the completed IA template appended to that report.

In addition to the above the report author may also wish to consider completing a discretionary Health impact assessment. Guidance on when this is appropriate should be sought from the Public Health team.

Further actions		Lead	Deadline
Mitigating actions	Implementation of the project to deliver the revised model, along with implementation of performance management metrics to track the impact of the model and enable officers to identify if there are any unintended impacts and address them.	Adam Allen	September 2020
Promotion	The decision will be promoted with partners, current providers and service users as necessary. Timing will vary depending upon transition arrangements and changes.	Adam Allen	various
Monitoring and evaluation	The implementation of the decision will be monitored and evaluated to identify any areas of unexpected negative impact through the Community Support Commissioning Project Board, in consultation with the Programme Management Office	Adam Allen	ongoing

Assessment completed by:	Julie Marsden	Head of Service:	Marion Walker
Date:	16.09.19	Date:	20.08.19

Public Health Impact Assessment Level 1: Initial screening assessment

Subject of assessment:	PHPP 01 Transformation of the drug and alcohol service			
Coverage:	Service specific			
This is a decision relating to:	<input type="checkbox"/> Strategy	<input type="checkbox"/> Policy	<input type="checkbox"/> Service	<input type="checkbox"/> Function
	<input type="checkbox"/> Process/procedure	<input checked="" type="checkbox"/> Programme	<input type="checkbox"/> Project	<input type="checkbox"/> Review
	<input type="checkbox"/> Organisational change	<input type="checkbox"/> Other (please state)		
It is a:	New approach:	<input type="checkbox"/>	Revision of an existing approach:	<input checked="" type="checkbox"/>
It is driven by:	Legislation:	<input type="checkbox"/>	Local or corporate requirements:	<input checked="" type="checkbox"/>

<p>Description:</p>	<p>Reduction of substance misuse budget via transformation of service model:</p> <p>Key aims, objectives and activities</p> <p>To implement a 12% budget reduction for substance misuse in 2019/20 and a further 8% reductions the following financial year, to ensure a 20% reduction is achieved by 2020/21 *. In spite of this, the aim is to maintain frontline capacity and improve quality of delivery and outcomes. This will be delivered via integrating substance misuse with other Middlesbrough Council services for vulnerable people and making efficiencies across a wider range of service areas.</p> <p>Statutory drivers (set out exact reference)</p> <p>The need to make savings is derived from a reduction in LA funding from central Government and impending loss of ring-fenced public health grant.</p> <p>Differences from any previous approach</p> <p>Substance misuse services have traditionally been commissioned as a standalone model, as have domestic abuse, sexual violence, homelessness services etc., yet there are a significant proportion of clients in need of two or more of these services. By commissioning a new model with a mixture of a generic and specialist services, the ensuing holistic approach should better meet the needs of these vulnerable groups. The reductions will result in there being no contingency for emerging issues or one-off support requirements, nor any developmental budgets to pilot innovative solutions.</p> <p>Key stakeholders and intended beneficiaries (internal and external as appropriate)</p> <p>Key stakeholders include Public Health and Stronger Communities directorates, other LA departments (e.g. adult services), the PCC, Police, CCG and health trusts, commissioned services, the local VCS, existing and potential service users and carers. The intended beneficiaries are the population of Middlesbrough, particularly vulnerable groups affected by the toxic trio (substance misuse, domestic abuse and mental health).</p> <p>Intended outcomes</p> <ul style="list-style-type: none"> • Achieving the required savings, • Reduced duplication to ensure a seamless transfer between services via improved co-ordination of care • Increased ability to manage complex cases • Increased number of people achieving sustainable recovery • Single care record for these cohorts • Reduced pressure on social care and other statutory services • Improved co-ordination and management of personalisation funding, therefore, better value derived from these care budgets • Reduction in re-presentations to services <p>* Please note: <i>The Change Programme budget reductions highlighted above were correct at the time that this EIA was carried out, however, the reductions have subsequently been re-profiled. The amounts that reflect the new position (at the end of September 2019) are 15.2% for 2019/20 and a further 7.4% for 2020/21. The approach being taken to make these savings mitigates the need to make reductions to core frontline/customer-facing staff capacity within substance misuse services, both prior to the integration and following it. Public Health are subsidising substantial additional drugs</i></p>
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	<i>costs for 2019/20, which are unavoidable. Therefore, the actual investment into substance misuse will be significantly higher (forecasted to be approx. £250k-£300k, based on the first quarter spend) but the corporate Change Programme savings of 15.2% will be achieved.</i>
Live date:	1 April 2019
Lifespan:	Between 1 April 2019 and 31 March 2021
Date of next review:	March 2021

