

# Public Document Pack



## NOTICE OF MEETING

<b>Meeting</b>	Executive Member for Adult Services and Public Health Decision Day
<b>Date and Time</b>	Tuesday, 21st September, 2021 at 3.00 pm
<b>Place</b>	Remote Meeting
<b>Enquiries to</b>	members.services@hants.gov.uk

Carolyn Williamson FCPFA  
Chief Executive  
The Castle, Winchester SO23 8UJ

## FILMING AND BROADCAST NOTIFICATION

This meeting is being held remotely and will be recorded and broadcast live via the County Council's website.

## AGENDA

### DEPUTATIONS

To receive any deputations notified under Standing Order 12.

### KEY DECISIONS (NON-EXEMPT/NON-CONFIDENTIAL)

**1. RAPID DISCHARGE SERVICE AND DISCHARGE TO ASSES LIVE IN CARE (Pages 5 - 16)**

To seek approval from the Executive Member to extend the existing contracts for the Rapid Discharge Service (RDS) and Discharge to Assess Live in Care (LIC) contracts from the period of 1 October 2021 – 31 March 2022.

### NON KEY DECISIONS (NON-EXEMPT/NON-CONFIDENTIAL)

**2. SERIOUS VIOLENCE REDUCTION GRANT (Pages 17 - 24)**

To request approval of a grant of £38,000 to be awarded to No Limits to deliver the second phase of a Teachable Moments service for young people under 26 years old in Basingstoke and Winchester Hospitals' Emergency Departments.

**3. DEMAND MANAGEMENT AND PREVENTION GRANT AWARD**  
(Pages 25 - 36)

To seek approval for making a grant award of £29,700 to Citizens Advice Winchester to cover an 18 month period between 1 Nov 2021 and 30 Apr 2023 as part of the Local Solutions Grant scheme.

**4. DEMAND MANAGEMENT AND PREVENTION LEARNING DISABILITY CONNECTOR GRANT** (Pages 37 - 48)

To seek approval from the Executive Member for Adult Services and Public Health to open a grant scheme for organisations to provide a connector service for residents with Learning Disabilities (to be known as the Learning Disability Connector Grant).

**5. SEXUAL VIOLENCE SERVICES** (Pages 49 - 58)

To seek approval from the Executive Member for the award of 2 grants totalling £589,386 over a seven year period, on a 3+2+2 basis, from 1 April 2022 to the OPCC in respect of the Rape and Sexual Assault Counselling (RASAC) Services and Independent Sexual Violence Advocacy (ISVA) Service.

**6. GRANT TO OFFICE OF THE POLICE AND CRIME COMMISSIONER (OPCC) FOR APPROPRIATE ADULT SERVICE** (Pages 59 - 64)

To seek approval from the Executive Member for Adult Services and Public Health to provide a grant to the Office of the Police and Crime Commissioner (OPCC) to contribute to the funding of an Appropriate Adult Service for Hampshire, Isle of Wight and Southampton.

**7. SAVINGS PROGRAMME 2023** (Pages 65 - 232)

To approve the submission of the detailed savings proposals for Adult Social Care and Health that have been developed as part of the Savings Programme to 2023 (SP2023) to the Cabinet.

**KEY DECISIONS (EXEMPT/CONFIDENTIAL)**

None

**NON KEY DECISIONS (EXEMPT/CONFIDENTIAL)**

None.

**ABOUT THIS AGENDA:**

**On request, this agenda can be provided in alternative versions (such as large print, Braille or audio) and in alternative languages.**

**ABOUT THIS MEETING:**

**The press and public are welcome to observe the public sessions of the meeting via the webcast.**

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## HAMPSHIRE COUNTY COUNCIL

### Decision Report

<b>Decision Maker</b>	Executive Member for Adult Services and Public Health
<b>Date:</b>	21 September 2021
<b>Title:</b>	Rapid Discharge Service and Discharge to Assess Live-in Care
<b>Report From:</b>	Director of Adults' Health and Care

**Contact name:** Denise Graham

**Tel:** 0370 779 0865

**Email:** Denise.graham@hants.gov.uk

#### Purpose of this Report

1. The purpose of this report is to seek approval from the Executive Member to extend the existing contracts for the Rapid Discharge Service (RDS) and Discharge to Assess Live in Care (LIC) contracts from the period of 1 October 2021 – 31 March 2022. These services support individuals who are Hampshire residents to return home from hospital or avoid admission to hospital.
2. The County Council is seeking approval to extend the above contracts for RDS and LIC services to meet existing and predicted high service levels, catering for an anticipated increase in demand over the forthcoming winter period which may be detrimentally affected further by a third wave of Covid 19.

#### Recommendation(s)

3. That the Executive Member for Adult Services and Public Health gives approval to modify 6 contracts for the RDS Services to extend from 1 October 2021 – 31 March 2022 and to approve the associated spend of up to £1.6 million as set out in this report.
4. That the Executive Member for Adult Services and Public Health gives approval to modify 4 contracts for the LIC services to extend from 1 October 2021 – 31 March 2022 and to approve associated spend of up to £1.5 million as set out in this report.

#### Contextual information

5. As a direct response to Covid-19 and in line with new NHS Discharge guidance in early 2020, Hampshire County Council was required to work with all Hampshire hospital systems to support the discharge of individuals, within

a targeted 4-hour window once deemed fit for discharge. To support the 'home first' priority, Hampshire County Council commissioned three core services, two home based and one bed based. These services were originally set up over a 4-week period in April 2020.

6. The two home based services are in discussion in this paper. These are the Rapid Discharge Service (RDS)– a domiciliary service to enable discharge back to an individual's own home, which supports those who may have an eligible Care Act need with a domiciliary care package for 14 -28 days to enable a full assessment of need and the second is a Live in Carer (LIC) service which provides a more extensive level of support for an individual in their own home for up to 28 days for assessment of need. Funding for these services is being recharged against the NHS Hospital Discharge Fund agreed in advance via local NHS/CCG Finance Leads. These services are non-chargeable to the individual in receipt of the service up to 28 days.
7. These services are a significant contributor to timely hospital discharge performance, improving flow across the Hampshire systems and have been a significant contributor to maintaining all Hampshire systems through the pandemic. The value of these two extensions totals £2.3M and will be funded in their entirety through an equivalent combined contribution from the Hampshire and Isle of Wight and North East Hampshire Clinical Commissioning Groups (CCGs), via the NHS Discharge Fund.
8. System forecasts suggest that service demand will remain high over the next 6 months. These extensions will also allow time and give the ability for the Hampshire County Council Older Adults Commissioning team to be able to carry out a new full and compliant tender exercise for an ongoing, longer term 'home first' service to begin in the next financial year (subject to NHS discharge funding being confirmed for services beyond March 2022).
9. Following the initial set up during the opening weeks of Covid Wave One, in order to continue service delivery into Covid Wave 2, the County Council ran a call-off tender from the Help to Live at Home Framework in October 2020, dividing the County into 8 Lots for RDS (2 Lots have the same Provider) and 4 Lots for LIC (2 Lots have the same Provider).
10. The original contracts were put in place to cover 5 months from November 2020 to the end of March 2021 with an option to extend by 3 months. The expectation was that systems might have been in a position to confirm their agreement to a longer-term arrangement from the beginning of 2021/22 but it was recognised that there was uncertainty regarding whether the National Hospital Discharge Fund, (NHDF) would be regularised or at least confirmed to continue into the new financial year. In the event, NHDF funding was confirmed but only for the first half of the year and the actual confirmation was not received until late in March 2021. Given the situation we were unable to move forward with new contracts or tenders at that time and thus extended the contracts whilst the financial position was further debated nationally.

11. The contracts were modified in May 2021 extending to September 2021. The continued uncertainty around long term future funding streams has meant that we have not been able to put these services on a longer-term footing to this point. Agreement was reached with the local CCGs on 17 August 2021 that they will provide funding from 1 October 2021 until the 31 March 2022 to meet anticipated demand. We are now seeking approval for a modification to the original contract so that services can be secured for the remainder of this financial year.
12. An extension period was allowed in the initial tender sufficient to run a full and proper procurement exercise. As long-term funding has still not been agreed with central Government or local system partners, we are not yet able to tender for a more optimal, longer term (2-3 year) contract.
13. Hampshire residents have benefited hugely from these home-first services. These services have supported over 250 individuals a month to return home safely following a hospital stay or to remain in their own home and not have to be admitted to hospital. The average length of stay with RDS is 10 days, after which over 32% of clients have been able to remain at home with no care or with family support. Following a stay with LIC, over 6% of clients were able to remain at home with no care or family support required, and 64% of clients had an onward package of care in their own home and only 12% went onto a permanent long-term placement (residential or nursing care). Therefore, we are fully supporting and enabling residents of Hampshire to live well in their own homes and supporting the NHS mantra of Home First in action.
14. It should be noted that individuals using these services may need support with discharge from a hospital setting to their own home (step-down) or may require support to prevent a hospital admission (step-up), thereby supporting flow and effective management across the wider system.

## **Finance**

15. The funding for the service has and will continue to be fully covered by the CCGs via the National Hospital Discharge Fund, (NHDF) up to the 30 September 2021. It is currently uncertain whether the NHDF will continue in the second half of the year. However, in the event that national funding is not available for the second half of the year the Local CCGs have formally agreed to underwrite the cost of the services as presented in this report.
16. The cost of these services are captured within the ledger and are reclaimed through an invoice issued to the CCGs on a quarterly basis. Regardless of whether the national funding continues into the second half of the year it has been agreed with the CCGs that the identical process will be undertaken from October 2021 through to March 2022.

## **Legal**

17. Legal advice is set out in exempt appendix 1.

18. In exercising its functions an authority must have due regard to the need to: eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act and advance equality of opportunity and foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

### **Climate Change Impact Assessment**

19. Hampshire County Council utilises two decision-making tools to assess the carbon emissions and resilience impacts of its projects and decisions. These tools provide a clear, robust, and transparent way of assessing how projects, policies and initiatives contribute towards the County Council's climate change targets of being carbon neutral and resilient to the impacts of a 2°C temperature rise by 2050. This process ensures that climate change considerations are built into everything the Authority does.

### **Equality Impact Assessment**

20. Both the RDS and LIC service support all individuals over the age of 18 and also support individuals who may be Covid 19 positive. They offer a home first discharge option, accompanied by Therapy and Hampshire County Council Social Care support to ensure that each individual is maximised to their full potential and that their eligible needs are fully assessed in a holistic way, alongside the person and their family. This then ensures that long term chargeable needs are minimised for the individual, and we place the person back in the heart of their community, linked in and able to live well in their own home

### **Conclusions**

21. That the Executive Member for Adult Services and Public Health gives approval to modify 6 contracts for the RDS Services to extend from 1 October 2021 – 31 March 2022 and to approve the associated spend of up to £1.6 million as set out in this report.
22. That the Executive Member for Adult Services and Public Health gives approval to modify 4 contracts for the LIC services to extend from 1 October 2021 – 31 March 2022 and to approve associated spend of up to £1.5 million as set out in this report.



**REQUIRED CORPORATE AND LEGAL INFORMATION:**

**Links to the Strategic Plan**

<b>Hampshire maintains strong and sustainable economic growth and prosperity:</b>	Yes
<b>People in Hampshire live safe, healthy and independent lives:</b>	Yes
<b>People in Hampshire enjoy a rich and diverse environment:</b>	Yes
<b>People in Hampshire enjoy being part of strong, inclusive communities:</b>	Yes

<b>Section 100 D - Local Government Act 1972 - background documents</b>	
<p>The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)</p>	
<u>Document</u>	<u>Location</u>
None	

## EQUALITIES IMPACT ASSESSMENT:

### 1. Equality Duty

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation).
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it.
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic.
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it.
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

### 2. Equalities Impact Assessment:

**Geographical impact (required):** All Hampshire

**Describe the proposed change. This question has a limit of 700 characters; approximately 100 words (required):** An additional discharge option to support the ethos of home first and prevent the need for a bed-based provision for individuals awaiting Care Act assessment of eligibility following a stay in hospital and where other services currently available are not suitable

**Who does this impact assessment cover? (required):** Individual residents of Hampshire

**Has engagement or consultation been carried out? (required):** No prior but in process now

**Describe the consultation or engagement you have performed or are intending to perform. This question has a limit of 700 characters; approximately 100 words (required):** N/A

**Age (required):** Positive

**Impact (required):** This service will support adults to be discharged home with support whilst awaiting a Care Act assessment. This will support the individual's choice and ability to return home first with an enabling, least restrictive service rather than needing access to a bed-based provision, where those services are deemed not suitable

**Disability (required):** Positive

**Impact (required):** This service will support people with disabilities to be discharged home with support whilst awaiting a Care Act assessment. This will support the individual's choice and ability to return home first with an enabling, least restrictive service rather than needing to access a bed-based provision, where those services are deemed not suitable

**Sexual orientation (required):** Neutral

**Race (required):** Neutral

**Religion or belief (required):** Neutral

**Gender reassignment (required):** Neutral

**Gender (required):** Neutral

**Marriage or civil partnership (required):** Positive

**Impact (required):** This service will support those adults who are married or in a civil partnership and who may both require care in order to be discharged home from hospital with support or avoid admission to hospital whilst awaiting onward assessment of need/Care Act assessment. This will support the individual's choice enabling partners to stay together rather than the need for one or both to access bed based services and means they have the ability to return home sooner where other services are deemed not suitable

**Pregnancy and maternity (required):** Neutral

**Poverty (required):** Positive

**Impact (required):** This service is funded through CCG money therefore is free/non chargeable at the point of referral for up to 4 weeks.

**Rurality (required):** Positive

**Impact (required):** This service enables people to return home with a carer who will live in their property to care for them.

**Any other brief information which you feel is pertinent to this assessment (optional):** N/A

**Please confirm that the accountable officer has agreed the contents of this form (required): Yes**

By virtue of paragraph(s) 5 of Part 1 of Schedule 12A  
of the Local Government Act 1972.

Document is Restricted

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## HAMPSHIRE COUNTY COUNCIL

### Decision Report

<b>Decision Maker:</b>	Executive Member for Adult Services and Public Health
<b>Date:</b>	21 September 2021
<b>Title:</b>	Serious Violence Reduction Grant
<b>Report From:</b>	Director of Public Health

**Contact name:** Julia Waters

**Tel:** 07565 201 286      **Email:** [Julia.waters@hants.gov.uk](mailto:Julia.waters@hants.gov.uk)

#### Purpose of this Report

1. The purpose of this report is to request approval of a grant of £38,000 to be awarded to No Limits to deliver the second phase of a Teachable Moments service for young people under 26 years old in Basingstoke and Winchester Hospitals' Emergency Departments.
2. This project is part of a coordinated programme of work being implemented in Hampshire to tackle serious violence, funded by the Home Office. The budget for the grant is from the dedicated violence reduction funds received from the Home Office via Hampshire's Office of the Police and Crime Commissioner (OPCC) for 2021/22. While the funding originates from the Home Office, it is paid by the Home Office to the OPCC and Hampshire County Council receives the funding from the OPCC.

#### Recommendation

3. To approve a grant to the value of £38,000 for No Limits to implement a second phase of a service tackling risk factors for serious violence in Emergency Departments, as part of a wider public health approach to reducing serious violence in Hampshire.

#### Executive Summary

4. This report seeks to set out the summary, purpose, and background to one of the projects in the Violence Reduction Unit (VRU) programme (Reachable/Teachable Moments) that requires funding to be allocated via a grant. The funding for this project totals £38,000 in 2021/22; this will come

from the Home Office funding already received by Hampshire County Council.

5. The proposal is to enable implementation of a second phase of a Reachable/Teachable Moments project in Winchester and Basingstoke Hospitals by building on the model currently running at University Hospital Southampton (which is funded through Southampton budgets). This will support children and young people (up to the age of 25) who present to the Emergency Department with risk factors for serious violence, including exposure to violence or mental health and substance misuse issues.
6. There is a coordinated programme of work for the Hampshire VRU that is overseen and agreed by a multi-agency steering group, to ensure that this funding is used in line with an evidence based, public health approach.
7. Under the [NHS Act 2006 S2B\(4\)](#), each local authority must take such steps as it considers appropriate for improving the health of the people in its area. This can include the providing of grants on such terms as the local authority considers appropriate.

### **Contextual Information**

8. Hampshire County Council has received funding via the OPCC from the Home Office in 2021/22 to continue the work of the Violence Reduction Unit (VRU). This is a national initiative to tackle serious violence, particularly affecting young people.
9. No Limits was awarded £36,744 in March 2021 through Executive Member approval of a grant to mobilise 'teachable moments' which show early indications of effectiveness in improving outcomes related to the risk of being involved in violence. Risk factors that are addressed through this project include mental health, substance misuse and exposure to violence. This work is targeted at young people up to the age of 25 by embedding youth workers within the Emergency Department team and social prescribers in the community to provide follow up support to the young people.
10. The initial grant in 2020/21 has enabled the project to establish; in order to collate meaningful evaluation data, a second phase is required in 2021/22 to embed the project and collect outcomes from more young people.
11. This project is part of a wider VRU partnership model. Hampshire's OPCC is one of 18 areas in England and Wales to receive Home Office funding to set up a VRU to tackle and prevent serious violence. Across the Hampshire Constabulary area, the OPCC adopted a devolved approach to delivery of its VRU, comprising four local VRUs across Hampshire, Isle of Wight, Portsmouth and Southampton in line with local authority boundaries.



12. Each VRU is required to support a multi-agency, public health approach to preventing and tackling serious violence. In the Hampshire County Council area, the local VRU is led by the Director of Public Health.
13. The Hampshire VRU Strategy for 2021/22 includes a commitment to using the Reachable/Teachable Moments approach to engage with young people at moments when they have the opportunity to make changes to their lives, with appropriate support.
14. There is evidence that successfully embedding youth workers within the Emergency Department team provides opportunities for a public health approach to complex issues, such as violence, drug and alcohol abuse and mental health concerns.
15. Delivery in Basingstoke and Winchester Hospitals has been initiated and evaluation is being undertaken of the first phase of the project. However, an equivalent service in Southampton Emergency Department, which has been running for longer, has shown:
  - The percentage of young people returning to the Emergency Department after being seen by a No Limits worker was 30% compared to 64% of those not seen.
  - A wellbeing measurement tool was used to show that 68% of the young people, followed up after 6 weeks, experienced meaningful positive change during that time.
  - Young people identifying the need for help with substance misuse, crime and violence and personal safety had taken significant steps in their journey to tackle these within 6 weeks.
  - 85% of young people said they were helped to think about their options, 77% felt better about themselves, 77% had found new coping strategies and 70% felt more positive about the future. In terms of quality 77% of young people rated the service as very good or excellent and a further 17% as good.
  - 97% of staff were overwhelmingly positive about the service and rated the support to young people as very or extremely helpful.

## Finance

16. It is recommended that a non-recurrent grant of £38,000 should be awarded to No Limits to implement the second phase of a service tackling risk factors for serious violence in Emergency Departments.

17. The proposed sum will be funded from resources made available through funds received by Hampshire County Council from the Home Office in respect of VRU funding.
18. The proposed non-recurrent payment of £38,000 would be in addition to the £36,744 that No Limits received from the VRU to establish the project in the previous financial year. The funding would be allocated via a grant agreement.
19. The evaluation of the service will inform future decision making, with the aim of any continuation of the service beyond 2021/22 being part of a more sustainable model across the integrated care system footprint. Should further funding need approval this will be formally requested at the appropriate time.

## Performance

20. An evaluation of the service in the second phase aims to determine the sustainability and effectiveness and add to empirical data in this new area of work. Evaluation process and impact measures include:
- The number of young people per month aged under 26 accessing reachable/teachable moments by age, sex, ethnicity, disability, sexual orientation, vulnerable and inclusion health groups.
  - Presenting issues by individual e.g. self-harm, overdose, other substance misuse issues, alcohol misuse, violence engaged in (in home setting or in public place).
  - Reason for attendance.
  - Service type referred onto by individual case.
  - District of residence by number accessing service and by type of presenting issue.
  - Intended outcomes (risk reduction evidence) in case studies and feedback.
  - Unintended outcomes in case studies and feedback.
  - Duration of interaction in Emergency Department for service users in Emergency Department and those having social prescribing (average numbers).
  - Staff feedback – quantitative and qualitative.
  - Service user feedback – quantitative and qualitative (including 3,6,9,12-month follow-ups where feasible).
  - % Reduction in re-admission rate with this same cohort within 3 months.
  - % Reduction in serious violence risk and reduction in associated risky behaviours.

## Consultation and Equalities

21. If funding is approved, this project will benefit young people in the locality of Basingstoke, Eastleigh and Andover which have been identified through the VRU Problem Profile (2020/21 and 2021/22 - public health and police analysis as areas of higher risk for serious violence).
22. The population targeted will be young people who are at risk of violence as victims and / or perpetrators.
23. The Hampshire response strategy to serious violence is being informed by the VRU Problem Profile (data and intelligence) about the populations and geographies most at risk of serious violence. This ongoing workstream to understand patterns of serious violence will enable resources to be targeted where they will have the greatest impact.
24. Stakeholders are being engaged throughout the life of the Violent Reduction Unit as part of the serious violence response strategy.
25. A full EIA statement has been completed for the first grant awarded in March 2021 which would still apply to this grant: EIA297385417

## Conclusions

26. In order to implement and evaluate the second phase of the No Limits teachable moments work in Basingstoke and Winchester Hospitals, it is recommended that £38,000 is awarded (under grant agreement). This will provide evaluation evidence on which to base commissioning and procurement decisions for 2022/23 and beyond.

**REQUIRED CORPORATE AND LEGAL INFORMATION:**

**Links to the Strategic Plan**

Hampshire maintains strong and sustainable economic growth and prosperity:	yes
People in Hampshire live safe, healthy and independent lives:	yes
People in Hampshire enjoy a rich and diverse environment:	no
People in Hampshire enjoy being part of strong, inclusive communities:	yes

**Other Significant Links**

<b>Links to previous Member decisions:</b>	
<u>Title</u> <a href="#">2021-03-16 Executive Member report - Serious Violence Grant</a>	<u>Date</u> March 2021
<b>Direct links to specific legislation or Government Directives</b>	
<u>Title</u> <a href="#">Home Office. Consultation on a new legal duty to support multi-agency approach to preventing and tackling serious violence.</a>  <a href="https://www.legislation.gov.uk/ukpga/2006/41/section/2B">https://www.legislation.gov.uk/ukpga/2006/41/section/2B</a>	<u>Date</u> July 2019  2006

<b>Section 100 D - Local Government Act 1972 - background documents</b>	
<p>The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)</p>	
<u>Document</u>	<u>Location</u>
None	

## **EQUALITIES IMPACT ASSESSMENT:**

### **1. Equality Duty**

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

### **2. Equalities Impact Assessment:**

- 2.1 A full EIA statement has been completed for the first grant awarded in March 2021 which would still apply to this grant: EIA297385417
- 2.2 The grant to No Limits is to fund a secondary, and tertiary preventative project on violent crime. This project is part of a coordinated programme of work being implemented in Hampshire to tackle serious violence which has received funding from the Home Office.
- 2.3 Implementation of the project is to target young people at risk of violence and the risk factors for involvement with violence.
- 2.4 Stakeholders are being engaged on an ongoing basis as part of the serious violence response strategy.

2.5 There will be a positive impact on young people and age group who are most at risk of serious violence.

2.6 A serious violence response strategy is being informed by data and information about sections of the population and geographies at highest risk of serious violence.

## HAMPSHIRE COUNTY COUNCIL

### Decision Report

<b>Decision Maker:</b>	Executive Member for Adult Services and Public Health
<b>Date:</b>	21 September 2021
<b>Title:</b>	Demand Management and Prevention Grant Award
<b>Report From:</b>	Director of Adults' Health and Care

**Contact name:** Sarah Snowdon  
Peter Stokes

**Tel:** 0370 779 1037

**Email:** [Peter.Stokes@hants.gov.uk](mailto:Peter.Stokes@hants.gov.uk)

#### Purpose of this Report

1. The purpose of this report is to seek approval for making a grant award to the voluntary and community organisations outlined in this report as part of the Demand Management and Prevention Programme.

#### Recommendation(s)

2. That approval be given by the Executive Member for Adult Services and Public Health to award a grant totalling £29,700 to Citizens Advice Winchester to cover an 18 month period between 1 Nov 2021 and 30 Apr 2023 as part of the Local Solutions Grant

#### Executive Summary

3. This report seeks to
  - Set out the background to the grants
  - Set out the reason for the recommendation
  - Consider the finance for the project
  - Look at key issues
  - Briefly consider the future direction of the project.

#### Contextual information

##### Background

4. The Voluntary and Community Sector (VCS) contributes to improving people's quality of life. The grants programme is one of the ways in which the County Council supports the sector to support people to live fuller more independent lives.

5. A voluntary organisation may be considered for grant aid from the County Council only if its services, projects or activities are in compliance with the aims and objectives, priorities and policies of the County Council.
6. Grants are awarded to support services that are better provided by the voluntary sector e.g. the mobilisation of community resources to help vulnerable people maintain their independence.
7. A grant is defined as a sum of money to support a particular activity. It does not usually cover the entire cost of the activity and it is legally considered to be a one-sided gift, rather than a payment in exchange for services.
8. Voluntary and community organisations provide valuable locally based services that are often rooted in the communities which they serve. Significant benefit is produced through this activity, often through voluntary action and focused towards activity that clearly assists in providing early intervention and prevention initiatives. Grant funding by the County Council contributes to, and helps sustain, this activity.
9. As grants are a contribution to service or activity costs the economic benefit to the department can be significant, leveraging in additional funding, the benefit of volunteer time and therefore providing good value for money to the authority.
10. Organisations will not normally be eligible for grants where they hold balances in excess of one year's running costs. Those organisations receiving recurring funding which hold in excess of three months' running costs, and where they cannot demonstrate through their reserves policy that these reserves are justified, may receive a reduced grant. To establish the level of reserves, organisations are required to provide a set of their latest accounts and annual report with their application and before grant payment is made – in the case of organisations with an income of £10,000 or above, these must be independently examined or audited. If organisations have reserves in excess of three months, we will apply the reserves policy which is in line with the Charity Commission's policy on these matters.

#### Demand and Prevention Programme

11. Prevention, incorporating Demand Management is one of the three key areas identified to achieve the Vision of Adults' Health and Care, as detailed in the Adult's Health and Care Strategy 2018.
12. The Demand Management and Prevention work will build on people's strengths, enabling them to improve their health and take more personal responsibility for looking after themselves with support from their family, friends and community network. The County Council will encourage this by making the healthy choice the easy choice and developing accessible, inclusive and readily available information and advice services. The County Council will also carry out targeted prevention work for certain groups of



people who are most at risk of poor health to keep them well and to avoid or delay the need for social care services. The County Council will work with partners, in particular the NHS, GPs and the Voluntary sector to achieve the above aims.

13. In this report the grant being recommended follows on from an advertised programme named the Local Solutions Grant that is open for applications from relevant organisations on an ongoing basis.

#### Local Solutions Grant

14. It is recognised that across Hampshire there are local initiatives, support networks and services achieving positive outcomes for adults every day. A strength-based approach values these local provisions and seeks to enable them to further develop, be sustained and grow. This approach recognises that the County Council is often not the only, or the best, source of help for local people
15. Services developed through this locality focused approach (either through building capacity in existing provision or through new initiatives) are likely to enable early prevention support, as well as shaping options which may be attractive alternatives to some traditional services currently available for individuals, carers and families. The prioritisation of localities to focus upon within this approach has been informed by data on demographics, existing and projected social care demand, and feedback from stakeholders. This will help to ensure that local people have effective support available now and into the future.
16. The focus and criteria for each Local Solution Grant has been shaped by engagement with local stakeholders. This engagement has informed identification of the local priorities, the outcomes which are important to be achieved and the potential type of solution which could be developed. They are also aligned to the NHS programme to support self-management, which assists individuals to remain independent and minimising their need for social care. Some grants are more specific in what is being asked to be delivered and others outline more generally the focus of the change required. Across all, it will be looked for the successful bidder(s) to ensure local insight and expertise continue to shape the support and services as they further develop, in order to deliver positive outcomes. Local stakeholders and local Adult's Health and Care Community Teams were involved in the decision making to ensure that the grants recommended meet the community need.
17. In this paper, a local solutions grant is recommended benefitting residents of Winchester and the surrounding areas, based on need identified through local stakeholder engagement. The area covered in this grant round builds on those covered in previous Local Solutions grant rounds and provision made on a countywide basis. The Local Solutions Grant is open to applications from any voluntary, community or not for profit organisation delivering services to resident in any part of Hampshire. The Local Solutions Grant is open to

applications year-round, enabling further application that meet the grant outcomes and objectives in other areas to be funded at other points in the year.

18. The Integrated advice and Mental Health Pilot seeks to offer a holistic service to in-patients at Melbury Lodge (Winchester), both pre and post-discharge. The service will support users in financial and life management skills to support mental health recovery and reduce the risk factors to future acute mental health episodes.
19. Studies have consistently shown the link between financial worries and debt issues and lower mental health and wellbeing amongst adults. By supporting users to regain control of their finances, and support with financial independence, the project will target acute mental health patients in the Winchester area to maximise the benefits and outcomes.
20. Citizens Advice Winchester have actively engaged with staff within the Adults' Health and Care staff involved in both the delivery of operational mental health community services and the commissioning of mental health support services. This engagement has ensured the proposed service meets the needs of people supported by the community teams and other existing provision by providing additionality but not duplication in terms of support to be offered.
21. Successful delivery of the project will see reduced pressure on mental health services, increased support for residents with acute mental health issues and significant improvements in the quality of life for the users of the service. By targeting debt as one of the key risk factors in the triggering of acute mental health episodes, the outcomes will be of benefit to users of services and Hampshire County Council alike. In the joint discussions across teams in both with operational and commissioning functions of the Adults' Health and Care with the applicant have also identified relevant operational benefits such as decreasing the need for operational staff presence in providing support to the service users, enabling additional capacity of staff to engage in other critical work.

