

Equality Impact Assessment (EIA)

Name of Policy or Practice	Social Services Transformation Programme Approach		
Head of Service responsible for the Policy or Practice	Janet Morgan – Head of Governance, Efficiency and Transformation		
Name of officer (s) completing impact assessment form	Emma Roberts – Corporate Modernisation Manager		
Service	Social Services	Date of Assessment	11 th September 2012

EIA Completed by :		EIA Agreed by Head of Service :	
Date	14.12.12	Date	28.05.13
Name(s)	Emma Roberts	Name	Janet Morgan
Signature(s)	E. Roberts	Signature	J. Morgan

STEP 1 – Identify the Main Aims and Objectives of the Policy or Practice

1. What is being assessed? (***Please double click on the box and select 'checked' as appropriate to cross X***)

- New and revised policies or practices
- New procedures (which modify service delivery or employment practices)
- Service review or re-organisation proposals which affect the community and/or staff
- Efficiency or saving proposals
- Setting budget allocations for new financial year
- Decisions affecting service users, employees or the wider community
- New project proposals affecting staff, communities or accessibility to the built environment, eg, new construction work or adaptations to existing buildings
- Other please explain in the box below :

2. What are the overall aims and objectives of the policy or practice ?

During 2011/12, Conwy Social Services department instigated structural change. Although a new Interim Statutory Director, Interim Head of Adult and Community Services and Interim Head of Children, Family and Safeguarding Services were appointed, the post of Head of Provider Services has been deleted and the previous post holder is currently working in the fixed term post of the Head of Governance, Efficiency and Transformation.

Although Adult Services and Children's Services co-exist, these Services still operate quite differently with different approaches to commissioning, procurement, assessment and workforce development.

The moment is now opportune to review the structures, systems and processes of Conwy Social Services to promote consistency across all Services and increase efficiency in the use of resources, increase independence and manage risk.

The objectives of the Programme are:

- To develop, implement and operationalise a Commissioning Strategy for the whole of Social Services (SSO1)

- To develop, implement and operationalise a Quality Assurance Framework for the whole of Social Services (SSO2)
- To develop, implement and operationalise a Workforce Strategy for the whole of Social Services (SSO3)
- To develop, implement and operationalise an Engagement Strategy for the whole of Social Services (SSO4)
- To ensure that the benefits expected from service transformation are realised (SSO5)
- To manage change in Social Services proactively and effectively and move to a more financially efficient way of working (SSO6)
- To ensure that the legislative requirements of the Social Services Bill are achieved (SSO7)
- To maximise the number of opportunities for collaborative working / working in partnership (SSO8)

The key deliverables of the programme are:

- A Commissioning Strategy
- A Quality Assurance Framework
- A Workforce Strategy
- An Engagement Strategy
- A long term Financial Strategy

3. Who is the policy or practice intended to help or benefit (stakeholders) ?

The Programme is intended to benefit Service Users, Carers / Next of Kin, the Authority as a whole, staff, external partners and the public in general.

The Programme benefits are:

1. Increased flexibility in service delivery (SSB1)
2. Increase in the number of Service User outcomes met (SSB2)
3. Increase in number of Service Users receiving services that they actually need (SSB3)
4. Efficient and effective use of public money (SSB4)
5. Increase in workforce skills & motivation (SSB5)
6. Consistent approach to risk management across Social Services (SSB6)
7. Increased quality of service provision at no extra budgetary cost (SSB7)
8. Consistent approach to partnership / collaborative working across Social Services (SSB8)

The outcomes of the Programme for Conwy are therefore:

- Conwy Social Services has a robust Commissioning Strategy (CO1)
- Conwy Social Services has a robust Quality Assurance Framework (CO2)
- Conwy Social Services has a robust Workforce Strategy (CO3)
- Conwy Social Services has a robust Engagement Strategy (CO4)
- Conwy Social Services has a long term financial model (CO5)

The outcomes of the Programme for Service Users are therefore:

- Service users in Conwy receive the right service at the right time based upon their needs and have an outcome focused care plan (SUO1)
- Service users in Conwy receive robust and quality assured support from Conwy Social Services and other providers (SUO2)
- Service users in Conwy help evaluate and shape Social Services in Conwy (SUO3)
- Service users in Conwy receive support from appropriately trained, skilled and motivated staff from Conwy Social Services and other providers (SUO4)
- Service users in Conwy receive relevant and timely information regarding their support (SUO5)
- Service users in Conwy receive sustainable support based upon long term financial modelling (SUO6)

The outcomes of the Programme for key stakeholders are therefore:

- Key Stakeholders know which services they need to provide, who to, where, at what cost and how often and are confident in their continued commission for the future (KSO1)
- Key Stakeholders are adequately trained and supported to provide robust and quality assured services according to an approved Conwy Social Services Strategy (KSO2)
- Key Stakeholders have appropriately trained, skilled and motivated staff as a result of the support received from Conwy Social Services (KSO3)
- Key Stakeholders have two way feedback with Conwy Social Services enabling them to offer the best possible service provision (KSO4)
- Key Stakeholders are confident in the continued viability of their service / business due to Conwy Social Services having a long term financial model (KSO5)

4. Who are the main consultative groups or communities of interest ?

Key Stakeholders:

External:

- The public and local communities
- Service Users
- Carers
- Welsh Government
- North Wales Public Sector Partner Organisations
- BCUHB
- North Wales Social Services Improvement Collaborative
- Wales Audit Office
- CSSiW
- Private Sector Providers
- Third Sector Providers
- Voluntary Sector Providers
- Trade Unions
- Public Health Wales

Internal

- Cabinet and Scrutiny Committees
- Corporate Priorities Improvement Board 2
- Executive Group and SMT
- Project Managers and Project Teams associated with individual projects
- Social Services Staff
- Other Departmental Services

Interfaces

The Programme has strong links to, and interfaces with:

- The Corporate Plan 2008 – 2012
- The Corporate Plan 2012 – 2017
- One Conwy
- The Business Transformation Programme
- The Valuing Staff Programme
- Regional Commissioning Hub
- Regional Procurement Project
- All Wales Information System
- Supporting People Regional Collaboration Committee
- All other ongoing Projects within Social Services
- Asset Management Plan
- Health and Safety

STEP 2 - Consider Existing Information and What This Tells You

When completing this section, you need to consider if you have sufficient information with which to complete your EIA, or whether you need to undertake a period of engagement/consultation before continuing. The legislation relating to the EIA process requires you to **engage and involve people who represent the interests of those who share one or more of the protected characteristics and with those who have an interest in the way you carry out your functions**. This needs to be proportionate to the policy or practice being Equality Impact Assessed. You may have already recently undertaken consultation specifically on this policy or practice. Other officers within CCBC may have carried out engagement work which will be relevant to this EIA and you can review the Corporate Consultation Database to find out what engagement activities have taken place in Conwy and establish if this is relevant. If you have very little or no information from previous engagement that is relevant to this EIA, you should consider undertaking some engagement work with you stakeholders and with relevant representative groups to ensure that you do not unwittingly overlook the needs of each protected group.

5. What do you already know about the impact on each protected characteristic from your experience of current service delivery or previous engagement or consultation? You could refer to the Initial Equality Impact Assessment Screening Form and the Community Involvement Database.

Protected Group	Relevance of the policy / practice by protected characteristic
Race	<p>The 'Equality Issues by Protected Group' document produced by Corporate HR has been referred to and in order to ensure there are no adverse impacts in regard to race, this programme will have to take race into consideration if there are any proposed changes in:</p> <ul style="list-style-type: none"> • Resources for Voluntary / Community Groups • Access to services appropriate to need • Access to jobs and training • Access to information, translation and interpretation <p>The current Social Services care planning process takes language and cultural considerations into account. The review of this process as part of the Practice Frameworks project will need ensure that this continues to be the case.</p>

	<p>As part of the consultation around Conwy's Corporate Plan, a Regional Stakeholder Event was held on 20/09/2011. This event was organised with Partner Organisations relevant to all protected characteristics plus individual groups separately e.g. Disability Commission, RNIB as part of the North Wales Public Sector Equality Network work. A summary of the feedback relating to the current service delivery model of Social Services and its impact on race are given below:</p> <ul style="list-style-type: none"> • Remove language barriers that affect some groups from accessing information about services, eg, Race, Disability (BSL) • Engage minority groups in health and exercise programmes • Exploitation of BME people working in the care industry • What provision/planning are care providers carrying out for the ageing BME population to meet cultural needs?
<p>Disability</p>	<p>The 'Equality Issues by Protected Group' document produced by Corporate HR has been referred to and in order to ensure there are no adverse impacts in regard to disability, this programme will have to give due consideration to:</p> <ul style="list-style-type: none"> • Social isolation • Health and Community care • Access to information in different formats • Disability types • Access to buildings and services • Mobility and Transport • Low income / Reduced employment opportunities • Access to education, training and leisure services <p>The current Social Services care planning process takes individual's needs into account. The review of this process as part of the Practice Frameworks project will need ensure that this continues to be the case.</p> <p>Previous projects and current service delivery within Social Services continually take accessibility and the format of information into consideration to ensure that all stakeholders are informed and consulted.</p> <p>As part of the consultation around Conwy's Corporate Plan, a Regional Stakeholder Event was held on 20/09/2011. This event was organised with Partner Organisations relevant to all protected characteristics plus individual groups separately e.g. Disability Commission, RNIB as part of the North Wales Public Sector Equality Network work. A summary of the feedback relating to the current service delivery model of Social Services and its impact on disability are given below:</p> <ul style="list-style-type: none"> • Reduced long term institutional care for people with mental health issues has had greater impact on this group of vulnerable people • Removing language barriers that affect some groups from accessing information about services, eg,

