

Appendix D- Equality Impact Assessments- Tranche One MTFs 2020/21-2022/23

Contents

Equality Impact Assessment: Age UK.....	2
Equality Impact Assessment: Integrated Lifestyles Service.....	5
Equality Impact Assessment: Healthy Child Programme	7
Equality Impact Assessment: Stay Well in Winter.....	10
Equality Impact Assessment: Lifeline service	13
Equality Impact Assessment: Extra Care.....	16
Equality Impact Assessment: Peterborough Community Assistance Scheme (PCAS).....	19
Equality Impact Assessment: Street Lighting.....	22
Equality Impact Assessment: Youth Services	24
Equality Impact Assessment: HR Controls.....	27
Equality Impact Assessment: Peterborough Enforcement Services (PES).....	30
Equality Impact Assessment: HR Functional Changes.....	32
Equality Impact Assessment: Care Package Reviews	34

Equality Impact Assessment: Age UK

What are the proposed outcomes of the policy?

To decommission the Age UK contract and activities which are commissioned by the iBCF (improved Better Care Fund) programme equating to £45,000 annually.

The Department of Health provided funding (Improved Better Care Fund (iBCF)) to local authorities including Peterborough City Council to deliver capacity to assist hospital discharge and avoid admissions. (The Secretary of State for Health and Social Care closely monitors the delivery of the iBCF programme across the country and critically evaluates its impact on the speed of discharge).

With the older population in Peterborough set to rise by more than 4% each year to 2021, the Age UK Community Support at Home was commissioned in 2017 as part of the Winter Pressures Model with other providers. This was to avoid bed capacity pressures at Peterborough City Hospital which is key to the national planning for managing Delayed Transfers of Care (DTOCs) which the service provided.

Age UK Cambridgeshire and Peterborough Community Support at Home Service supports vulnerable, older people, primarily but not exclusively aged 60 and over, within their own homes. Older people are assisted to continue to live independently by providing daily contact, and support by personal visit or telephone call to ensure a sense of security and wellbeing as well as practical support.

Community Support at Home primarily relieves pressure on the Reablement Team and Domiciliary Care Providers, reducing the number of care visits required by offering support with practical needs.

The service is free of charge to people accessing it and supports all older people to continue to live independently at home by providing regular contact (Monday to Friday), either by a personal visit or telephone call, to provide a sense of security and wellbeing.

The service also provides: -

- Signposting older people to helpful information and guidance.
- Advice on other local community services
- Collecting prescriptions
- Reading post
- Making phone calls on behalf of the service user, if requested

Which individuals or groups are most likely to be affected?

Older people who are assisted to live independently will be affected by this proposal.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	Yes, this proposal would affect older people particularly over the age of 65 and could lead to changes increases /

	reductions in the care that some people receive. Additional pressure could be placed on inhouse services, such as reablement.
Disabled people	Not specifically
Married couples or those entered into a civil partnership	Not specifically
Pregnant women or women on maternity leave	Not specifically
Particular ethnic groups	Not specifically
Those of a particular religion or who hold a particular belief	Not specifically
Male/Female	Not specifically
Those proposing to undergo, currently undergoing or who have undergone gender reassignment	Not specifically
Sexual orientation	Not specifically

What information is available to help you understand the effect this will have on the Groups identified above?

Information from the provider.

Information owned by the council including client reviews, information on care packages available through corporate systems, and corporate comments, compliments and complaints process.

Who will be the beneficiaries of the policy?

The city council will benefit and in turn the residents of the city, as it will allow the council to work towards delivering a balanced budget in 2020/21.

Has the policy been explained to those it might affect directly or indirectly?

Not yet – consultation will take place on the proposal as part of the phase one budget setting process. If and when a decision is made full briefings would be held with the provider and those affected.

Can any differences be justified as appropriate or necessary?

The proposal is necessary given the severe financial challenge faced by the council. In addition, the changes support the council’s Think Communities approach, which looks to empower and support communities to help themselves.

Are any remedial actions required?

No, although robust review of the contractual change will be undertaken.

Once implemented, how will you monitor the actual impact?

Client reviews, information on care packages available through corporate systems, and corporate comments, compliments and complaints process.

We will also use the Adult Social Care outcomes framework. Age UK contribute to meet these indicators. The withdrawal of the service may result in a reduction in performance.

Policy review date	Six months from any change
Assessment completed by	Karen Berkley
Date Initial EqIA completed	3 Oct 2019H
Signed by Head of Service	Gary Jones

Equality Impact Assessment: Integrated Lifestyles Service

What are the proposed outcomes of the policy?

Integrated Lifestyle services help people to reduce their risk of illnesses such as heart disease, diabetes and cancer, through evidence-based programmes supporting them to achieve personal health goals. These include behaviour changes such as stopping smoking, eating a healthier diet, losing weight and reducing their alcohol intake. These changes reduce future demand on health and care services.

Both Peterborough City Council and Cambridgeshire County Council commission similar Integrated Lifestyle Services, and this proposal is for the two councils to work together to commission the service jointly.

This will enable a saving to be made on the cost of the contract, through reduced management overheads and other efficiencies. In addition, it is proposed to redesign the child weight management services which are delivered as part of the contract, to a more locally tailored model which would not include a lower input from specialist staff.

Which individuals or groups are most likely to be affected?

The savings secured through efficiencies in management cost will not affect specific groups or individuals.

The savings will affect 7 to 11-year-olds identified as being overweight or obese as they will not be able to access structured child weight management services.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	7 to 11-years-olds will not be able to access structured child weight management groups
Disabled people	Not specifically
Married couples or those entered into a civil partnership	Not specifically
Pregnant women or women on maternity leave	Not specifically
Particular ethnic groups	Not specifically
Those of a particular religion or who hold a particular belief	Not specifically
Male/Female	Not specifically
Those proposing to undergo, currently undergoing or who have undergone gender reassignment	Not specifically
Sexual orientation	Not specifically

What information is available to help you understand the effect this will have on the

Groups identified above?