## **Finance**

22. The grant proposal in this report will commit additional expenditure totalling £29,700 over 2 financial years (2021/22 and 2022/23). Subject to approval of this report the total grants committed for payment will remain within the agreed, (2021/22, 2022/23) annual budget envelopes for the Demand Management and Prevention Programme.
23. Payment will be made in 3 instalments as are traditionally used for awards in excess of £10,000. All Grant Agreements have conditions that enable the County Council to require repayment of the award or any part of it if it remains unspent at the end of the grant period, or if there is a material breach of the grant agreement.

## Performance

24. The provision of grants to voluntary and community sector organisations by statutory bodies always presents a degree of risk. Specific risks that statutory bodies are required to manage include voluntary and community organisations accepting funding without providing any activity; organisations not delivering the service as expected; and there being an under spend on the expected activity. This applies to all grants however; larger grants represent a potentially higher risk to the County Council.
25. A number of mechanisms have been employed successfully over a number of years to mitigate and alleviate these risks. These include nominating a liaison officer from the County Council whose responsibility is to monitor how the grant is spent, specifying within the grant agreement that the grant is 'restricted' funding for the provision of the specified activity only and phasing the payment of grants over the course of the award duration.
26. The Local Solutions Grants will include measures to define the volume of referrals taken and how much care costs have been diverted. The precise details of this performance framework will be subject to further discussion and subsequent agreement with the grant recipients prior to accepting the grant. The measures agreed will be used amongst other measures, to quantify and qualify the cost avoidance of the Local Solutions grant spend, specifically in relation to the efficacy in offsetting demand that would otherwise fall on formal Social Care services. Performance will be monitored through senior internal governance structures. It is envisaged that the financial benefits derived will exceed the one-off cost invested provided that the activity undertaken is in accordance with the grants. The activity will be monitored and reviewed over the life of the award to ensure it remains on track. Discussions with commissioning and operational staff in Adults' Health and Care during the application process has led to the identification of key benefits designed to increase capacity of operational delivery. These key benefits will be monitored and evaluated during the life of the grant to both ensure delivery against identified outcomes from the funded service, as well as informing the future development of services.
27. A comprehensive evaluation assessment tool has been developed and is in use for the beneficiaries of previous grant rounds, ensuring consistency of data capture.
28. All organisations awarded a grant sign a declaration stating they accept that grant funding can only be awarded for the given period and no commitment exists from the County Council to continue funding after this time, or in subsequent years.

## **Consultation and Equalities**

29. It is for the Executive Member as decision maker to have due regard to the need to: eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act and advance equality of opportunity and foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
30. The Local Solutions Grant will have a positive impact on adults with mental health issues, as the awards will create a new service to support with long term management and reduction in acute mental health episodes.
31. The Local Solutions Grants have been shaped in their design by local stakeholder engagement, including those working in the local voluntary community sector, local councillors as well as staff working for Adults' Health and Care, Health and from local councils.

## **Climate Impact Assessment**

32. Hampshire County Council utilises two decision-making tools to assess the carbon emissions and resilience of its projects and decisions. These tools provide a clear, robust, and transparent way of assessing how projects, policies and initiatives contribute towards the County Council's climate change targets of being carbon neutral and resilient to the impacts of a 2°C temperature rise by 2050. This process ensures that climate change considerations are built into everything the Authority does.
33. A full assessment of climate change vulnerability was not completed as the initial vulnerability assessment showed that the project is at minimal risk from the climate vulnerabilities because the project is not within a flood risk zone and will be operated from premises not owned by the County Council or the organisation in receipt of the grant.

## **Conclusions**

34. In receiving a Local Solutions Grant Citizens Advice Winchester will provide a service identified through engagement with Adults Health and Care staff to support adults using mental health services both during and after discharge from Melbury Lodge by providing financial and life management skills. This will prevent, reduce or delay these adults from requiring future social care involvement. This will also support with the ongoing aims and objectives of the Hampshire County Council Demand Management and Prevention Department and support Hampshire residents to live safe, healthy independent lives

**REQUIRED CORPORATE AND LEGAL INFORMATION:**

**Links to the Strategic Plan**

<b>Hampshire maintains strong and sustainable economic growth and prosperity:</b>	no
<b>People in Hampshire live safe, healthy and independent lives:</b>	yes
<b>People in Hampshire enjoy a rich and diverse environment:</b>	no
<b>People in Hampshire enjoy being part of strong, inclusive communities:</b>	yes

**Other Significant Links**

<b>Links to previous Member decisions:</b>	
<u>Title</u> Demand Management and Prevention Grant Award	<u>Date</u> March 2021
<b>Direct links to specific legislation or Government Directives</b>	
<u>Title</u>	<u>Date</u>

<b>Section 100 D - Local Government Act 1972 - background documents</b>	
<p>The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)</p>	
<u>Document</u>	<u>Location</u>
None	

## **EQUALITIES IMPACT ASSESSMENT:**

### **1. Equality Duty**

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

### **2. Equalities Impact Assessment:**

The award of grants to the voluntary and community sector to support people to live long, healthy and happy lives with the maximum possible independence, as part of the demand management and prevention programme and in-line with Adults'/ Health and Care Strategy 2018.

Grants in this paper:

Local Solutions Grant awarded to Citizens Advice Winchester for one on one support to in-patients with acute mental health issues at the Melbury Lodge facility in Winchester.: £29,700

**Geographical impact:** Winchester District.

**Proposed Change:**

The introduction of a new project in the Winchester district to support in-patients with acute mental health issues at the Melbury Lodge facility both pre and post discharge. One on One support will be given around finance, benefits and support with life issues to remove some of the triggers to relapse and reduce the overall incidence of acute mental health episodes in users of the service. The service seeks to work with participants strengths to ensure the greatest benefits.

**Who does this impact assessment cover?:** Service users

**Has engagement or consultation been carried out?:** Yes

**Describe the consultation or engagement you have performed or are intending to perform:** The proposal for an acute mental health support service has been shaped in its design by local stakeholder engagement. Consultation has been undertaken with staff at the facility concerned. Citizens Advice has a great deal of experience dealing with people in financial difficulty and understand the impact which this can have on peoples mental health. A robust monitoring and evaluation process is in place and takes into account the views of users of the service and HCC local teams who will be engaged throughout the evaluation process.

**Age Public Impact:** Neutral

**Age Staff Impact:** Neutral

**Assessment Rationale:** The service is open to all age groups and aims to support people with acute mental health issues irrespective of age.

**Disability social impact:** Positive

**Disability staff impact:** Neutral

**Assessment Rationale:** The service seeks to support people with acute mental health issues both pre and post discharge from the Melbury Lodge facility in Winchester. One of the biggest triggers for acute mental health episodes is financial difficulty and debt which this project seeks to overcome. Support will be given in applying for and managing benefits, managing debt levels and teaching money management skills . The outcomes of the project are seen as being better mental health outcomes for participants, a reduction in frequency of acute mental health relapses and a greater quality of life.

**Sexual orientation public impact:** Neutral

**Sexual orientation staff impact:** Neutral

**Assessment rationale:** The service is open to all age groups and aims to support people with acute mental health issues irrespective of sexual orientation.

**Race social impact:** Neutral

**Race staff impact:** Neutral

**Assessment Rationale:** The service is open to all age groups and aims to support people with acute mental health issues irrespective of race.

**Religion or belief social impact:** Neutral

**Religion or belief staff impact:** Neutral

**Assessment Rationale:** The service is open to all age groups and aims to support people with acute mental health issues irrespective of religion.

**Gender reassignment public impact:** Neutral

**Gender reassignment staff impact:** Neutral

**Assessment Rationale:** The service is open to all age groups and aims to support people with acute mental health issues irrespective of Gender reassignment.

**Sex public impact:** Neutral

**Sex staff impact:** Neutral

**Assessment rationale:** The service is open to all age groups and aims to support people with acute mental health issues irrespective of gender identity.

**Marriage or civil partnership:** Neutral

**Marriage or civil partnership:** Neutral

**Assessment Rationale:** The service is open to all age groups and aims to support people with acute mental health issues irrespective of marriage or civil partnership status.

**Pregnancy and maternity public impact:** Neutral

**Pregnancy and maternity staff impact:** Neutral

**Assessment rationale:** The service is open to all age groups and aims to support people with acute mental health issues irrespective of whether pregnant or not.

**Poverty public impact:** Positive

**Poverty staff impact:** Neutral

**Assessment Rationale:** The service seeks to support people with acute mental health issues both pre and post discharge from the Melbury Lodge facility in Winchester. One of the biggest triggers for acute mental health episodes is financial difficulty and debt which this project seeks to overcome. Support will be



given in applying for and managing benefits, managing debt levels and teaching money management skills. The outcomes of the project are seen as being better mental health outcomes for participants, a reduction in frequency of acute mental health relapses and a greater quality of life.

**Rurality public impact:** Neutral

**Rurality staff impact:** Neutral

**Assessment rationale:** Owing to the location of the project and the district covered there will be no impact on rurality so a neutral assessment was made.

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## HAMPSHIRE COUNTY COUNCIL

### Decision Report

<b>Decision Maker:</b>	Executive Member for Adult Services and Public Health
<b>Date:</b>	21 September 2021
<b>Title:</b>	Demand Management and Prevention Learning Disability Connector Grant
<b>Report From:</b>	Director of Adults' Health and Care

**Contact name:** Sarah Snowdon  
Peter Stokes

**Tel:** 0370 7791037

**Email:** [Peter.Stokes@hants.gov.uk](mailto:Peter.Stokes@hants.gov.uk)

#### Purpose of this Report

1. The purpose of this report is to seek approval from the Executive Member for Adult Services and Public Health to open a grant scheme for organisations to provide a connector service for residents with Learning Disabilities) (to be known as the Learning Disability Connector Grant) and for the authority to award grants to be delegated to the Director of Adults' Health and Care in consultation with the Executive Member following receipt of bids. The proposed value of the grant scheme is £30,000 and will be fully funded from the Demand Management and Prevention Change Unit 2021/22 budget

#### Recommendations

2. That approval be given by the Executive Member for Adult Services and Public Health to publish a grant scheme known as the Learning Disability Connector Grant, with a total value of £30,000.
3. That the Executive Member for Adult Services and Public Health delegates authority to the Director of Adults' Health and Care in consultation with the Executive Member following receipt of bids to award grants from the Learning Disability Connector Grant.

#### Executive Summary

4. This report sets out the proposals for establishing and managing the Learning Disability Connector Grant in Hampshire, including proposals to delegate authority to award the grants to the Director of Adults' Health and Care.
5. This report will also do the following:
  - Set out the background to the grant scheme

- Set out the reason for the recommendations
- Consider the finance for the project
- Look at key issues
- Briefly consider the future direction of the project.

## **Contextual information**

### Demand and Prevention Programme

6. Prevention, incorporating Demand Management is one of the three key areas identified to achieve the Vision of Adults' Health and Care, as detailed in the Adults' Health and Care Strategy 2018.
7. The Demand Management and Prevention work builds on people's strengths, enabling them to improve their health and take more personal responsibility for looking after themselves with support from their family, friends and community network. The County Council will encourage this by making the healthy choice the easy choice and developing accessible, inclusive and readily available information and advice services.

### Learning Disability Connector Grant

8. It is recognised that across Hampshire there are local initiatives, support networks and services achieving positive outcomes for adults with a learning disability every day. A strength-based approach values these local provisions and seeks to enable them to further develop, be sustained and grow. This approach recognises that the County Council is often not the only, or the best, source of help for local people.
9. It is important that these local services are promoted and utilised for maximum benefit, both to the users of the services and the organisations themselves. The Learning Disability Connector Grant will seek to fund organisations that can develop and deliver a project, to support adults with a learning disability to access local community services and provide support to enable them to increase their independence and potentially move away from traditional commissioned services. This will help to ensure that local people have effective support available now and into the future.
10. The focus and criteria for the Learning Disability Connector Grant has been shaped by engagement with local stakeholders, Hampshire County Council community teams and the users of services themselves. This engagement has identified that whilst provision exists many potential users of these services are unaware of how to access them or lack the confidence to do so independently.
11. By increasing awareness of these services through another provider via this grant will have direct benefit to these operational teams in reducing the need for the operational staff to support this enabling them to undertake other key duties. Indirect benefits will include the person being supported by the

Learning Disability Connector Grant provider to the most effective support for the individual enabling them to lead safer, healthier and more independent lives which will prevent or reduce the need for direct support from operational staff and social care provision

12. The Learning Disability Grant Scheme will be available for award to award in the Hart and Rushmoor district areas. This decision has been based on engagement with the Learning Disability staff with responsibility for commissioning who have identified a specific need for these initiatives in these areas. By focusing the Learning Disability Connector Grant in this geographical area enables the County Council to test this approach before further decisions are made on future provision. Any future decision will be subject to an additional Executive Member decision report
13. In this paper, the proposed Learning Disability Connector Grant will seek funding to address and overcome the barriers for participation in local services and ensure that the residents of Hart and Rushmoor with learning disabilities are able to access the services which would be of greatest use to them.

### **Delegation Of Authority**

14. In order to ensure that grants are awarded in a timely way, it is proposed that the Executive Member for Adult Services and Public Health delegates the authority to award grants from the Learning Disability Connector Grant to the Director of Adults' Health and Care in consultation with the Executive Member following receipt of bids.
15. Following a period of isolation and restriction owing to the Covid-19 pandemic, many residents who are targeted to benefit from this grant award are seeking services and support to help them rebuild their connections. It is important that any grant is awarded in a timely manner to allow the project to commence and support those individuals looking to build back stronger post Covid-19

### **Use of Grants**

16. Grants are awarded to support services that are better provided by the voluntary sector e.g. the mobilisation of community resources to help vulnerable people maintain their independence. A grant is defined as a sum of money to support a particular activity. It does not usually cover the entire cost of the activity and it is legally considered to be a one-sided gift, rather than a payment in exchange for services.
17. A voluntary organisation may be considered for grant aid from the County Council only if its services, projects or activities are in compliance with the aims and objectives, priorities and policies of the County Council.

18. Voluntary and community organisations provide valuable locally based services that are often rooted in the communities which they serve. This approach recognises that the County Council is often not the only, or the best, source of help for local people.
19. The governance around managing the Learning Disability Connector Grant is set out in sections 21-25 of this report

## **Finance**

20. The grant proposed in this report will commit additional expenditure totalling £30,000 over a single financial year period of 2021/22. Subject to approval of this report the total grants committed for payment will remain within the agreed, (2021/22) annual budget envelopes for the Demand Management and Prevention Programme.
21. Payment of any successful Learning Disability Connector Grant awards will be made in one instalment if under £10,000, with multiple instalments used for awards in excess of £10,000. All Grant Agreements will have conditions that enable the County Council to require repayment of the award or any part of it if it remains unspent at the end of the grant period, or if there is a material breach of the grant agreement.

## **Performance**

22. The provision of grants to voluntary and community sector organisations by statutory bodies always presents a degree of risk. Specific risks that statutory bodies are required to manage include voluntary and community organisations accepting funding without providing any activity; organisations not delivering the service as expected; and there being an under spend on the expected activity. This applies to all grants however; larger grants represent a potentially higher risk to the County Council.
23. A number of mechanisms have been employed successfully over a number of years to mitigate and alleviate these risks. These include nominating a liaison officer from the County Council whose responsibility is to monitor how the grant is spent, specifying within the grant agreement that the grant is 'restricted' funding for the provision of the specified activity only and phasing the payment of grants over the course of the award duration.
24. Any Learning Disability Connector Grants awards will include measures to define the volume of referrals taken and how much care costs have been diverted. The precise details of this performance framework will be subject to further discussion and subsequent agreement with the grant recipients prior to accepting the grant. Before recommending applicants for award there will be further discussions with commissioning and operational staff in Adults' Health and Care. This will inform the identification of key benefits designed to increase capacity of operational delivery. These key benefits will be monitored and evaluated during the life of the grant to both ensure delivery

against identified outcomes from the funded service, as well as informing the future development of services.

25. A comprehensive evaluation assessment tool has been developed and is in use for the beneficiaries of previous grant rounds, ensuring consistency of data capture.
26. All organisations awarded a grant sign a declaration stating they accept that grant funding can only be awarded for the given period and no commitment exists from the County Council to continue funding after this time, or in subsequent years.

### **Consultation and Equalities**

27. It is for the Executive Member as decision maker to have due regard to the need to: eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act and advance equality of opportunity and foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
28. The Learning Disability Connector Grant, if approved, will have a positive impact on adults with Learning Disabilities in the Hart and Rushmoor districts specifically as the awards from this will allow better signposting to the ever increasing services and provision in the community.
29. The Learning Disability Connector Grant has been shaped in design by local stakeholder engagement, including those working in the local voluntary community sector, local councillors as well as staff working for Adults' Health and Care, Health and from local councils.

### **Climate Change Impact**

30. Hampshire County Council utilises two decision-making tools to assess the carbon emissions and resilience impacts of its projects and decisions. These tools provide a clear, robust, and transparent way of assessing how projects, policies and initiatives contribute towards the County Council's climate change targets of being carbon neutral and resilient to the impacts of a 2°C temperature rise by 2050. This process ensures that climate change considerations are built into everything the Authority does.
31. The Learning Disability Connector Grant scheme has been designed to support people with Learning Disabilities in the Hart and Rushmoor to access community services and support to maximise their independence. The grant scheme proposals have been assessed against the two decision-making tools which are designed to assess impacts on climate change and carbon emissions. As a grants scheme no impacts have been identified, however the impact of individual projects supported by the scheme would need to be assessed at an individual project level.

## **Conclusions**

32. The organisations receiving a Learning Disability Connector Grant will support and signpost users of the service to provision in the community which will support their increased independence and allow them to become more connected to their communities. They will support with the ongoing aims and objectives of the Hampshire County Council Demand Management and Prevention Department and support Hampshire residents to live independently for longer.



**REQUIRED CORPORATE AND LEGAL INFORMATION:**

**Links to the Strategic Plan**

<b>Hampshire maintains strong and sustainable economic growth and prosperity:</b>	no
<b>People in Hampshire live safe, healthy and independent lives:</b>	yes
<b>People in Hampshire enjoy a rich and diverse environment:</b>	no
<b>People in Hampshire enjoy being part of strong, inclusive communities:</b>	yes

**Section 100 D - Local Government Act 1972 - background documents**

**The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)**

Document

Location

None

## EQUALITIES IMPACT ASSESSMENT:

### 1. Equality Duty

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

### 2. Equalities Impact Assessment:

The award of grants to the voluntary and community sector to support people to live long, healthy and happy lives with the maximum possible independence, as part of the demand management and prevention programme and in-line with Adult's Health and Care Strategy 2018.

Grants in this paper:

Learning Disability Connector Grant (proposal to advertise and award in line with stated outcomes): £30,000

**Geographical impact:** Hart and Rushmoor District. The Learning Disability Grant Scheme will be available for award to award in the Hart and Rushmoor district areas. This decision has been based on engagement with the Learning Disability staff with responsibility for commissioning who have identified a specific need for these initiatives in these areas. By focusing the Learning Disability Connector

Grant in this geographical area enables the County Council to test this approach before further decisions are made on future provision. Any future decision will be subject to an additional Executive Member decision report

**Proposed Change:**

The LD Connector Grant is a new grant stream which seeks to connect adults living with LD to the expanding services available to them in the local community. These connections will allow for users of the service to become more independent, connected to their community and of course to build the skills the wish to as part of a Strength Based Approach (SBA)

**Who does this impact assessment cover?:** Service users

**Has engagement or consultation been carried out?:** Yes

**Describe the consultation or engagement you have performed or are intending to perform:** The proposal for an LD Connector grant has been shaped in its design by local stakeholder engagement. The Learning Disability Grant Scheme will be available for award to award in the Hart and Rushmoor district areas a decision based on engagement with the Learning Disability staff with responsibility for commissioning who have identified a specific need for these initiatives in these areas. This grant represents an opportunity for Adults Services to pilot this approach across a limited number of districts to effectively assess its impact. A robust monitoring and evaluation process is in place and takes into account the views of users of the service and HCC local teams who will be engaged throughout the evaluation process.

**Age Public Impact:** Neutral

**Age Staff Impact:** Neutral

**Assessment Rationale:** The Learning Disability Grant Scheme will seek applications for projects which will support residents with a leaning disability to make connections to pre-existing local services to support independent living and social connectivity. This will be done irrespective of the participants age and will deliver to the individuals needs in line with a strength based approach.

**Disability social impact:** Positive

**Disability staff impact:** Neutral

**Impact:** The purpose of the grant is to allow local organisations and the voluntary sector to propose projects which will seek to connect adults with LD into the existing services in the community. Studies and anecdotal evidence from the community suggest that whilst projects and services exist, barriers to participation prevent them being used in greater numbers. This grant stream seeks to fund projects to break down two specific barriers; lack of knowledge of the projects and services available and lack of confidence in initiating and attending them. Projects will be require to support users end to end, helping identify services which could benefit them but also support in building confidence, enabling them to attend.

**Sexual orientation public impact:** Neutral

**Sexual orientation staff impact:** Neutral

**Assessment rationale:** The Learning Disability Grant Scheme will seek applications for projects which will support residents with a learning disability to make connections to pre-existing local services to support independent living and social connectivity. This will be done irrespective of the participants sexual orientation and will deliver to the individuals needs in line with a strength based approach.

**Race social impact:** Neutral

**Race staff impact:** Neutral

**Assessment Rationale:** The Learning Disability Grant Scheme will seek applications for projects which will support residents with a learning disability to make connections to pre-existing local services to support independent living and social connectivity. This will be done irrespective of the participants race and will deliver to the individuals needs in line with a strength based approach.

**Religion or belief social impact:** Neutral

**Religion or belief staff impact:** Neutral

**Assessment Rationale:** The Learning Disability Grant Scheme will seek applications for projects which will support residents with a learning disability to make connections to pre-existing local services to support independent living and social connectivity. This will be done irrespective of the participants religion and will deliver to the individuals needs in line with a strength based approach.

**Gender reassignment public impact:** Neutral

**Gender reassignment staff impact:** Neutral

**Assessment Rationale:** The Learning Disability Grant Scheme will seek applications for projects which will support residents with a learning disability to make connections to pre-existing local services to support independent living and social connectivity. This will be done irrespective of the participants gender identity or gender reassignment and will deliver to the individuals needs in line with a strength based approach.

**Sex public impact:** Neutral

**Sex staff impact:** Neutral

**Assessment rationale:** The Learning Disability Grant Scheme will seek applications for projects which will support residents with a learning disability to make connections to pre-existing local services to support independent living and social connectivity. This will be done irrespective of the participants gender

identity and will deliver to the individuals needs in line with a strength based approach.

**Marriage or civil partnership:** Neutral

**Marriage or civil partnership:** Neutral

**Assessment Rationale:** The Learning Disability Grant Scheme will seek applications for projects which will support residents with a learning disability to make connections to pre-existing local services to support independent living and social connectivity. This will be done irrespective of the participants marital or civil partnership status and will deliver to the individuals needs in line with a strength based approach.

**Pregnancy and maternity public impact:** Neutral

**Pregnancy and maternity staff impact:** Neutral

**Assessment rationale:** The Learning Disability Grant Scheme will seek applications for projects which will support residents with a learning disability to make connections to pre-existing local services to support independent living and social connectivity. This will be done irrespective of the participant being pregnant and will deliver to the individuals needs in line with a strength based approach.

**Poverty public impact:** Neutral

**Poverty staff impact:** Neutral

**Assessment Rationale:** The Learning Disability Grant Scheme will seek applications for projects which will support residents with a learning disability to make connections to pre-existing local services to support independent living and social connectivity. Whilst there is the potential to link those who need advice around money management and benefits support to organisations who will do this this is anticipated to be a limited element of the overall service and so a 'neutral' outcome was selected.

**Rurality public impact:**

**Rurality staff impact:** Neutral

**Assessment rationale:** Owing to the location of the project and the districts covered there will be no impact on rurality so a neutral assessment was made.

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## HAMPSHIRE COUNTY COUNCIL

### Decision Report

<b>Decision Maker</b>	Executive Member for Adult Services and Public Health
<b>Date:</b>	21 September 2021
<b>Title:</b>	Sexual Violence Services
<b>Report From:</b>	Director of Adults' Health and Care

**Contact name:** Emma Dyer / Stephen White

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### Purpose of this Report

1. The purpose of this report is to seek approval from the Executive Member for the award of 2 grants totalling £589,386 over a seven year period, on a 3+2+2 basis, from 1 April 2022 to the Office for the Police and Crime Commissioner (OPCC) in respect of the Rape and Sexual Assault Counselling (RASAC) Services and Independent Sexual Violence Advocacy (ISVA) Service.
2. This report will set out the background to the Sexual Violence Support services and provide the local context whilst outlining the finance for the services and the impact on the Adults' Health and Care budget.

### Recommendations

3. That the Executive Member for Adult Services and Public Health gives approval for a grant of up to £471,786 to the OPCC over a maximum seven year period, for the delivery of Rape and Sexual Assault Counselling Service.
4. That the Executive Member for Adult Services and Public Health gives approval for a grant of up to £117,600 to the OPCC over a maximum seven year period, for the delivery of Independent Sexual Violence Advocacy service.

### Contextual information

5. NHS England and Improvement (NHS E&I), Clinical Commissioning Groups (CCGs), Local Authorities and the Criminal Justice System jointly commission integrated responses to sexual violence and rape to meet the needs of local populations.

6. This report covers two separate contracts, both of which contribute to the overall provision of Sexual Violence services across Hampshire, Portsmouth and Southampton. The Rape and Sexual Assault Counselling (RASAC) service provide therapeutic support to individuals who have experienced rape, sexual abuse/violence or sexual exploitation. The Independent Sexual Violence Advocacy (ISVA) service offers practical support and advice to individuals who have experienced rape, sexual abuse/violence or sexual exploitation; including support to those whose case is progressing through the criminal justice system.
7. The current commissioning arrangements for these two services are complex, potentially adding confusion for both service users and stakeholders. The County Council currently commissions four RASAC services jointly funded by two CCGs and NHS E&I, as well as one ISVA service jointly funded by the Office for the Police and Crime Commissioner (OPCC) and Portsmouth City Council (PCC). These contracts come to an end in March 2022. The OPCC commissions three further RASAC services across Hampshire and NHS E&I commission a separate ISVA service attached to the Hampshire Sexual Assault Referral Centre (SARC). All partners are keen to address this and make better use of collective resources.
8. The Police and Crime Commissioner published a Sexual Crime Strategy for Hampshire in 2017. The aspirations for victim support services include the development of a standard specification for specialist counselling services across the pan Hampshire area, increased co-commissioning arrangements and a need to address the differences in access arrangement across the Hampshire, Portsmouth and Southampton geography.

### **Future Service Delivery**

9. Although the County Council currently holds the main ISVA contract, the County Council is a minor funding partner and overarching responsibility for victim support sits with the OPCC. Similarly, the County Council has also historically led on the commissioning and procurement of the RASAC services. As therapeutic services, this provision should sit under the OPCC or CCGs as an integral part of the mental health pathway.
10. Discussions with partners have resulted in agreement to align all funding streams and progress joint commissioning of all sexual violence services from April 2022.
11. The OPCC will lead on the commissioning of two separate, pan-Hampshire services. This would result in a more co-ordinated and cost-effective approach to the delivery of these services.
12. The ISVA service will be funded by the Office of the Police and Crime Commissioner, Portsmouth City Council, Southampton City Council and the County Council.



13. Similarly, the RASAC will be primarily commissioned by the OPCC in partnership with the County Council, Ministry of Justice (MOJ), the Hampshire, Southampton and Isle of Wight CCG, Frimley CCG, and the NHSE&I.

## **Finance**

### **ISVA**

14. While the County Council will carry out the procurement exercise on behalf of the partnership, the contract will be held by the OPCC who will have responsibility for management of the contract for the new ISVA service from April 2022. Therefore, there is a need to ensure that the County Council is able to support the OPCC as flexibly as possible, to give both them and the successful provider confidence regarding ongoing funding arrangements.
15. The contribution from the County Council to support the ISVA provision is proposed to be up to £16,800 per annum. To ensure consistent service delivery and enable the efficient procurement of the service, it is proposed that this be made available up to a maximum of seven years, on a 3+2+2 basis. Therefore, the total contribution from the County Council for up to seven years will be £117,600. This level of contribution does not represent an additional cost pressure, it is consistent with the current planned annual budget provision. In year one of the contract, County Council funding for the ISVA contract is estimated to equate to just over 6% of the total contract value. While management of the contract will rest with the OPCC, we will retain the ability to jointly assess performance of the contract and review if required.

### **RASAC**

16. The contribution from the County Council to support the RASAC service is proposed to be up to £67,394 per annum. It is proposed that the County Council make this funding available for up to a maximum of seven years, meaning the total contribution from the County Council would be up to £471,758, subject to contributions from other partners being confirmed. This level of contribution does not represent an additional cost pressure, it is consistent with the current planned annual budget provision. At the time of writing, funding levels for the RASAC service had not yet been confirmed from all partners. While management of the contract will rest with the OPCC, we will retain the ability to jointly assess performance of the contract and review if required.