	<p>Disability (BSL)</p> <ul style="list-style-type: none"> • Issue of transport to access facilities and appointments, particularly for older and disabled people, rural residents • Carers find it hard to access services because of their commitments to others - enablement or re-ablement approach can restrict access to some services • Disability actions tend to concentrate on physical access and mental health issues often not considered • Need to learn to understand and apply the social model of disability as it forms the basis of all disability equality work • Improve access to peer and independent advocacy services for disabled people and others • Advocacy services not being used as they should - would expect them to get involved with many more access issues • Not just about physical access - people with mental health problems need to access services in a variety of ways (phone, face to face, internet)
Sex	<p>The 'Equality Issues by Protected Group' document produced by Corporate HR has been referred to and in order to ensure there are no adverse impacts in regard to sex, this programme will have to take sex into consideration if there are proposed changes in:</p> <ul style="list-style-type: none"> • Caring for dependants • Health and Social Services • Occupational / Career choices • Access to employment, training and education • Pay and benefits <p>In terms of current service delivery, the Social Services workforce is predominantly female and there can be cultural restrictions or preferences whereby a specific care worker is requested by gender. This needs to be taken into consideration as part of the Implementation projects.</p> <p>As part of the consultation around Conwy's Corporate Plan, a Regional Stakeholder Event was held on 20/09/2011. This event was organised with Partner Organisations relevant to all protected characteristics plus individual groups separately e.g. Disability Commission, RNIB as part of the North Wales Public Sector Equality Network work. A summary of the feedback relating to the current service delivery model of Social Services and its impact on sex are given below:</p> <ul style="list-style-type: none"> • More women are carers for older people, children and young people and disabled people - reduction of care provision resulting in increased health issues for women
Age	<p>The 'Equality Issues by Protected Group' document produced by Corporate HR has been referred to and in order to ensure there are no adverse impacts in regard to age, this programme will have to take age into consideration if there are proposed changes in:</p>

	<ul style="list-style-type: none"> • Health and Community care • Recruitment and selection • Employment terms and conditions • Training and development <p>As part of the consultation around Conwy's Corporate Plan, a Regional Stakeholder Event was held on 20/09/2011. This event was organised with Partner Organisations relevant to all protected characteristics plus individual groups separately e.g. Disability Commission, RNIB as part of the North Wales Public Sector Equality Network work. A summary of the feedback relating to the current service delivery model of Social Services and its impact on age are given below:</p> <ul style="list-style-type: none"> • What do we do in Social Services to ensure older people live healthy lifestyles? • Age Cymru: Depression and Anxiety for older people supported by Conwy is a priority
<p>Religion & Belief</p>	<p>The current Social Services care planning process takes dietary, cultural and prayer needs into account. The review of this process as part of the Practice Frameworks project will need ensure that this continues to be the case.</p> <p>The 'Equality Issues by Protected Group' document produced by Corporate HR has been referred to and in order to ensure there are no adverse impacts in regard to religion & belief, this programme will have to give due consideration to:</p> <ul style="list-style-type: none"> • Personal care needs • Visiting Service Users in their homes • Workplace isolation
<p>Sexual Orientation</p>	<p>The 'Equality Issues by Protected Group' document produced by Corporate HR has been referred to and in order to ensure there are no adverse impacts in regard to sexual orientation, this programme will have to take sexual orientation into consideration if there are proposals for any changes around:</p> <ul style="list-style-type: none"> • Fostering and Adoption • Health and Community Care • Access to Services <p>As part of the consultation around Conwy's Corporate Plan, a Regional Stakeholder Event was held on 20/09/2011. This event was organised with Partner Organisations relevant to all protected characteristics plus individual groups separately e.g. Disability Commission, RNIB as part of the North Wales Public Sector Equality Network work. A summary of the feedback relating to the current service delivery model of Social Services and its impact on sexual orientation are given below:</p> <ul style="list-style-type: none"> • Older people and sexuality - unmet needs (due to lack of awareness) causing depression and mental health issues