Screening questions	Response			Evidence
	No	Yes	Uncertain	
<p>Human Rights</p> <p>Could the decision impact negatively on individual Human Rights as enshrined in UK legislation?*</p>	☒	☐	☐	<p>None of the rights listed within the Human Rights Act 1998 are anticipated to be affected by the integrated approach.</p> <p>Evidence used to assess the impact of this proposal includes:</p> <ul style="list-style-type: none"> • Services providing assurance that they have appropriate, up to date policies and procedures – this will continue to be a contractual requirement within the future model; • The Recovery Service employs many experts by experience (i.e. people who have formerly had addiction issues and are now in recovery) – currently over 80% of its workforce – and this will continue to be a contractual requirement; • Continuing to offer accessible services, both in terms of physical (accessible buildings and access) and the inclusion criteria (any resident of Middlesbrough with a related vulnerability is entitled to free access to support, reasonable adjustments will be made to enable effective engagement and individually tailored support plans will be developed). Specific projects/initiatives to engage under-represented groups into services also have and will continue to be undertaken.

* Consult the Impact Assessment further guidance appendix for details on the issues covered by each of these broad questions prior to completion.

<p>Equality</p> <p>Could the decision result in adverse differential impacts on groups or individuals with characteristics protected in UK equality law? Could the decision impact differently on other commonly disadvantaged groups?*</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>The Public Sector Equality Duty (PSED) requires that when exercising its functions the Councils must have due regard to the need to:</p> <ul style="list-style-type: none"> • Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act; • Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and • Foster good relations between persons who share a relevant protected characteristic and persons who do not share it. <p>In having due regard to the need to advance equality of opportunity, the Council must consider, as part of a single equality duty:</p> <ul style="list-style-type: none"> • Removing or minimising disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic; • Taking steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of people who do not share it; and • Encouraging people who share a protected characteristic to participate in public life or in any other activity in which participation is low. <p>As set out previously, the revised commissioned services will continue to meet the needs of service users, however the way this is done will be revised to ensure that the same or better outcomes for individuals can be achieved. It is anticipated that while costs will be reduced, the impact of the proposal will be positive as the recommissioned services will better meet identified needs. There are no concerns that capacity to deliver services that will continue to meet the (relative) needs of all of the local population could be affected by the proposal.</p> <p>Evidence used to assess the impact of this proposal includes:</p> <ul style="list-style-type: none"> • Services providing assurance that they have appropriate, up to date policies and procedures – this will continue to be a contractual requirement within the future model; • The Recovery Service employs many experts by experience (i.e. people who have formerly had addiction issues and are now in recovery) – currently over 80% of its workforce – and this will continue to be a contractual requirement; • Continuing to offer accessible services, both in terms of physical (accessible buildings and access) and the inclusion criteria (any resident of Middlesbrough with a related vulnerability is entitled to free access to support, reasonable adjustments will be made to enable effective engagement and individually tailored support plans will be developed). Specific projects/initiatives to engage under-represented groups into services also have and will continue to be undertaken.
<p>Community cohesion</p> <p>Could the decision impact negatively on relationships</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>One of the aims of the integrated approach is to improve community cohesion via an asset based approach. As such there are no concerns that the revised commissioning model being proposed could have an adverse impact on community cohesion.</p>

Screening questions	Response			Evidence
	No	Yes	Uncertain	
between different groups, communities of interest or neighbourhoods within the town?*				<p>Evidence used to inform this assessment includes:</p> <ul style="list-style-type: none"> • Substance misuse services have and will continue to champion the cause of vulnerable groups and challenge stigma. This includes community events such as recovery walks and roadshows, as well as attending community groups and delivering from community locations; • The challenges of getting some of the most vulnerable people in society into sustainable recovery require a system-wide response. Substance misuse services have to adopt an asset-based approach in terms of utilising existing public and 3rd sector partner organisations to support and reintegrate clients into their communities – they cannot do this alone; • Challenging stigma related to addictions and vulnerable groups is one of the strategic aims for Public Health, therefore, the team will continue to work with partners, stakeholders and the public on this agenda. The impact of this workstream will continue to be monitored.
<p>Next steps:</p> <p>➡ If the answer to all of the above screening questions is No then the process is completed.</p> <p>➡ If the answer of any of the questions is Yes or Uncertain, then a Level 2 Full Impact Assessment must be completed.</p>				

Assessment completed by:	Jonathan Bowden	Head of Service:	Catherine Parker
Date:	21/12/18	Date:	21/12/18