## **Legal**

17. In exercising its functions an authority must have due regard to the need to: eliminate discrimination, harassment, victimisation and any other conduct prohibited under the Equality Act and advance equality of opportunity and

foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

## **Consultation and Equalities**

18. Stakeholder consultation was carried out in April 2021 via an online survey. The respondents were from people who had used ISVA services, professionals who have or are working in services, professionals who refer clients or professionals with an interest in services. 48.8% of responders agreed with the proposal to bring existing services together, 27.9% did not agree and 23.3% neither agreed nor disagreed/other. Of those professionals referring to the service, 90.9% found it easy to refer to the service, 9.1% did not. Respondents also commented on having a single point of access, easier referral pathways and providing additional staff across the county.
19. Most of the impacts recorded for these services are neutral due to the same service offers continuing, with few changes for individuals using the services. The main changes will be to the commissioning arrangements which will bring together funding of current same/ similar services. This should enable future services to take a more consistent countywide approach and for resources to be used more flexibly and allocated where they are most needed. The impacts will be monitored via contract monitoring meetings by all funding partners.

## **Climate Change Impact Assessment**

20. Hampshire County Council utilises two decision-making tools to assess the carbon emissions and resilience impacts of its projects and decisions. These tools provide a clear, robust, and transparent way of assessing how projects, policies and initiatives contribute towards the County Council's climate change targets of being carbon neutral and resilient to the impacts of a 2°C temperature rise by 2050. This process ensures that climate change considerations are built into everything the Authority does.
21. An initial climate change assessment has taken place, and it is considered that the tools were not applicable due to the nature of this report being a financial one, amending or proposing budgets for programmes and individual schemes and therefore does not require a climate change assessment.

## **Conclusions**

22. That the Executive Member for Adult Services and Public Health gives approval for a grant of up to £471,786 to the OPCC over a maximum seven year period, for the delivery of Rape and Sexual Assault Counselling Service.
23. That the Executive Member for Adult Services and Public Health gives approval for a grant of up to £117,600 to the OPCC over a maximum seven year period, for the delivery of Independent Sexual Violence Advocacy service.

**REQUIRED CORPORATE AND LEGAL INFORMATION:**

**Links to the Strategic Plan**

<b>Hampshire maintains strong and sustainable economic growth and prosperity:</b>	No
<b>People in Hampshire live safe, healthy and independent lives:</b>	Yes
<b>People in Hampshire enjoy a rich and diverse environment:</b>	No
<b>People in Hampshire enjoy being part of strong, inclusive communities:</b>	Yes

**Other Significant Links**

<b>Links to previous Member decisions:</b>	
<u>Title</u>	<u>Date</u>
<b>Direct links to specific legislation or Government Directives</b>	
<u>Title</u>	<u>Date</u>

<b>Section 100 D - Local Government Act 1972 - background documents</b>	
<p>The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)</p>	
<u>Document</u>	<u>Location</u>
None	

## **EQUALITIES IMPACT ASSESSMENT:**

### **1. Equality Duty**

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

### **2. Equalities Impact Assessment:**

**Geographic Impact** - All Hampshire

**Engagement/Consultation** – Yes

#### **Details of Engagement/Consultation**

Stakeholder consultation was carried out in April 2021 via an online survey. The respondents were from people who had used ISVA services, professionals who have or are working in services, professionals who refer clients or professionals with an interest in services. 48.8% of responders agreed with the proposal to bring existing services together, 27.9% did not agree and 23.3% neither agreed nor disagreed/other. Of those professionals referring to the service, 90.9% found it easy to refer to the service, 9.1% did not find it easy.

Respondents also commented on having a single point of access, easier referral pathways and providing additional staff across the county.

## **Additional Information**

Most of the impacts recorded for these services are neutral due to the same service offers continuing, with few changes for individuals using the services. The main changes will be to the commissioning arrangements which will bring together funding of current same/ similar services. This should enable future services to take a more consistent countywide approach and for resources to be used more flexibly and allocated where they are most needed. The impacts will be monitored via contract monitoring meetings by all funding partners.

## **Overview Statement**

### **1. Age**

**Public Impact** - Positive

**Staff Impact** - Neutral

#### **Decision Rationale**

The new ISVA and RASAC services will bring together existing services into one contract and be an all age service available to adults, children and young people. The provider will have a pool of workers including CYP ISVAs to ensure that individuals are matched appropriately with a worker according to their age and will be offered relevant and appropriate support according to their needs.

### **2. Disability**

**Public Impact** - Neutral

**Staff Impact** - Neutral

#### **Decision Rationale**

In the last quarter, of 174 ISVA referrals, 21 had a physical or sensory disability, 12 had a learning disability, 7 had a long term condition and 83 had a mental health condition.

In the last quarter, of 235 RASAC referrals (not including NHSE&I), 13 had a physical or sensory disability, 13 had a learning disability, 74 had a mental health condition, 20 had multiple disabilities. The new ISVA and RASAC services will bring together existing services into one contract and will continue to be accessible to people with disabilities. The provider will ensure services are accessible according to individual need and will offer relevant and appropriate support.

### **3. Gender Reassignment**

**Public Impact** - Neutral

**Staff Impact** - Neutral

#### **Decision Rationale**

The service will continue to respect the diversity of local communities and provide services in a safe environment free from discrimination where all individuals are treated fairly, with dignity and respect appropriate to their needs. Where people are identified they will continue to be supported appropriately and signposted to appropriate groups locally.

### **4. Pregnancy & Maternity**

**Public Impact** - Neutral

**Staff Impact** - Neutral

**Decision Rationale**

Pregnancy is a risk factor for individuals accessing this service, those affected will be supported appropriately. However changing commissioning arrangements for these services should not impact on the support available for this protected characteristic group.

**5. Race**

**Public Impact** - Neutral

**Staff Impact** - Neutral

**Decision Rationale**

The service will continue to respect the diversity of local communities and provide services in a safe environment free from discrimination where all individuals are treated fairly, with dignity and respect appropriate to their needs. Race and cultural issues will be taken into account to ensure the most appropriate service and support is offered. Other than White British (67.2%), the largest numbers accessing the ISVA service in the last quarter were White European/Irish/Other (2.3%), African/Caribbean/Black British (4.6%) and Asian/Asian British (0.6%).

**6. Religion or Belief**

**Public Impact** - Neutral

**Staff Impact** - Neutral

**Decision Rationale**

The service will continue to respect the diversity of local communities and provide services in a safe environment free from discrimination where all individuals are treated fairly, with dignity and respect appropriate to their needs. Religion and beliefs will be taken into account to ensure the most appropriate and suitable support is offered.

**7. Sex**

**Public Impact** - Neutral

**Staff Impact** - Neutral

**Decision Rationale**

ISVA and RASAC services will continue to support both women and men who who have experienced rape, sexual abuse, assault, violence or sexual exploitation at any point in their lives. In the last quarter, only 4.6% of those who accessed the ISVA service were men but a male ISVA will continue to be available for anyone using the service.

**8. Sexual Orientation**

**Public Impact** - Neutral

**Staff Impact** - Neutral

**Decision Rationale**

In the last quarter, 9.2% of people referred into the ISVA service, identified themselves as Lesbian, Gay or Bisexual. However, an additional 44% either did not state or identified as Other. Both the ISVA and RASAC services will continue to support people in this protected characteristic group to ensure the most appropriate service and support is offered and signpost to other appropriate services.

## **9. Marriage & Civil Partnership**

**Public Impact** - Neutral

**Staff Impact** - Neutral

### **Decision Rationale**

Both the ISVA and RASAC services will continue to support people in this group to ensure the most appropriate service and support is offered.

## **10. Poverty**

**Public Impact** - Neutral

**Staff Impact** - Neutral

### **Decision Rationale**

Both the ISVA and RASAC services will continue to support people in this group to ensure the most appropriate service and support is offered and that individuals are signposted to other services for further support where appropriate.

## **11. Rurality**

**Public Impact** - Neutral

**Staff Impact** – Neutral

### **Decision Rationale**

The new services will continue to offer support across all areas of the county through a variety of methods and will be contactable via helpline, email, website and social media. They will also continue to offer face to face services which people can access easily across all areas of the county via private or public transport.

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## HAMPSHIRE COUNTY COUNCIL

### Decision Report

<b>Decision Maker:</b>	Executive Member for Adult Services and Public Health
<b>Date:</b>	21 September 2021
<b>Title:</b>	Grant to Office of the Police and Crime Commissioner (OPCC) for Appropriate Adult Service
<b>Report From:</b>	Director of Adults' Health and Care

**Contact name:** Jason Norum

**Tel:** 07545 415218

**Email:** Jason.norum@hants.gov.uk

#### Purpose of this Report

1. The purpose of this report is to seek approval from the Executive Member for Adult Services and Public Health to provide a grant to the Office of the Police and Crime Commissioner (OPCC) to contribute to the funding of an Appropriate Adult Service for Hampshire, Isle of Wight and Southampton. The proposed total value of the grant for a 5-year period is £386,085.

#### Recommendation(s)

2. That the Executive Member for Adult Services and Public Health approves a grant of £386,085 to the OPCC for a 5-year period to contribute to the funding of an Appropriate Adult Service for Hampshire, Isle of Wight and Southampton.

#### Executive Summary

3. This report seeks to;
  - Set out the background and context to contribute funding to the OPCC for an Appropriate Adult Service for Hampshire, Isle of Wight and Southampton.

#### Contextual information

4. As stated within the 'Appropriate Adult PCC-Local Authority Partnership Agreement (England)', Appropriate Adults help ensure children and vulnerable adults are treated fairly when the police suspect them of committing an offence. They reduce the risk of miscarriages of justice as a result of evidence being obtained from vulnerable adults and children in ways which, by virtue of their vulnerability, might lead to unsafe convictions.

5. Appropriate Adults are required whenever mentally vulnerable adults are detained in custody. However, there is no statutory provision for vulnerable adults.
6. The role of Local Authorities in the provision of Appropriate Adult service to vulnerable adults is described in the Home Office document 'Appropriate Adult PCC-Local Authority Partnership Agreement (England)'.
7. The County Council previously held the contract for the Appropriate Adult Service with contributions from other parties. It was agreed going forward that it would be appropriate for the OPCC to enter into the contract for the Appropriate Adult Service with other parties including Hampshire County Council contributing.
8. Prior to the existence of a contracted Appropriate Adult service, the role of Appropriate Adult was ordinarily undertaken by qualified social workers, employed by the County Council.
9. The Police determine whether an adult is a vulnerable adult using the standards set out in PACE, Code C. The Police would then request an Appropriate Adult from the provider.
10. Custody Suites have NHS funded Liaison and Diversion teams, which support vulnerable adults but don't act as Appropriate Adult: Liaison and Diversion services identify people who have mental health, learning disability, substance misuse or other vulnerabilities when they first come into contact with the criminal justice system as suspects, defendants or offenders. The service can then support people through the early stages of criminal system pathway, refer them for appropriate health or social care or enable them to be diverted away from the criminal justice system into a more appropriate setting, if required.
11. Her Majesty's Inspectorate of Constabulary (HMIC): [Welfare of vulnerable people in police custody](#) (2015) reiterates the legal requirement for custody staff to identify and contact an appropriate adult as soon as practicable and without delay, so that all children and mentally disordered or otherwise mentally vulnerable adults have one with them during the custody process and any interviews.
12. The role of the Appropriate Adult is to:
  - Ensure that the detained person understands their rights and that appropriate adults have a role in protecting their rights;
  - Support, advise and assist the detained person, particularly while they are being questioned;
  - Observe whether the police are acting properly, fairly and with respect for the rights of the detained person – and to tell them if they think they are not; and
  - Assist with communication between the detained person and the police.

13. The Appropriate Adult service in 2019 supported 1325 vulnerable adults, 1214 vulnerable adults in 2020 and 700 vulnerable adults in the first 6 months of 2021.

## **Finance**

14. It is proposed that a grant totalling £386,085 to cover a 5-year period, is allocated to the OPCC to contribute to an Appropriate Adult Service.
15. This financial commitment represents the Adults Health and Care contribution to the provision, it is a cash limited sum and will not exceed the amounts set out in paragraph 21 and as laid out in the terms of the grant agreement. Additional contributions to the OPCC will be made by Southampton and Isle of Wight Local Authorities.
16. A grant agreement would be issued to the OPCC and it will have conditions that enable the County Council to require repayment of the award or any part of it if it remains unspent at the end of the grant period, or if there is a material breach of the grant agreement. This agreement will need to be signed prior to the release of any funds.
17. The grant totalling £386,085 will be paid as an annual contribution to the OPCC:
- Year 1 – 3 - £69,362 per annum
  - Year 4 – 5 - £89,000 per annum subject to a review at the end of Year 3
18. Funds would be issued in 6 monthly instalments.
19. This is a continuation of an existing service and funding for this grant has been identified within the existing recurrent Adult Health and Care budget.

## **Performance**

20. The OPCC will closely monitor the delivery and success of the provision throughout the grant period to ensure the aims and objectives of the provision are being met and that the Grant Agreement is being adhered to.
21. The OPCC will provide the County Council with a copy of all Appropriate Adult contract monitoring reports on its use of the Grant and delivery of the provision on a regular basis.

## **Equalities Impact Assessment**

22. The Appropriate Adult service would have a positive impact on vulnerable groups in that it protects their rights and welfare when arrested or making statements to the Police as witness or victim of crime.

23. The National Appropriate Adult Network (NAAN) [National Standards](#) give detailed guidance around diversity and being compliant with all the requirements of, and the principles behind the Equalities Act 2010. (See Standard 3.4).

### **Climate Change Impact**

24. Hampshire County Council utilises two decision-making tools to assess the carbon emissions and resilience impacts of its projects and decisions. These tools provide a clear, robust, and transparent way of assessing how projects, policies and initiatives contribute towards the County Council's climate change targets of being carbon neutral and resilient to the impacts of a 2°C temperature rise by 2050. This process ensures that climate change considerations are built into everything the Authority does.
25. The grant to the OPCC has been assessed against the two decision-making tools which are designed to assess impacts on climate change and carbon emissions. No impacts have been identified.

### **Conclusions**

26. That the Executive Member for Adult Services and Public Health approves a grant of £386,085 to the OPCC for a 5-year period to contribute to the funding of an Appropriate Adult Service for Hampshire, Isle of Wight and Southampton.

**REQUIRED CORPORATE AND LEGAL INFORMATION:**

**Links to the Strategic Plan**

<b>Hampshire maintains strong and sustainable economic growth and prosperity:</b>	no
<b>People in Hampshire live safe, healthy and independent lives:</b>	yes
<b>People in Hampshire enjoy a rich and diverse environment:</b>	no
<b>People in Hampshire enjoy being part of strong, inclusive communities:</b>	yes

**Other Significant Links**

<b>Links to previous Member decisions:</b>	
<u>Title</u>	<u>Date</u>
<b>Direct links to specific legislation or Government Directives</b>	
<u>Title</u>	<u>Date</u>
<a href="#">Appropriate Adult PCC - Local Authority Partnership Agreement</a>	<b>31/07/2018</b>

<b>Section 100 D - Local Government Act 1972 - background documents</b>	
<p>The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)</p>	
<u>Document</u>	<u>Location</u>
None	

## EQUALITIES IMPACT ASSESSMENT:

### 1. Equality Duty

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

The County Council will not hold data about the protected characteristics of those vulnerable adults who will access the Appropriate Adult Service. However, the Service will have a positive impact on vulnerable groups in that it protects their rights and welfare when arrested or making statements to the Police as witness or victim of crime. The National Appropriate Adult Network (NAAN) [National Standards](#) give detailed guidance around diversity and being compliant with all the requirements of, and the principles behind the Equalities Act 2010. (See Standard 3.4)

## HAMPSHIRE COUNTY COUNCIL

### Decision Report

<b>Decision Maker:</b>	Executive Member for Adult Services and Public Health
<b>Date:</b>	21 September 2021
<b>Title:</b>	Savings Programme to 2023 – Revenue Savings Proposals
<b>Report From:</b>	Director of Adults' Health and Care and Director of Corporate Operations

**Contact name:** Sarah Snowdon and Dave Cuerden

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#### Purpose of this Report

1. The purpose of this report is to outline the detailed savings proposals for Adult Social Care and Health that have been developed as part of the Savings Programme to 2023 (SP2023) Programme.

#### Recommendation(s)

2. To approve the submission of the proposed savings options for Adult's Health and Care contained in this report and Appendix 1 to the Cabinet.

#### Executive Summary

3. This report outlines the detailed savings proposals for the Adults' Health and Care Department that have been developed as part of the Savings to 2023 (SP2023) Programme. The report also provides details of the Equality Impact Assessments (EIAs) that have been produced in respect of these proposals and highlights where applicable, any key issues arising from the public consultation exercise that was carried out over the summer and how these have impacted on the final proposals presented in this report.
4. The Executive Member is requested to approve the detailed savings proposals for submission to Cabinet in October and then full County Council in November, recognising that there will be further public consultation for some proposals.

#### Contextual Information

5. Members will be fully aware that the County Council has responded to reductions in public spending, designed to close the structural deficit within

the economy, since the first reductions to government grants were applied in 2010/11 and then as part of subsequent Comprehensive Spending Reviews (CSRs).

6. Whilst in more recent years there have been no reductions in government grant to deal with, what small increases there have been have not been sufficient to cover inflationary increases, coupled with a continued (and growing) underfunding for social care demand pressures.
7. One of the key features of the County Council's well documented financial strategy and previous savings programmes has been the ability to plan well in advance, take decisions early and provide the time and capacity to properly implement savings so that a full year impact is derived in the financial year that they are needed albeit elements of more recent programmes have taken longer to deliver as they become more complex.
8. This strategy has enabled the County Council to cushion some of the most difficult implications of the financial changes which have affected the short term financial viability of some Councils, with eight authorities having been granted exceptional financial support packages by Government in response to unmanageable pressures arising in 2020/21 and 2021/22. Furthermore, the County Council is accounting for the specific financial challenges arising as a result of the Coronavirus pandemic on a non-recurrent basis and expects to meet these challenges within the existing support package from Government, together with funding already set aside for this purpose. This is testament to the strength of the County Council's underlying financial position owing to the success of its service transformation agenda and prudent financial management approach.
9. However, Covid-19 has impacted delivery of both the Transformation to 2019 (Tt2019) and Transformation to 2021 (Tt2021) programmes, with £45m of outstanding savings still to deliver. Whilst sufficient resources have been set aside to cover this delayed implementation, the need to commence the successor programme will require twin-tracked delivery of change programmes, presenting a significant challenge for services. SP2023 will seek to achieve an additional £80m of savings, bringing the total savings to be delivered over the next two years to £125m and cumulatively to £640m in total since 2010.
10. It is recognised that each successive transformation programme is becoming more difficult to deliver as the potential to achieve further permanent cost reductions through early intervention and demand management and prevention approaches is reduced. Given the level of savings already achieved and the shortened timescales for delivery, the SP2023 programme will focus primarily on services that may be reduced or stopped rather than on driving further transformative change, although opportunities for transformation, efficiencies and income generation will of course continue to be pursued.



11. The ongoing impacts of the pandemic continue to present capacity challenges for operational teams and their ability to support transformation programmes has been limited as a result. However, with the acute impacts of the pandemic beginning to recede, existing change programmes in Economy, Transport and Environment, Adults and Children's social care will continue to be progressed alongside delivery of the SP2023 programme.
12. The announcement of a further single year Spending Review covering the period to March 2022 has placed the County Council in a very difficult position in terms of future financial planning. Given the lack of any certainty after this period, the County Council has had no choice but to assume that savings required to meet a two-year gap of at least £80m will be required by April 2023 as we cannot take the risk of delaying the programme until 2024. Furthermore, the financial constraints created by Covid-19 mean that there will be no funding available to cash flow a savings programme beyond April 2023.
13. The business as usual deficit in 2022/23, forecast to be £40.2m, has been provided for and will be drawn from the Budget Bridging Reserve in line with our normal strategy. However, given the current medium term deficit due to Covid-19 pressures and the resulting financial response package, which uses up all available financial flexibility and still requires significant additional government funding, it is critical that SP2023 is delivered by 1 April 2023.
14. Departments have looked closely at potential opportunities to achieve the required savings and unsurprisingly the exercise has been extremely challenging because savings of £560m have already been driven out over the past eleven years, and the fact that the size of the target (a further 10% reduction in departmental cash limited budgets) requires a complete "re-look"; with previously discounted options potentially having to be re-considered. It has been a significant challenge for all departments to develop a set of proposals that, together, can enable their share of the SP2023 Programme target to be delivered.
15. The County Council undertook an open public consultation called *Serving Hampshire – Balancing the Budget* which ran for six weeks between 7 June and 18 July. The consultation was widely promoted to stakeholders and residents and asked for their views on ways the County Council could balance its budget in response to continuing pressures on local government funding, and still deliver core public services.
16. The consultation was clear that a range of options would be needed to deliver the required £80m of savings by 2023. Therefore, whilst each option offers a valid way of contributing in part to balancing the budget – plugging the estimated £80m gap in full will inevitably require a combination of approaches. For example, the Information Pack illustrated the amount of savings that would still be required even if council tax was increased by up to 10%. It explained that the £80m estimated budget shortfall took into account an assumed increase in 'core' council tax of 1.99% and an increase in the

Adult Social Care Precept of 2% in both 2022/23 and 2023/24. The Pack also explained that if central government were to support changing local government arrangements in Hampshire, savings would still take several years to be realised. Residents were similarly made aware that the use of 'spare' reserves would only provide a temporary fix, providing enough money to run services for around 14 days.

17. As the consultation feedback confirms, a number of different approaches are likely to still be needed to meet the scale of the financial challenge. Consequently, the County Council will seek to:
- **continue with its financial strategy**, which includes:
    - **targeting resources** on the most vulnerable adults and children
    - **using reserves carefully** to help meet one-off demand pressures
  - **maximise income generation** opportunities;
  - **lobby central government** for legislative change to enable charging for some services;
  - **minimise reductions and changes to local services** wherever possible, including by raising council tax by 3.99%;
  - consider further the opportunities for **changing local government arrangements** in Hampshire;
  - Consider further the opportunities around **devolution of financial powers** in response to the Government's County Deal and levelling up agenda.
18. Executive Members and Chief Officers have been provided with the key findings from the consultation to help in their consideration of the final savings proposals for this report. Responses to the consultation will similarly help to inform the decision making by Cabinet and Full Council in October and November of 2021 on options for delivering a balanced budget up to 2023/24, which the Authority is required by law to do.
19. In addition, Equality Impact Assessments have also been produced for all of the detailed savings proposals and these together with the broad outcomes of the consultation and the development work on the overall SP2023 Programme have helped to shape the final proposals presented for approval in this report.

## **Budget Update**

20. Members will be aware that 2019/20 represented the final year of the previous multi-year Spending Review period. Single year Spending Reviews were undertaken for 2020 and 2021 due to the significant levels of economic and fiscal uncertainty associated with the UK's departure from the European Union and impacts of the Coronavirus pandemic respectively. The Government's decision to suspend multi-year budget planning and revert to

annual spending rounds for most departments means that the prospects for local government finance beyond 2021 remain uncertain.

21. In recent years, significant lobbying of the Government has been undertaken by Hampshire and the wider local government sector in order to ask them to address the financial pressures we are facing and to convince them to provide an early indication of the financial resources available to local authorities over the medium term.
22. At the time of writing, there has been no announcement from the Government regarding the 2021 Spending Round. Members will be briefed on the detail of the Spending Round as part of the updated Medium Term Financial Strategy when available.

### **Savings Programme to 2023 – Departmental Context/Approach**

23. The SP2023 proposed budget reduction of **£40.6m** (or 10%) represents a significant challenge for a department combining Adult Social Care and Public Health. The Department's cumulative budget reduction since 2010/11 would be £283m on completion of SP2023. The scale of this reduction also needs to be seen within the context of the County Council's wider budgetary position, outlined above, the continued and increasing demand and cost pressures alongside the potential longer-term impact of Covid-19, the financial challenges being experienced by NHS organisations which have a direct bearing on social care pressures, increasing expectations and greater levels of regulation especially linked to quality.
24. The SP2023 savings target will challenge the Department like never before (see following sections) and it is inevitable that there will be impacts on front-line services. That said, the programme would be taken forward carefully and sensitively. We will look to build on past performance that has resulted in positive service transformation and innovation (including multi-million £ investment in Technology Enabled Care and modern Extra Care housing) alongside further efficiencies and service reductions. Additionally, the strengths-based way of operating that the Department has been increasingly working to over the last decade continues to improve service user independence and in turn has helped to limit the cost of paid for care packages.

### **Public Health – Context**

25. In addition to the Balancing the Budget Consultation process for SP2023, the County Council has continued to undertake stage 2 consultations for Transformation to 2021 proposals. Final decisions on savings proposals are then considered by the relevant Executive Member before final implementation.
26. Over the Summer stage 2 consultations have been taking place with respect to Public Health saving proposals and as a result of the feedback provided, it

has been necessary to re-consider the position on Public Health as set out in the following paragraphs.

27. Since Public Health became part of local government's responsibilities in 2013, spend on public health has been met in full by a ring fenced grant provided by the government. Given this position, whilst the real value of the grant has reduced over the years, no savings targets had been set for Public Health by the County Council up until the Tt2021 Programme (Tt2021).
28. As part of the early planning of the Tt2021 Programme, it was anticipated that the ring fence for the Public Health grant would be removed and that Public Health spending would be treated in line with all other council spending and receive a proportion of the savings target for that programme.
29. It was highlighted at this time that there was a risk that the Public Health ring fence would remain and that it would therefore be difficult to achieve savings in this area whilst maintaining the overall value of public health spend against the grant.
30. At the present time, the ring fence for the Public Health grant remains intact and there is no indication that this will be removed in the near future. In order to try to achieve the Tt2021 savings for Public Health of £6.8 million, it was agreed that the County Council would prioritise those services across the entire council that deliver Public Health outcomes. As a result it has been identified that the ring fenced grant would be used to fund parts of existing services, in particular in Children's Services and Adults' Health and Care, that provide Public Health outcomes in line with the legislation and thereby reductions in current Public Health spending would be implemented. This process is known as re-badging.
31. Following a stage two consultation exercise on the proposed changes to Public Health spending for Tt2021, there has been feedback from Public Health England and healthcare professionals around some of the savings proposals and discussions have also taken place with Public Health England about the nature of the changes and the rationale that sits behind them.
32. It is the County Council's view, in line with the legislation, that the Director of Public Health and the Chief Financial Officer have responsibility for verifying that the ring fenced grant is used for appropriate public health outcomes. The County Council is currently reviewing the results of the stage 2 consultation and this will be reported together with recommendations to the Health and Adult Social Care Select Committee and on to the Executive Member for final decision. We will continue to discuss the position with Public Health England in light of the overall consultation feedback.
33. Whilst this deals with the savings within Public Health services themselves, we have also received further clarification from Public Health England on what spend can legitimately be charged against the ring-fenced grant. In particular, they have stated that Public Health must be the primary purpose of the

expenditure, and that consequential health outcomes from other service spend are not admissible. Spend on Country Parks therefore could not be charged against the grant since the health benefits are consequential to the main purpose of the service provision.

34. Given this clarified guidance, officers have reviewed the potential options for re-badging of spend in other Departments and have concluded that re-badging proposals of only £3.128m are admissible against the total savings of £6.8m, meaning that there is effectively a shortfall of £3.672m against the Tt2021 savings proposals. This shortfall will apply irrespective of the eventual decisions made by the Executive Member following the consultation.
35. This re-badging represents the maximum that can be achieved against Public Health spend at the present time and therefore raises significant concerns about the proposed savings in Public Health spend for the SP2023 programme as any further savings against the ring fenced grant could only be achieved if further savings could be made against the mandated Public Health outcomes and that these could then be re-badged against other County Council services.
36. Given the current position of the Tt2021 Programme, the clarified guidance from PHE and the work already completed to look at legitimate re-badging opportunities, it is clear that it will not be possible to achieve any further savings from the Public Health budget for the SP2023 Programme.
37. This therefore means that in addition to the £3.672m shortfall highlighted above, there is a further £4.4m gap in the achievement of savings within the Adults' Health and Care Department, making a total of £8.072m across the two programmes.
38. It is not considered feasible at this stage to propose that further savings within the rest of Adults' Health and Care should be identified to make up this difference as their proposals already rely on a large proportion of new government grant funding in order to meet their target. Similarly, to try to redistribute this saving across all Departments at this stage would not be practical or fair and would be against the disciplined approach that has served the County Council so well over the past 10 years.
39. Members will be aware that the impact of Covid-19 on the care sector has been significant, not just in terms of dealing with the pandemic itself and all of the measures to control infections across both public and private sector homes, but also in respect of the excess deaths in the older persons population and the impact of choices that individuals have made about going into particular care settings at the outset.
40. In financial planning terms, we have predicted that there will be a one off medium term impact of Covid-19 as a result of NHS funded clients coming across to the County Council and as a result of pent up demand within the system that is expected to start to flow through now that restrictions have

been lifted. These known direct impacts however are only expected to last over the medium term and one off funding has already been set aside for this up to the 2023/24 financial year, by which time, growth is expected to have returned to normal levels as a minimum.