<p>Gender Reassignment</p>	<p>The 'Equality Issues by Protected Group' document produced by Corporate HR has been referred to and in order to ensure there are no adverse impacts in regard to gender reassignment, this programme will have to take gender reassignment into consideration if there are proposals for any changes around:</p> <ul style="list-style-type: none"> • Fostering and Adoption • Health and Community care • Access to Services <p>As part of the consultation around Conwy's Corporate Plan, a Regional Stakeholder Event was held on 20/09/2011. This event was organised with Partner Organisations relevant to all protected characteristics plus individual groups separately e.g. Disability Commission, RNIB as part of the North Wales Public Sector Equality Network work. A summary of the feedback relating to the current service delivery model of Social Services and its impact on gender reassignment are given below:</p> <ul style="list-style-type: none"> • Depression and self-harm are issues for transgender people - improving support can increase wellbeing and productivity in the community
<p>Marriage & Civil Partnership</p>	<p>Many service users will be married or in a civil partnership and it is recognised that this must be taken into account when dealing with situations in social care with regard to issues around patient confidentiality, next of kin, and placing service users in care. There is a commitment within our Strategic Equality Plan and Adult Services Commissioning Service Plan to ensure consideration is given to service users' sexual orientation and gender identity in the provision of care, through delivering on the standards set out in Conwy's Action Plan for Older People's National Service Framework (NSF). This will be measured through the Service User Engagement Strategy which will include a Quality Assurance Framework to measure satisfaction and engagement with all adult service users (ensuring feedback is collected by protected characteristic where the information is not currently held).</p>
<p>Pregnancy & Maternity</p>	<p>Social Services will have a small number of service users at any one time who will be covered by pregnancy and/or maternity legislation. These specific needs will be taken into account when communicating and engaging with service users and in the provision of our services to these groups.</p>
<p>Welsh Language</p>	<p>The 'Equality Issues by Protected Group' document produced by Corporate HR has been referred to and in order to ensure there are no adverse impacts in regard to Welsh Language, the programme approach will have to give due consideration to:</p> <ul style="list-style-type: none"> • Policies and Documents • Public Meetings • Training and awareness <p>In terms of current service delivery, documentation is provided in English and Welsh and services can be provided in Welsh upon request. This will need to continue throughout the transformation programme.</p>

Other (please state)

6. Summarise the additional relevant data, research and performance management information you already have:

Data / Information	Examples
<p>The Social Services Annual Report 2012 states that:</p> <ul style="list-style-type: none"> • In 2010-11 67% of all Conwy social care clients were aged 65 and over - This compares to 60% across Wales • In 2011 1.5 % of people aged between 16 and 64 were in receipt of Disability Living Allowance which is higher than the Welsh average of 1.4% <p>Data from the Paris System states that within Adult Services:</p> <ul style="list-style-type: none"> • 94.84% of clients are White British, 3.7% are non white and 1.46% have not had their ethnicity recorded • 38.73% of clients are male and 61.27% are female • 80.31% of clients chose to be communicated with in English and 7.98% in Welsh <p>Data from the Paris System states that within Children’s Services:</p> <ul style="list-style-type: none"> • 96.8% of clients (including foster carers and parents receiving a service) are White British and 3.2% are non white. This however only takes account of the 88.87% of clients who have their ethnicity information recorded on the system. • 49.94% of clients (including foster carers and parents receiving a service) are male, 49.6% are female and 0.046% are unborn as yet. This takes account of 100% of the clients recorded on the system. • 96.6% of clients (under 25s only) are White British and 3.3% are non white. This however only takes account of the 88.87% of clients who have their ethnicity information recorded on the system. • 47% of clients (under 25s only) are male and 53% are female. <p>The Workforce Statistics Report for the whole of Social Services internal staff 2011 – 2012 highlights that:</p> <ul style="list-style-type: none"> • 82% of the workforce is female • In regard to age of the workforce - 3.7% are aged 16-24, 16.5% are aged 25-34, 23.1% are aged 35-44, 33.8% are aged 45-54, and 21% are aged 55-64. • 28% of staff describe themselves as having a Welsh language competency level of 2 and above. • The structure of our workforce reflects the social care workforce of Wales. Across Wales the social care sector employs more than 70,000 people in services delivered by around 1,800 public sectors, private and voluntary organisations located across Wales. Approximately 87% of the workforce is women, 30% of the social care workforce is aged 50 or over and only 10% of the workforce is under the age of 25. A high percentage of staff 	<p>Initial EIA Screening Complaints Compliments Service User data Service User Feedback Inspections or Audits</p>