The structured child weight management programme service has been provided in Peterborough since 2017 and despite strenuous efforts it has been difficult to recruit children and their families to the service. The model is evidence based and requires parents/carers to be involved which has been an additional challenge.

The service recruitment and completion targets have consistently not been met. This recruitment issue is a national issue and similar schemes throughout the country experience the same problem.

Who will be the beneficiaries of the policy?

The city council will benefit and in turn the residents of the city as it will allow the council to work towards delivering a balanced budget in 2020/21.

Has the policy been explained to those it might affect directly or indirectly?

As the service is currently being re-commissioned through a competitive tender the potential providers of the service will be informed through this process.

The new service will advertise and promote the proposed alternatives to children and their families.

Can any differences be justified as appropriate or necessary?

The withdrawal of the structured weight management services for 7 to 11-year-olds can be justified through it consistently having a very poor uptake, which is mirrored in other similar services across the country.

The current service has piloted an alternative approach to address weight issues and obesity which has resulted in engagement with higher numbers of children and young people.

Are any remedial actions required?

The service specification for the new Lifestyle Service will include the more locally tailored approach already piloted in Peterborough which has proved to be effective in engaging children and is more cost-effective.

Once implemented, how will you monitor the actual impact?

The new Lifestyle Service contract will have key performance indicators (KPIs) that will capture the numbers of children engaged in the intervention and these will be monitored on a regular basis as part of the main contract.

Policy review date	Three months after implementation
Assessment completed by	Val Thomas/Stuart Tarbuck
Date Initial EqIA completed	3 October 2019
Signed by Head of Service	Liz Robin

Equality Impact Assessment: Healthy Child Programme

What are the proposed outcomes of the policy?

Giving every child the best start in life is a national and local priority. The Healthy Child Programme (HCP) is a programme of screening tests, immunisations, developmental reviews, and information and guidance to support parents and communities to help give every child the best start in life.

The service is mainly delivered by health visitors, family nurses and school nurses working in skill-mix teams. All families receive basic elements of the programme and additional services are provided to those with specific needs and risks.

Work is underway across Peterborough and Cambridgeshire to redesign the HCP in partnership with our NHS providers:

- Cambridgeshire and Peterborough Foundation Trust (CPFT)
- Cambridgeshire Community Services NHS Trust (CCS).

This transformation work will deliver savings agreed in 2018 and includes:

- Aligning the leadership structure across Cambridgeshire and Peterborough
- Streamlining the delivery through a single duty desk and locality in Peterborough
- Using a nationally recognised tool to model the workforce required to deliver the service.
- Use of technology- text messaging service for parents (text us) and young people (chathealth) and on-line medicines management training for schools
- Enhanced Young Parent pathway embedded within Family Nurse Partnership programme.

The work has identified a historic funding gap in Peterborough when the programme transferred from the NHS to the local authority. The costs of the programme for the main provider CPFT were higher than the funding for the contract. Some additional funding has been put into the contract by the city council, and some savings have been identified by a review of costs in the contract including costs of premises, staff vacancies and national funding for the NHS pay rise. Some additional service redesign measures have also been identified including:

- transfer of the National Childhood Measurement Programme (NCMP) to another service provider which took place in September 2019.
- stopping hearing screening when children start school, as children's hearing is now screened shortly after birth. Screening at school entry is not a national requirement and is not being done in Cambridgeshire.
- using information sent through by health visiting services from other local authorities when children move into Peterborough, rather than visiting the family to ask for the information again.
- reducing the number of open access child health promotion clinics run by health visitors from twelve per week to six, while at the same time empowering parents by providing baby self-weigh facilities and improving the availability of local web-based and digital information on child health for parents.

Which individuals or groups are most likely to be affected?

Children aged 0-19 and their parents/carers.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	Children aged 0-19 years and their parents/carers. Both positive and negative impacts likely as there will be a wider digital offer and less face-to-face intervention
Disabled people	Not specifically.
Married couples or those entered into a civil partnership	Not specifically.
Pregnant women or women on maternity leave	Both positive and negative impacts likely as there will be a wider digital and self-help offer and possibly less face-to-face intervention
Particular ethnic groups	Similar impact across all ethnic groups but could have a negative impact on families where English is not the first language. In order to mitigate this impact, there is ongoing service user involvement in the transformation programme as detailed below.
Those of a particular religion or who hold a particular belief	Similar impact across all religious groups
Male/Female	Similar impact for men and women
Those proposing to undergo, currently undergoing or who have undergone gender reassignment	Not specifically
Sexual orientation	Not specifically

What information is available to help you understand the effect this will have on the Groups identified above?

Risk assessment by the service providers identifies that it will be important to ensure that the caseload of children who need safeguarding is shared between health visiting teams and there is good management and supervision, so that the most vulnerable children and families are well supported through the transformation and beyond.

Information on how many children and parents currently attend health promotion drop in clinics is available, and this information will be used when reducing the number of clinics, as well as ensuring a good geographical spread and engaging with service users for their views.

Engagement work on the 'Best Start in Life' strategic programme has provided information about what parents across Peterborough and Cambridgeshire feel is most important to them when receiving support from services, and this will be used during the transformation process.

Who will be the beneficiaries of the policy?

Children and Young People aged 0-19 years in terms of the greater digital offering.

The city council will also benefit and in turn the residents of the city as it will allow the council to work towards delivering a balanced budget in 2020/21.

Has the policy been explained to those it might affect directly or indirectly?

Yes - extensive engagement work has taken place with staff and service users.

While the work with teenage parents has been completed and has informed the design of the young parents pathway, work on the rest of the transformation Programme is ongoing.

As part of this work, a plan has been put in place to gain the service users' perspective in some of the existing clinics including those accessed by parents/ cares where English is a second language. This will particularly involve exploring the impact of closing some of the clinics and accessing the service by means of a texting/ telephony offer.

