



Haringey Council

Equality Impact Assessment

Name of Project	Reablement	Cabinet meeting date <i>If applicable</i>	16/12/2014 10/02/2015 16/06/2015 10/11/2015
Service area responsible	Adult Social Services		
Name of completing officer	Donna Simeon	Date EqIA created	Draft October 2015
Approved by Director / Assistant Director		Date of approval	02/11/2015

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'due regard' to:

- Eliminating discrimination, harassment and victimisation and any other conduct prohibited under the Act
- Advancing equality of opportunity between those with 'protected characteristics' and those without them
- Fostering good relations between those with 'protected characteristics' and those without them.

In addition the Council complies with the Marriage (same sex couples) Act 2013.

Haringey Council also has a 'Specific Duty' to publish information about people affected by our policies and practices.

All assessments must be published on the Haringey equalities web pages. All Cabinet papers **MUST** include a link to the web page where this assessment will be published.

This Equality Impact Assessment provides evidence for meeting the Council’s commitment to equality and the responsibilities outlined above, for more information about the Councils commitment to equality; please visit the Council’s website.

Stage 1 – Names of those involved in preparing the EqIA	
1. Transformation Project Manager – Donna Simeon	5.
2. Policy & Equalities Officer – William Shanks	6.
3.	7.
4.	8.

Stage 2 - Description of proposal including the relevance of the proposal to the general equality duties and protected groups. Also carry out your preliminary screening (Use the questions in the Step by Step Guide (The screening process) and document your reasoning for deciding whether or not a full EqIA is required. If a full EqIA is required move on to Stage 3.

The recommendation:

The transfer of the Council in-house Re-ablement Service to an external provider subject to further engagement with staff and the trade union, and following a procurement process.

Re-ablement services are for people with poor physical or mental health to help them adjust to their illness by learning or re-learning the skills necessary for daily living. The Re-ablement Service works closely with an individual for up to six weeks to build up skills, confidence and increase the opportunity for them to care for themselves. The service is for adults who have difficulty managing personal care or daily living tasks, perhaps as a result of illness or a period in hospital, and have the potential to regain or maintain those independent living skills. This tailored support allows the individual to regain independence and stay in their own home for longer.

The current reablement in-house service provides services to approximately 30 people at any one time. We want the number of people supported through re-ablement to radically increase, so they can achieve their maximum potential after, for example, a period in hospital or after an illness or injury. The current service provision is financially unsustainable the service could be provided by an alternative provider at a reduced cost to the Council. The proposal to transfer the service to an external provider would have minimal impact on existing service users. However, there will be a transition plan that will be sensitive to the needs of those that may be affected by this change, to ensure that any impact is mitigated and the process of change is safely handed.

The service has a high turnover of service users as the service is provided for a maximum period of 6 weeks at any one time therefore it is not anticipated that the recommendation will have any impact on service users.

The reablement team, currently has 32 members of staff that will be directly affected by this recommendation.

Stage 3 – Scoping Exercise - Employee data used in this Equality Impact Assessment
Identify the main sources of the evidence, both quantitative and qualitative, that supports your analysis. This could include for example, data on the Council’s workforce, equalities profile of service users, recent surveys, research, results of recent relevant consultations, Haringey Borough Profile, Haringey Joint Strategic Needs Assessment and any other sources of relevant information, local, regional or national.

Data Source (include link where published)	What does this data include?
Human Resources records Jun/Jul 2015	Staff profiles

Stage 4 – Scoping Exercise - Service data used in this Equality Impact Assessment
This section to be completed where there is a change to the service provided

Data Source (include link where published)	What does this data include?

Stage 5a – Considering the above information, what impact will this proposal have on the following groups in terms of impact on residents and service delivery:
Positive and negative impacts identified will need to form part of your action plan.

	Positive	Negative	Details	None – why?
Sex				The service proposal is to transfer the service to an external provider to increase capacity and reduce costs. We do not consider there will be any adverse impact on service users on the grounds of a) their sex, b) their gender reassignment status, c) religion or belief, d) race and ethnicity e) sexual orientation f) pregnancy & maternity status, g) marriage and civil partnership status, h) their age, i) disability. Further analysis of service user characteristics will be carried out during the commissioning process for commissioning a new provider.
Gender Reassignment				
Age				
Disability				
Religion or Belief (or No Belief)				

Race & Ethnicity				
Sexual Orientation				
Pregnancy & Maternity				
Marriage and Civil Partnership				

Stage 5b – For your employees and considering the above information, what impact will this proposal have on the following groups: Positive and negative impacts identified will need to form part of your action plan.