<p>work part time (55%) and many have second jobs.</p> <p>The North Wales Regional Social Care Partnership has collated information about the external social care workforce across North Wales and Conwy and states that:</p> <ul style="list-style-type: none"> • Language - within Conwy, 11% of residential and 35% of domiciliary care workers speak welsh. • Within Conwy, the Private, Independent and Voluntary sector employ approximately 4,000 staff. • The levels of welsh speaking within Conwy residential homes is a concern; it is more than 50% lower than in residential homes across North Wales. Within Conwy, 29% of the population are welsh speaking, yet only 11% of residential care staff speak welsh. <p>With regard to complaints, across Social Services (both Adults and Childrens) between April 2011 and March 2012, there was 1 complaint out of 90 Statutory complaints that was in relation to equalities and this was where a service user felt they were receiving a lower quality service because their first language was not English or Welsh.</p>	
<p>Research or Comparative Information</p>	<p>Examples</p>
<p>The Equalities Data Bulletin 2011 and the Area Profile 2010 prepared by the Corporate Research and Information Team highlight that:</p> <ul style="list-style-type: none"> • 96.8% of the population in the county are White British. 1.1% are non white 2.1% are white not British • 51.6% of the population in the county are female • The county has the highest proportion of elderly population in Wales at 28% • All projections predict significant growth in the post-retirement age population, in terms of both numbers and proportion of the population. Those aged over 64 could make up over a third of the population by the year 2033 • 23.4% of the population in the county have a limiting long term illness • 77.7% of the population in the county state that they are Christian • 95%.2 in Wales state that they are heterosexual and 1.2% are Gay/ Lesbian/ Bisexual. • Around 29% of the population aged 3 years old or over are Welsh speakers – considerably above the all-Wales figure of 20.5% • We have no data on gender reassignment • 8.6% of the population in the county have a learning, sensory and / or physical disability • 11.8% of the population in the county are unpaid carers <p>The Employment Monitoring 3 year summary for 2008 – 2011 for Conwy highlights that:</p> <ul style="list-style-type: none"> • Men are less likely to receive training in their job than women, although this represents the types of role the different genders take within the organisation. For example Social Services require a high level of regular training and this service employs a large percentage of female employees. This service has also employed 64 new members of staff in 2010-2011 which is 40% of the successful applicants for Council vacancies. 	<p>Service User Surveys Studies by Government departments or professional bodies Census data Service based projects and research How Fair Is Wales (EHRC data)</p>

- Environment and Technical Services, Adult Services (Adult Services Commissioning and Provider Unit) and Children's Services are most likely to receive older applicants (over 50 years of age).
- Social Services and Highways and Transport receive a high number of applications from Ethnic minorities.
- 3.0% (358) of applicants regarded themselves as Disabled. Education were by far the least likely service to receive disabled applicants, while Regeneration Service, Information Technology, Environment and Technical Services and Adult Services (Adult Services Commissioning and Provider Unit) attracted a high number of disabled applicants.

The research to support the Strategic Equality Plan 2012 – 2015 states that:

- Trend for delays in transfer of care is rising
- Limited number of support networks leading to isolation
- Further need to meet the cultural requirements of an aging Black Minority Ethnic (BME) population
- Poor experiences of older people due to communication problems between professionals and older people
- Investment in preventative work relating to mental health is generally regarded as insufficient
- The percentage of older people living in Conwy will increase meaning access issues will have greater emphasis
- Barriers include British Sign Language interpretation provision, language (other than Welsh or English); catering for people with visual impairments

The 2011 Census information states that:

- The high proportion of elderly residents has led to the county having one of the highest dependency ratios in Wales. According to the 2011 Census, over 13,000 people in Conwy Borough provide unpaid care and over a quarter of these carers (more than 3,900 people) provide 50 or more hours of care a week. Such high levels of unpaid care provision will have a huge impact on the economic and social well-being of the carers as well as those being cared for.
- 48.3% of Conwy's population is married and 0.2% are civil partners

In regard to demography:

Conwy County Borough (Conwy CB) is centrally located in North Wales. The County Borough has an area of 113,000 hectares and a population of 115,228 residents (2011 Census). About 38% of its area and 4% of its population are within the Snowdonia National Park. Its economy relies heavily upon tourism. Rural areas and their communities are dependent on agricultural and forestry activities, even though these sectors do not provide a high level of direct employment.

The narrow coastal belt contains over 80% of the County Borough's population with Llandudno and Colwyn Bay as the two main settlements in terms of population numbers. Rural Conwy is an attractive, mainly agricultural area with limited alternative employment and few development pressures. Its population is widely dispersed and is predominantly Welsh speaking. The main settlement in terms of population numbers is the market town of Llanrwst.

The demography in terms of protected groups highlights that:

- The greatest concentrations of people aged 65 and over, in terms of both numbers and proportions of the total population, are in the coastal settlements of Abergele, Rhos on Sea, Llandudno (Craig-y-Don, Penrhyn and Gogarth wards) and Deganwy.
- Llandrillo yn Rhos electoral division has the highest proportion of people aged over 65 in its population (35.7%).
- Other EDs with more than 30% of their population in the 65+ age group are Gele, Deganwy and Craig-y-Don.
- By far the youngest age profile in the County Borough is to be found in the Llysfaen electoral division / community council area, with only 10.9% of the population aged 65+, and 25.3% aged under 16.
- The electoral divisions where the proportion of population aged under 16 is higher than UK average, 2009 are Llysfaen, Gower (Llanrwst), Glyn (Colwyn Bay), Mochdre, Kinnel Bay, Pensarn (Llandudno Junction), Tudno, Llansannan, Eirias (Colwyn Bay) and Colwyn.