User research is also part of the Best Start in Life Strategy.

Can any differences be justified as appropriate or necessary?

Yes – there is a requirement to provide the service within the available funding envelope and the service transformation is designed to minimise any negative impacts.

There are also positive impacts from an increased digital offer when working with young people and young parents.

Are any remedial actions required?

These are outlined above. As mentioned, the digital offer will need to consider the needs of parents who speak different languages.

Once implemented, how will you monitor the actual impact?

The transformation programme will be overseen by the CCS-CPFT Joint Venture Programme Board.

Key performance indicators will be monitored through monthly contract monitoring meetings.

Outcomes will be monitored through the annually updated Children and Young Peoples Outcomes Framework available here

<https://cambridgeshireinsight.org.uk/health/popgroups/cyp/> (under Children and Young People – Outcomes).

Due to the financial challenges in the service, the proposal is to continue the transformation process and deliver additional changes in year, with anticipated clinical and financial implementation by December 2019.

Policy review date	Six months from decision
Assessment completed by	Raj Lakshman / Liz Robin
Date Initial EqIA completed	04/10/19
Signed by Head of Service	Liz Robin

Equality Impact Assessment: Stay Well in Winter

What are the proposed outcomes of the policy?

Since 2017, Peterborough City Council has taken part in the 'Stay Well in Winter' multi-agency campaign to support people who are at most risk of poor health as a result of cold weather. As part of this campaign, in 2017 and 2018, the council provided £50,000 of integrated Better Care Fund (iBCF) to the Citizens' Advice Bureau to provide grants to people they assessed as most vulnerable, to help keep their homes warm.

The planned outcomes of the grant were

- Decrease the risk of older and vulnerable people's health being affected by cold weather
- Decrease the demand from older and vulnerable people for hospital and social care services during cold weather periods.

Following a review of the use of the integrated Better Care Fund, it is proposed to remove the £50,000 grant funding to Citizens' Advice Bureau and instead refer people to other (non-council funded) sources of this type of support.

Which individuals or groups are most likely to be affected?

- Older people
- People with ongoing health conditions including mental health and learning disabilities
- Homeless (sleeping bags are also provided for the homeless)

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	Older people - the withdrawal of funding will have a negative effect on the older age groups. Older people are at increased risk of respiratory and cardiac conditions in cold weather especially if they have underlying health conditions.
Disabled people	Disabled people have the associated risks of colder weather that could be exacerbated if they have mobility issues or have difficulties in accessing information and support to keep warm.
Married couples or those entered into a civil partnership	Not specifically
Pregnant women or women on maternity leave	Not specifically
Particular ethnic groups	Not specifically
Those of a particular religion or who hold a particular belief	Not specifically
Male/Female	Not specifically

Those proposing to undergo, currently undergoing or who have undergone gender reassignment	Not specifically
Sexual orientation	Not specifically

What information is available to help you understand the effect this will have on the

Groups identified above?

There is a clear evidence base that demonstrates the effects of cold weather on health. Older people and young children under the age of five years and those with an ongoing health condition are especially affected by respiratory and cardiac health problems. This is evidenced by increased hospital admissions and number of deaths during the winter months.

Who will be the beneficiaries of the policy?

The city council will benefit and in turn the residents of the city as it will allow the council to work towards delivering a balanced budget in 2020/21.

Has the policy been explained to those it might affect directly or indirectly?

The Citizens' Advice Bureau will be advised formally of the changes to the funding that it receives prior to the budget being published.

Can any differences be justified as appropriate or necessary?

This service is not mandatory and there are some alternative options for securing heating support for older people during the winter months.

Are any remedial actions required?

The Stay Well in Winter project is a collaborative initiative that involves both the statutory and voluntary sector organisations. It includes a number of activities designed to support older people which will be maintained and increased to mitigate the impact. This includes the distribution to older people of a pack that has information on the measures they can take to keep themselves warm in winter. This includes the following:


- Information on where non-council grants and support can be obtained to help heat or repair homes.
- A thermometer to monitor home temperatures.
- Advice on eating, drinking and physical activity.
- Promotion of flu vaccination - which is another important protective factor against the effects of cold weather upon health.

Increased efforts will be made to ensure that these packs are widely distributed through older people networks and frontline professionals working with older people.

- The annual campaign for Stay Well runs over the winter and uses many forms of media. This campaign will be continued and enhanced especially when cold weather is forecast.
- Information and alerts will be circulated to frontline professionals about any adverse weather and where older people could access support to keep their homes warm.

Once implemented, how will you monitor the actual impact?

- Health and social work staff reports
- Requests to the Citizens' Advice Bureau and other voluntary sector organisations from older people for support with their heating.

Policy review date	6 months after any changes made
Assessment completed by	Val Thomas/Stuart Tarbuck
Date Initial EqIA completed	3 October 2019
Signed by Head of Service	

Equality Impact Assessment: Lifeline service

What are the proposed outcomes of the policy?

A budget proposal has been developed which will require people to pay for the Lifeline service after the first six weeks. This would deliver savings for the council and allow it to offer the scheme to more people across the city.

The city council has provided the service free of charge since 2015 through a contract with a local provider. Lifelines are not part of statutory social care provision and recent benchmarking against 18 other local authorities found that only four provide lifelines free of charge and, of those, only one was a unitary (Nottingham City).

The savings proposal is to amend the contract so that the council would pay for the first six weeks of Lifeline provision. This reflects the approach currently taken by Cambridgeshire County Council (CCC). In practice, this would mean that people deemed to benefit from a Lifeline would be referred to the provider who would install the lifeline, set up the monitoring service, invoice PCC for the 6-week package and liaise with the service user thereafter regarding them taking on the ongoing monitoring costs. CCC's experience is that around 70% of service users choose to continue with their Lifeline.