41. The other factor to consider is the impact on business as usual growth, which is currently forecast to be £13.5m per annum. During 2020/21 the growth money provided to Adults' Health and Care was not needed and was returned to the Corporate Centre as part of the year end position, but the recurring budget was retained within the Department. Since that time client numbers have continued to be affected by Covid-19 and detailed analysis of packages has been undertaken for the last 18 months to consider whether or not there has been a permanent 're-set' in the growth curve that would mean part of the growth funding could be given up on a recurring basis.
42. Whilst it is incredibly difficult to isolate the underlying trend in social care growth, based on the analysis completed to date, it is predicted that there is sufficient underutilisation of recurring growth across 2020/21 and 2021/22 to contain the £8.072m of required savings. However, this in no way undermines the longer term ongoing pressure that Adult Social Care potentially faces from future increases in complexity of clients and demand for services.
43. It is therefore proposed that the unmet Public Health savings totalling £8.072m is met from this recurring reduction in growth from 2023/24 onwards, which is in keeping with the discipline that every Department should meet its savings target in full as part of every savings programme.
44. It must be stressed however that this represents a reduction in demand pressures rather than savings in the cost of the Adult Social Care service itself. It is also important to note that this is a potentially high risk option given that it is difficult to predict with any certainty the future growth between now and April 2023 and be able to accurately separate trends from the temporary impact caused by Covid-19 factors.
45. Detailed monitoring of this position will continue to be undertaken by the Chief Financial Officer as part of the monthly financial resilience meetings that are held with the Director of Adults' Health and Care and should there be any significant change in the forecasts these will need to be re-considered by Cabinet and County Council with respect to the SP2023 Programme.

### **Adult Social Care - Context**

46. The Adult Social Care element of the savings target amounts to **£36.2m**, in addition to the reduction in demand growth funding of £4.4m to offset the Public Health SP2023 target as outlined above in paragraph 37. Six potential issues in particular are impacting on the size of this challenge or could add to it. These potential issues include:
  - service demand and complexity levels (includes also higher service prices);

- continued elements of non-recurrent government grant support;
  - the future availability of additional funding for Social Care prior to 2023/24;
  - the concurrent running of three large-scale savings programmes alongside 'business as usual' and Covid-19 pressures;
  - the challenge of forecasting the long-term impact of Covid-19;
  - the continued uncertainty regarding future funding for the service.
47. Despite the recent reduction in care volumes due to the pandemic we are expecting to see demand rates increase in the longer term, albeit from a reduced baseline. This includes the growth in the numbers of adults with eligible care needs, including an increase in the number of vulnerable/frail older people (particularly those aged 85 or above, whose population in Hampshire is expected to increase by 8.9% between 2021 and 2024), growing complexity of care needs e.g. the increasing prevalence of multiple conditions including higher levels of dementia, and sustained increases in the numbers and costs associated with supporting children with disabilities and complex needs transitioning to adulthood. Other factors such as regulation and the national living wage are also impacting on direct provision and the independent sector in terms of increasing inflationary pressures. These pressures are not unique to Hampshire and are representative of the position nationally.
48. To help address the range of strategic Social Care financial challenges being faced, the Government has previously made available relatively modest additional non-recurrent funding to local authorities for Adult Social Care. These grants have allowed transformational programmes to be progressed aimed at reducing cost exposure in the long term. However, they do not address the anticipated medium term increases in demand and like many local authorities, the County Council has had little choice but to use a major element of this funding to offset the financial impact of increases in recurring pressures coupled with reductions in baseline funding. This will be no different as we progress toward 2023.
49. As again there has only been a single year spending review for 2021 there continues to be uncertainty in the medium to long term and there remains a risk that during the timeframe of the SP2023 programme the department will face the challenge of further losses in funding whilst delivering £40.6m of savings. With the anticipated but long-awaited changes in funding for Adult Social care still unknown this adds a layer of further uncertainty as we go into the future.
50. At the time of writing, the Adult Social Care Green Paper (or an appropriate alternative future funding mechanism) is still awaited and as such it remains unclear as to what financial impact this will have for all upper tier Authorities. Needless to say, it is highly likely that it will have a significant effect on the future funding for adult social care and very possibly during the timeframe of

SP2023, but the form this could take is unknown. What is known is that the continued delay of the Green Paper (or alternative) is making it very difficult for local authorities to forward plan financially with any degree of certainty.

51. In addition to the above, the Department is concerned that a risk exists that we see a return to previous service pressure trends. Furthermore, it is currently unknown what additional impact Covid-19 will have in the longer term on the viability of the sector where it could further affect rates of home closures and exacerbate workforce challenges both of which will have a direct consequence on the rates paid for care by the County Council. If these market issues are exacerbated by Covid-19 it will put a greater risk on the targeted transformational savings. In the short term the Covid-19 pressure will likely be ameliorated by the specific funding set aside by the County Council to mitigate the impact of Covid-19. This in turn will assist in maintaining the Department's cost of change balances thereby ensuring that there is sufficient investment available alongside the cash-flow phasing to support the activity that aims to deliver the SP2023 recurring budget reductions.
52. It is anticipated, within the MTFS that local authorities will retain the ability to raise a minimum of an additional 2% Council Tax under a specific precept for Adult Social Care beyond 2021/22. Furthermore, one of the saving proposals included within this report is predicated on additional funding being made available nationally for Adult Social Care. Part of this saving has already been achieved through the ability to raise the precept to 3% in 2021/22. There is no certainty of a repeat of this in 2022/23 and with no further grant funding announced to date this represents a risk. As highlighted previously a single year spending review means that this is not a certainty and therefore represents a key risk within the SP2023 proposals.
53. Whilst the Department is planning for the SP2023 savings described in this report it is concurrently in the midst of delivering the final year of Tt2019 savings, and final two years of Tt2021. As at July 2021 over £51m of the £55.9m Tt2019 target had been achieved leaving £4.5m still to secure. At the same point in time, after adjusting for the proposed change to the delivery of Public Health Tt2021 savings, there remains £24.7m of Tt2021 savings still to secure. The remaining £29.2m combined represents the most difficult element to achieve as this mainly relates to reducing expenditure on care packages against a backdrop of increasing demand and cost pressures as highlighted. As many of the SP2023 savings are an extension upon the Tt2019 and Tt2021 work programmes the Department faces a very challenging forward period. We forecast that by the end of the current financial year a further £11.5m of savings will be achieved leaving £17.7m to be delivered from the Tt2019 and Tt2021 programmes from 2022/23.
54. Although there are many significant risks, both in the short to medium and long term, as highlighted above, the Department is confident from the information currently held that during the timeframe of SP2023 the savings can be achieved and the expected pressures managed within the available funding including the overall reduction in growth funding of £8.072m. Although



it should not go unnoticed that this is a highly volatile area of Council spend that can be significantly impacted by both changes in demand / complexity of clients and funding available, both of which are very challenging to predict at this uncertain time.

55. The annual ADASS Spring Survey report, published earlier this year, identifies the critical funding challenges being faced by all local authorities, both in-year and in the near future, in the provision of adult social care. These challenges are being felt too in Hampshire. However, currently we have not built in any assumptions regarding the impact of the Green Paper (or alternative) therefore there may, as a result, be both further opportunities and significant challenges that the Department may face over the SP2023 timeframe.

### **Savings Proposals Government & Corporate Funding**

56. The biggest block of the Adult Social Care targeted savings proposals, some £15m, is in anticipation that additional recurring funding will be available by 2023/24. It should be noted that over £7m has already been made available through the increase in the Adult Social Care precept by 1% to 3% in 2021/22. Should this be repeated in 2022/23 or a separate additional recurrent grant be received this element of the programme will be complete. It is currently unknown if either of these will be included within the outcome of the 2021 Spending Review, although there continues to be national recognition of increased long-term demand and market pressures in Adult Social Care. These pressures are generally accepted as being derived from the unsustainable nature of the existing funding model for adult social care (linked to demography/complexity pressures, provider cost growth and care sector recruitment/retention issues) and could be potentially further exacerbated by the, as yet unknown, longer term impacts of the Covid-19 pandemic. This strategy of using additional funding reduces the impact of savings that would otherwise need to be achieved and is consistent with the approach taken for Tt2021. A further £2m saving is anticipated from reducing planned for and funded demand during 2021/22 and 2022/23. This demand will be avoided through maximising improvements in prevention and demand management practises.
57. Subsequent to the decision to not progress the £4.4m SP2023 and £3.672m Tt2021 savings within Public Health as outlined in paragraph 37, the decision has been taken to remove, from the Adults baseline funding, one tranche of £8.072m growth funding on a recurrent basis from 2023/24. The £4.4m for SP2023 has been combined with the £2m outlined above as one £6.4m saving proposal for SP2023 reflecting the total reduction in current and future demand. The £8.072m is anticipated, based on current projections of known future pressures, to be achievable due to the reduction in care volumes recorded during 2020/21, which helped support the reported departmental underspend in the same year. Whilst there will continue to be further growth it is currently anticipated that this will be managed by all other future year growth funding remaining at £13.5m.

## Younger Adults Services

58. The next biggest targeted savings proposals, some £8.7m, would come from **Younger Adults** services as the Department looks to continue the successful journey started ahead of Tt2017 and built upon throughout Tt2019 and Tt2021 to embed a strengths-based approach and move increasingly away from institutional, long-term care settings, instead supporting people into more flexible, more modern ways of living that provide much greater independence for service users with learning disabilities, physical disabilities and/or mental health needs. This would include:

- creation of additional Extra Care accommodation to move people on from higher-cost residential care (this would require significant capital investment of approx. £15m to be funded through prudential borrowing, with repayments accounted for within the proposed saving). Due to the nature of this proposal requiring some additional capital works over £1m of the saving is profiled to be delivered in 2024/25;
- creating more opportunities for employment for younger adults with disabilities including supported employment;
- enabling people to do more for themselves, including greater adoption of Technology Enabled Care, and developing opportunities for people to find a greater level of support from within their local communities and through volunteer schemes;
- extension of transition (Special Educational Needs and Children's Services) to further manage family expectations promoting independence;
- extension of current work on reducing challenging behaviour (Least Restrictive Practice) which will lead to reduced support costs.

## Older Adults Services

59. The third block of targeted savings proposals covers £6.9m which relates to **Older Adults** as the Department looks to further transform its services for older people. There will be a continued focus on strengths-based solutions, intermediate care and reablement to improve the health and wellbeing of residents so that increasing numbers can remain in their own homes, living as independently as possible, with increased wellbeing. This approach aims to see lower or reduced needs following a short-term intervention, enabling, wherever possible, people to return home with appropriately sized care packages as opposed to being transferred to residential and nursing care provision at current levels of demand. This would include:

- maximising Discharge to Assess arrangements from hospital stay, increasing the availability of step up options from the community including increased use of In-House (HCC Care) settings, and working with the provider market as part of a refreshed Residential and Nursing strategy;

- a reduction in direct placements into long-term residential settings;
- a revitalised day services offer to provide carer respite and reduce need for paid for care;
- proactive enhanced support to amplify opportunities to identify and mitigate causes of crisis events before they occur by working with a range of partner organisations;
- further embedding the Strengths Based Approach to reduce demand for domiciliary care and ensure individuals' needs are met by other means where appropriate, including timely review and right-sizing of care packages following hospital admission to maximise independence, as well as increased use of Technology Enabled Care.

### **In-House Services (HCC Care)**

60. The fourth block of targeted savings covers £2.3m relating to **In-House services** (HCC Care), building on the service review and efficiencies delivered as part of Tt2021. The additional SP2023 savings would be achieved through:

- implementation of the Discharge to Assess model within HCC Care, with planned income generated through delivery of 80 beds on behalf of the CCG (less the cost of alternative provision for long-term beds subsequently required to be purchased from the private sector).

### **Headquarters Services**

61. The fifth block of targeted savings proposals (£1.1m) is through further efficiencies and income delivered within **Headquarters services**. Proposed savings include:

- reviewing all local and county-wide grants directly funded by Adult Social Care to voluntary, community and partner organisations, as part of our Demand Management and Prevention approach;
- reduction in funding for the Social Inclusion contract for commissioned non-statutory services that support people who are homeless or at risk of homelessness;
- implementation of Technology Enabled Care that can be shown to contribute to integrated working with the NHS, for example people with an early diagnosis of Dementia and those at risk of falls;
- income generated through sold services within Learning and Development, furthering initiatives begun in Tt2021;
- other efficiencies including development of dedicated in-house Learning and Development training venue/s, and reduction in IT costs.

## Governance and Assurance

62. The final targeted savings area, £0.2m, relates to **Governance and Assurance** staffing budget efficiencies, the detail of which will be finalised following the completion of a review and restructure of the function, building on Working Differently savings already achieved.

## Key Challenges/Risks

63. In Adults' Health and Care, as in other departments, we already have many of the solutions to the challenges we face. Managing service demand, whilst appropriately meeting eligible needs (against the backdrop of a reducing budget) is highest among these but is becoming increasingly challenging. Whilst the baseline volume of care provided reduced sharply in the first half of 2020/21 we have seen demand stabilise then resume within the latter part of the second half of the year in line with previous predictions, in addition to an overall increase in the complexity of clients, (proportionately more dementia needs for example) and higher cost packages and market pressures (in part caused by Covid-19). Whilst this remains broadly manageable the longer-term impact of Covid-19 is difficult to foresee, for example there is a real risk that not only permanent changes in the market will adversely affect the budget but also increased financial hardship and unemployment caused by Covid-19. We could see increased levels of deprivation that impacts the health and wellbeing of the Hampshire population, resulting in further strain on social care. Improved access to insight and analytics will support our approach to tackling these significant challenges, however the risks cannot be underestimated.
64. People with lifelong disabilities and chronic health conditions are living longer. Whilst there are constant developments meaning people are able to live more independently, many do require some level of support for periods of their lives, and in some cases for the whole of their lives. Budget reductions within Younger Adults in particular are therefore likely to impact on largely the same individuals as in previous years. The challenging business as usual and operating environment across all services, concurrent with managing Covid-19 and delivery of three large savings programmes alongside other strategic change (for example CareDirector, our new social care record system due to be implemented in 2022) is substantial and no departmental services are excluded from this. We recognise that social care budgets for both Adults and Children's are under extreme pressure and thus recognise the inescapable risk that there could be a resultant negative impact upon other services of the County Council.
65. Whilst the required savings will be positively pursued, there remain other significant risks. It is recognised that difficult service decisions/changes will need to be made across the programme to achieve the decreased departmental expenditure. There is a risk that a reduction in the Department's service offer may reduce, or may be perceived to reduce, client choice. The Department is mindful of its legal duties and is clear that eligible needs will be

met in the most cost-effective way. The Department will also continue to closely monitor the actions of other local authorities and legal judgements. The impact of decisions on service users will continue to be carefully considered and mitigated where possible. It should be noted that adult social care case law turns upon circumstances in individual cases and as such some areas of risk are by their nature less predictable.

66. Progress and success will require a very thoughtful and careful engagement approach across a myriad of different but important stakeholders. Most important will be the way the Department works with people and their representatives (family, friends) who use services, as well as NHS partners (through the continued development of Integrated Care System arrangements). Positive engagement will enable more co-produced solutions to be secured. This should result in greater levels of independence and/or local support that in turn will help to reduce paid for service costs. Success will be very much dependent on how we continue to change the culture of staff, how we create the optimum working conditions for all staff (including improved productivity linked to the significant investment in mobile technology) and how we continue the journey of re-setting expectations that the public understands, accepts and agrees to.
67. System-wide challenges, exacerbated by Covid-19, are ever-present including integration, Continuing Health Care and dependency on Government/NHS funding for Discharge. There is much ongoing work with our NHS partners at acute hospital, community provider and Clinical Commissioning Group (CCG) level to find new and improved ways of working together, including 'making the money work'. The Department will continue to take forward integration opportunities where they can add most value and improve and simplify existing joint working – taking out cost alongside improving the service user experience. It is recognised that there will continue to be external scrutiny on discharge performance and how the County Council uses the Better Care Fund (and any other future sources of funding support) to protect and enhance social care provision across Hampshire.
68. Linked to this, the £2.3m HCC Care saving proposal, as described in paragraph 60, is dependent on the availability and ongoing receipt of funding from the NHS in respect of Discharge to Assess beds, alongside consideration of implementation costs to deliver the arrangement on a longer term footing within existing settings. Close engagement continues with our NHS partners to work through and finalise the detailed financial arrangements to support ongoing delivery of the current arrangement.
69. Lastly, but by no means least, are the risks relating to our workforce. The cumulative impact of successive large-scale budget reductions on all Adults' Health and Care services, including the frontline, is considerable and will continue to intensify alongside the growing difficulty to recruit and retain staff across the sector, an issue compounded by Covid-19 and the recent opening up of the hospitality sector. The Department will continue to seek to deliver improved and more efficient ways of working, but the scale of the

culture/practice change required in addition to managing business as usual pressures could impact further on the wellbeing and resilience of staff notwithstanding the support measures that have been put in place. Linked to this, the Department's capacity to maintain and improve service quality, levels of safeguarding and clinical safety will be increasingly challenged. Our relationship with the care sector, and in particular Hampshire Care Association – the care sector representative body in the county - throughout the response to the pandemic has seen a positive benefit, yet the sector as a whole remains vulnerable over the coming period and will require critical support and, to a degree, continued nurturing.

### **Summary Financial Implications**

70. The savings target that was set for Adults' Health and Care was £40.6m and the detailed savings proposals that are being put forward to meet this target are contained in Appendix 1.
71. As highlighted above, following subsequent analysis and further discussions, including with Public Health England, it is felt that there are no further opportunities to reduce Public Health spending beyond those savings already in progress for Tt2021. As a result, further savings within Public Health will not be progressed as part of the various saving programmes. The unmet Public Health savings of £8.072m will instead be achieved through a reduction in the growth funding for Adults' Health and Care made possible through the significant reduction in baseline care volumes during 2020/21 as a result of the Covid-19 pandemic. Accordingly, based on current assumptions, this is not expected to adversely affect the achievability of the Adults Health and Care SP2023 target or the timescale that it is forecast to be delivered.
72. The Department is currently forecasting to achieve savings of up to £38.2m of the £40.6m required by 2023/24, the year by which the SP2023 budget reductions would come into effect. The remaining £2.4m, largely from the Younger Adults Extra Care accommodation proposal will be delivered within 2024/25. In cashflow terms, this late delivery requires £2.4m to be supported through available departmental cost of change reserves.
73. The Department has been able to top up its cost of change reserve through both early delivery of the Tt2021 programme and a significant under spend on business-as-usual activity within 2020/21. This has enabled the Department to start 2021/22 with a cost of change balance of £25.9m after adjusting for the commitment under a reciprocal arrangement with the CCG to offset enhanced Better Care Fund contributions in 2020/21.
74. In addition, it is anticipated that the early delivery of SP2023 will yield savings of £10.1m in 2022/23 which will further add to the departmental cost of change balance. Whilst it is inevitable that there will be further requirements from the cost of change over the intervening three years the Department remain confident that more than sufficient resources will be available to

support the cashflow requirement of £2.4m highlighted above in addition to the £4.5m investment required to deliver the SP2023 savings programme. The Department will continue to focus on safely achieving early savings wherever possible to mitigate this need.

75. In summary, it should be highlighted that whilst the Department currently holds a healthy balance within its cost of change reserve and care volumes have not yet recovered to levels pre the pandemic, there still remains significant savings to be delivered for Tt2021 of £24.7m in addition to a residual £4.5m for Tt2019 before the delivery of SP2023. The Department remains confident that all of the required savings will be delivered in accordance with the revised profile post Covid-19. However, the scale of this challenge must not be underestimated, specifically against the back drop of uncertain funding arrangements for social care and the unknown longer term impact of Covid-19 on demand, complexity of clients and changes in the market.

### **Workforce Implications**

76. Appendix 1 also provides information on the estimated number of reductions in staffing as a result of implementing the proposals.
77. Positively, the direct impact of SP2023 plans on the Adults' Health and Care workforce is expected to be minimal with very few staff posts to be at risk. Importantly, this will enable further embedding of the large-scale workforce change and development necessary to achieve the department's Working Differently efficiency aims as part of Tt2021. The few Full Time Equivalent (FTE) posts that may be affected will be within the Department's Care Governance and Quality Assurance function, details of which will be understood when exact plans for the function's operating model (currently in development) have been finalised. It is anticipated that savings from these posts will be achieved through natural turnover where possible. Any balance remaining would need to be managed down in advance of the implementation date.
78. The County Council's approach to managing down staff levels in a planned and sensitive way through the use of managed recruitment, redeployment of staff where possible and voluntary redundancy where appropriate will be continued.

### **Climate Implications**

79. Hampshire County Council utilises two decision-making tools to assess the carbon emissions and resilience of its projects and decisions. These tools provide a clear, robust, and transparent way of assessing how projects, policies and initiatives contribute towards the County Council's climate change targets of being carbon neutral and resilient to the impacts of a 2°C temperature rise by 2050. This process ensures that climate change considerations are built into everything the Authority does.

80. Given that this report deals with savings proposals it is difficult to assess any specific climate change impacts at this stage, but assessments will be undertaken for individual proposals, if appropriate as part of the implementation process.

### **Consultation, Decision Making and Equality Impact Assessments**

81. As part of its prudent financial strategy, the County Council has been planning since June 2020 how it might tackle the anticipated deficit in its budget by 2023/24. As part of the MTFs, which was last approved by the County Council in July 2020, initial assumptions have been made about inflation, pressures, council tax levels and the use of reserves. Total anticipated savings of £80m are required and savings targets were set for departments as part of the planning process for balancing the budget.
82. The proposals in this report represent suggested ways in which departmental savings could be generated to meet the target that has been set as part of the SP2023 Programme. Individual Executive Members cannot make decisions on strategic issues such as council tax levels and use of reserves and therefore, these proposals, together with the outcomes of the *Serving Hampshire - Balancing the Budget* consultation exercise outlined below, will go forward to Cabinet and County Council and will be considered in light of all the options that are available to balance the budget by 2023/24.
83. The County Council undertook an open public consultation called *Serving Hampshire – Balancing the Budget* which ran for six weeks from 7 June to the 18 July 2021. The consultation was promoted to residents and stakeholders through a range of online and offline channels including: the County Council's website, social media channels, Hampshire Perspectives residents' forum and Your Hampshire e-newsletter; in County Council libraries and buildings and on electronic noticeboards in GP surgeries and healthcare settings; via media releases to the local TV, radio and written press; via targeted social media advertising; and through direct mail contact to a wide range of groups and organisations across Hampshire (such as district and parish councils, schools, voluntary and community sector groups and organisations, service providers), which promoted onward dissemination, as well as response. Information Packs and Response Forms were available in hard copy in standard and Easy Read, with other formats available on request. Comments could also be submitted via email, letter or as comments on social media.
84. The consultation sought residents' and stakeholders' views on several options that could contribute towards balancing the revenue budget, and any alternatives not yet considered – as well as the potential impact of these approaches. The consultation was clear that a range of options would be needed to meet the required £80m savings by 2023. For example, the Information Pack illustrated the amount of savings that would still be required even if council tax was increased by up to 10%.



85. The options were:

- Reducing and changing services;
- Introducing and increasing charges for some services;
- Lobbying central government for legislative change;
- Generating additional income;
- Using the County Council's reserves;
- Increasing council tax; and
- Changing local government arrangements in Hampshire.

86. Information on each of the above approaches was provided in an Information Pack. This set out the limitations of each option, if taken in isolation, to achieving required savings. For example, supporting information explained that the £80m estimated budget shortfall took into account an assumed increase in 'core' council tax of 1.99% and an increase in the Adult Social Care Precept of 2% in both 2022/23 and 2023/24. The Pack also explained that if central government were to support changing local government arrangements in Hampshire, savings would still take several years to be realised. Residents were similarly made aware that the use of 'spare' reserves would only provide a temporary fix, providing enough money to run services for around 14 days.

87. Therefore, whilst each option offers a valid way of contributing in-part to balancing the budget – plugging the estimated £80m gap in full will inevitably require a combination of approaches.

88. A total of 2,027 responses were received to the consultation – 1,931 via the Response Forms and 96 as unstructured responses through email, letter and social media.

89. The key findings from consultation feedback are as follows:

- Agreement that the County Council should carry on with its **financial strategy** now stands at 45%, compared with 52% in 2019, and 65% in 2017. This involves targeting resources on the most vulnerable people; planning ahead to secure savings early and enable investment in more efficient ways of working; and the careful use of reserves to help address funding gaps and plug additional demand pressures (e.g. for social care).
- The data suggests that respondents are concerned about the implications of further service changes and charges and increasingly feel that the solution lies with national Government.
- Both data and verbatim comments indicate the respondents want the County Council to **lobby central Government** for further funding and to allow additional charging in a number of areas:

- 87% agreed with lobbying for additional funding to deliver social care services for adults and children
  - 69% agreed with lobbying for increased central government grant funding for libraries
  - 66% agreed with updating the 1964 Public Libraries and Museums Act to enable service modernisation
  - 62% agreed with means testing/ charging for Home to School Transport (HtST)
  - 60% agreed with charging £10 for issuing an Older Person’s Bus Pass
  - 51% agreed with making change to the charging approach for non-residential social services.
- However, there were exceptions, namely that:
    - Most respondents (52%) did not feel that it would be appropriate to lobby for charges relating to Household Waste Recycling Centres (HWRCs)
    - 47% disagreed (compared to 38% who agreed) that councils should be permitted to charge a 25% per journey fare for concessionary travel.
  - A clear majority of respondents (63%) agreed that the County Council should explore further the possibility of changing local government arrangements for Hampshire.
  - No majority view was achieved for any of the other proposals, but the weight of opinion veered slightly towards agreement with:
    - The position that reserves should not be used (48% agreement vs 42% disagreement);
    - That existing service charges could be raised (45% agreement vs 33% disagreement);

And towards disagreement with:

- Introducing new service charges (47% disagreement vs 41% agreement);
  - Reducing or changing services (49% disagreement vs 36% agreement).
- A slight majority of respondents (52%) preferred that the County Council raise **Council Tax** by less than 3.99%. This compared to 21% of respondents whose first choice was to raise council tax by 3.99% and 27% who would choose an increase of more than 3.99%.
  - Suggestions for income generation most commonly related to charges that the County Council could apply. There was also frequent mention of changes to how Council Tax is collected, delivering efficiencies in Council services, ways that the Council could save costs to its operational budget, and suggestions that the County Council could improve its return on investments and adopt more commercial practices.
  - Around half of respondents specified impacts that they felt would arise should the County Council continue with its financial strategy and approve the proposed options. Almost half of these related to the protected equalities

characteristic of age (47%) – most often the effect on children and young people – with impacts on poverty (33%), disability (30%), and rurality (23%) also commonly mentioned. The potential environmental impacts were also noted in a third of the comments submitted (34%). The specific nature of the perceived impacts primarily related to reduction in service quality or availability and the personal financial impacts of increased taxation or charging.

- Efficiency savings were the most common focus of additional suggestions, incorporating staffing, contractor and Member costs, process efficiencies and more effective use of building space.
- The 96 unstructured responses to the consultation, submitted via letter / email or on social media, primarily focussed on the perceived impacts of the proposals, stating concern about reductions to services and the need to focus on reducing costs and lobbying national government for additional funding in preference to raising local taxes.

### **Proposals following consultation feedback**

90. Executive Lead Members and Chief Officers have been provided with the key findings from the consultation to help in their consideration of the final savings proposals. As the consultation feedback confirms, a number of different approaches are likely to still be needed to meet the scale of the financial challenge. Consequently, the County Council will seek to:

- **continue with its financial strategy**, which includes:
  - **targeting resources** on the most vulnerable adults and children
  - **using reserves carefully** to help meet one-off demand pressures
- **maximise income generation** opportunities;
- **lobby central government** for legislative change to enable charging for some services;
- **minimise reductions and changes to local services** wherever possible, including by raising council tax by 3.99%;
- consider further the opportunities for **changing local government arrangements** in Hampshire;
- Consider further the opportunities around **devolution of financial powers** in response to the Government's County Deal and levelling up agenda.

91. The proposals set out in Appendix 1 have, wherever possible, been developed in line with these principles. The majority relate to savings through further demand reduction (for example, changing the process by which it is determined which Older Adults' service is required rather than reduce the type of services available), increased income generation, and working with our supply chain. A large portion are a continuation and/or expansion of successful Tt2021 initiatives already underway, including all of those

proposed for Younger Adults. Only a minority of savings relate to services being stopped as the Department is now at the point where services which continue to be delivered are the minimum statutory requirement.