Information published by the Local Government Data Wales states that:

- The life expectancy of men in Conwy is 77.8 and was just above the Wales average for 2008 - 2010
- The life expectancy of females in Conwy is 81.5 and is just below the Wales average for 2008 - 2010
- The percentage of children aged between 0 – 15 was 16.6% (2011 Census)
- The percentage of people aged 65+ was 24.4% (2011 Census)

The Housing Research Bulletin for Conwy April 2012 highlights that:

- 56.3% of homeless households living in temporary accommodation contain dependant children which is above the Wales average

Health indicators collated by the Corporate Research and Information Unit in November 2012 highlight that:

- The death rate in Conwy per 100,000 population was 590 between 2008-2010
- The death rate in Conwy per 100,000 population due to cancer was 181 between 2008-2010 but rates for death caused by cancer in Conwy have decreased since 2002
- The death rate in Conwy per 100,000 population due to cardiovascular disease was 193 between 2008-2010 but rates for death caused by Cardiovascular disease in Conwy have decreased since 2002

7. Have you complied with the duty to Engage as described at the start of this section and are you sufficiently informed to proceed?

Yes

No

(please cross as appropriate X)

_If Yes, please proceed to Step 3

If No, you may wish to consider pausing at this point while you undertake engagement activities (which you should add to your action plan – Step 6). Please incorporate any information you have obtained from this additional activity in the box below and state what the key findings were:

The projects within the Social Services Transformation Programme will all have to complete their own Equality Impact Assessments. In order to progress the collation of research and the development of options for each project, consultation will have to be undertaken with service users (clients), next of kin / carers, staff and external partners in order for them to feed into shaping the future of Social Services. As part of this consultation work, it will be ensured that people who represent the interests of those who share one or more of the protected characteristics are involved.

STEP 3 - Procurement and Partnerships

The public sector General Duty means all public authorities need to consider the needs of different groups when designing and delivering public services. This duty also applies to private sector organisations who deliver a public function on our behalf and we need to ensure that those organisations exercise those functions by ensuring our procurement and monitoring of those services complies with the General Duty.

8. Is this policy or practice to be carried out wholly or partly by contractors or in partnership with another organisation(s)?

Yes No **(please cross as appropriate X)** If No, please proceed to Step 4

9. If yes, how will you comply with Equality, Human Rights and Welsh Language Legislation? Think about :

Procurement

- Setting out clear equality expectations in Tendering and Specification documentation
- On what you based your decisions in the award process
- That contract clauses cover legislative equality requirements
- Performance and Monitoring measures are included to monitor compliance

Partnerships

Who is responsible for :

- Equality Monitoring relevant data
- Equality Impact Assessment
- Delivering the actions from the EIA
- Ensuring that equality, human rights and Welsh Language legislation is complied with by all partners

Procurement

The development of the Commissioning Strategy and in particular the Contracting and Commissioning Project will need to ensure that as part of any future tendering process clear equality expectations are set out in the specification documentation. It should also be ensured that as part of the specification, copies of tenderer's staffing policies i.e. recruitment policy and their equalities policy are requested.

As part of the review of the tender evaluation process, the Contracting and Commissioning Project will need to take account of the tenderer's approach to equalities as part of the quality scoring. It is already ensured as part of the tendering process that contract clauses cover legislative equality requirements.

The development of the Quality Assurance Framework and the Practice Frameworks Project will include a review of the performance and monitoring measures required to ensure procured services / organisations are providing appropriate and quality services. This review will therefore need to take account of the measures to be included around equalities e.g. application of equality principles in the contractor organisation.

Partnerships

Many of the outputs of the Social Services Transformation Programme will have to be delivered with the support of other Public Sector Organisations such as BCULHB, Denbighshire County Council etc. An example would be in regard to the Access and Information Project, input would be required from Health as many of the access points to Social Services come through them in the first instance. Also as some services are already being delivered in partnership i.e. Mental Health, if the Transformation Programme led to a changes in the way the service was being run consultation would have to involve Health and Denbighshire County Council.

In terms of Equality Monitoring relevant data, if new partnerships / collaborations are created as a result of the Transformation Programme then responsibility for equality monitoring would have to form part of the Partnership Agreement. This would also be the case in terms of the responsibility to undertake Equality Impact Assessments. Whomever has the responsibility for undertaking Equality Impact Assessments within the Partnership Agreement would also ensure that the actions are delivered from it.

Finally if new Partnerships are created as a result of the Transformation Programme, it would to be ensured that any Partner of Social Services complies with Human Rights and Welsh Language Legislation. This will need to be taken into account when options for improvement are being developed within each project and if an option involving partnership is chosen, copies of all equalities related policies will have to be requested from Partners.