Savings will be realised by the council no longer paying for ongoing monitoring of lifeline users as the financial commitment will be for 6 weeks only. There will be savings in terms of back office functions in the council where the admin time is currently significant.

Which individuals or groups are most likely to be affected?

Older people and disabled adults.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	Older people are the majority users of Lifelines. Some may be impacted negatively if they feel they are unable to pay for the ongoing monitoring costs after the first 6 weeks – likely to be approx. £4 per week. It should be acknowledged that the peripheral sensors and detectors that may be connected to a Lifeline – eg falls detectors, door entry monitors – will still be provided on loan free of charge as per the legislative requirements of The Care Act.
Disabled people	Disabled adults under 65 may be impacted in a similar way to older people (as above)
Married couples or those entered into a civil partnership	Not specifically
Pregnant women or women on maternity leave	Not specifically
Particular ethnic groups	Not specifically

Those of a particular religion or who hold a particular belief	Not specifically
Male/Female	Not specifically
Those proposing to undergo, currently undergoing or who have undergone gender reassignment	Not specifically
Sexual orientation	Not specifically

What information is available to help you understand the effect this will have on the groups identified above?

If people choose not to continue with the Lifeline, it is possible that they may be left at risk – for example, if they fell and were unable to raise an alert.

Who will be the beneficiaries of the policy?

The city council will benefit and in turn the residents of the city as it will allow the council to work towards delivering a balanced budget in 2020/21.

Has the policy been explained to those it might affect directly or indirectly?

Not as yet. If the decision is progressed the council will need to work with the provider and service users.

Can any differences be justified as appropriate or necessary?

Council services must be delivered within the available budget and this is not a statutory service. The council would continue to offer 6 weeks free for all, helping to encourage take up of the service, for those who would find it useful.

Are any remedial actions required?


The proposal relates to new users only. Existing Lifeline users would continue to have their systems funded under the current contract until they are no longer required so the number of ‘free’ Lifelines would diminish over time.

There are stand-alone technologies that can be offered to people as an alternative to Lifeline where they have friends, neighbours or family members who could respond if needed ie via a pager type system. Where appropriate, these can be provided on loan, as they are already, through the Technology Enabled Care service within PCC.

Once implemented, how will you monitor the actual impact?

The new Lifestyle service contract will have key performance indicators (KPIs) that will capture the numbers of children engaged in the intervention and these will be monitored on a regular basis as part of the main contract.

Policy review date	3/10/19
Assessment completed by	Val Thomas/Stuart Tarbuck

Date Initial EqIA completed	3/19/19
Signed by Head of Service	

Equality Impact Assessment: Extra Care

What are the proposed outcomes of the policy?

The council's Extra Care Contract provides support and help to people who are socially isolated.

The service is split into three areas:

1. Personal support provision (planned calls)
2. Night support
3. Support for people to access activities in their communities

Hales and Longhurst both provide care in each of the three elements at different rates.

A budget proposal being progressed looks to reduce the size of the contract, by supporting people who are socially isolated to integrate better with their communities through friendships, rather than services provided by the council. We will look to recruit a bank of volunteers in the community and train them over a period of time to be able to provide support for those who are socially isolated and would access these Extra Care services.

This supports the council's Think Communities approach, which looks to empower and support communities to help themselves.

In addition, Serco is undertaking a soft market testing exercise to allow us to better understand the current extra care market in Peterborough. The results of this will then inform whether the council should extend the current contracts at the current rate or proceed with a full procurement exercise.

Which individuals or groups are most likely to be affected?

Older people who receive care as part of the Extra Care Contract could be affected by this proposal.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	Yes, this proposal would affect older people over the age of 65 and could lead to changes/increases/reductions in the care that some people receive. That said, the changes being proposed could lead to a better living standard for some residents as they will be supported to live independently and to feel part of the community, building lasting relationships.
Disabled people	Not specifically
Married couples or those entered into a civil partnership	Not specifically.
Pregnant women or women on maternity leave	Not specifically.

Particular ethnic groups	Not specifically.
Those of a particular religion or who hold a particular belief	Not specifically.
Male/Female	Not specifically.
Those proposing to undergo, currently undergoing or who have undergone gender reassignment	Not specifically.
Sexual orientation	Not specifically.

What information is available to help you understand the effect this will have on the groups identified above?

Provider Information:

Each provider has its own expected outcomes as follows:

- Participation in the PAMMS (Provider Assessment & Market Management Solution) quality monitoring system as outlined in schedule 6 of the contract.
- Submission of the monthly information returns as outlined in schedule 2 of the contract.
- Adherence to key performance indicators as stated in schedule 2 of the contract. Contract monitoring meetings held, and any actions developed to improve KPIs where necessary.

PCC Information:

Client reviews, information on care packages available through corporate systems, and corporate comments, compliments and complaints process.

Who will be the beneficiaries of the policy?

The changes being proposed could lead to a better living standard for some residents as they will be supported to live independently and to feel part of the community, building lasting relationships.

The city council will also benefit and in turn the residents of the city as it will allow the council to work towards delivering a balanced budget in 2020/21.

Has the policy been explained to those it might affect directly or indirectly?

Not as yet, that would happen if and when this proposal is approved.

Can any differences be justified as appropriate or necessary?

The proposal is necessary given the severe financial challenge faced by the council. In addition, the changes support the council's Think Communities approach, which looks to empower and support communities to help themselves.

Are any remedial actions required?

No, though robust review of the contractual change will be undertaken

Once implemented, how will you monitor the actual impact?

Each provider has its own expected outcomes as mentioned above. These include how well people are supported to have control over their daily lives and how much social interaction people receive. The results of these indicators will help us to monitor the impact.

Policy review date	Six months after implementation
Assessment completed by	Kim Grove/Lynne O'Brien/Amanda Rose
Date Initial EqIA completed	3 October 2019
Signed by Head of Service	Gary Jones

Equality Impact Assessment: Peterborough Community Assistance Scheme (PCAS)

What are the proposed outcomes of the policy?