					Positive	Negative	Details	None – why?
Sex						Across the unit 96.9% of staff are female as compared to 67.5% across the council generally and therefore the risk of impact is disproportionately high to females.	This proposal assumes the transfer of staff to an alternative provider. We will embark on implementing changes using the Councils reorganisation procedure. This will involve a formal consultation process of 45 days with staff and their trade union Representatives. All employees within this service area will be treated equally in accordance with the Council's redeployment policy and procedures. EqIA evaluation will be updated following this consultation	
	All LBH staff	%	Reablement Team	%				
Sex:								
All people	2,727		32					
Males	887	32.5%	1	3.1%				
Females	1,840	67.5%	31	96.9%				
Gender Reassignment								There will be an opportunity for staff to raise any impacts arising for this characteristic during the consultation.
Data unavailable								
	Gender Reassignment							
Age						Across the unit 40.6% of staff are between the 40-49 age group compared to 30.1% across the council generally and therefore the impact is disproportionate		
	All LBH staff	%	Reablement Team	%				
Age:								
All people	2,727	%	32	%				
16-24	34	1.2%	0	0.0%				
25-39	681	25.0%	2	6.3%				
40-49	822	30.1%	13	40.6%				
50-64	1,138	41.7%	16	50.0%				
65 +	52	1.9%	1	3.1%				

					on this group of staff when compared to the council generally		
					Positive	Negative	None – why?
Disability							There is insufficient data to allow an analysis of the impact of the recommendations on staff in consideration of their disability/non disability status. There will be an opportunity for staff to raise any impacts arising for this characteristic during the consultation
Disability:	All LBH staff	%	Reablement Team	%			
All people	2,727		32				
Disabled Staff	282	10.3%	0	0.0%			
Non Disabled Staff	1,775	65.1%	24	75.0%			
Not Stated	670	24.6%	8	25.0%			
Race & Ethnicity							Overall there is a disproportionate higher risk of impact on staff from BME background (84.4%) as compared to the council generally (53.1%)
Race & Ethnicity:	All LBH staff	%	Reablement Team	%			
All people	2,727		32				
White	1,219	44.7%	5	15.6%			
Mixed	100	3.7%	1	3.1%			
Asian	263	9.6%	2	6.3%			
Black	1,009	37.0%	23	71.9%			

Not Stated	59	2.2%	0	0.0%				
Other Ethnic Group	77	2.8%	1	3.1%				
					Positive	Negative		None – why?
Sexual Orientation								There is insufficient data to allow an analysis of the impact of the recommendations on staff in consideration of their sexual orientation status. There will be an opportunity for staff to raise any impacts arising for this characteristic during the consultation.
Sexual Orientation:	All LBH staff	%	Reablement Team	%				
All people	2,727		32					
Bi-Sexual	8	0.3%	0	0.0%				
Gay Man	12	0.4%	0	0.0%				
Heterosexual	528	19.4%	1	3.1%				
Lesbian	4	0.1%	0	0.0%				
Prefer not to say	188	6.9%	1	3.1%				
Not Declared	1,987	72.9%	30	93.8%				
Religion or Belief (or No Belief)								There is insufficient data to allow an analysis of the impact of the recommendations
Religion or Belief (or No Belief):	All LBH staff	%	Reablement Team	%				
All people	2,727		32					