STEP 4 - Assessing the Impact

10. Is there any evidence of higher or lower take-up or satisfaction by any group(s), and if so, how is this explained?

There is no evidence of higher or lower take-up or satisfaction by any group in terms of the Service that is currently being provided. It will have to be ensured however that the transformation of Social Services takes account of everything highlighted under 'Step 2' for each of the protected groups.

11. Does the geography or demography of any groups reveal anything?

The geography or demography does not highlight anything that was not already known. Throughout the lifetime of the programme and the implementation of the projects, any service changes put in place will have to take the accessibility to services in the rural area into account.

12. Do any rules or requirements or the way the policy or practice is delivered prevent or reduce the likelihood of any groups from use or access or are any other barriers created for them?

Eg: due to limited income, location, times of availability, access to buildings, information or language, eligibility rules, dress code, cultural issues

Throughout the lifetime of the programme and the implementation of the projects, it will need to be ensured that any service changes do not prevent or increase the likelihood of any groups from use or access. Everything highlighted under 'Step 2' will be taken into consideration when implementing service changes.

13. Can any of these limitations be justified on the grounds of advancing equality of opportunity or fostering good relations between those who share a protected characteristic and those who do not?

N/A

14. Do any of these limitations amount to unlawful discrimination?

Yes No Not Sure
(please cross as appropriate X)

If you answered Yes or Not Sure, please state on the table below, which protected group(s) it applies to and if possible explain why (including likely impact or effects of this proposed change):

Race	Black Minority Ethnic groups Gypsies / Travellers Language
Disability	Mobility Dexterity Blind or Visually impaired Deaf or Hearing impaired Mental Health Learning Disabilities
Sex	Men Women
Age	Older People Children Young People
Religion & Belief	Faith communities
Sexual Orientation	Gay Lesbian Bi-sexual Heterosexual
Gender Reassignment	A person who proposes to, starts or has changed his or her gender

Marriage & Civil Partnership	
Pregnancy & Maternity	
Human Rights	Right to Education, Private and Family Life, Protection of property, etc
Welsh Speaking Communities	
Other socially excluded groups or communities (please state)	

15. If you answered No to Question 13, do the barriers and limitations amount to a differential impact for certain groups?

Yes No Not Sure
(please cross as appropriate X)

16. If you answered Yes or Not Sure to Question 14, please give details in the box below and explain why

If all the issues highlighted under 'Step 2' are taken into account when implementing service changes, any differential impact for certain groups will be avoided.

17. Do you have enough information to make an informed judgement?

Yes No **(please cross as appropriate X)**

If you answered Yes, please justify:

If you answered No, what information do you require about protected groups?

As part of Phase 2 of each project's implementation, consultation will have to take place with key stakeholders on each of the options for service change being proposed. Within each Stakeholder Group, particularly Staff, Service Users and Carers, there will be representatives from most of the protected groups and their views will influence the final decisions made around the proposed options.

18. Is it possible to get the information needed quickly and easily, or should data collection be included in the action plan? Please give details below:

Phase 2 of most of the projects will not commence until Early 2013 and consultation with key stakeholders and representatives will be included in Project Action Plans.

STEP 5 – Dealing with Adverse or Unlawful Impact and Strengthening the Policy or Practice

In this section, you will consider whether there are any measures to reduce or remove any adverse impact. You should also explore other ways of achieving the same goal and / or alternative means of delivering a service to meet the needs of different groups.

19. What measures can you introduce to the policy or practice which could reduce or remove any unlawful impact or disadvantage?

N/A

20. What measures could be included to strengthen the policy/practice and foster good relations and advance equality of opportunity?

Consultation will all key stakeholder groups and representatives of protected groups will be undertaken as part of Phase 2 of all projects within the programme. This will highlight the importance of the views of those within protected groups on the options being proposed for service change within each project.

21. What actions could you take to achieve the same goal by an alternative means?

N/A

STEP 6 – Action Plan

Please outline below the actions you will take to progress your proposal. These might involve carrying out additional Engagement/Involvement activities, collecting Equality data where this was not readily available to help with this EIA, undertake data analysis from future data obtained to monitor the impact of this policy/practice on an ongoing basis, any actions you need to take to ensure procurement complies with the General Duty, any arrangements you need to put in place to monitor and review the impact of this policy/practice in future, and so on.