A budget proposal is being progressed which looks to reduce the amount of money the council provides for the Peterborough Community Assistance Scheme (PCAS). This will involve a reduction in funding for a number of organisations, namely the Citizens' Advice Bureau (CAB), Disability Peterborough, Age UK, the Credit Union, KingsGate and the Peterborough Council for Voluntary Services (PCVS).

Currently the amount received by these organisations through the PCAS is £623,000. The budget proposal looks to reduce that by £418,000 in 2020/21, rising to £473,000 in the following financial year. However, all but Age UK will have their funding removed in its entirety.

Which individuals or groups are most likely to be affected?

If the budget proposal proceeds, it will impact those organisations mentioned above which provide these services currently on our behalf - the CAB, Disability Peterborough, Age UK, the Credit Union, KingsGate and the PCVS.

It will also affect those people in the city who use those services as follows:

- CAB - people needing general information, advice and guidance including on matters associated with debt, money management, housing and employment issues.
- Disability Peterborough - this will affect people with a physical disability who have welfare benefit issues, which was the part of the service provided by this organisation that the council funded.
- Age UK - this organisation supports older people, however the proposal in relation to Age UK will not lead to a change in services for these people. It is simply a change to the way a number of different grants are provided.
- Credit Union - this will affect households on low incomes who historically have been unable to secure a high street bank account
- KingsGate - this will affect people who are struggling financially to make ends meet who need financial support to be able to eat and fit out their homes.
- PCVS - will affect people who are seeking volunteering opportunities in Peterborough.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	The only part of this proposal that is specific to an age group is the element related to Age UK and we are not expecting there to be a service reduction here.
Disabled people	People with a physical disability will be affected by the element of the proposal relating to Disability Peterborough. However, some services will still be provided to this group under a new contract to be funded by the remaining PCAS budget, and other services are provided by national providers and locally by the Department for Work and Pensions.
Married couples or those entered into a civil partnership	Not specifically.

Pregnant women or women on maternity leave	Not specifically.
Particular ethnic groups	Not specifically.
Those of a particular religion or who hold a particular belief	Not specifically.
Male/Female	Not specifically.
Those proposing to undergo, currently undergoing or who have undergone gender reassignment	Not specifically.
Sexual orientation	Not specifically.

What information is available to help you understand the effect this will have on the groups identified above?

In the case of older people, the proposals have been developed in close co-operation with Age UK. In the case of disabled people, we have held discussions with other local partners and carried out our own research to determine alternative sources of information and advice.

We will continue to maintain a positive relationship with Age UK, and there will be a number of other formal funding arrangements in place with them. These will be monitored in the normal way, enabling any service issues or impacts to be identified and managed.

The specification for the remaining PCAS service will be explicit about needing to support people with a physical disability with welfare benefits issues. Data to be provided through this contract will enable the council to closely monitor the impact of this funding change and seek further mitigations if necessary.

Who will be the beneficiaries of the policy?

The city council will benefit and in turn the residents of the city as it will allow the council to work towards delivering a balanced budget in 2020/21.

Age UK will benefit as the process we use to pay the organisation a number of different grants is being simplified.

In addition, a procurement exercise will follow if this budget proposal is approved, to appoint an organisation to provide a number of services for residents, in particular those who are at risk of homelessness. In this instance, the organisation selected would benefit, as would those residents who are at risk of homelessness in the future.

Has the policy been explained to those it might affect directly or indirectly?

Not as yet. Informal conversations have been held with each of the organisations mentioned above, but detailed briefings will take place with each group prior to the proposal being made public.

Can any differences be justified as appropriate or necessary?

The proposal is necessary given the severe financial challenge faced by the council. In addition, some of the arrangements with the organisations mentioned have been in place for some time without review and are therefore out of date, For example, the funding for the Credit Union was originally put in place to allow people with poor credit history to open a bank account. Most high street banks now offer this service so the funding is no longer needed.

Are any remedial actions required?

A procurement exercise will be undertaken for a new Voluntary and Community Services Infrastructure Contract, to provide support across Cambridgeshire and Peterborough to smaller voluntary organisations.

Additionally, the remaining PCAS budget will be used to commission an organisation to provide targeted information, advice and guidance as described above.

Actions will also be needed with the following organisations:

- Kingsgate - we need to work with them to support them in seeking alternative funding and to remodel the service.
- Credit Union - the service needs to relocate from its current base below Northminster car park owing to the fact it is due to be demolished, so we will support them to relocate.
- Age UK - complete consolidation of all the funding streams.
- Disability Peterborough - we need to set up a system which allows this organisation to signpost people to other services available locally and nationally, and which allows the provider of the new contract mentioned above to work with Disability Peterborough.

Once implemented, how will you monitor the actual impact?

We will review demand levels in certain areas to track the impact of this proposal. For example, because of the Voluntary and Community Services Infrastructure Contract which we are yet to procure, we would expect levels of homeless to reduce as this contract will specifically to look to work with people who are in housing difficulty.

We would also keep a check on whether there is an increase in people presenting to us with the problems that this funding currently supports, such as being able to afford food and essential items for the home.

Policy review date	September 2020
Assessment completed by	Amanda Rose/Adrian Chapman
Date Initial EqIA completed	1 October 2019
Signed by Head of Service	

Equality Impact Assessment: Street Lighting

What are the proposed outcomes of the policy?

The council has just completed its LED replacement programme, upgrading 17,000 street lights to energy-efficient LEDs, and now has the ability to dim street lights. Many other councils already dim their street lights.

A budget proposal is being developed which looks to dim street lights across the city, limited to between 12am and 5am, by 20 per cent. Street lighting on subways would remain the same.

This proposal would save the council money through reduced energy costs but it would also reduce the energy used which supports the Climate Emergency declared by Council in July. Members unanimously declared the emergency and agreed to make the council's activities net-zero carbon by 2030.