92. The largest saving proposed is through utilisation of Government funding, assumed to be forthcoming in recognition of demand and market pressures within Adult Social Care, to reduce the impact of savings that would otherwise need to be achieved. Through the development of new and improved Discharge to Assess arrangements within Older Adults and HCC Care services, people will be better enabled to return to their own home following a hospital stay and unnecessary hospital stays and/or long-term residential care placements could be prevented, thereby helping to alleviate system pressures and generate income. Similarly, focus will remain on supporting people's independence across all client groups through maximising strengths-based approaches, including growing our Younger Adults supported accommodation offer and further investment in Technology Enabled Care.
93. For the few services proposed to be stopped/reduced – local and countywide grants (stopped), and Social Inclusion (reduced) - it is important to note that Adults' Health and Care will continue to work closely with partners, including the Districts and Boroughs, the NHS and the Voluntary and Community Sector to meet shared objectives and minimise the impact on local services and individuals, building on the positive relationships developed in recent months through the pandemic. Additionally, the opportunity will remain for grants to be awarded where there is a corresponding further deliverable saving that can fund the initial outlay of the grant. Both proposals will also be subject to Phase 2 public consultation as detailed further in paragraph 97.
94. Following the Executive Member Decision Days, all final savings proposals will go on to be considered by the Cabinet and Full Council in October and November – providing further opportunity for the overall options for balancing the budget to be considered as a whole and in view of the consultation findings. Further to ratification by Cabinet and Full Council, some proposals may be subject to further, more detailed consultation.
95. In addition to the consultation exercise, Equality Impact Assessments (EIAs) have been produced for all the savings proposals outlined in Appendix 1 and these have been provided for information in Appendix 2. These will be considered further and alongside a cumulative EIA by Cabinet and Full Council. The cumulative assessment provides an opportunity to consider the multiple impacts across proposals as a whole and, therefore, identify any potential areas of multiple disadvantage where mitigating action(s) may be needed.
96. Together the *Balancing the Budget* consultation and Equality Impact Assessments have helped to shape the final proposals presented for approval in this report. The EIAs will be periodically revisited throughout the life of SP2023. The department is ever mindful of the cumulative impact of savings proposals on service users, families, staff, and other stakeholders including

voluntary and community services, and will take all necessary steps to work with stakeholders, co-produce designs, and mitigate any negative effects where possible.

97. The Department would look to conduct Phase 2 consultation on detailed options with regards to a small number of service areas as listed below. The specific service change proposals would be subject to further work and confirmation. Both Phase 2 consultations would likely take place next year, most probably from early Spring 2022, and would include:
- Social Inclusion – a reduction in funding for commissioned non-statutory services that support people who are homeless or at risk of homelessness;
  - Demand Management and Prevention – cessation of local and countywide grants directly funded by Adult Social Care to voluntary, community and partner organisations.
98. It is recognised that the above proposals, subject to Phase 2 consultation and decision, could cause disruption to some voluntary, community and partner organisations, while others may be able to expand their reach. Furthermore, funding secured from other sources may sustain delivery by such organisations but may not enable them to meet any additional demands. It is also recognised that Adults' Health and Care or the County Council as a whole are not the only statutory funders of voluntary and community sector provision in Hampshire (other funders include the NHS, District Councils and the Office of the Police and Crime Commissioner), however they may not be able to fully address any funding shortfall and face their own budget pressures. The Department would continue to work with all other statutory parties to maximise and coordinate funding across the voluntary and community sector.
99. As highlighted in paragraph 62, £0.2m of the Department's savings target relates to Governance and Assurance staffing budget efficiencies. The detailed proposal is in development following the recent appointment of a new Head of Service and will be finalised following the completion of a review and restructure of the function, building on Working Differently savings already achieved. The proposal will be subject to consultation with potentially impacted staff prior to decision and implementation.

## **Conclusion**

100. The Savings to 2023 Programme represents the most challenging and significant programme thus far undertaken by Hampshire County Council. The consequences of previous transformational programmes of cost reduction and change has meant that the course previously set remains consistent with the majority of proposals within this report.

101. The delivery of the Savings to 2023 Programme will be in parallel to delivery of ongoing Transformation to 2019 and Transformation to 2021 initiatives and, for that reason, is yet more complicated. There is continued uncertainty over medium term funding, as set out in this report and we still await the publication of a social care Green Paper.
102. In the face of the challenges outlined throughout this report Adults' Health and Care are fully cognisant of duties under the Care Act 2014, as well as the mandate for Public Health services and other requirements. The proposals contained within this report represent realistic and achievable means by which reductions in the budget can be achieved. However, it is recognised that whilst some proposals build upon work already underway which have led to improved outcomes and greater independence for some, other people will experience a reduction in the support and the services available to them. Priority will be provided, wherever possible, to those vulnerable and at greatest risk, whether that be through care needs or risks presented through deprivation, social isolation, lifestyle or other factors.

**REQUIRED CORPORATE AND LEGAL INFORMATION:**

**Links to the Strategic Plan**

<b>Hampshire maintains strong and sustainable economic growth and prosperity:</b>	Yes
<b>People in Hampshire live safe, healthy and independent lives:</b>	Yes
<b>People in Hampshire enjoy a rich and diverse environment:</b>	Yes
<b>People in Hampshire enjoy being part of strong, inclusive communities:</b>	Yes

**Other Significant Links**

<b>Links to previous Member decisions:</b>	
<u>Title</u>	<u>Date</u>
Medium Term Financial Strategy Update <a href="https://democracy.hants.gov.uk/documents/s53375/MTFS%20-%20Cabinet%20FINAL.pdf">https://democracy.hants.gov.uk/documents/s53375/MTFS%20-%20Cabinet%20FINAL.pdf</a>	Cabinet - 14 July 2020 County Council – 16 July 2020
Executive Member for Public Health Transformation to 2021 decision report <a href="#">Appendix 1 (hants.gov.uk)</a>	
<b>Direct links to specific legislation or Government Directives</b>	
<u>Title</u>	<u>Date</u>

<b>Section 100 D - Local Government Act 1972 - background documents</b>	
<p><b>The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)</b></p>	
<u>Document</u>	<u>Location</u>
None	

## **EQUALITIES IMPACT ASSESSMENT:**

### **1. Equality Duty**

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

### **2. Equalities Impact Assessment:**

A full Equalities Impact Assessment has been undertaken for each of the savings options and these are included as a separate appendix to this report (Appendix 2).



## Adults' Health and Care – Proposed Savings Options (Subject to consultation where appropriate)

Ref.	Service Area and Description of Proposal	Impact of Proposal	2022/23 £'000	2023/24 £'000	Full Year Impact £'000	Estimated Staffing Impact FTE
OA-23-1	<b>Older Adults – Residential Care</b> Maximising Discharge to Assess, (D2A) arrangements from hospital and increasing availability of step up options from the community including increased use of HCC Care settings.	D2A Provides individuals with a stabilisation period during which action can be taken to facilitate a return home to live as independently as possible, reducing direct placements into permanent long term residential settings. Full utilisation of day opportunities and establishing links to health and wellbeing through these centres will provide additional support and opportunities to increase individuals' community networks, working in a strengths-based way to increase and maintain their independence, providing support to individuals and their carers. Delayed or reduced admissions to residential care.	5,400	5,400	5,400	0
OA-23-2	<b>Older Adults – Domiciliary Care</b> Robust application of Strengths Based Approach to reduce demand and by ensuring the needs of individuals are met by other means where appropriate.	Eligible needs met through a more personalised approach which will include family and friends, local community and voluntary sector organisations. Reduces risk of individuals becoming dependent on higher than necessary packages of care, increases and improves community networks and utilises voluntary and community sector organisations to support individuals. Potential for improved analytics facilitating proactive rather than reactive social	902	1,500	1,500	0

Ref.	Service Area and Description of Proposal	Impact of Proposal	2022/23 £'000	2023/24 £'000	Full Year Impact £'000	Estimated Staffing Impact FTE
		care and more targeted and tailored interventions to maintain independence at home for longer. Reduction in events that see escalations in care required - delayed increases to packages. Opportunities to work to reverse frailty in some cases reducing level of paid for care. Enables a joined up approach with community health and identification of most suitable interventions that would allow an individual to remain safe at home for longer, reducing the need for commissioned services and increasing opportunities to prevent hospital admission.				
YA-23-LD1	<b>Younger Adults – Learning Disability</b> Younger Adults Extra Care accommodation, moving people on from residential care to supported accommodation.	Greater proportion of clients in a lower cost service whilst also enabling a greater level of independence for individuals.	138	1,052	1,651	0
YA-23-LD2	<b>Younger Adults – Learning Disability</b> Extension of current work on reducing challenging behaviour	Practices required by providers to mitigate the risk to carers from potentially dangerous client behaviours can be lessened through the application of an LRP approach leading to reduced support costs. Will require extension of temporary LRP staff team.	360	607	740	0

Ref.	Service Area and Description of Proposal	Impact of Proposal	2022/23 £'000	2023/24 £'000	Full Year Impact £'000	Estimated Staffing Impact FTE
	(Least Restrictive Practice, LRP).					
YA-23-LD3	<b>Younger Adults – Learning Disability</b> Greater use of universal services (review & reassess), and extension of Strengths Based Approach and telecare.	Reduction in demand for traditional care service as alternatives to care provided through lower cost technological solutions, whilst maintaining independence for longer. Will require HCC taking a pioneering role as a major employer, reducing social isolation, developing community activities/clubs and supporting the wider Voluntary and Community Sector. Supporting economic development of the care market, including encouragement of micro-providers and adoption of Technology Enabled Care.	1,423	2,363	2,773	0
YA-23-LD4	<b>Younger Adults – Learning Disability</b> Extension of volunteering model of care started in 2019.	Reduced support costs through use of volunteering resources to meet some elements of a personal support plan. Care needs that require registered care are still met through a regular support provider.	0	43	182	0
YA-23-LD5	<b>Younger Adults – Learning Disability</b> Younger Adults Extra Care 60+ accommodation, moving people on from residential care into more appropriate provision.	Greater proportion of clients in a lower cost service whilst also enabling a greater level of independence for individuals. Reduction of clients in residential care following move to Supported Living resulting in improved outcomes and financial savings.	76	385	553	0

Ref.	Service Area and Description of Proposal	Impact of Proposal	2022/23 £'000	2023/24 £'000	Full Year Impact £'000	Estimated Staffing Impact FTE
YA-23-MH1	<b>Younger Adults – Mental Health</b> Greater use of universal services (review & reassess) and extension of Strengths Based Approach.	Reduction in demand for traditional care service as alternatives to care provided through lower cost technological solutions, whilst maintaining independence for longer. Will require HCC taking a pioneering role as a major employer, reducing social isolation, developing community activities/clubs and supporting the wider Voluntary and Community Sector.	135	463	664	0
YA-23-PD1	<b>Younger Adults – Physical Disability</b> Younger Adults Extra Care accommodation, moving people on from residential care. Moving clients with physical disabilities from residential to tenancy and Supported Living schemes.	Greater proportion of clients in a lower cost service whilst also enabling a greater level of independence for individuals. Reduction of clients in residential care following move to Supported Living resulting in improved outcomes and financial savings.	204	549	816	0
YA-23-PD2	<b>Younger Adults – Physical Disability</b> Greater use of universal services (review & reassess), and extension of Strengths Based Approach and telecare.	Reduction in demand for traditional care service as alternatives to care provided through lower cost technological solutions, whilst maintaining independence for longer. Will require HCC taking a pioneering role as a major employer, reducing social isolation, developing community activities/clubs and supporting the wider Voluntary and Community Sector. Supporting	336	889	1,132	0

Ref.	Service Area and Description of Proposal	Impact of Proposal	2022/23 £'000	2023/24 £'000	Full Year Impact £'000	Estimated Staffing Impact FTE
		economic development of the care market, including encouragement of micro-providers and adoption of Technology Enabled Care.				
YA-23-PD3	<b>Younger Adults – Physical Disability</b> Extension of volunteering model of care started in 2019.	Reduced support costs through use of volunteering resources to meet some elements of a personal support plan. Care needs that require registered care are still met through a regular support provider.	0	109	189	0
IH-23-1	<b>HCC Care (In-House)</b> Implementation of the Discharge to Assess model within HCC Care. This supports the NHS with circa 80 beds to discharge people from hospital faster and is funded by the NHS.	The additional income to HCC will be offset, in part, by the cost of long term care purchased from external providers due to the displaced capacity within HCC Care. Staff may need to move sites. Positive impact for service users through improving the discharge process. Some service users may need to move between settings for longer term care support.	0	2,300	2,300	0
HQ-23-1	<b>Headquarters – Demand Management &amp; Prevention</b> Stopping all currently budgeted local and county-wide grants funded by Adult Social Care to voluntary, community and partner organisations. NB. The	Voluntary and community partner organisations may need to reshape their services or seek alternative sources of funding. This may increase demand on funding available from partners (e.g. health and District Councils).	0	365	365	0

Ref.	Service Area and Description of Proposal	Impact of Proposal	2022/23 £'000	2023/24 £'000	Full Year Impact £'000	Estimated Staffing Impact FTE
	County Council would continue to provide insight and support to organisations to identify and target services that would be most effective in reducing demand for social care and that meet local needs, as well as help to access external grants and seek opportunities for alternative funding. Grants will still be awarded where there is an evidencable link to a further cashable reduction in care paid for by HCC.					
HQ-23-2	<b>Headquarters – Learning &amp; Development (L&amp;D)</b> Development of L&D's own dedicated training venue(s) within HCC estate.	Possible savings of approx. 50% of L&D venue hire budget if one dedicated venue was available internally with priority use by L&D.	60	60	60	0

Ref.	Service Area and Description of Proposal	Impact of Proposal	2022/23 £'000	2023/24 £'000	Full Year Impact £'000	Estimated Staffing Impact FTE
HQ-23-3	<b>Headquarters – L&amp;D</b> Income Generation savings in addition to existing Tt2021 target achieved through greater sales to external parties.	Minimal impact to existing staffing numbers as e-learning technology will be used to complement the face to face learning to reach a wider audience.	25	25	25	0
HQ-23-4	<b>Headquarters – Technology Enabled Care (TEC)</b> Implement TEC delivery that can be shown to contribute to integrated working with the NHS. Specifically identify where measurable benefits sit.	Joint funding arrangements agreed. Areas of specific interest are the 10% of referrals for people with an early diagnosis of Dementia and those at risk of falls.	0	215	215	0
HQ-23-5	<b>Headquarters – Transformation</b> Mobile Forms (Kirona) within the care management system no longer required.	Minimal impact, budget no longer required following closure of IT project.	75	75	75	0
HQ-23-6	<b>Headquarters – Social Inclusion</b> Reduction in funding for non-statutory services	A reduction in these services may result in an increase in the number of people sleeping rough or in temporary accommodation due to lack of support to maintain accommodation, and	0	360	360	0

Ref.	Service Area and Description of Proposal	Impact of Proposal	2022/23 £'000	2023/24 £'000	Full Year Impact £'000	Estimated Staffing Impact FTE
	that support people who are homeless or at risk of homelessness. The statutory responsibility to prevent and relieve homelessness sits with District and Borough Councils, however Adults' Health and Care currently commissions a range of accommodation based and community support services for people who are homeless.	subsequently increase pressures across the system and costs for housing, health and adult social care. Fewer people would be able to access Adults' Health and Care funded homelessness support services and would need to seek assistance from District and Borough Councils. Services would continue to be provided for people who are homeless and may have eligible care and support needs as a result of mental health and/or substance misuse or other complex needs.				
GA-23-1	<b>Governance &amp; Assurance</b> Staffing budget savings within Governance & Assurance through a review and restructure of the function.	Staff impact, details to be understood when exact plans (in development) have been finalised.	0	0	200	TBC
AHC-23-1	<b>Demography &amp; Complexity</b> Reduction in care volumes during the	Individuals would receive more timely advice to meet early needs through the extension of demand and prevention services resulting in the	1,000	6,400	6,400	0



Ref.	Service Area and Description of Proposal	Impact of Proposal	2022/23 £'000	2023/24 £'000	Full Year Impact £'000	Estimated Staffing Impact FTE
	Covid-19 pandemic have reduced the baseline volume of paid for care, leading to less growth funding being required. In addition, future predicted demand will continue to be diverted from the front door through use of preventative services and the Contact and resolution Team, (CART) reducing the growth in care requiring support by the County Council.	people being able to continue for longer without the need to access services. CART would support by increasing resolution rates through embedding Strengths Based Approach (SBA) fully and increasing self-service rates.				
AHC-23-2	<b>National Funding</b> Utilisation of additional Government funding to reduce the impact of savings that would otherwise need to be achieved.	N/A	0	15,000	15,000	0
<b>Total Adults' Health and Care</b>			<b>10,134</b>	<b>38,160</b>	<b>40,600</b>	<b>TBC</b>

## **EIAs**

Equality Impact Assessments (EIAs) for the Adults' Health and Care Savings Programme to 2023 proposals are provided in the accompanying Appendix 2 attachment to this report.

Adults' Health and Care EIAs

Service Area	Savings Programme reference(s)	Opportunity	Pages <i>(to be removed for final papers)</i>
Older Adults	OA-23-1	Residential Care	3 to 13
	OA-23-2	Domiciliary Care	(combined EIA)
Younger Adults	YA-23-LD1	Learning Disability – Extra Care Accommodation	14 to 20
	YA-23-PD1	Physical Disability – Extra Care Accommodation	(combined EIA)
	YA-23-LD2	Learning Disability – Least Restrictive Practice	21 to 28
	YA-23-LD3	Learning Disability – Review & Reassess	29 to 37
	YA-23-LD4	Learning Disability – Volunteering	38 to 44
	YA-23-PD3	Physical Disability - Volunteering	(combined EIA)
	YA-23-LD5	Learning Disability – 60+ Accommodation	45 to 51
	YA-23-MH1	Mental Health – Review & Reassess	52 to 61
	YA-23-PD2	Physical Disability – Review & Reassess	62 to 69
HCC Care (In-House Services)	IH-23-1	Discharge to Assess – Income Generation	70 to 78
Headquarters	HQ-23-1	Demand Management & Prevention – Grants	79 to 90
	HQ-23-2	Learning & Development – Venues	91 to 97
	HQ-23-3	Learning & Development – Income Generation	98 to 104
	HQ-23-4	Technology Enabled Care	105 to 112
	HQ-23-5	Transformation – IT Project Budget	N/A – no EIA required

	HQ-23-6	Social Inclusion	113 to 124
Governance & Assurance	GA-23-1	Operating Model	125 to 132
Funding	AHC-23-1	Demography & Complexity	N/A – no EIA required
	AHC-23-2	National Funding	N/A – no EIA required

# Older Adults

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Older Adults – Residential Care & Domiciliary Care (OA-23-1 & OA-23-2)	EIA – AHC – Older Adults-2021/08/19

## EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Erica Jenner	AHC	Transformation Manager	<a href="mailto:Erica.Jenner@hants.gov.uk">Erica.Jenner@hants.gov.uk</a>	03707 791775	19/08/2021	v1
2	EIA authoriser	Helen Style	AHC	Assistant Director Older Adults	<a href="mailto:Helen.Style@hants.gov.uk">Helen.Style@hants.gov.uk</a>	01962 847420	19/08/2021	v1
3	EIA Coordinator	Gloria Kwaw	AHC	Equality and Inclusion Manager	<a href="mailto:Gloria.Kwaw@hants.gov.uk">Gloria.Kwaw@hants.gov.uk</a>	0370 779 4934	19/08/2021	v1

## Section one – information about the service and service change

<b>Service affected</b>	<u>Older Adults</u>
<b>Please provide a short description of the service / policy/project/project phase</b>	Hampshire County Council has a statutory duty to meet the eligible care needs of an individual. Support is provided to older adults with the aim of maximising a person's independence whilst ensuring their care needs are met through a Strengths Based Approach, thereby, putting the individual at the centre of understanding their needs and how they can achieve their goals. This support is delivered through a variety of care

	<p>services including the provision of domiciliary care, residential and nursing care, short term beds and respite care.</p> <p>Some of the ways that older people aged 65 and above with eligible needs are supported include:</p> <ul style="list-style-type: none"> <li>• helping people to remain in their own homes for as long as possible, with the aid of services such as assistive care technology, domiciliary care and Direct Payments;</li> <li>• supporting the health, recovery, and wellbeing of individuals through the work of our teams based in the community and hospitals, and through our Reablement and equipment services, working closely with the NHS;</li> <li>• providing day care, short-stays, long-term placements and specialist dementia care in County Council-run residential and nursing homes;</li> <li>• commissioning domiciliary care, residential and nursing placements within the private care market;</li> <li>• investing in alternative accommodation options that help older people to remain independent while meeting the need for 24-hour care in the most cost-effective way, such as Extra Care Accommodation and Shared Lives stays.</li> </ul>
<p><b>Please explain the new/changed service/policy/project</b></p>	<p>Reductions to the cost of providing long-term care in Older Adults services would be sought through:</p> <ul style="list-style-type: none"> <li>• careful timing of our interventions for the most frail individuals to keep them well and stable in their own home – most especially, those over 85 years old;</li> <li>• working closely with our NHS partners by increasing the number of people that are enabled to return to their own home with flexible care arrangements after a hospital stay or visit, through a “Home First” approach;</li> <li>• working closely with our NHS partners by using short-term residential care settings (including County Council-run care homes) to be able to assess people’s longer-term care needs, including following a stay in hospital – sometimes known as</li> </ul>

“Discharge to Assess”;

- reducing the number of direct placements into long-term residential settings by increasing the availability and range of alternative options for ongoing care needs, such as through commissioning more placements in Extra Care accommodation, Shared Lives short stays and day breaks, and working with the private care market as part of a refreshed Residential and Nursing Strategy;
- a modernised day service offering as an alternative to more traditional building-based care, that provides carer respite, sign-posting and direct links to classes and voluntary organisations, thereby improving carer resilience and reducing the need for paid for care;
- delaying the need for people to access more costly, statutory services by making sure they receive early and proactive support before their needs escalate;
- reducing the levels of support paid for by the County Council to help people live at home by ensuring their needs are met by other means where appropriate, including through family and friends, local community and voluntary sector organisations, and increased use of assistive care technology;
- driving performance excellence throughout the service supported by improved analytics, including the introduction of a tool to assess an individual’s level of clinical frailty;
- deliver efficiencies and reduce duplication by expanding the use of virtual technology and working closely with NHS and GP networks to join up our virtual care and virtual visit arrangements for users at home.

### Engagement and consultation

The County Council’s *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents’ and stakeholders’ views on strategic options for funding the Authority’s budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed ‘stage two’ consultation before any decisions on service specific changes are made.

**Has any pre-consultation engagement been carried out?**

(Delete as appropriate)

No
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**Describe the consultation or engagement you have performed or are intending to perform.**

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

No specific consultation has been carried out on this proposal, some of which is a continuation of previous Transformation initiatives. However, the County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council's Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required.

Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

**Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.



**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age				X		Public
Disability			X			Public
Gender reassignment		X				Public
Pregnancy and maternity		X				Public
Race			X			Public
Religion or belief		X				Public
Sex				X		Public
Sexual orientation		X				Public
Marriage & civil partnership		X				Public
Poverty			X			Public
Rurality			X			Public

## Table 2 Geographical impact

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

Area	Yes / no
All Hampshire	Yes
Basingstoke and Deane	
East Hampshire	
Eastleigh	
Fareham	
Gosport	
Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

### Section three: Equality Statement

For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.

**Table 3 Consideration of and explanation for neutral or low negative impacts**

Protected characteristic	Brief explanation of why this has been assessed as having neutral or low negative impact
Disability	<p>Some service users who would previously have entered residential care may not receive such services from Adults' Health and Care, but alternative community provision is available as mitigation – supporting individuals to return home.</p> <p>Some individuals may receive a lower or different amount of commissioned care, however they will still receive a level of care appropriate to meet their needs.</p>
Gender Reassignment	<p>The limitations around choice of temporary discharge destination, while longer term needs are assessed, may result in individuals being placed in settings that provide limited privacy for individuals, however the additional stabilisation time provided through discharge to assess will result in increased opportunities for individuals to return home and alternative services to temporary beds are available.</p>
Race	<p>Whilst there are areas that have a range of voluntary sector services that cater to different ethnicities this may not always be the case, however supporting individuals to remain at home for longer will benefit them.</p> <p>Discharge to assess temporary placements may not be able to meet all cultural needs, however as mitigation alternative services will be available including services that support individuals in their own home.</p>
Religion or Belief	<p>Whilst there are areas that have a range of voluntary sector services that cater to different religions or beliefs this may not always be the case, however the anticipated outcome that individuals remain at home safely for longer will benefit them.</p> <p>Discharge to assess temporary placements may not be geared up to meet all religious needs, however as mitigation alternative services will be available including services that support individuals in their own home.</p>

Sexual Orientation	The limitations around choice of discharge destination, while longer term needs are assessed, may result in individuals being temporarily placed in settings that provide limited privacy for individuals, however the additional stabilisation time provided through discharge to assess will result in an increased chance for individuals to return home and for those that need long term residential or nursing a longer period to identify a suitable placement. There are also alternative services available to support individuals to return home sooner.
Marriage & Civil Partnership	The limitations around choice of discharge destination, while longer term needs are assessed, may result in individuals being placed in settings away from their family, however the additional stabilisation time provided through discharge to assess will result in an increased chance for individuals to return home and for those that need long term residential or nursing a longer period to identify a suitable placement. There are also alternative services available to support individuals to return home sooner.
Poverty	There are areas of deprivation in Hampshire and some services may not be available to all, for example live in care requires a second bedroom for the carer, however alternative services will be available to support individuals.
Rurality	Some rural areas of Hampshire may have difficulty in accessing services for example Discharge to Assess beds will be located in urban or semi urban areas potentially exacerbating the lack of provision of short term services in rural areas. Alternative services will be available to support individuals.

For all characteristics marked as either having a ‘medium negative’ or ‘high negative’, please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions
Age	Some older adults with less complex needs could receive less commissioned services from Adults’ Health and Care	All of Hampshire	Some new services (as detailed in the additional information section below) would deliver benefits to all

	<p>through the increased use of universal and other voluntary sector services when compared to previous individuals who received care. Some older adults, particularly those who have had an episode of ill-health may receive alternative services to meet the immediate care need with the intention of preventing their need escalating to long term residential care services. Some older adults may need to review their residential care setting as they transfer from self-funding their care to provision of care by Adults' Health and Care.</p>		<p>age groups which balances the impact of lower levels of service in other areas. The outcome of the temporary service following hospital discharge will result in higher numbers of people returning home.</p> <p>Levels of care provided to all older adults age groups will be closely monitored to identify any negative trends and take corrective action if required, there will also be a focus on younger older adults to work with them to improve their longer term independence.</p>
Sex	<p>As 62% of individuals aged 85+ are female they may be disproportionately impacted by changes to services.</p>	All of Hampshire	<p>The outcome of the temporary service following hospital discharge will result in higher numbers of people returning home. Alternative services to the temporary service will also be available for those who require something different.</p>

If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.  
 For all characteristics marked as either having a positive impact please explain why here.

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

SP23 Older Adults Transformation programme aims to increase the independence of individuals, provide alternatives to long term residential care and deliver savings against current spending on Older Adults services by:

- Supporting individuals to meet their care needs and maintain independence in the community without the need for paid for services from Older Adults;
- Meeting an individual's care needs using a strength based approach, greater use of local community and voluntary organisations and better use of technology to reduce the demand for domiciliary care;
- Supporting a Home First approach to managing discharge from acute hospital settings;
- Reducing the need for long term residential care by providing suitable alternatives, both short term and long term, including use of temporary assessment beds following discharge from hospital.

Supporting individuals to remain safe at home for as long as possible while ensuring their eligible needs are met will reduce the deterioration that individuals may experience through being in a more controlled setting such as a hospital ward for a prolonged period of time and support people to live as independently as possible.

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

## Younger Adults

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Learning Disabilities & Physical Disabilities – Extra Care Accommodation (YA-23-LD1 & YA-23-PD1)	EIA-AHC-LD PD Supported Accommodation-2021/08/19

### EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Jenny Dixon	AHC	Strategic Commissioning Lead Younger Adults	Jenny.dixon@hants.gov.uk	07739 050567	19/08/2021	V1
2	EIA authoriser	Jess Hutchinson	AHC	Assistant Director Younger Adults	<a href="mailto:Jessica.hutchinson@hants.gov.uk">Jessica.hutchinson@hants.gov.uk</a>	Teams	19/08/2021	V1
3	EIA Coordinator	Ed Walton	AHC	Safeguarding & Governance Senior Officer	<a href="mailto:Ed.walton@hants.gov.uk">Ed.walton@hants.gov.uk</a>	Teams	19/08/2021	V1

### Section one – information about the service and service change

<b>Service affected</b>	Learning Disabilities and Physical Disabilities
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<b>Please provide a short description of the service / policy/project/project phase</b>	<p>The project began in 2017 under the Transformation to 2017 programme and has continued through Transformation to 2019, Transformation to 2021 and on into Savings Programme 2023. The project is about increasing the number of people with learning disabilities and physical disabilities living in Supported Accommodation and reducing the number of people in those client groups living in residential care. This is through accessing a range of housing opportunities, developing supported accommodation, and the deregistration of residential care homes.</p>
<b>Please explain the new/changed service/policy/project</b>	<p>The purpose of the project is to support individuals with learning disabilities and physical disabilities to move into accommodation where they hold a tenancy which increases their rights, gives them greater security of tenure and enables them to live as adults with greater equity with the rest of the adult population. It also enables individuals to have greater choice and control over their living environments and how they live their lives.</p>

## Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.

### Has any pre-consultation engagement been carried out?

(Delete as appropriate)

<b>Yes</b>		
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### Describe the consultation or engagement you have performed or are intending to perform.

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

There has been significant ongoing engagement throughout this programme with all stakeholders and providers and with service users and their families impacted throughout this process. It is envisaged that this would continue.

No specific consultation has been carried out on this proposal, which is a continuation of the previous Transformation initiatives.