Action	Measure of Success	Timeframe	Lead Responsibility	Add to Project Plans (✓)
Actions to be taken before EIA and policy/practice can be signed off				

Actions after EIA and policy/practice signed off				
As part of Phase 2 of each project, consultation to be undertaken with key stakeholders, including representatives from protected groups, on the proposed options being put forward for service change	Consultation taken place and any views incorporated into final option taken forward	Between January 2013 and July 2013	Project Managers	✓
The development of the Commissioning Strategy (Market Position Statement) and in particular the Contracting and Commissioning Project will need to ensure that as part of any future tendering process clear equality expectations are set out in the specification documentation. Also need to ensure that as part of the specification, copies of tenderer's staffing policies i.e. recruitment policy and their equalities policy are requested.	Clear equality expectations set out in Market Position Statement when complete	By March 2013	Alan Hughes – Commissioning and Contracting Project Manager	✓
The development of the Quality Assurance Framework and the Contracting and Commissioning Project to include a review of the performance and monitoring measures required to ensure procured services / organisations are providing appropriate and quality services. This review therefore needs to take account of the measures to be included around equalities e.g. application of equality principles in the contractor organisation.	Ensure this is built into Market Position Statement and contract standing orders	By March 2013	Alan Hughes – Commissioning and Contracting Project Manager	✓
If new partnerships / collaborations are created as a result of the Transformation Programme then responsibility for equality monitoring will have to form part of the Partnership Agreement. This will also be the case in terms of the responsibility to undertake Equality Impact Assessments. Whomever has the responsibility for	N/A	By completion of programme	Project Managers	✓

undertaking Equality Impact Assessments within the Partnership Agreement will also ensure that the actions are delivered from it.				
if new Partnerships are created as a result of the Transformation Programme, it will be ensured that any Partner of Social Services complies with Human Rights and Welsh Language Legislation. This will need to be taken into account when options for improvement are being developed within each project and if an option involving partnership is chosen, copies of all equalities related policies will have to be requested from Partners	N/A	Between January 2013 and July 2013	Project Managers	✓
Everything highlighted under 'Step 2' will be taken into consideration when implementing service changes.	N/A	By completion of programme	Project Managers	✓
The current Social Services care planning process takes individual's needs into account. The review of this process as part of the Practice Frameworks project will need ensure that this continues to be the case.	Review the new Care Planning process once it is in place	By end of Practice Frameworks project	Pauline Williams – Practice Frameworks Project Manager	✓
The current Social Services care planning process takes language and cultural considerations into account. The review of this process as part of the Practice Frameworks project will need ensure that this continues to be the case.	Review the new Care Planning process once it is in place	By end of Practice Frameworks project	Pauline Williams – Practice Frameworks Project Manager	✓
In terms of current service delivery, the Social Services workforce is predominantly female and there can be cultural restrictions or preferences whereby a specific care worker is requested by gender. This needs to be taken into consideration as part of the Implementation projects.	Review the new Workforce structure once it is in place	By end of each implementation project	Implementation Project Managers	✓
In terms of current service delivery, documentation is provided in English and Welsh and services can be provided in Welsh upon request. This will need to continue throughout the transformation programme.	N/A	By completion of programme	Project Manager	✓

STEP 7 – Decision To Proceed

22. Using the information you have gathered in steps 1 – 5 above, please state on the table below whether you are able to proceed with the policy or practice and if so, on what basis?

(please cross as appropriate X)

Decision		Action
<input checked="" type="checkbox"/> Yes	Continue with policy or practice in its current form	Complete the Monitoring and Review section (Step 8) to ensure the outcomes are monitored and regularly reviewed
<input type="checkbox"/> Yes	Continue with policy or practice but with amendments for improvement	Complete Action Plan and Monitor and Review sections (Steps 6 & 8) to continually assess impact
<input type="checkbox"/> Yes	Continue with policy or practice but with amendments to remove any areas of adverse impact as identified in Step 5	Complete Action Plan (Step 6) to address any areas of adverse impact and Monitor and Review (Section 8) to continually assess impact
<input type="checkbox"/> No	Abandon this policy or practice as it is not possible to address the adverse impact, and consider alternative ways of addressing the issues	Complete Action Plan to address any issues resulting from abandoning policy and to deal with the adverse impact identified

STEP 8 – Arrangements for Monitoring and Review

The EIA process is an ongoing one that doesn't end when the policy/practice and EIA is agreed and implemented. There is a specific legal duty to monitor the impact of policies/practices on equality on an ongoing basis.

23. Please outline below what arrangements you will make to monitor and review the ongoing impact of this policy or practice :

Monitoring and Review arrangements (including where outcomes will be recorded)	Timeframe & Frequency	Lead Responsibility	Add to Programme Plan (✓)
Project Plans will be reviewed at the end of each project phase to ensure EIA Actions are included and have been completed as necessary	At the end of each Project phase	Emma Roberts – Programme Manager	✓
Ensure that all EIA actions have been completed	At Programme completion	Emma Roberts – Programme Manager	✓

STEP 9 – Publishing the Equality Impact Assessment

Please arrange for this completed EIA to be agreed by your Head of Service, refer to the EIA Policy regarding publishing arrangements and return a copy to the HR and Equality Officer.