LED street lighting produces less carbon than conventional street lighting. The upgraded lights are expected to achieve a reduction in the amount of energy used by around 70 per cent.

Which individuals or groups are most likely to be affected?

This proposal would affect every resident and group in the city and all highway users. It would not affect one particular group.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	Not specifically.
Disabled people	Not specifically.
Married couples or those entered into a civil partnership	Not specifically.
Pregnant women or women on maternity leave	Not specifically.
Particular ethnic groups	Not specifically.
Those of a particular religion or who hold a particular belief	Not specifically.
Male/Female	Not specifically.
Those proposing to undergo, currently undergoing or who have undergone gender reassignment	Not specifically.
Sexual orientation	Not specifically.

What information is available to help you understand the effect this will have on the

Groups identified above?

There is no specific impact on the groups mentioned above, this proposal would affect every resident in the city and all highway users.

Who will be the beneficiaries of the policy?

The city council will benefit and in turn the residents of the city as it will allow the council to work towards delivering a balanced budget in 2020/21.

The city as a whole will benefit as it will reduce the amount of energy used for street lighting, allowing us to work towards our goal of being net-zero carbon by 2030. This sends a positive message to residents across Peterborough who we are encouraging to reduce their carbon footprint.

Has the policy been explained to those it might affect directly or indirectly?

No – members of the public will be informed through the consultation process when the proposals are launched on 25 October 2019.

Can any differences be justified as appropriate or necessary?

The proposal is both appropriate and necessary to allow the council to work towards its commitment made as part of the climate emergency declaration.

It is also necessary given the severe financial challenge faced by the council.

Are any remedial actions required?

Street lighting currently meets the British Standard, whereas this proposal looks to reduce lighting to below. As a result, a Cabinet Member Decision Notice will be required.

Once implemented, how will you monitor the actual impact?

We are not aware of any evidence in other areas of the country that dimming street lighting impacts on crime and public safety. That said, we will monitor crime data and respond to that if needs be.

Policy review date	June 2020
Assessment completed by	Amanda Rose/Andy Tatt
Date Initial EqIA completed	2 October 2019
Signed by Head of Service	

Equality Impact Assessment: Youth Services

What are the proposed outcomes of the policy?

A budget proposal is being progressed which looks to reduce the number of posts in the youth services team at the council. This will reduce the budget for the service from £1.7m to £1.2m.

In 2018 the Targeted Youth Support Service (TYSS) was launched which brought together the Youth Offending Service, support for those who are not in employment, education or training, adolescent social care and targeted youth work into one service which focusses on young people who are most at risk of harm.

This proposal looks to continue much of that service, but will reduce some of the discretionary elements, including 1-2-1 youth engagement activity and universal youth projects.

In the future there will be a focus on supporting others in the community to set up their own provision through the Think Communities approach.

Which individuals or groups are most likely to be affected?

This proposal will of course impact on the staff members within the existing team, both those at risk and other members of the team.

It will also impact young people across the city and their families who currently use these services or may do so in the future.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	This will initially adversely affect young people aged 13 to 18 across the city. However, future services will still target those young people who are the most vulnerable and at risk of offending.
Disabled people	Not specifically.
Married couples or those entered into a civil partnership	No
Pregnant women or women on maternity leave	Not specifically.
Particular ethnic groups	Not specifically.
Those of a particular religion or who hold a particular belief	Not specifically.
Male/Female	Not specifically.
Those proposing to undergo, currently undergoing or who have undergone gender reassignment	Not specifically.

Sexual orientation	Not specifically.
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What information is available to help you understand the effect this will have on the groups identified above?

The TYSS was co-developed with the staff team and following extensive engagement with relevant partners and young people. Since its launch, it has focussed on ensuring the council's statutory functions are delivered well and also on developing evidenced preventative measures to support young people and their families at risk of entering the criminal justice system or care.

The evidence to date is positive, with significantly fewer numbers of young people in the TYSS age range being in care and entering care. The change to the service as a result of this proposal will not affect this key aspect of the TYSS – all of these outcomes will continue to be achieved. We also have a comprehensive performance framework in place across TYSS, which will quickly help us to identify any adverse or unintended impacts.

Who will be the beneficiaries of the policy?

The city council will benefit and in turn the residents of the city as it will allow the council to work towards delivering a balanced budget in 2020/21.

Community groups wanting to run provision for young people may benefit in the future.

Has the policy been explained to those it might affect directly or indirectly?

Not as yet. Staff members will be informed ahead of the proposals being published and young people will be informed of those services that will not continue if and when a decision is made.

Can any differences be justified as appropriate or necessary?

The proposal is necessary given the severe financial challenge faced by the council. The services we are proposing to reduce are those that we do not have to deliver, non statutory. We are continuing to provide services for those young people who are most at risk. We are also retaining expertise within the team to support voluntary and faith sector groups to run their own youth provision.

Are any remedial actions required?

- Consultation will be needed with affected staff.
- Engagement with young people and families who use or benefit from the services.
- Engagement with groups in the community that may be able to provide youth services going forward.

Once implemented, how will you monitor the actual impact?

We will monitor a number of different areas, including the number of referrals made to children's social care and the youth offending service, to see whether there is an impact.

Policy review date	June 2020
Assessment completed by	Adrian Chapman/Amanda Rose
Date Initial EqIA completed	1 October 2019
Signed by Head of Service	

Equality Impact Assessment: HR Controls

What are the proposed outcomes of the policy?

Following a review of existing HR related controls, a number of areas have been identified which would benefit from central HR oversight such as absence management, leave, agency/interim spend, recruitment and training. The following proposed changes will ultimately support organisational effectiveness by providing greater control in the following areas:

Absence management: absence management would be strengthened by the proposed introduction of new system functionality providing greater management information direct to our managers in a timely manner. Streamlined processes would enable managers to better identify absence themes earlier, helping to support our staff members as part of our wellbeing strategy. The implementation of this will be supported by a dedicated absence management programme.