<table border="1"> <tr><td>Christian</td><td>335</td><td>12.3%</td><td>1</td><td>3.1%</td></tr> <tr><td>Buddhist</td><td>2</td><td>0.1%</td><td>0</td><td>0.0%</td></tr> <tr><td>Hindu</td><td>16</td><td>0.6%</td><td>0</td><td>0.0%</td></tr> <tr><td>Jewish</td><td>5</td><td>0.2%</td><td>0</td><td>0.0%</td></tr> <tr><td>Muslin</td><td>52</td><td>1.9%</td><td>0</td><td>0.0%</td></tr> <tr><td>Sikh</td><td>7</td><td>0.3%</td><td>0</td><td>0.0%</td></tr> <tr><td>Other Religion</td><td>16</td><td>0.6%</td><td>0</td><td>0.0%</td></tr> <tr><td>No Religion</td><td>152</td><td>5.6%</td><td>0</td><td>0.0%</td></tr> <tr><td>Not Stated</td><td>2,142</td><td>78.5%</td><td>31</td><td>96.9%</td></tr> </table>	Christian	335	12.3%	1	3.1%	Buddhist	2	0.1%	0	0.0%	Hindu	16	0.6%	0	0.0%	Jewish	5	0.2%	0	0.0%	Muslin	52	1.9%	0	0.0%	Sikh	7	0.3%	0	0.0%	Other Religion	16	0.6%	0	0.0%	No Religion	152	5.6%	0	0.0%	Not Stated	2,142	78.5%	31	96.9%				on staff in consideration of their religion or belief. There will be an opportunity for staff to raise any impacts arising for this characteristic during the consultation.
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Separated	2	0.1%	0	0.0%				status. There will be an opportunity for staff to raise any impacts arising for this characteristic during the consultation
Divorced	24	0.9%	0	0.0%				
Widowed	2	0.1%	0	0.0%				
Same-sex civil partnership	0	0.0%	0	0.0%				
Not Stated	1,896	69.5%	22	68.8%				

Stage 6 - Initial Impact analysis	Actions to mitigate, advance equality or fill gaps in information
<p>The service has a high turnover of service users as the service is provided for a maximum period of 6 weeks at any one time therefore it is not anticipated that existing service users will be affected by the recommendation.</p> <p>Initial assessment concludes that the recommendation will not have any impact on future service users because the service will be commissioned to deliver the same and/or better outcomes.</p>	See section 8

Stage 7 - Consultation and follow up data from actions set above	
Data Source (include link where published)	What does this data include?
<p>Consultations on the three proposals were undertaken from 3 July to 1 October 2015. The proposal was part of Proposal 1 of the adult social care public consultation.</p> <p>2 workshops were held during this period in which current and past service users were invited to feedback to the proposal. In total the workshops were attended by 3 people - they did not address the proposal but raised other social care issues.</p>	The responses to the public consultation showed opposition to the proposal.

Stage 8 - Final impact analysis

The service proposal is to transfer the service to an external provider to increase capacity and reduce costs. We do not consider there will be any adverse impact on service users on the grounds of a) their sex, b) their gender reassignment status, c) religion or belief, d) race and ethnicity e) sexual orientation f) pregnancy & maternity status, g) marriage and civil partnership status, h) their age, i) disability. Further analysis of service user characteristics will be carried out during the commissioning process for commissioning a new provider.

We acknowledge the concerns raised through the consultation responses regarding the quality of services provided by an alternative provider. To mitigate this we shall have a commissioning relationship with the new provider. This means that we will specify the service which we want to be provided and the new provider will deliver the service in line with that specification. We will monitor the provider to ensure compliance with our requirements including the provision of high quality support.

Additionally:

- 1) Officers will (i) carefully monitor the development of these proposals; (ii) continue to have “due regard” to the Public Sector Equalities Duties during the implementation process;

- 2) There will be monitoring and oversight of the implementation of the recommendations through i) the Strategic Healthy Lives Priority Board (which has oversight of the strategic and operational delivery of the various service proposals), ii) Transformation Group (which provides scrutiny and challenge to the delivery of the Transformation proposals/plans and ongoing monitoring of quality and performance), iii) the Director and Lead member for Health and Wellbeing. In addition the transformation is subject to scrutiny by the Council’s overview and Scrutiny Committee and the Adults and Health Scrutiny panel.

We acknowledge that certain groups of staff may be disproportionately affected (older 40-49, females and BME) should the recommendations be agreed there will be formal consultation with staff and a further equalities analysis for the impact on the workforce will be carried out via an additional EQIA.

Stage 9 - Equality Impact Assessment Review Log

Review approved by Director / Assistant Director	<input type="text"/>	Date of review	<input type="text"/>
Review approved by Director / Assistant Director	<input type="text"/>	Date of review	<input type="text"/>

Stage 10 – Publication

Ensure the completed EqIA is published in accordance with the Council's policy.