The County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council's Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required. Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

## **Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age		X				Public
Disability	X					Public
Gender reassignment	X					Public
Pregnancy and maternity	X					Public

<b>Race</b>	X					Public
<b>Religion or belief</b>	X					Public
<b>Sex</b>		X				Public
<b>Sexual orientation</b>	X					Public
<b>Marriage &amp; civil partnership</b>	X					Public
<b>Poverty</b>	X					Public
<b>Rurality</b>		X				Public

**Table 2 Geographical impact**

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

<b>Area</b>	<b>Yes / no</b>
All Hampshire	YES
Basingstoke and Deane	
East Hampshire	
Eastleigh	

Fareham	
Gosport	
Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

### **Section three: Equality Statement**

**For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.**

**Table 3 Consideration of and explanation for neutral or low negative impacts**

<b>Protected characteristic</b>	<b>Brief explanation of why this has been assessed as having neutral or low negative impact</b>
<b>Age</b>	Supporting individuals to move to Supported Accommodation will not have any effect on this protected characteristic.
<b>Sex</b>	Supporting individuals to move to Supported Accommodation will not have any effect on this protected characteristic.
<b>Rurality</b>	Supporting individuals to move to Supported Accommodation will not have any effect on this protected characteristic.

For all characteristics marked as either having a ‘medium negative’ or ‘high negative’, please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions

If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact
<b>Disability</b>	Supporting people with learning disabilities and physical disabilities to move to Supported Accommodation or other housing opportunities seeks to improve their quality of life and give people more choice and control of their lives. The offer would help support the Adults’ Health and Care vision of people living long, healthy and happy lives with the maximum possible independence.
<b>Poverty</b>	People who live in residential care are only able to retain a small part of their benefit entitlement to spend as they choose. Individuals with disabilities living in Supported Accommodation or other housing where they are the tenant or owner are entitled to the full range of benefits.

<p><b>Gender reassignment; Pregnancy and maternity; Race; Religion or belief; Sexual orientation; Marriage &amp; civil partnership</b></p>	<p>Enabling people to have their own accommodation does enable individuals to have more control and live as they choose which may have benefits to any protected characteristics they may have, for example they will have greater privacy to conduct and engage in relationships with other people of their choosing, which may promote more opportunities for people to get married. There may also be beneficial impacts for individuals as they can arrange their living environment to meet their cultural or religious needs.</p>
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**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

This project has been running since 2017, the outcomes have overall mostly been positive for individuals who have moved into new supported accommodation.

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

## Younger Adults

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Learning Disability - Least Restrictive Practice (YA-23-LD2)	EIA-AHC-Least Restrictive Practice-2021/08/19

### EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Steve Gowtridge	AH&C	Programme Manager	<a href="mailto:Steve.gowtridge@hants.gov.uk">Steve.gowtridge@hants.gov.uk</a>	Teams	19/08/2021	V1
2	EIA authoriser	Jess Hutchinson	AH&C	Assistant Director LD & MH	<a href="mailto:Jessica.hutchinson@hants.gov.uk">Jessica.hutchinson@hants.gov.uk</a>	Teams	19/08/2021	V1
3	EIA Coordinator	Gloria Kwaw	AH&C	Equality and Inclusion Manager	Gloria.Kwaw@hants.gov.uk	Teams	19/08/2021	V1

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### Section one – information about the service and service change

<b>Service affected</b>	Learning Disability Services
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<p><b>Please provide a short description of the service / policy/project/project phase</b></p>	<p>Currently there are over 200 individuals with a learning disability living in a variety of settings including supported living and residential care for whom there is a risk that they may present behaviour that challenges. These individuals have high levels of support, typically this would mean 1:1 or 2:1 support at most times.</p>
<p><b>Please explain the new/changed service/policy/project</b></p>	<p>This would be a continuation of the current Least Restrictive Practice project that started in 2018. The roll-out of Least Restrictive Practice (LRP) and Positive Behaviour Support (PBS) across Hampshire is designed to improve the quality of life and reduce the use of restrictive practices for a relatively small cohort of people with learning disabilities that display behaviour that may challenge. This can lead to a reduction in the levels of support required by an individual as a result of a decrease in their behaviours that may challenge.</p>

## Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.

### Has any pre-consultation engagement been carried out?

(Delete as appropriate)

<p>Yes – this is a continuation of a Transformation to 2021 (T21) savings proposal, which has seen extensive engagement.</p>		
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**Describe the consultation or engagement you have performed or are intending to perform.**

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

No specific consultation has been carried out on this proposal, which is an extension of a T21 initiative. However, there has been significant ongoing engagement with stakeholders and providers and with service users and their families impacted over the past 2 years. It is envisaged that this would continue.

The County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council's Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required.

The outcomes of the budget consultation show that 53% of Adult Social Care users disagree with reducing or charging for services and many responses showed concern at the potential of this occurring. The LRP project seeks to support this through reducing the levels of overall care and support by improving quality of life through reduction of restrictions and application of PBS approaches.

**Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age		X				Public
Disability	X					Public
Gender reassignment		X				Public
Pregnancy and maternity		X				Public
Race		X				Public
Religion or belief		X				Public
Sex		X				Public
Sexual orientation		X				Public
Marriage & civil partnership		X				Public
Poverty		X				Public
Rurality		X				Public

## Table 2 Geographical impact

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

Area	Yes / no
All Hampshire	Yes
Basingstoke and Deane	
East Hampshire	
Eastleigh	
Fareham	
Gosport	
Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

### Section three: Equality Statement

**For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.**

**Table 3 Consideration of and explanation for neutral or low negative impacts**

Protected characteristic	Brief explanation of why this has been assessed as having neutral or low negative impact
All with the exception of Disability	The continued roll-out of Least Restrictive Practice across Hampshire will have, at worst, a neutral impact in terms of people with protected characteristics. Its aims of increasing quality of life and reducing distress for those individuals that we work with will mean that, irrespective of someone's race, gender etc, for those people we work with we expect to see improved outcomes. The way that individuals are identified to be supported by the LRP team is based on their care and support needs as well as levels of behaviours that may challenge, irrespective of any protected characteristic.

For all characteristics marked as either having a 'medium negative' or 'high negative', please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions
None			

If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact
Disability	The people with whom we would work are people with a learning disability who present behaviours that may challenge.

	The LRP offer seeks to improve the quality of life and reduce the use of restrictive practices for people who present behaviour that may challenge. The offer would help support the Adults' Health and Care vision of people living long, healthy, and happy lives with the maximum possible independence.
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### Further actions and recommendations to consider:

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

### Box 1 Please set out any additional information which you think is relevant to this impact assessment:

LRP embraces all 6 key principles of Positive & Proactive Care, including:

**Non – Discriminatory:** *Avoiding discrimination, paying attention to groups who are vulnerable to rights violations. As demonstrated by: Using person-centred planning approaches that do not discriminate on the basis of religion or belief, race or culture, gender, sexual preference, disability, mental health; making sure staff are sensitive to culture and diversity and how interventions may affect rights.*

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

## Younger Adults

<b>Name of SP23 proposal:</b> LD SBA	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Learning Disability – Review & Reassess (YA-23-LD3)	EIA-AHC-LD SBA-2021/08/19

### EIA writer(s) and authoriser

No		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Sam Davenport	AHC	Service Manager	<a href="mailto:Samantha.davenport@hants.gov.uk">Samantha.davenport@hants.gov.uk</a>	07545 41525 7	19/08/21	V1
2	EIA authoriser	Jess Hutchinson	AHC	Assistant Manager Younger Adults	<a href="mailto:Jessica.hutchinson@hants.gov.uk">Jessica.hutchinson@hants.gov.uk</a>	01962 84796 6	19/08/21	V1
3	EIA Coordinator	Ed.walton@hants.gov.uk	AHC	Safeguarding & Governance Senior Officer	<a href="mailto:Ed.walton@hants.gov.uk">Ed.walton@hants.gov.uk</a>	01962 84588 0	19/08/21	V1

## Section one – information about the service and service change

<b>Service affected</b>	Learning Disabilities
<b>Please provide a short description of the service / policy/project/project phase</b>	<p>The learning disability service provides support provision for circa. 3,000 people who have been assessed as eligible under the Care Act 2014. The support provided includes support work, residential care, day services, Direct Payments and other forms of care and support. The current budget is £112m per year (total LD budget minus staffing costs).</p> <p>Each person who receives a service has a support plan which is reviewed regularly by Social Workers and social care practitioners. Support is provided with the aim of maximising a person's independence whilst ensuring their care needs are met through a Strengths Based Approach (SBA), thereby putting the individual at the centre of understanding their needs and how they can achieve their goals.</p>
<b>Please explain the new/changed service/policy/project</b>	<p>This is a continuation of the current Transformation to 2021 (T21) review programme for Learning Disability services, the outcomes of which would specifically look to deliver and maintain existing levels of support to clients where possible but through a more cost-effective method. It is likely that for a large percentage of those assessed the support that they receive would change or reduce. These people are likely to have been impacted by reductions / changes to the levels of service they previously received as a result of earlier transformation programmes.</p> <p>This would include:</p> <ul style="list-style-type: none"> <li>• The use of volunteers where appropriate;</li> <li>• Review of use of transport;</li> <li>• A greater emphasis on community support (without a cost to the County Council);</li> <li>• Support to enter paid employment;</li> <li>• Support to develop self-sustaining networks;</li> <li>• More shared support options;</li> <li>• Time limited support to develop skills;</li> <li>• Implementation of technology;</li> <li>• Changing models of care e.g. increasing access to older persons services.</li> </ul>



## Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.

### Has any pre-consultation engagement been carried out?

(Delete as appropriate)

Yes – see below		
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### Describe the consultation or engagement you have performed or are intending to perform.

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

No specific consultation has been carried out on this proposal, which is an extension of a T21 initiative. However, there has been significant ongoing engagement with service users, families, stakeholders and providers via the Hampshire Learning Disability Partnership Board and the Local Implementation Groups.

The County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council's Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required.

The results of the Balancing the Budget consultation show that 53% of Adult Social Care users disagree with reducing or charging for services and many responses showed concern at the potential of this occurring. The SBA/reviews workstream will result in less paid for services for some people; the County Council will continue to ensure all eligible needs are met.

### **Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age			X			Public
Disability					X	Public
Gender reassignment		X				Public
Pregnancy and maternity		X				Public
Race		X				Public
Religion or belief		X				Public
Sex		X				Public
Sexual orientation		X				Public
Marriage & civil partnership		X				Public
Poverty		X				Public

<b>Rurality</b>		X					Public
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**Table 2 Geographical impact**

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

<b>Area</b>	<b>Yes / no</b>
All Hampshire	Yes
Basingstoke and Deane	
East Hampshire	
Eastleigh	
Fareham	
Gosport	
Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

**Section three: Equality Statement**

For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.

**Table 3 Consideration of and explanation for neutral or low negative impacts**

Protected characteristic	Brief explanation of why this has been assessed as having neutral or low negative impact
Age	Some older people with a learning disability would move to new accommodation, either Extra Care, Older Persons residential or nursing care. An assessment of need would be carried out with the person, their family, support network and if appropriate advocate. If it is identified that the person would benefit from Older Adults services, then detailed planning would be undertaken to ensure it would best meet their needs. All activity would be in line with the Care Act 2014, Mental Capacity Act 1983, and Human Rights Act 1998. Learning from previous experience, we would be working with providers to identify services which would be successful for people with learning and physical disabilities.
Gender reassignment	The assess and review project will have a neutral impact on those people with a learning disability who have the protected characteristic of gender reassignment. Currently data for this protected characteristic is not collected for people with learning disabilities. Practitioners will ensure that they treat people as individuals, irrespective of their gender.
Marriage or civil partnership	The assess and review project will have a neutral impact on those people with a learning disability who have the protected characteristic of marriage or civil partnership. Assessments & reviews are undertaken with individuals, regardless of whether they are married or in a civil partnership. Where appropriate, carers assessments will be offered to partners of individuals with a learning disability who may be undertaking caring roles. The data for this protected characteristic is available via AIS/Aspire.
Pregnancy and maternity	The assess and review project will have a neutral impact on those people with a learning disability who have the protected characteristic of pregnancy and maternity. Currently data for this protected characteristic is not collected by the County Council for people with learning disabilities.
Race	The assess and review project will have a neutral impact on those people with a learning disability who have the protected characteristic of race. Practitioners will ensure that where English is not the individual's first language, an interpreter is sourced for the assessment or review. The data for this protected characteristic is available via AIS/Aspire.

Religion or belief	The assess and review project will have a neutral impact on those people with a learning disability who have the protected characteristic of religion or belief. Practitioners will ensure that religion or belief is respected, and care provision is based on individual need. The data for this protected characteristic is available via AIS/Aspire.
Sexual orientation	The assess and review project will have a neutral impact on those people with a learning disability who have the protected characteristic of sexual orientation. The data for this protected characteristic is available via AIS/Aspire.
Sex	The assess and review project will have a neutral impact on those people with a learning disability who have the protected characteristic of sex.

For all characteristics marked as either having a ‘medium negative’ or ‘high negative’, please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions
Disability	<p>These proposals would impact upon people with learning disabilities receiving a variety of different service types. Some choices that are currently available and that are more expensive may cease to be available.</p> <p>People in receipt of supported living or care at home services may experience an overall reduction in the volume (hours) of support received on a 1:1 basis.</p>	No	<p>Assessed Care Act eligibility outcomes would still be met. Case Workers would discuss potential options with individuals who use services as part of the assessment process.</p> <p>Hampshire County Council would continue to invest in enablement services and supported employment services.</p>

	It is likely for a large percentage of those assessed the support that they receive would change or reduce. These people are likely to have been impacted by reductions / changes to the levels of service they previously received as a result of earlier transformation programmes.		
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If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

## Younger Adults

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Learning Disability & Physical Disability – Volunteering (YA-23-LD4 & YA-23-PD3)	EIA-AHC-LD PD Volunteering-2021/08/19

### EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Ross Thorpe	AHC	Programme Manager	<a href="mailto:ross.thorpe@hants.gov.uk">ross.thorpe@hants.gov.uk</a>	01962 845083	19/08/21	V1
2	EIA authoriser	Jess Hutchinson	AHC	Assistant Director Younger Adults	<a href="mailto:Jessica.hutchinson@hants.gov.uk">Jessica.hutchinson@hants.gov.uk</a>	01962 847966	19/08/21	V1
3	EIA Coordinator	Ed Walton	AHC	Safeguarding & Governance Senior Officer	<a href="mailto:ed.walton@hants.gov.uk">ed.walton@hants.gov.uk</a>	01962 845880	19/08/21	V1

### Section one – information about the service and service change

<b>Service affected</b>	Learning Disabilities (LD) & Physical Disabilities (PD)
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<p><b>Please provide a short description of the service / policy/project/project phase</b></p>	<p>There are currently no schemes providing volunteer support buddies within the adult learning disability service.</p> <p>The Volunteering project across Hampshire is designed to facilitate and establish a culture of volunteer use across provider organisations.</p> <p>This scheme will provide a framework for volunteers to be engaged as volunteer support buddies as a 'step down' from more intensive paid support to improve enablement options. It is envisaged that this will also protect the County's care market.</p> <p>In addition to this, the programme will also seek to expand on more traditional forms of volunteering.</p> <p>As part of the Savings Programme 2023 (SP23) transformation programme, a savings target of £371k has been attached to this initiative (£182k LD and £189k PD).</p>
<p><b>Please explain the new/changed service/policy/project</b></p>	<p>Volunteers will be engaged as support buddies for service users with physical disabilities, learning disabilities and/or autism. Individual volunteer role profiles will be created in partnership with individuals, families, providers, volunteering organisations and other stakeholders. The scheme creates new ways for people with learning and/or physical disabilities to meet their assessed outcomes. The project will seek to recruit volunteers with different cultural and social backgrounds to ensure inclusivity for all service users. It should be noted that support buddies will not be replacing support workers performing regulated care tasks. All volunteers will be DBS checked.</p>

## Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.

### Has any pre-consultation engagement been carried out?

(Delete as appropriate)

Yes – see below		
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**Describe the consultation or engagement you have performed or are intending to perform.**

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

The County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council's Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required. Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

No specific consultation has been carried out on this proposal. However, in preparation for this project, both internal and external stakeholders were engaged with including volunteering and provider organisations. Providers are involved at all stages of this project with direct links to the project leads and subject matter expert.

Service users are integral to the matching process of the buddy scheme. The role profiles are based on the needs and wishes of the service users and their support network as appropriate.

**Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age		X				Public
Disability	X					Public
Gender reassignment		X				Public
Pregnancy and maternity		X				Public
Race		X				Public
Religion or belief		X				Public
Sex		X				Public
Sexual orientation		X				Public
Marriage & civil partnership		X				Public
Poverty		X				Public
Rurality		X				Public

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**Table 2 Geographical impact**

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

Area	Yes / no
All Hampshire	Yes
Basingstoke and Deane	
East Hampshire	
Eastleigh	
Fareham	
Gosport	
Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

**Section three: Equality Statement**

**For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.**

**Table 3 Consideration of and explanation for neutral or low negative impacts**

Protected characteristic	Brief explanation of why this has been assessed as having neutral or low negative impact
All (with the exception of Disability)	The continuation of the volunteering project across Hampshire will have, at worst, a neutral impact in terms of people with protected characteristics. The department’s aim will remain that all service users receive the appropriate care provision for their needs irrespective of someone’s race, gender, age, religious beliefs, sex or sexual orientation and we expect to see improved outcomes for users. The way that individuals are identified for use of volunteers is based on their care and support needs as well as levels of behaviours that may challenge, irrespective of any protected characteristic. The way in which volunteers will be identified will ensure that volunteers are recruited from different cultural and social backgrounds. Furthermore, there will also be no impact on non-protected characteristics of service users considered by the County Council such as poverty or rurality.

For all characteristics marked as either having a ‘medium negative’ or ‘high negative’, please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions

If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact
Disability	Support from volunteers is associated with higher self-esteem, improved wellbeing, and lower levels of social exclusion. In many areas of Hampshire, providers are finding it hard to recruit and retain support staff needed to deliver contracted hours. Increasing the use of volunteer support buddies will provide flexibility for people to have the support they need when they need it.

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

## Younger Adults

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Learning Disability - 60+ Accommodation (YA-23-LD5)	EIA-AHC-Younger Adults 60+ Accommodation-2021/08/19

### EIA writer(s) and authoriser

No		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Jenny Dixon	AHC	Strategic Commissioning Lead Younger Adults	<a href="mailto:Jenny.dixon@hants.gov.uk">Jenny.dixon@hants.gov.uk</a>	07739050567	19/08/21	V1
2	EIA authoriser	Jess Hutchinson	AHC	Assistant Director Younger Adults	<a href="mailto:Jessica.hutchinson@hants.gov.uk">Jessica.hutchinson@hants.gov.uk</a>	01962 847966	19/08/21	V1
3	EIA Coordinator	Ed Walton	AHC	Safeguarding & Governance Senior Officer	<a href="mailto:Ed.walton@hants.gov.uk">Ed.walton@hants.gov.uk</a>	01962 845880	19/08/21	V1

### Section one – information about the service and service change

<b>Service affected</b>	Learning Disabilities
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<p><b>Please provide a short description of the service / policy/project/project phase</b></p>	<p>The Older People with a Learning Disability Project is aimed at ensuring that people with a learning disability are enabled to live in appropriate environments as they age both in terms of the physical environment and having access to the right care and support. There are a number of people living in the community in properties which are not suitable to their aging needs, for example they may only have upstairs bedrooms and bathrooms. The support staff in some of these settings may also be less experienced/ skilled in working with individuals with frailty or needs that arise from the onset of dementia. The project is looking to move people to more appropriate settings to meet their longer-term needs associated with aging.</p>
<p><b>Please explain the new/changed service/policy/project</b></p>	<p>This project may involve moving people to other ground floor supported living opportunities or residential or nursing provision that is suitable to their age-related needs.</p>

## Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.

### Has any pre-consultation engagement been carried out?

(Delete as appropriate)

No

### Describe the consultation or engagement you have performed or are intending to perform.

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

There has been significant ongoing engagement throughout this programme with all stakeholders and providers and with service users and their families impacted throughout this process. It is envisaged that this would continue.

No specific consultation has been carried out on this proposal, which is a continuation of a Transformation to 2021 initiative. However, the County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County



Council's Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required. Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

**Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age	X					
Disability	X					
Gender reassignment		X				
Pregnancy and maternity		X				
Race		X				

<b>Religion or belief</b>		X				
<b>Sex</b>		X				
<b>Sexual orientation</b>		X				
<b>Marriage &amp; civil partnership</b>		X				
<b>Poverty</b>		X				
<b>Rurality</b>		X				

**Table 2 Geographical impact**

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

<b>Area</b>	<b>Yes / no</b>
All Hampshire	YES
Basingstoke and Deane	
East Hampshire	
Eastleigh	
Fareham	
Gosport	

Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

**Section three: Equality Statement**

**For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.**

**Table 3 Consideration of and explanation for neutral or low negative impacts**

<b>Protected characteristic</b>	<b>Brief explanation of why this has been assessed as having neutral or low negative impact</b>
<b>All except Disability and Age</b>	The individuals who are identified and supported to move are selected on the basis of the suitability of their current residence, their physical health needs and other needs related to aging irrespective of any other protected characteristic.

For all characteristics marked as either having a ‘medium negative’ or ‘high negative’, please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions

If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact
<b>Disability</b>	The individuals have been supported on the basis of their primary need being their learning disability; as they age and have increased physical care needs or needs related to dementia, the support arrangements and accommodation they have had may no longer be suitable or the most appropriate to meet their future needs. Enabling people to move to accommodation that does meet their age-related needs with the right support for these needs will lead to better outcomes for those individuals.
<b>Age</b>	Individuals are identified for this project in relation to their age for the reasons described above.

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

## Younger Adults

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA:
Mental Health – Review & Reassess (YA-23-MH1)	EIA-AHC-Mental Health Review & Reassess-2021/08/19

### EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Louise Snook	AHC	PD MH Business Development Manager	<a href="mailto:Louise.Snook@hants.gov.uk">Louise.Snook@hants.gov.uk</a>	0370 779 7093	19/08/21	V1
2	EIA authoriser	Jess Hutchinson	AHC	Assistant Director Younger Adults	<a href="mailto:jessica.hutchinson@hants.gov.uk">jessica.hutchinson@hants.gov.uk</a>	01962 847966	19/08/21	V1
3	EIA Coordinator	Gloria Kwaw	AHC	Equality and Inclusion Manager	Gloria.Kwaw@hants.gov.uk	0370 779 4934	19/08/21	V1

### Section one – information about the service and service change

<b>Service affected</b>	Mental Health
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<p><b>Please provide a short description of the service / policy/project/project phase</b></p>	<p>Hampshire Adults' Health and Care currently fund a range of residential, nursing care and at home support packages for working age adults who have been assessed with eligible need under either the Care Act 2014 and/or the Mental Health Act 1983 and who require the use of mental health services. The current social care offer is aimed at people who present with complex needs and often a variety of diagnoses which might include psychiatric and/or psychological conditions and/or addiction. People may have lived in residential settings for many years, sometimes a long way from Hampshire.</p>
<p><b>Please explain the new/changed service/policy/project</b></p>	<p>Mental Health teams are currently supporting around 470 people with packages of care in various care institutions. The teams will review these arrangements with individuals, using a strengths-based approach, considering how people receiving a high level of care including those in traditional models of 24-hour care can move towards greater independent living. Where it is evidenced that a person is able to move to greater independence, they will be provided with the support to enable them to make the transition and will continue to receive any support required for ongoing needs. Options for people to consider with opportunities for greater independence may include receiving support in Extra Care settings, Shared Lives, Supported Accommodation with a tenancy, improved access to Direct Payments and or a combination of all of the above.</p>

## Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.

### Has any pre-consultation engagement been carried out?

(Delete as appropriate)

Yes

### Describe the consultation or engagement you have performed or are intending to perform.

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

No specific consultation has been carried out on this proposal, which is an extension of a Transformation to 2021 initiative. However, there has been significant ongoing engagement with service users, families, stakeholders and providers.

The County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council’s Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required. Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

**Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age				X		Public
Disability					X	Public
Gender reassignment		X				Public



<b>Pregnancy and maternity</b>		X				Public
<b>Race</b>				X		Public
<b>Religion or belief</b>		X				Public
<b>Sex</b>		X				Public
<b>Sexual orientation</b>		X				Public
<b>Marriage &amp; civil partnership</b>		X				Public
<b>Poverty</b>		X				Public
<b>Rurality</b>		X				Public

### Table 2 Geographical impact

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

Area	Yes / no
All Hampshire	Yes
Basingstoke and Deane	
East Hampshire	

Eastleigh	
Fareham	
Gosport	
Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

### **Section three: Equality Statement**

**For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.**

**Table 3 Consideration of and explanation for neutral or low negative impacts**

<b>Protected characteristic</b>	<b>Brief explanation of why this has been assessed as having neutral or low negative impact</b>
<b>Gender reassignment</b>	Whilst people who would describe themselves as transgender may sometimes experience stigma and adversity, this proposal should not result in a negative impact on them, specifically as there is an opportunity to have greater control and choice over their care and support preferences in a mental health arrangement.
<b>Pregnancy and maternity</b>	There is currently no evidence that people who identify with this characteristic will be impacted by the project work to review all cases, as their ongoing care will be determined by their Mental Health needs and individualised support plan.

<b>Religion or belief</b>	People who identify with this characteristic will hold a low risk of being impacted by the project work to review all cases, as their ongoing care will be determined by their Mental Health needs and individualised support plan.
<b>Sex</b>	Currently in Hampshire 61% of funded Mental Health clients have identified as Male and 38% Female, however, there is currently no evidence that people who identify with this characteristic will be impacted by the project work to review all cases, as their ongoing care will be determined by their Mental Health needs and an individualised support plan that would take into account appropriate living arrangements.
<b>Sexual orientation</b>	People from the LGBTQ community are assessed as being at low risk of being affected negatively by this programme of work as their ongoing care will be determined by their Mental Health needs and individualised support plan.
<b>Marriage &amp; civil partnership</b>	There is currently no evidence that people who identify with this characteristic will be impacted by the project work to review all cases, as their ongoing care will be determined by their Mental Health needs and individualised support plan.
<b>Poverty</b>	People with low income will be assessed for their eligibility for care and support and will receive a suitable level of intervention directly from Hampshire Adults' Health and Care to ensure their care arrangements promote their choices in the interests of promoting greater independent living and a healthy lifestyle.
<b>Rurality</b>	Residents of Hampshire who reside in more rural settings are assessed as low risk to this programme where commissioned services are available in all areas across Hampshire, enhanced by an increased set of virtual/ remote care and support opportunities available through technologically enabled care.

For all characteristics marked as either having a 'medium negative' or 'high negative', please complete the following table:

Table 4 Explanation and mitigation for medium and high impacts

<b>Protected characteristic</b>	<b>Brief explanation of why this has been assessed as having medium or high negative impact</b>	<b>Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)</b>	<b>Short explanation of mitigating actions</b>
<b>Age</b>	There is an expectation that people would move into accommodation which would meet their needs to	No	Each person in receipt of a current package would be supported carefully and

	<p>maximise their independence. For those people growing older, this may impact on their expectation to remain in lifelong residential care if they are deemed to be capable of residing in an alternative arrangement with an appropriate level of available care and support. This could include the concern of loneliness and isolation which in turn may trigger the deterioration in an older person's mental health and ability to self-care. Similarly, those younger people with complex mental health needs who are experiencing transition into adult services would also not automatically move into 24-hour care provision.</p>		<p>sensitively to understand how their needs are being assessed with the right to an advocate if required. Whilst recognising the issues affecting potential impact of 'change' for someone growing older and moving into adult services, the application of a strengths-based approach is fundamentally aimed at ensuring the person is heard and that their rights are respected by the social care professionals involved in this process. A range of contemporary supported accommodation options are also available including Extra Care for people which should minimise the risk of loneliness and isolation. Housing Providers are also working alongside this workstream to involve new 'well-being' support staff (i.e. Vivid Housing). Inclusion of NHS age-appropriate services and involvement of advocacy will be integral. Working age adults may benefit from moving from residential care into more independent accommodation.</p>
<b>Disability</b>	<p>People using mental health services and who are often subject to Section 117 Mental Health Act are likely to feel challenged by the prospect of change to their care</p>	No	<p>Residential care arrangements will continue to remain available for those people who are deemed to require 24-hour care and support. However, it is</p>

	<p>and support provision as a result of the associated disability they live with. Care and support provision in conjunction to accommodation arrangements are fundamental to the welfare and recovery of people experiencing problems with their mental health. Group living in residential care has been a traditional offer in Hampshire for many years and is often prescribed by medical staff for individuals on their in/out-patient treatment pathway. The prospect of developing supported living schemes for people needing support for their mental health may be subject to stigmatisation in different community settings without adequate planning, preparation and suitable support structures.</p>		<p>anticipated, that this would be a smaller group of people in need of 24-hour provision after a number of examples of care reviews have led to people moving into more independent supported living arrangements with great success despite the experienced level of disability. Some of the challenges which people have overcome have been achieved with the use of assistive technology, personal care packages, use of direct payments, personal health budgets and excellent health and social care support. Close partnership working with people and other care/ relevant agencies has demonstrated that living with a mental disability does not necessitate the experience of residential care. Careful community engagement and support from relevant local public and voluntary agencies would be essential when establishing new schemes and challenging any negative stereotypes.</p>
<b>Race</b>	<p>There is an over representation of people in England who would identify themselves as from a Black Asian Minority Ethnic (BAME) background who have been or who</p>	No	<p>Accommodation for people in need of services as a result of their mental health is available in all local communities across Hampshire. The programme of</p>

	<p>are subject to detention in the mental health system. Many people in need of care and support packages are also subject to Section 117 Aftercare as a result of having been detained under the Mental Health Act 1983. The reduction of residential provision would impact on people from BAME backgrounds in respect to the prospect of being offered a change in their current arrangements which is sensitive to their cultural needs across all Hampshire communities. There is a risk within local communities of stigmatisation of developing housing support schemes leading to the negative impact on the mental state and stability of the scheme residents.</p>		<p>developing Extra Care schemes is being rolled out to ensure each area provides access subject to eligible need. Community engagement is essential without involvement of specialist mental health housing officers in conjunction with local districts/ boroughs and Registered Social Landlords. People with BAME backgrounds will be supported by a variety of measures to stay independent including: interpreters, advocacy, direct payments, personal health budgets, assistive technology, and would be supported to access local community support in respect of their individual needs and cultural requirements.</p> <p>Current work on National Approved Mental Health Professional standards requires the service to understand more fully the diversity of the community it serves; information is being collated, to be analysed and the impact understood.</p>
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**If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.**

**For all characteristics marked as either having a positive impact please explain why here.**

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

Information on the protected characteristics is limited by the information recorded within the service on AIS. This project work to continue the review and reassessment of Mental Health service users is part of business as usual, with all Mental Health teams contributing to the work and overall savings target.