Leave and expense management: through better use of technology and the further development of our HR systems to include self-service functionality, manual processes would be dramatically reduced with a greater level of management reporting accessible by our managers to aid resource planning.

Interim and agency spend: through enhanced processes and central oversight in this area, budget holders will have improved sighting on recruitment spend within their business area, as well as resourcing options available to them across the council. It is anticipated this would reduce the reliance on interim and agency staff across the council, drive improvements and realise savings.

Training:

- Training budgets across the council would be centralised with ownership and maintenance by the dedicated HR learning and development (L&D) team. This would allow training funds to be allocated effectively across the entire council and opportunities maximised to support the learning and development of the workforce.
- A central L&D team would continue to establish minimum training requirements in order to stay compliant with statutory service delivery and regulators (e.g. Ofsted and child protection). In addition, the team would continue to ensure provision exists for mandatory training such as GDPR, health and safety, with maintenance of central records for compliance purposes.
- All non-statutory training would be removed in the council for the next 12 to 18 months, with additional training deemed to be essential, being reviewed and considered by the council's corporate management team. Where appropriate, apprenticeships will be utilised for any non-statutory development in order to draw down funds from the council's apprenticeship levy account.

Which individuals or groups are most likely to be affected?

This will have an impact on all Council staff as It represents a change to the ways of working.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	Not specifically.
Disabled people	The proposals will affect all staff equally and therefore the proposals will not be detrimental to this group in particular.
Married couples or those entered into a civil partnership	The proposals will affect all staff equally and therefore the proposals will not be detrimental to this group in particular.
Pregnant women or women on maternity leave	The proposals will affect all staff equally and therefore the proposals will not be detrimental to this group in particular.
Particular ethnic groups	The proposals will affect all staff equally and therefore the proposals will not be detrimental to this group in particular.
Those of a particular religion or who hold a particular belief	Not specifically.
Male/Female	From a population of 1,260 employees 28% are males and 72% are females. However, the proposals will affect all staff equally and therefore the proposals will not be detrimental to one gender more than another.
Those proposing to undergo, currently undergoing or who have undergone gender reassignment	Not specifically.
Sexual orientation	Not specifically.

What information is available to help you understand the effect this will have on the groups identified above?

The data used was taken from the HR Resource Link system. It includes details of staff in post on a given day in October. If the same exercise were to be repeated in a month's time, the data is not anticipated to materially change. The proposals are the HR controls are anticipated to affect all staff and therefore all groups in an equal way.

Who will be the beneficiaries of the policy?

The proposals put forward are expected to improve and streamline policies and processes, therefore all staff are expected to see the benefit of this.

Has the policy been explained to those it might affect directly or indirectly?

Not yet - briefings will be held with the affected staff members prior to the budget proposals being made public.

This will also be included in the briefings to all staff as part of the budget proposals.

Can any differences be justified as appropriate or necessary?

As there are no detrimental impacts there are no differences.

Are any remedial actions required?

As there are no detrimental impacts there are no remedial actions required.

Once implemented, how will you monitor the actual impact?

N/A

Policy review date	
Assessment completed by	Michelle Moulding
Date Initial EqIA completed	October 2019
Signed by Head of Service	Mandy Pullen

Equality Impact Assessment: Peterborough Enforcement Services (PES)

What are the proposed outcomes of the policy?

A budget proposal is being progressed which looks to delete the council's anti-social behaviour team which consists of 1.8FTE posts.

The work currently undertaken by this team will be passed to other organisations with responsibility for tackling anti-social behaviour and for supporting victims and offenders, in particular the police.

Which individuals or groups are most likely to be affected?

This proposal will of course impact upon the staff members within the team.

In addition, it could impact victims of anti-social behaviour and the perpetrators, but in reality the impact should be negated by other organisations, in particular the police, picking up this area of work in the way they do already.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	Not specifically.
Disabled people	Not specifically.
Married couples or those entered into a civil partnership	Not specifically.
Pregnant women or women on maternity leave	Not specifically.
Particular ethnic groups	Not specifically.
Those of a particular religion or who hold a particular belief	Not specifically.
Male/Female	Not specifically.
Those proposing to undergo, currently undergoing or who have undergone gender reassignment	Not specifically.
Sexual orientation	Not specifically.

What information is available to help you understand the effect this will have on the groups identified above?

N/A as no groups identified.

Generally, however, we have analysed the nature of ASB cases that the council is holding, and these have increasingly become more complex in nature. Informal discussions have been held with the police, which have suggested that these types of cases are usually criminal in nature and are therefore core police business.

Who will be the beneficiaries of the policy?

The city council will benefit and in turn the residents of the city as it will allow the council to work towards delivering a balanced budget in 2020/21. Victims may receive a better service as the most appropriate agencies will be dealing with the issues.

Has the policy been explained to those it might affect directly or indirectly?

Not as yet - briefings will be held with the affected staff members prior to the budget proposals being made public. Full briefings will also be held with organisation that will pick up this area of work going forward such as the police. Briefings have already taken place with Assistant Chief Constable Dan Vajzovic.

Can any differences be justified as appropriate or necessary?

The proposal is necessary given the severe financial challenge faced by the council. That said, it could be argued that many of the services this team provides are outside the council's remit and that management of anti-social behaviour issues should be passed to those agencies better placed to deal with them.

Are any remedial actions required?

Formal consultation with affected staff members.

We need to engage formally with agencies to agree a new model for providing these services in the future.

Once implemented, how will you monitor the actual impact?

We will monitor crime data through the community safety partnership and mitigate where we can.

Policy review date	April 2020
Assessment completed by	Adrian Chapman/Amanda Rose
Date Initial EqIA completed	1 October 2019
Signed by Head of Service	

Equality Impact Assessment: HR Functional Changes

What are the proposed outcomes of the policy?