Service users are identified for review either where there is a change in needs or at the point of their diarised annual review. The review is carried out using strength-based principles and a personalised plan drawn up; appropriate support to enable that person to maintain or improve their independence is put in place, taking into consideration all characteristics that may impact on the delivery of the plan.

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

## Younger Adults

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Physical Disability – Review & Reassess (YA-23-PD2)	EIA-AHC-PD SBA-2021/08/19

### EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Donna Harrison	AHC	Service Manager	Donna.harrison@hants.gov.uk	03707 791482	19/08/2021	V1
2	EIA authoriser	Jessica Hutchinson	AHC	Assistant Director Younger Adults	<a href="mailto:Jessica.hutchinson@hants.gov.uk">Jessica.hutchinson@hants.gov.uk</a>	01962 847966	19/08/2021	V1
3	EIA Coordinator	Gloria Kwaw	AHC	Equality and Inclusion manager	Gloria.kwaw@hants.gov.uk	03707 794934	19/08/2021	V1

### Section one – information about the service and service change

<b>Service affected</b>	Physical Disabilities
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<p><b>Please provide a short description of the service / policy/project/project phase</b></p>	<p>The Physical Disability service provides support provision for people who have been assessed as eligible under the Care Act 2014. The support provided includes support work, residential care, day services, Direct Payments and other forms of care and support.</p> <p>Each person who receives a service has a support plan which is reviewed regularly by Social Workers and social care practitioners. Support is provided with the aim of maximising a person’s independence whilst ensuring their care needs are met through a Strengths Based Approach (SBA), thereby putting the individual at the centre of understanding their needs and how they can achieve their goals.</p>
<p><b>Please explain the new/changed service/policy/project</b></p>	<p>This is a continuation of the current Transformation to 2021 (T21) review programme for Physical Disability services, the outcomes of which would specifically look to deliver support that is most cost effective. This would include:</p> <ul style="list-style-type: none"> <li>• The use of volunteers where appropriate;</li> <li>• Review of use of transport;</li> <li>• A greater emphasis on community support (without a cost to the council);</li> <li>• Support to enter paid employment;</li> <li>• Support to develop self-sustaining networks;</li> <li>• More shared support options;</li> <li>• Time limited support to develop skills;</li> <li>• Implementation of technology;</li> <li>• Changing models of care e.g. moving from residential care to supported living.</li> </ul>

**Engagement and consultation**

The County Council’s *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents’ and stakeholders’ views on strategic options for funding the Authority’s budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed ‘stage two’ consultation before any decisions on service specific changes are made.

**Has any pre-consultation engagement been carried out?**  
(Delete as appropriate)

<p>Yes – see below</p>		
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**Describe the consultation or engagement you have performed or are intending to perform.**

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

No specific consultation has been carried out on this proposal, which is, in part, an extension of the Transformation to 2021 initiative. However, there has been significant ongoing engagement with service users, families, stakeholders and providers via co-production groups and individual service users.

The County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council's Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required.

The results of the Balancing the Budget consultation show that 53% of Adult Social Care users disagree with reducing or charging for services and many responses showed concern at the potential of this occurring. The SBA/reviews workstream will result in less paid for services for some people; the County Council will continue to ensure all eligible needs are met.

**Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

<b>Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)</b>	<b>Positive</b>	<b>Neutral</b>	<b>Negative - low</b>	<b>Negative - Medium</b>	<b>Negative - High</b>	<b>Affects staff, public or both?</b>
<b>Age</b>			X			Public
<b>Disability</b>					X	Public
<b>Gender reassignment</b>		X				Public
<b>Pregnancy and maternity</b>		X				Public
<b>Race</b>		X				Public
<b>Religion or belief</b>		X				Public
<b>Sex</b>		X				Public
<b>Sexual orientation</b>		X				Public
<b>Marriage &amp; civil partnership</b>		X				Public
<b>Poverty</b>		X				Public
<b>Rurality</b>		X				Public

## Table 2 Geographical impact

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

Area	Yes / no
All Hampshire	Yes
Basingstoke and Deane	
East Hampshire	
Eastleigh	
Fareham	
Gosport	
Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

### Section three: Equality Statement

**For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.**

**Table 3 Consideration of and explanation for neutral or low negative impacts**

Protected characteristic	Brief explanation of why this has been assessed as having neutral or low negative impact
Age	An assessment of need would be carried out with the person, their family, support network and if appropriate advocate. If it is identified that the person would benefit from services, then detailed planning would be undertaken to ensure it would best meet their needs. All activity would be in line with the Care Act 2014, Mental Capacity Act 1983 and Human Rights Act 1998. Learning from previous experience, we would be working with providers to identify services which would be successful for people with learning and physical disabilities.
All (with the exception of Age & Disability)	<p>The continuation of the Review and Assess project across Hampshire will have, at worst, a neutral impact in terms of people with protected characteristics. Its aim of ensuring that all service users receive the appropriate care provision for their needs for those individuals that we work with will be applied, irrespective of someone’s race, gender etc, and we expect to see improved outcomes for users. The way that individuals are identified to have their care provision assessed is based on their care and support needs as well as levels of behaviours that may challenge, irrespective of any protected characteristic.</p> <p>Furthermore, there will also be no impact on non-protected characteristics of service users such as poverty or rurality considered by the County Council.</p>

For all characteristics marked as either having a ‘medium negative’ or ‘high negative’, please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions
Disability	These proposals would impact upon people with physical disabilities receiving a variety of different service types. Some	No	Assessed Care Act eligibility outcomes would still be met. Case Workers would discuss potential options with

	<p>choices that are currently available and that are more expensive may cease to be available.</p> <p>People in receipt of supported living or care at home services may experience an overall reduction in the volume (hours) of support received on a 1:1 basis.</p> <p>It is likely for a large percentage of those assessed the support that they receive would change or reduce. These people are likely to have been impacted by reductions / changes to the levels of service they previously received as a result of earlier transformation programmes.</p>		<p>individuals who use services as part of the assessment process.</p> <p>Hampshire County Council would continue to invest in enablement services and supported employment services.</p>
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**If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.**

**For all characteristics marked as either having a positive impact please explain why here.**

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.

- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

## HCC Care (In-House Services)

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA:
HCC Care (In-House Services) – Income Generation through Discharge to Assess Bedded Provision (IH-23-1)	EIA – AHC - HCC Care Income Generation - 2021/08/19

### EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Roger Carter	AHC	Transformation Manager	<a href="mailto:Roger.carter@hants.gov.uk">Roger.carter@hants.gov.uk</a>	0370 779 0885	19/08/2021	V1
		Spencer Ashton-Taylor	Transformation Practice	Senior Consultant	<a href="mailto:Spencer.ashton-taylor@hants.gov.uk">Spencer.ashton-taylor@hants.gov.uk</a>	0370 779 5985		
2	EIA authoriser	Karen Ashton	AHC	Assistant Director Internal Provision	<a href="mailto:karen.ashton@hants.gov.uk">karen.ashton@hants.gov.uk</a>	0370 779 1654	19/08/21	V1
3	EIA Coordinator	Ed Walton	AHC	Safeguarding & Governance Senior Officer	<a href="mailto:Ed.walton@hants.gov.uk">Ed.walton@hants.gov.uk</a>	01962 845880	19/08/2021	V1



## Section one – information about the service and service change

<p><b>Service affected</b></p>	<p>Residential Nursing services provided at Clarence Unit at Woodcot Lodge, Willow Court, Forest Court and Ticehurst to convert to dedicated Discharge to Assess (D2A) hubs. These are an extension of a hospital ward in a dedicated care facility away from the acute hospital where dedicated health, care staff and social workers can continue rehabilitating a person and assessing their long term care needs.</p>
<p><b>Please provide a short description of the service</b></p>	<p>Reductions to the running cost of providing permanent long term care and support by optimising people's independence and delaying transfer into long term residential and nursing care by keeping people at home for longer, should this be their preferred option. It will also support income generation by covering the costs of transitional care through joint NHS and Social Care funding whilst assessing long term needs for support.</p>
<p><b>Please explain the new/changed service/policy/project</b></p>	<p>The Clarence Unit was established as a dedicated D2A unit in June 2020 and has been increasing capacity to full 79 beds since. Willow Court, Forest Court and Ticehurst are currently Care Homes for Nursing and have been providing D2A services since late August and early September 2020 respectively. The change in service will mean that new residents in these units will receive a transitional care service following a discharge from hospital. This will include nursing care, reablement, physiotherapy and Care Act assessment for a period of around 21 days before transferring to the most suitable long term care provision. The changes to the existing services will be from long term care placement, to short term care and assessment for people being discharged from hospital, or those deemed to be at risk of an impending hospital admission (hospital admission avoidance). Staff are currently being trained to provide reablement type care to support people to gain independence and return home safely and confidently, as opposed to remaining in the service.</p> <p>The potential service changes are likely to have the following impacts:</p> <ul style="list-style-type: none"> <li>• more effective assessment and understanding of people's needs is made in the more</li> </ul>

appropriate environment, ensuring intensity of care need is understood and the person can then access the right care at the right time, in the right way;

- remove time pressure sourcing long-term services whilst people are in hospital, avoiding inappropriate placement into higher intensity, higher cost long-term residential or nursing care where unnecessary;
- avoiding unnecessary hospital admission where care need can be safely managed in the community, reducing pressure on hospitals and increasing flexibility to manage demand fluctuations;
- everyone eligible who needs longer-term support could receive this in a more personalised setting that maximises their independence, be that their own home, supported accommodation, or a care home;
- dedicated competent staff and space would be provided to make a timely assessment of people's care needs within an environment focused on reablement;
- on completion of assessment individuals will need to move between settings when they require longer-term residential care and support;
- some members of staff may need to work differently or move to different work locations.

Current permanent older adult residents of Ticehurst, Forest Court and Willow Court nursing homes will remain in these units. The vacant capacity in Forest Court and Willow Court will be re-purposed and units will not accept further permanent long term admissions.

## Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made. Feedback is currently being sought from people who have been through these services and how they might be improved.

**Has any pre-consultation engagement been carried out?**

(Delete as appropriate)

No

**Describe the consultation or engagement you have performed or are intending to perform.**

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

No specific consultation has been carried out on this proposal – however, the County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council’s Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required. Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

The outcomes of the budget consultation show that 51% of users of services for older people agreed with making changes to the charging approach for non-residential social services (17% disagreed). The use of Short Term Services, and interim assessment, would help reduce the costs of non-residential care by a period of intensive reablement, ensuring the individual’s independence is fully optimised before starting / restarting their non-residential care package if their long term outcome was to return home.

**Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age	X					Public
Disability			X			Public
Gender reassignment		X				Public
Pregnancy and maternity		X				Both
Race		X				Public
Religion or belief		X				Public
Sex		X				Public
Sexual orientation		X				Public
Marriage & civil partnership		X				Public
Poverty		X				Public
Rurality			X			Both

## Table 2 Geographical impact

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

Area	Yes / no
All Hampshire	Yes
Basingstoke and Deane	
East Hampshire	
Eastleigh	
Fareham	
Gosport	
Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

### Section three: Equality Statement

**For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.**

**Table 3 Consideration of and explanation for neutral or low negative impacts**

Protected characteristic	Brief explanation of why this has been assessed as having neutral or low negative impact
Disability	D2A Units will not be suitable for all people with advanced dementia or complex behavioural issues due to the nature of the service and other service users. Specific to people using the services.
Rurality	Location of units may be some distance from usual place of residence which might require longer travel times for visitors. Both for staff and people using the services.
Race	The service will be available to anyone whose needs can be met in the setting. Temporary extra care housing is available in the North of the County, where a large population of Nepalese makes up 10+% of the population. Extra Care living will allow longer average length of D2A stays, providing more time to support people with language and complex housing needs. Specific for people using the services.
Gender reassignment; Pregnancy and maternity; Religion or belief; Sex; Sexual orientation; Marriage and civil partnership; Poverty	The only acceptance criteria for access to these services are clinical and social care need. Pregnancy and maternity for staff is already protected through current HCC Care policies and risk assessment. Poverty is neutral as this service is non-chargeable for a set period of time, and then means tested as per the Care Act 2014.

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For all characteristics marked as either having a ‘medium negative’ or ‘high negative’, please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions

If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact
Age	D2A Bedded service provision focuses mainly on Pathway 3 Patients, these are people generally 65+ but usually 85 years and older with Complex Health needs and co-morbidity. This demographic previously would have moved into long term residential or nursing care post hospital discharge. However, following the D2A bedded intervention more are seen to be returning home, as evidenced by the discharge to services outcomes tracking via multi-disciplinary care notes and onwards care monitoring. Further work will be included in the D2A project to follow the outcomes for those people returned home (i.e., readmission to acute hospitals in the last 3/6/12 months). For those admitted needing house clearance or equipment installation, the length of stay can be extended.

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

The service is short term (average 21 days); there will also be alternative D2A provisions available such as Home Based or temporary Extra Care housing if applicable.

Research will continue on the demographics and outcomes of people using the D2A service including how this supports carer breakdown. The additional time to allow for people to be assessed outside of an acute hospital provides time to ensure that

support is provided for people who have specific language, religious and other protected characteristics that might otherwise be overlooked if there were additional time pressures to discharge into long-term onward care.

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**



## Headquarters – Demand Management & Prevention - Grants

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Demand Management & Prevention – Grants for Voluntary and Social Enterprise Sector (HQ-23-1)	EIA-AHC-DMPCU Grants-2021/08/19

### EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Peter Stokes	AHC	Strategic Development Manager	<a href="mailto:peter.stokes@hants.gov.uk">peter.stokes@hants.gov.uk</a>	0370 779 1037	19/08/2021	V1
		Bethany Tanton	AHC	Service Development Officer	<a href="mailto:bethany.tanton@hants.gov.uk">bethany.tanton@hants.gov.uk</a>	0370 779 2655		
2	EIA authoriser	Sarah Snowdon	AHC	Director of AHC	<a href="mailto:graham.allen@hants.gov.uk">graham.allen@hants.gov.uk</a>	0370 779 0744	19/08/2021	V1
3	EIA Coordinator	Ed Walton	AHC	Safeguarding and Governance Senior Officer	<a href="mailto:ed.walton@hants.gov.uk">ed.walton@hants.gov.uk</a>	01962 845880	19/08/2021	V1

## Section one – information about the service and service change

<b>Service affected</b>	Adults' Health and Care (AHC)
<b>Please provide a short description of the service / policy/project/project phase</b>	AHC currently has a grants programme which provides grant funding each year to the Voluntary Community and Social Enterprise (VCSE) sector in Hampshire to help deliver services that are targeted to those most at risk of needing social care. Responsibility for managing this grant programme sits with the Demand Management and Prevention Change Unit (DMPCU).
<b>Please explain the new/changed service/policy/project</b>	To stop issuing all AHC grant funding as part of the grants programme managed by DMPCU by 31 March 2023.

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### Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.

**Has any pre-consultation engagement been carried out?**

(Delete as appropriate)

	No	
--	----	--

**Describe the consultation or engagement you have performed or are intending to perform.**

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

No specific consultation has yet been carried out on this proposal – however, the County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council’s Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required. Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

Specific Phase 2 consultation on this proposal is planned. As part of this process, we will ensure partners such as VCSE organisations (including those we currently fund or have funded in the past), District and Borough Councils, health colleagues, etc. will be aware of the consultation process and how they can take part.

**Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age				X		Public

<b>Disability</b>				X		Public
<b>Gender reassignment</b>		X				Public
<b>Pregnancy and maternity</b>		X				Public
<b>Race</b>				X		Public
<b>Religion or belief</b>		X				Public
<b>Sex</b>		X				Public
<b>Sexual orientation</b>		X				Public
<b>Marriage &amp; civil partnership</b>		X				Public
<b>Poverty</b>				X		Public
<b>Rurality</b>				X		Public

**Table 2 Geographical impact**

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

<b>Area</b>	<b>Yes / no</b>
All Hampshire	Yes
Basingstoke and Deane	

East Hampshire	
Eastleigh	
Fareham	
Gosport	
Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

### **Section three: Equality Statement**

**For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.**

**Table 3 Consideration of and explanation for neutral or low negative impacts**

<b>Protected characteristic</b>	<b>Brief explanation of why this has been assessed as having neutral or low negative impact</b>
Gender reassignment	Neutral – No DMPCU grants currently specifically support individuals with this protected characteristic. It is also not specifically included as one of the target characteristics in terms of current AHC DMPCU grant programme priorities.

Pregnancy and maternity	Neutral – No DMPCU grants currently specifically support individuals with this protected characteristic. It is also not specifically included as one of the target characteristics in terms of current AHC DMPCU grant programme priorities.
Religion or belief	Neutral – No DMPCU grants currently specifically support individuals with this protected characteristic. It is also not specifically included as one of the target characteristics in terms of current AHC DMPCU grant programme priorities.
Sex	Neutral – No DMPCU grants currently specifically support individuals with this protected characteristic. It is also not specifically included as one of the target characteristics in terms of current AHC DMPCU grant programme priorities.
Sexual orientation	Neutral – No DMPCU grants currently specifically support individuals with this protected characteristic. It is also not specifically included as one of the target characteristics in terms of current AHC DMPCU grant programme priorities.
Marriage & civil partnership	Neutral – No DMPCU grants currently specifically support individuals with this protected characteristic. It is also not specifically included as one of the target characteristics in terms of current AHC DMPCU grant programme priorities.

For all characteristics marked as either having a ‘medium negative’ or ‘high negative’, please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions
Age	Medium Negative – a significant proportion of current DMPCU grant-funded projects specifically support individuals with this protected characteristic (older adults), an estimated 5,000 individuals across the County. AHC has grant funded some of these service for a number of years. Older Adults are also a key client group in	Countywide impact	AHC will continue to fund a team that will provide insight and support to continue VCSE activity, particularly activity supporting older adults. This includes providing support to access external grants and funding opportunities, to minimise disruption and maximise the ability for the VCSE sector to

	<p>terms of the current AHC grant priorities. It is rated as medium because most of these services are not fully funded by AHC grants, it can only be a proportion of the running costs. In additional projects that are fully funded are operating as pilots and so are already aware that the grant funding is short-term and applied to for the grant funds on this basis. As part of their initial application, they were assessed on their sustainability to continue running beyond the term of the grant without any further financial support from AHC.</p>		<p>avoid costs. Utilisation and development of existing strong relationships focused on expressing AHC needs of sector. Some providers may fail, but others (both at large and community level) may see increased activity. Organisations will still be able to apply for Grant funding through the local County Councillor Grant scheme.</p>
Disability	<p>Medium Negative – a significant proportion of current DMPCU grant-funded projects specifically support individuals with this protected characteristic, an estimated 3,000 individuals across the County. AHC has grant funded some of these services for a number of years. Disability is also a key focus group in terms of the current DMPCU grant priorities. It is rated as medium because most of these services are not fully funded by AHC grants, it can only be a proportion of the running costs.</p>	Countywide impact	<p>AHC will continue to fund a team that will provide insight and support to continue VCSE activity, particularly activity supporting adults with disabilities. This includes providing support to access external grants and funding opportunities, to minimise disruption and maximise the ability for the VCSE sector to avoid costs. Utilisation and development of existing strong relationships focused on expressing AHC needs of sector. Some providers may</p>

	<p>In additional projects that are fully funded are operating as pilots and so are already aware that the grant funding is short-term and applied for the grant funds on this basis. As part of their initial application, they were assessed on their sustainability to continue running beyond the term of the grant without any further financial support from AHC.</p>		<p>fail, but others (both at large and community level) may see increased activity. Organisations will still be able to apply for Grant funding through the local County Councillor Grant scheme.</p>
Race	<p>Medium Negative – a small proportion of current DMPCU grant-funded projects specifically support individuals in relation to this protected characteristic – an estimated 100 individuals across the County. In particular, the impact for this characteristic is rated as medium negative because the organisations that are currently being granted-funded by the DMPCU programme (and have been grant-funded in the past) are valued and trusted sources of information and advice for BAME communities, so therefore these services (of which there are not many in Hampshire) are very important in supporting the welfare of these communities in particular. We also recognise that there</p>	Countywide impact	<p>AHC will continue to fund a team that will provide insight and support to continue VCSE activity, particularly activity supporting adults from BAME communities. This includes providing support to access external grants and funding opportunities, to minimise disruption and maximise the ability for the VCSE sector to avoid costs. Utilisation and development of existing strong relationships focused on expressing AHC needs of sector. Some providers may fail, but others (both at large and community level) may see increased activity. Organisations will still be able to apply for Grant funding through the local</p>



	<p>may be barriers to these organisations accessing funding from other sources. It is rated as medium impact only because these projects are already aware that the grant funding is short-term and applied to for the grant funds on this basis. As part of their initial application, they were assessed on their sustainability to continue running beyond the term of the grant without any further financial support from AHC.</p>		<p>County Councillor Grant scheme.</p>
Poverty	<p>Medium Negative – a significant proportion of current DMPCU grant-funded projects specifically support individuals in relation to this characteristic – an estimated 1,000 individuals across the County. AHC has grant funded some of these services for a number of years. Poverty is also a key focus group in terms of the current DMPCU grant priorities. It is rated as medium because most of these services are not fully funded by AHC grants; the AHC funding can only be a proportion of the running costs. In addition, projects that are fully funded are operating as pilots and so are already aware that the grant funding is short-term and</p>	<p>Countywide impact</p>	<p>AHC will continue to fund a team that will provide insight and support to continue VCSE activity, particularly activity supporting adults experiencing poverty. This includes providing support to access external grants and funding opportunities, to minimise disruption and maximise the ability for the VCSE sector to avoid costs. Utilisation and development of existing strong relationships focused on expressing AHC needs of sector. Some providers may fail, but others (both at large and community level) may see increased activity. Organisations will still be</p>

	<p>applied for the grant funds on this basis. As part of their initial application, they were assessed on their sustainability to continue running beyond the term of the grant without any further financial support from AHC.</p>		<p>able to apply for Grant funding through the local County Councillor Grant scheme.</p>
Rurality	<p>Medium Negative – a medium proportion of current DMPCU grant-funded projects specifically support individuals in relation to this characteristic – an estimated 500 individuals across the County. It is rated as medium because most of these services are not fully funded by AHC grants; the AHC funding can only be a proportion of the running costs. In addition, projects that are fully funded are operating as pilots and so are already aware that the grant funding is short-term and applied to for the grant funds on this basis. As part of their initial application, they were assessed on their sustainability to continue running beyond the term of the grant without any further financial support from AHC.</p>	Countywide impact	<p>AHC will continue to fund a team that will provide insight and support to continue VCSE activity, particularly activity supporting adults living in rural areas. This includes providing support to access external grants and funding opportunities, to minimise disruption and maximise the ability for the VCSE sector to avoid costs. Utilisation and development of existing strong relationships focused on expressing AHC needs of sector. Some providers may fail, but others (both at large and community level) may see increased activity. Organisations will still be able to apply for Grant funding through the local County Councillor Grant scheme.</p>

If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact
N/A	

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

DMPCU in AHC will still provide insight and support to Voluntary Community & Social Enterprise sector (VCSE) and partners (Health and Local Councils) but no direct grant funding support will be provided. DMPCU team will be reprioritised to support organisations find and secure funding from other sources to maintain services, whilst continuing to ensure that the VCSE sector are provided with insight and data (such as demographics, risk factors to social care) to ensure that support continues to be targeted to those most at risk of needing social care (this in particular includes the following protected characteristics: Age, Disability, Race, Poverty and Rurality). Maintenance of relationships with health partners is key to help meet shared objectives e.g., Clinical Commissioning Group. Better working relationships developed with Districts post-COVID can be aligned to minimise impact on local services.

The Culture, Countryside and Business Services department (CCBS) as part of Savings Programme to 2023 are intending to remove £600,000 of grants to community organisations via the CCBS Recreation and Heritage fund and transfer £230,000 to the

Leader's and Members' Grant Fund as a permanent commitment. The impact of the CCBS savings on this proposal will be minimal, as the adverse impact of the CCBS proposal is likely to be cultural and community organisations seeking capital investment for buildings, which is not something the Adults' Health and Care grant programme provides funding for. Furthermore, the additional funding to the Leader's and Member's Grants may provide some organisations who would currently apply to Adults' Health and Care for funding for smaller one-off or pump-priming support to an alternative funding source. Depending on what other changes County Council departments and wider community partners make to their own budgets and activities in relation to VCSE sector support, this change in service could potentially contribute towards greater negative cumulative effects on a number of the protected characteristics. This will be important to consider although cannot be quantified at present.

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

## Headquarters – Learning & Development

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Development of L&D's own dedicated training venue(s) within HCC estate (HQ-23-2)	EIA – AHC – Learning and Development Venues – 21/08/19

### EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Paul Castle	Adults Learning & Development	Business Development Manager	<a href="mailto:Paul.Castle@hants.gov.uk">Paul.Castle@hants.gov.uk</a>	0370 779 0794	19/08/2021	V1
2	EIA authoriser	Sarah Snowdon	AHC	Assistant Director Transformation & Digital	<a href="mailto:Sarah.snowdon@hants.gov.uk">Sarah.snowdon@hants.gov.uk</a>	01962 832480	19/08/2021	V1
3	EIA Coordinator	Ed Walton	AHC	Safeguarding & Governance Senior Officer	<a href="mailto:Ed.walton@hants.gov.uk">Ed.walton@hants.gov.uk</a>	01962 845880	19/08/2021	V1

### Section one – information about the service and service change

<b>Service affected</b>	HQ – Learning & Development (L&D)
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<b>Please provide a short description of the service / policy/project/project phase</b>	Opportunity for the L&D team to have dedicated training venue(s) in an effort to reduce expenditure on the use of external venues.
<b>Please explain the new/changed service/policy/project</b>	Possible savings of approx. 50% of L&D venue hire budget if one dedicated venue was available internally with priority use by L&D.

## Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.

**Has any pre-consultation engagement been carried out?**

(Delete as appropriate)

	No	
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**Describe the consultation or engagement you have performed or are intending to perform.**

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

No specific consultation has been carried out on this proposal – however, the County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council's Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required. Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

**Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age		X				
Disability			X			
Gender reassignment		X				
Pregnancy and maternity		X				
Race		X				
Religion or belief		X				
Sex		X				

<b>Sexual orientation</b>		X				
<b>Marriage &amp; civil partnership</b>		X				
<b>Poverty</b>			X			
<b>Rurality</b>		X				

**Table 2 Geographical impact**

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

<b>Area</b>	<b>Yes / no</b>
All Hampshire	Yes
Basingstoke and Deane	
East Hampshire	
Eastleigh	
Fareham	
Gosport	
Hart	
Havant	



New Forest	
Rushmoor	
Test Valley	
Winchester	

**Section three: Equality Statement**

For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.

**Table 3 Consideration of and explanation for neutral or low negative impacts**

<b>Protected characteristic</b>	<b>Brief explanation of why this has been assessed as having neutral or low negative impact</b>
Disability	New training venue once sourced may/may not provide desired level of disabled access.
Poverty	New location may equate to additional travel costs for staff either by public transport or increased parking costs.
Age; Gender reassignment; Pregnancy and maternity; Race; Religion or belief; Sex; Sexual orientation; Marriage and civil partnership; Rurality	Neutral – No other protected characteristics will be affected by the proposed changes. As done currently, any potential new venue for training will meet the requirements for inclusivity of all staff and attendees attending the training venues.

For all characteristics marked as either having a ‘medium negative’ or ‘high negative’, please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions

If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

Table 5 Consideration of and explanation for positive impacts

Protected characteristic	Brief explanation of why this has been assessed as having positive impact

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.

- Consider undertaking consultation/re-consulting.
- If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
- Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

Decision on the new venue(s) is yet to be made; the service is working with the internal corporate accommodation board to review possible options that both meet our requirement for a dedicated training venue with suitable facilities but also delivers on planned savings.

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

At this stage, given that no decision has been made on a venue, an update to the EIA may be required at a later date.

## Headquarters – Learning & Development

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA – [Department]-[title]-[year/month/day]</i></b>
Learning & Development – Income Generation (HQ-23-3)	EIA-AHC-Income Generation-2021/08/19

### EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Paul Castle	AHC Learning & Development	Business Development Manager	<a href="mailto:Paul.Castle@hants.gov.uk">Paul.Castle@hants.gov.uk</a>	0370 779 0794	19/08/21	V1
2	EIA authoriser	Sarah Snowdon	AHC	Assistant Director Transformation & Digital	<a href="mailto:sarah.snowdon@hants.gov.uk">sarah.snowdon@hants.gov.uk</a>	01962 832480	19/08/21	V1
3	EIA Coordinator	Ed Walton	AHC	Safeguarding & Governance Senior Officer	<a href="mailto:Ed.walton@hants.gov.uk">Ed.walton@hants.gov.uk</a>	01962 845880	19/08/21	V1

### Section one – information about the service and service change

<b>Service affected</b>	Learning & Development – Income Generation
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<b>Please provide a short description of the service / policy/project/project phase</b>	Growing opportunities for increased income mainly through the launch of the team's external E-Learning platform.
<b>Please explain the new/changed service/policy/project</b>	Launch of a dedicated, external only, E-Learning platform. Customers will subscribe to the service for access to content.

## Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.

### Has any pre-consultation engagement been carried out?

(Delete as appropriate)

No

### Describe the consultation or engagement you have performed or are intending to perform.

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

No specific consultation has been carried out on this proposal – however, the County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council's Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required.

Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

**Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age		X				
Disability		X				
Gender reassignment		X				
Pregnancy and maternity		X				
Race		X				
Religion or belief		X				
Sex		X				
Sexual orientation		X				

<b>Marriage &amp; civil partnership</b>		X				
<b>Poverty</b>			X			
<b>Rurality</b>		X				

**Table 2 Geographical impact**

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

Area	Yes / no
All Hampshire	Y
Basingstoke and Deane	
East Hampshire	
Eastleigh	
Fareham	
Gosport	
Hart	
Havant	
New Forest	

Rushmoor	
Test Valley	
Winchester	

**Section three: Equality Statement**

For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.

**Table 3 Consideration of and explanation for neutral or low negative impacts**

Protected characteristic	Brief explanation of why this has been assessed as having neutral or low negative impact
Poverty	If agreed there may be a future requirement for staff to travel outside of county to provide Face to Face to training. However full costs will be reimbursed.
Age; Disability; Gender reassignment; Pregnancy and maternity; Race; Religion or belief; Sex; Sexual orientation; Marriage and civil partnership; Rurality	Neutral – No other protected characteristics will be affected by the proposed changes. As done currently, any training will be designed to meet the requirements for inclusivity of all staff and attendees.

For all characteristics marked as either having a ‘medium negative’ or ‘high negative’, please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions



If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

Table 5 Consideration of and explanation for positive impacts

Protected characteristic	Brief explanation of why this has been assessed as having positive impact

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

Agreements on Face-to-Face training and how this will be conducted are yet to be decided.

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

At this stage, given that no decision has been made on Face-to-Face training, an update to the EIA may be required at a later date as possibilities for additional income become clearer. This may include travel out of the county to conduct training at venues/providers.

## Headquarters – Technology Enabled Care

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Headquarters - Technology Enabled Care (HQ-23-4)	EIA – AHC – TEC – 2021/08/19

### EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Mark Allen	AHC	Head of TEC	<a href="mailto:Mark.allen@hants.gov.uk">Mark.allen@hants.gov.uk</a>	01962 845056	19/08/2021	V1
2	EIA authoriser	Sarah Snowdon	AHC	Assistant Director Transformation & Digital	<a href="mailto:Sarah.snowdon@hants.gov.uk">Sarah.snowdon@hants.gov.uk</a>	0370 779 0744	19/08/2021	V1
3	EIA Coordinator	Ed Walton	AHC	Safeguarding & Governance Senior Officer	<a href="mailto:Ed.walton@hants.gov.uk">Ed.walton@hants.gov.uk</a>	01962 845880	19/08/2021	V1

### Section one – information about the service and service change

<b>Service affected</b>	<u>Technology Enabled Care (TEC)</u>
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<p><b>Please provide a short description of the service / policy/project/project phase</b></p>	<p>The Adults' Health and Care department currently provides TEC services to individuals who are referred via the Dementia Advisors service and pathway. These services are the provision of technological devices that support people in various ways that help them maintain independence. These can range from remote alarms to Amazon Echoes. These individuals fall outside our prime eligibility framework (those who have assessed care needs via a Care Act assessment).</p>
<p><b>Please explain the new/changed service/policy/project</b></p>	<p>Our proposal is to seek funding from the NHS to cover this work as it primarily and substantially supports people who have a first diagnosis of Dementia and their carers. The impact is largely on reducing the call on health services in this early stage of Dementia. In addition, we will seek to develop and offer NHS services a falls prevention intervention utilising Care Technology as we have previously been able to demonstrate positive impacts on primary health care services and admissions to hospital due to repeated falls where individuals have been unable to raise help and/or support.</p> <p>If we are unable to attract appropriate funding arrangements from other sources, we will review the provision of services currently provided by Adults' Health and Care via the Dementia Pathway and assess whether ceasing the referrals via this route will realise the savings required.</p>

<p><b>Engagement and consultation</b></p>		
<p>The County Council's <i>Serving Hampshire Balancing the Budget</i> consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.</p>		
<p><b>Has any pre-consultation engagement been carried out?</b> (Delete as appropriate)</p>		
	<p>No</p>	

**Describe the consultation or engagement you have performed or are intending to perform.**

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

No specific consultation has been carried out on this proposal – however, the County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council’s Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required. Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

**Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age		X		X		Public
Disability		X		X		Public

<b>Gender reassignment</b>		X				Public
<b>Pregnancy and maternity</b>		X				Public
<b>Race</b>		X				Public
<b>Religion or belief</b>		X				Public
<b>Sex</b>		X				Public
<b>Sexual orientation</b>		X				Public
<b>Marriage &amp; civil partnership</b>		X				Public
<b>Poverty</b>		X				Public
<b>Rurality</b>		X				Public

### Table 2 Geographical impact

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

Area	Yes / no
All Hampshire	Yes
Basingstoke and Deane	
East Hampshire	

Eastleigh	
Fareham	
Gosport	
Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

### **Section three: Equality Statement**

**For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.**

**Table 3 Consideration of and explanation for neutral or low negative impacts**

<b>Protected characteristic</b>	<b>Brief explanation of why this has been assessed as having neutral or low negative impact</b>
Age	The assessment is neutral if we are able to source additional funding from the NHS as there would be no direct impact on service delivery. If, however, funding is not available then we would need to reduce the service. This would not impact on existing service users but would impact on future potential clients. These individuals would need to approach the NHS for services.
Disability	The assessment is neutral if we are able to source additional funding from the NHS as there would be no direct impact on service delivery. If, however, funding is not available then we

	would need to reduce the service. This would not impact on existing service users but would impact on future potential clients. These individuals would need to approach the NHS for services.
Gender reassignment	The assessment is neutral as there are no specific impacts for this protected characteristic beyond those for any individual.
Pregnancy and maternity	The assessment is neutral as there are no specific impacts for this protected characteristic beyond those for any individual.
Race	The assessment is neutral as there are no specific impacts for this protected characteristic beyond those for any individual.
Religion or belief	The assessment is neutral as there are no specific impacts for this protected characteristic beyond those for any individual.
Sex	The assessment is neutral as there are no specific impacts for this protected characteristic beyond those for any individual.
Sexual orientation	The assessment is neutral as there are no specific impacts for this protected characteristic beyond those for any individual.
Marriage & civil partnership	The assessment is neutral as there are no specific impacts for this protected characteristic beyond those for any individual.
Poverty	The assessment is neutral as there are no specific impacts for this protected characteristic beyond those for any individual.
Rurality	The assessment is neutral as there are no specific impacts for this protected characteristic beyond those for any individual.

For all characteristics marked as either having a 'medium negative' or 'high negative', please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions
Age	If funding is not available, then we would need to reduce the service. This would not impact on existing service users but		We have initiated a dedicated programme to look at the opportunities to seek joint funding from the



	would impact on future potential clients. A significant proportion of people who are diagnosed with Dementia are older individuals. These individuals would need to approach the NHS for services.		NHS for these services alongside a fall prevention initiative. Should this be successful it will mitigate the currently understood negative effects. Those service users who currently receive the service will continue to do so.
Disability	If funding is not available, then we would need to reduce the service. This would not impact on existing service users but would impact on future potential clients who are diagnosed with Dementia and require some level of support. These individuals would need to approach the NHS for services.		We have initiated a dedicated programme to look at the opportunities to seek joint funding from the NHS for these services alongside a fall prevention initiative. Should this be successful it will mitigate the currently understood negative effects. Those service users who currently receive the service will continue to do so.

If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

Table 5 Consideration of and explanation for positive impacts

Protected characteristic	Brief explanation of why this has been assessed as having positive impact

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

## Headquarters –

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Reduction in funding available for social inclusion services (homelessness support services) (HQ-23-6)	EIA-AHC-Social Inclusion-2021/08/19

### EIA writer(s) and authoriser

No		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Sarah Jeffery	AHC	Commissioning officer	<a href="mailto:Sarah.jeffery@hants.gov.uk">Sarah.jeffery@hants.gov.uk</a>	07894417027	19/08/21	V1
2	EIA authoriser	Sarah Snowdon	AHC	Assistant Director Transformation & Digital	<a href="mailto:Sarah.snowdon@hants.gov.uk">Sarah.snowdon@hants.gov.uk</a>	0370 779 0744	19/08/21	V1
3	EIA Coordinator	Gloria Kwaw	AHC	Equality and Inclusion Manager	<a href="mailto:Gloria.kwaw@hants.gov.uk">Gloria.kwaw@hants.gov.uk</a>	0370 779 4934	19/08/21	V1

### Section one – information about the service and service change

<b>Service affected.</b>	<u>Social Inclusion Services (Homelessness Support Services)</u>
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<p><b>Please provide a short description of the service / policy/project/project phase</b></p>	<p>Social inclusion services provide housing related support for people who are sleeping rough or at high risk of sleeping rough. Services support people with mental health support needs, substance misuse issues and those with a history of offending.</p> <p>Housing related support is defined as help that develops or sustains an individual's capacity to live independently in accommodation. This includes support to understand and manage the rights and responsibilities of their tenancy, manage debt and budget effectively, better manage physical health, mental health and substance misuse, and access healthcare, specialist services and Education, Training and Employment (ETE) opportunities.</p> <p>Hampshire County Council currently funds support services for 190 homeless people living in accommodation based (supported housing) schemes.</p> <p>The County Council also funds community support for people who are homeless or at risk of homelessness who have complex and multiple needs and require support to access or maintain accommodation. Approximately 200 people use community support services at any one time.</p>
<p><b>Please explain the new/changed service/policy/project</b></p>	<p>A proposed reduction of £360k in the Adults' Health and Care budget available for these services resulting in fewer people being able to access support and an increased demand for homelessness services provided by district and borough councils.</p> <p>The statutory responsibility to prevent and relieve homelessness sits with the District and Borough councils, however Adults' Health and Care currently commission a range of accommodation based and community support services for people who are homeless.</p> <p>Whilst fewer people would be able to access the specialist services funded by Adults' Health and Care, these services would continue to be available for people who are homeless and may have eligible care and support needs as a result of mental health and/or substance misuse or other complex needs.</p>

## Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.

### Has any pre-consultation engagement been carried out?

(Delete as appropriate)

	No, but is planned to be undertaken
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### Describe the consultation or engagement you have performed or are intending to perform.

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

The County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council's Cabinet in October 2021. When decisions are made to pursue the options, further specific 'stage 2' consultation will be carried out with stakeholders on the detailed options where required.

Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

The initial findings showed that the weight of opinion veered slightly towards disagreement with introducing new service charges, or reducing or changing services.

The respondents to the consultation were not representative of the people affected by changes to services with fewer responses from those in lower income groups or who recognise that they use Adults' Health and Care services. In addition, it was not possible to identify respondents to the consultation who may be homeless or at risk of homelessness. Therefore, if the decision is taken to continue to look at further service changes, there will need to be further in-depth 'stage 2' consultation with the public, service users and other stakeholders.

Once the initial findings from the budget consultation have been published, there will be extensive engagement with District and Borough councils and Health partners to review the future provision of these services and explore opportunities for pooled funding

arrangements in recognition that these services cut across housing, social care, and health needs. Changes to services to achieve the proposed £360k reduction will be co-produced with District and Borough council partners.

It is also intended to engage and consult with other key stakeholders including Probation, the Office of the Police and Crime Commissioner, providers of services and the wider voluntary sector.

Service users will be consulted through both the completion of questionnaires and the opportunity to talk directly to County Council staff regarding the proposals.

In recognition of the complexity and importance of this area of work, we are also proposing to ask the Health and Adult Social Care Select Committee (HASC) to establish a working group to provide overview and scrutiny throughout the review period.

### **Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age		X				Public
Disability					X	Public

<b>Gender reassignment</b>		X				Public
<b>Pregnancy and maternity</b>		X				Public
<b>Race</b>		X				Public
<b>Religion or belief</b>		X				Public
<b>Sex</b>		X				Public
<b>Sexual orientation</b>		X				Public
<b>Marriage &amp; civil partnership</b>		X				Public
<b>Poverty</b>					X	Public
<b>Rurality</b>				X		Public

### Table 2 Geographical impact

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

Area	Yes / no
All Hampshire	YES
Basingstoke and Deane	
East Hampshire	

Eastleigh	
Fareham	
Gosport	
Hart	
Havant	
New Forest	
Rushmoor	
Test Valley	
Winchester	

### **Section three: Equality Statement**

**For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.**

**Table 3 Consideration of and explanation for neutral or low negative impacts**

<b>Protected characteristic</b>	<b>Brief explanation of why this has been assessed as having neutral or low negative impact</b>
<b>Age</b>	Services support people aged between 18 and 64 and above where this is the most appropriate service to meet their needs. Data shows that a significant majority of service users (97%) are aged between 18 and 60. Whilst there are variations around the county, the data shows a fairly even spread within the 18 and 60 age bracket. The available data does not show a marked variation in age between the users of the different types of services.



	Access to services following the proposed reduction in budget would not be prevented on the basis of age.
<b>Gender reassignment</b>	Access to services following the proposed reduction in budget would not be prevented on the basis of gender reassignment and available data regarding use of services does not indicate that this group will be impacted by changes in this provision.
<b>Pregnancy and maternity</b>	Access to services following the proposed reduction in budget would not be prevented on the basis of pregnancy or maternity and available data regarding use of services does not indicate that this group will be impacted by changes in this provision. Equalities data from 2020/21 will be used to further understand the current use of services.
<b>Race</b>	Access to services following the proposed reduction in budget would not be prevented on the basis of race. Equalities data from 2020/21 will be used to further understand the current use of services.
<b>Religion or belief</b>	Access to services following the proposed reduction in budget would not be prevented on the basis of religion or belief. Equalities data from 2020/21 will be used to further understand the current use of services.
<b>Sex</b>	All Homelessness Support services commissioned by the County Council are mixed gender. However, available data shows a variation in use of the different types of service. The majority of people using accommodation-based services are male whilst the majority of people using community support are female. Whilst access to services following the proposed reduction in budget would not be prevented on the basis of sex, an impact may be identified if one element of service provision is reduced more than another.
<b>Sexual orientation</b>	Access to services following the proposed reduction in budget would not be prevented on the basis of sexual orientation. Equalities data from 2020/21 will be used to further understand the current use of services.
<b>Marriage/civil partnership</b>	Access to services following the proposed reduction in budget would not be prevented on the basis of marriage/civil partnership. Equalities data from 2020/21 will be used to further understand the current use of services.

For all characteristics marked as either having a 'medium negative' or 'high negative', please complete the following table:

Table 4 Explanation and mitigation for medium and high impacts

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions
<b>Disability</b>	<p>In an analysis of client need completed in April 2020, it was found that over 60% of clients have mental health issues and more than 80% have substance misuse issues. A significant number also have poor physical health resulting from long term substance misuse and unmet health needs due to issues accessing services.</p> <p>A significant number of clients receive Employment Support Allowance (ESA) because of illness or disability.</p> <p>Service providers have supplied evidence that they are working with more people with complex and multiple needs. People with complex needs have a combination of mental health and drug and alcohol problems and possibly additional issues such as a learning or physical disability and offending behaviour.</p> <p>The proposed changes to services may mean that this group find it more challenging to access and maintain accommodation. This may result in an increase in homelessness and street homelessness, and associated health problems such as substance misuse and mental health issues.</p> <p>People who are homeless experience some of the worst health outcomes in England and die 30</p>		<p>There will be extensive engagement with District council and Health partners to review the future provision of these services and explore opportunities for pooled funding arrangements in recognition that these services cut across housing, social care and health needs.</p> <p>Any proposed changes to services would ensure that provision focuses on meeting the needs of the most vulnerable clients with multiple and complex needs.</p> <p>The County Council would ensure that anybody affected by the proposals that may have eligible care and support needs as defined by the <i>Care Act 2014</i> can have their needs assessed by the County Council. Following assessment, they would be offered services to meet eligible needs or signposted to other community services.</p>

	<p>years earlier than the general population. The average age of death for a man that is homeless is 47, and for a woman 43. Primary and secondary health services are difficult for homeless clients to access, and intensive support is often required to enable clients to engage with services to ensure that health needs are met.</p> <p>A reduction in services available for this client group may result in an increase in unmet health and social care needs and a subsequent increase in A&amp;E attendance, hospital admissions, and demand for adult social care services.</p>		<p>People with substance misuse issues can access support through the specialist substance misuse services commissioned by the County Council. Services can offer support through outreach and in partnership with other organisations to increase the uptake of the service offer by harder to reach client groups.</p> <p>Where people seek homelessness prevention or relief support from District and Borough councils, housing advisors can refer those with additional support needs to other County Council funded support services, including drug and alcohol services, Wellbeing Centres, and for assessment under the <i>Care Act 2014</i>.</p>
<b>Poverty</b>	<p>Available data shows that the majority of people using Homelessness Support services are in receipt of welfare benefits. Many clients come to the attention of services when they are facing eviction due to rent arrears.</p> <p>Homelessness Support services help people to access their full entitlement of benefits, attend appointments for benefit assessments and resolve issues with benefit claims. Service providers have reported an increase in the number of people requiring this type of support following the roll out of welfare reforms and increased sanctions. Services also help people</p>	This will depend on how the reductions are made.	Any proposed changes to services would ensure that provision focuses on meeting the needs of the most vulnerable clients with multiple and complex needs.

	<p>budget on a low income, access debt advice and prioritise rent payments. Whilst alternative services are available, clients with complex needs often need support to engage with more mainstream service offers or are excluded from these services due to behaviour or substance misuse.</p> <p>For those recovering from homelessness, support to access training courses, voluntary work, education, and employment is available. Pre-employment activities are provided to support vulnerable people who are not yet ready to engage with more mainstream employment support.</p> <p>The proposed changes would result in a reduction in the services available and may result in more people being unable to navigate the benefits system without support or being sanctioned. Subsequently, more people may become homeless as a result of non-payment of rent.</p>		
<b>Rurality</b>	<p>The reduction in community support may mean that people living in more rural areas could find it harder to access the support they need as most alternative services are in larger towns or cities. People who currently receive a visiting community support service may need to travel to get support from other services which they may not be able to do due to affordability or accessibility of public transport.</p>	<p>This will depend on how the reductions are made.</p>	

If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce, or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

Whilst other sources of support are available, the vulnerability of some of the people who use services may mean that they do not seek or access the help they need to prevent homelessness. This could result in an increase in homelessness and street homelessness, and an increase in the number of people who subsequently require services from the District and Borough Councils.

In addition, other sources of support such as Community Mental Health Services have recently undergone changes with new contracts being issued in April 2021. Changes to Hampshire's Mental Health Accommodation and Support Services have also recently taken place. Substance misuse services are currently subject to consultation as part of the Transformation to 2021 programme, with outcomes currently unknown, therefore, identified mitigations such as use of these services may not be available pending the outcome of the consultation. Linked to this, the new Prison and Probation Service, Commissioned Rehabilitative Services are dependent on Local Authority Housing Stock to support those leaving prison, therefore reductions in these services could have a compound impact on these client groups.

Lastly, the Government's stay on evictions during the pandemic has recently ceased. It is anticipated that this will lead to a rise in evictions in a few months' time once the processes have been followed, which may see increased demand for services. Therefore, there is the potential for a higher number of people to be impacted by any changes to services.

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

## Care Governance and Quality Assurance

<b>Name of SP23 proposal:</b>	<b>SP23 Opportunity Reference:</b> Please use this structure as a reference for your EIA: <b><i>EIA –[Department]-[title]-[year/month/day]</i></b>
Care Governance and Quality Assurance Operating Model (GA-23-1)	EIA-AHC-Care Governance and Quality Assurance-2021/08/19

### EIA writer(s) and authoriser

No.		Name	Department	Position	Email address	Phone number	Date	Issue
1	Report Writer(s)	Philippa Mellish	AHC	Head of Care Governance & Quality Assurance	philippa.mellish@hants.gov.uk	0370 779 0652	19/08/2021	V1
2	EIA authoriser	Graham Allen	AHC	Director of Adult's Health & Care	<a href="mailto:Graham.allen@hants.gov.uk">Graham.allen@hants.gov.uk</a>	03707 795574	24/08/2021	V1
3	EIA Coordinator	Gloria Kwaw	AHC	Equality & Inclusion Manager	<a href="mailto:Gloria.kwaw@hants.gov.uk">Gloria.kwaw@hants.gov.uk</a>	03707 794934	19/08/2021	V1

## Section one – information about the service and service change

<b>Service affected</b>	<p>Care Governance and Quality Assurance function</p> <p>All services within the Care Governance and Quality Assurance function will be included within the scope of the operating model review with the exception of Officers dedicated to support the Hampshire Safeguarding Adults Board (HSAB). This is because these posts are partnership funded and the level of resource needed to support the HSAB is subject to a resources review being overseen by the HSAB.</p> <p>The remaining teams that are within scope include:</p> <p>The Quality Team - responsible for monitoring the quality of provision across Hampshire's care market, proactively supporting providers to improve, working to prevent provider failure and coordinating the Department's response in the case of provider failure and market exit. The Team also oversee the development and implementation of the Department's Quality Assurance Framework and Care Governance Strategy, providing support and input to the Care Governance Board.</p> <p>The Customer Care Team - responsible for reporting, monitoring, responding to and learning from complaints. The team also coordinate and undertake review activity including records reviews, Critical Incident Reviews, Complex Complaint Investigations, Internal Management Reviews, Coroner's reports and Safeguarding Adult Reviews.</p> <p>Policy and Guidance Team - responsible for overseeing Departmental policies, procedures and guidance, ensuring the Department is kept abreast of, and responds effectively to, policy and legislative developments and managing the Department's work to advance inclusion and diversity, alongside the accessibility of services.</p> <p>Risk and Information Governance Team - responsible for oversight and management of the Department's approach to risk, health and safety, business continuity and information governance.</p>
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<p><b>Please provide a short description of the service / policy/project/project phase</b></p>	<p>This project is in its early, scoping phase. Its purpose is to review the Care Governance and Quality Assurance Operating Model with a view to identifying opportunities to reduce headcount through, for example, changing the way we work or revising the services and support provided to the Department and wider organisation.</p> <p>As the vast majority of the function's budget relates to pay costs, future savings will necessarily impact on members of the team. In so far as possible, efforts will be made to deliver savings through opportunities to rationalise resource through natural turnover - however, this will depend on the nature of roles and needs of the business.</p> <p>Detailed timings for the review and delivery of required savings have yet to be determined. Timings will take into account the fact that the function has recently concluded a restructure resulting in the deletion of four Safeguarding Administrative Officers to achieve savings under the Department's Transformation to 2019 Programme.</p>
<p><b>Please explain the new/changed service/policy/project</b></p>	<p>The Care Governance and Quality Assurance function is required to deliver a £200,000 saving contribution to the Department's Savings Programme to 2023 (SP23) target. It is expected that these savings will need to be achieved through a reduction in the function's headcount, although for completeness consideration will be given to any other opportunities (e.g., the potential to generate income or to reduce limited non-pay budgets). The detailed changes have yet to be determined and will be developed as part of the operating model review. It is anticipated that once detailed proposals are in place, a full EIA will be completed.</p> <p>The Care Governance and Quality Assurance function has recently completed a restructure and undergone a period of instability. With this in mind, planning has not yet commenced on the operating model review to inform required SP23 savings. As this work is progressed, options for achieving savings will be considered and detailed proposals developed. Whilst all possibilities will be explored, it is likely that the majority of savings will be delivered through revising the function's support offer in order to reduce the overall headcount. The equality impacts of all options considered will inform the final proposals which in turn, will be subject to a full EIA. This cannot be completed at this stage in a meaningful way as it is not yet clear which staff will be affected.</p>

## Engagement and consultation

The County Council's *Serving Hampshire Balancing the Budget* consultation (2021-2023) sought residents' and stakeholders' views on strategic options for funding the Authority's budget gap. Where applicable, detailed proposals for making savings will be subject to further, more detailed 'stage two' consultation before any decisions on service specific changes are made.

### Has any pre-consultation engagement been carried out?

(Delete as appropriate)

		<b>No, but is planned to be undertaken</b>
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### Describe the consultation or engagement you have performed or are intending to perform.

Describe who was engaged or consulted. What was the outcome of the activity and how have the results influenced what you are doing? If no consultation or engagement is planned, please explain why.

No specific consultation has yet been carried out on this proposal – however, the County Council ran a major public consultation exercise over the Summer 2021 on a range of options for finding further budget savings including increasing Council Tax, using reserves and making changes to the way services are delivered, which may mean reducing or withdrawing certain services. The outcome of this consultation will be presented to the County Council's Cabinet in October 2021. When decisions are made to pursue the options, further specific consultation will be carried out with stakeholders on the detailed options where required. Feedback from the budget consultation has been taken into consideration in shaping savings proposals where appropriate.

All staff impacted will be consulted, as appropriate, prior to any decision being made to restructure services in scope. As the function primarily serves the Department, and is not customer facing, it is not envisaged that more detailed, stage two consultation will be required in addition to the Budget consultation. Where there may be an impact on the function's support to providers, or on work with partners, further consultation and engagement will be planned.

### **Section two: Assessment**

Carefully and consciously consider the impacts of the proposed change.

Consider at this point whether the assessment is of impacts on staff or service users. If it is both the impacts may be contradictory for each group (negative for staff but positive for customers, or vice versa). Consider completing two assessment tables (one for staff and one for customers) and providing one equality statement for both groups.

If the proposed change is expected to have a positive, neutral (no impact) or negative (low, medium or high) impact on people in the protected characteristics groups. Indicate the impact by entering the risk score in the relevant column in the table below, as shown in the example.

If an overview assessment of due regard is appropriate, please go to box 2.

**Table 1 Impact Assessment**

**This is an overview assessment – equality impacts are not yet known** The equality impacts of all options considered will inform the final proposals which in turn, will be subject to a full EIA. This cannot be completed at this stage in a meaningful way as it is not yet clear which staff will be affected.

Protected characteristic (see <a href="#">EIA Guidance</a> for considerations)	Positive	Neutral	Negative - low	Negative - Medium	Negative - High	Affects staff, public or both?
Age						
Disability						
Gender reassignment						
Pregnancy and maternity						
Race						
Religion or belief						
Sex						

<b>Sexual orientation</b>						
<b>Marriage &amp; civil partnership</b>						
<b>Poverty</b>						
<b>Rurality</b>						

**Table 2 Geographical impact**

Does the proposal impact on a specific area? Consider the [demographic data](#) of the locations.

<b>Area</b>	<b>Yes / no</b>
All Hampshire	n/a
Basingstoke and Deane	n/a
East Hampshire	n/a
Eastleigh	n/a
Fareham	n/a
Gosport	n/a
Hart	n/a
Havant	n/a

New Forest	n/a
Rushmoor	n/a
Test Valley	n/a
Winchester	n/a

**Section three: Equality Statement**

For all characteristics marked as either having a neutral or low negative impact, challenge your assessment - carefully consider the protected characteristics, if necessary, review the Inclusion and Diversity eLearning, discuss with an EIA co-ordinator.

**Table 3 Consideration of and explanation for neutral or low negative impacts**

Protected characteristic	Brief explanation of why this has been assessed as having neutral or low negative impact

For all characteristics marked as either having a 'medium negative' or 'high negative', please complete the following table:

**Table 4 Explanation and mitigation for medium and high impacts**

Protected characteristic	Brief explanation of why this has been assessed as having medium or high negative impact	Is there a Geographical impact? If so, please explain -use list below to identify geographical area(s)	Short explanation of mitigating actions

If you have specified mitigations as part of the assessment, now consider reviewing the impact severity/risk assessment.

For all characteristics marked as either having a positive impact please explain why here.

**Table 5 Consideration of and explanation for positive impacts**

Protected characteristic	Brief explanation of why this has been assessed as having positive impact

**Further actions and recommendations to consider:**

- If neutral or low negative impacts have been carefully considered and identified correctly, the activity is likely to proceed.
- If medium negative or high negative have been identified:
  - The policy, service review, scheme or practice may be paused or stopped
  - The policy, service review, scheme or practice can be changed to remove, reduce or mitigate against the negative impacts.
  - Consider undertaking consultation/re-consulting.
  - If all options have been considered carefully and there are no other proportionate ways to remove, reduce, or mitigate - explain and justify reasons why in the assessment.
  - Carry out a subsequent impact severity assessment following mitigating actions.

**Box 1 Please set out any additional information which you think is relevant to this impact assessment:**

**Box 2**

**If appropriate, (i.e., it is immediately evident that a full EIA is not necessary) please provide a short succinct assessment to show that due regard has been given and that there is no requirement for a full EIA:**

As explained above, until the work to create a new Operating Model is complete, it will not become apparent what equality impacts there are, as it is not known which staff will be affected. A full EIA will need to be done before decisions are taken about the implementation of a new Operating Model.