A review of the HR function has been conducted along with a benchmarking exercise. The results have found that the function could be resourced more efficiently viewed alongside the proposals put forward in the HR Controls, to meet the needs of the new operating model.

HR will move to be a more effective, efficient function, providing support, advice and guidance to the organisation in a more structured value-add way, empowering and upskilling managers to take responsibility for all aspects of their people management. We will look to share the best practice of this happening already within the organisation with other areas that are less embedded.

To manage this transition, focus will be on creating meaningful data and developing the current HR system for HR to more effectively support the business and for line managers to manage their people accordingly.

In order to achieve this ambition, Senior Leaders will need to be aligned to the revised role of the HR function, supporting the proposed changes with their managers.

All roles within the HR Function including Serco Business Support and Payroll will be affected by this proposal.

Which individuals or groups are most likely to be affected?

Primarily existing members of the HR Function (PCC & Serco). There would be a wider impact on the rest of the council as a result of changes to the ways of working. These are further defined in the HR Controls EIA.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	The proposals will affect all staff within this function equally and therefore this group will not be disproportionately affected.
Disabled people	The proposals will affect all staff within this function equally and therefore this group will not be disproportionately affected.
Married couples or those entered into a civil partnership	The proposals will affect all staff within this function equally and therefore this group will not be disproportionately affected.
Pregnant women or women on maternity leave	The proposals will affect all staff within this function equally and therefore this group will not be disproportionately affected.
Particular ethnic groups	The proposals will affect all staff within this function equally and therefore this group will not be disproportionately affected.
Those of a particular religion or who hold a particular belief	The proposals will affect all staff within this function equally and therefore this group will not be disproportionately affected.
Male/Female	The proposals will affect all staff within this function equally and therefore this group will not be disproportionately affected.

Those proposing to undergo, currently undergoing or who have undergone gender reassignment	The proposals will affect all staff within this function equally and therefore this group will not be disproportionately affected.
Sexual orientation	The proposals will affect all staff within this function equally and therefore this group will not be disproportionately affected.

What information is available to help you understand the effect this will have on the groups identified above?

The data used was taken from the HR Resource Link system. It includes details of staff in post on a given day in October. If the same exercise were to be repeated in a month's time, the data is not anticipated to materially change. The proposals are anticipated to affect all HR staff and therefore all groups in an equal way.

Who will be the beneficiaries of the policy?

The city council will benefit from a more effective, efficient HR function aligned to the new operating model and in turn the residents of the city as it will allow the council to work towards delivering a balanced budget in 2020/21.

Has the policy been explained to those it might affect directly or indirectly?

Not as yet - briefings will be held with the affected staff members prior to the budget proposals being made public.

This will also be included in the briefings to all staff as part of the budget proposals.

Can any differences be justified as appropriate or necessary?

As there are no detrimental impacts there are no differences.

Are any remedial actions required?

As there are no detrimental impacts there are no remedial actions required.

Once implemented, how will you monitor the actual impact?

N/A

Policy review date	
Assessment completed by	Michelle Moulding
Date Initial EqIA completed	4 October 2019
Signed by Head of Service	

Equality Impact Assessment: Care Package Reviews

What are the proposed outcomes of the policy?

With the increases in the numbers of clients and greater demands placed on the service, the team needs to find better and more effective ways of continuing to deliver high quality care within the current resource numbers. A number of the initiatives within adults and safeguarding are being proposed to enhance operational effectiveness and reduce demand on council resources. The aim is to support potential new clients to self-manage their care and support needs as much as possible or by supporting existing clients to lessen their reliance on council-funded care and support.

The initiatives include:

- Improving how reviews of our client's care and support plans are carried out
- The approach and style of conversations we are having with our clients - with a greater focus on ensuring their independence and abilities.
- Provide easy access to a directory of resources and universal services which clients can access to more effectively manage their own care and be directed to alternative providers as appropriate.
- Enhancing our offer and use of technology and aids to support our clients to retain their independence
- Sharing of best practice with Cambridgeshire

Which individuals or groups are most likely to be affected?

Older people with dementia/comorbidities and their carers. Younger adults with disabilities or long term health conditions and their carers.

Now consider whether any of the following groups will be disproportionately affected:

Equality Group	Note any positive or negative effects
Particular age groups	Predominantly those over the age of 65 will be disproportionately affected as the largest user group for care and support services. However there would also be an impact on adults of working age who are carers or have disabilities or long term health conditions. The proposals would change the way we work with these groups with an emphasis on helping them to help themselves and investing time in avoidance of long term support wherever possible.
Disabled people	Yes as this is the key user group of our services for adults of all ages.
Married couples or those entered into a civil partnership	No disproportionate impact
Pregnant women or women on maternity leave	No disproportionate impact
Particular ethnic groups	No disproportionate impact

Those of a particular religion or who hold a particular belief	No disproportionate impact
Male/Female	No disproportionate impact
Those proposing to undergo, currently undergoing or who have undergone gender reassignment	No disproportionate impact
Sexual orientation	No disproportionate impact

What information is available to help you understand the effect this will have on the groups identified above?

Public health data/national data and data gathered via recent collaboration with Impower.

Who will be the beneficiaries of the policy?

All elements of the changes proposed relate to key changes to the service model and service delivery and the ethos of early and proportionate intervention would benefit those for whom it prevents deterioration.

It will also allow the council to support a growing number of clients with the funding that is available.

Has the policy been explained to those it might affect directly or indirectly?

No - although staff have been engaged in adult positive challenge and there has been information shared with partnership boards.

Are any remedial actions required?

No - the changes should have a positive impact only.

Once implemented, how will you monitor the actual impact?

The changes will be implemented as part of the wider transformation and system replacement projects which are key to the delivery.

Policy review date	
Assessment completed by	Tina Hornsby
Date Initial EqIA completed	October 2019
Signed by Head of Service	Debbie McQuade

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