

EQUALITY IMPACT ASSESSMENT – Trafford Council & Pennine Care NHS Foundation Trust (Trafford Division)

A. Summary Details		
1	Title of EIA:	Proposal to develop the Business Support Service as part of the All Age Integrated Health and Social Care service between Pennine Care NHS Foundation Trust (PCFT) and Trafford Council.
2	Person responsible for the assessment:	Asma Ibrahim, Business Change Analyst (Trafford Council) Fiona Bradbury, Project Support Officer (PCFT) Lorraine Webb, Independent Project Manager
3	Contact details:	Asma.Ibrahim@trafford.gov.uk fionabradbury@nhs.net
4	Section & Directorate:	All Age Integrated Health and Social Care
5	Name and roles of other officers involved in the EIA, if applicable:	Diane Eaton, Director of Integrated Services Kirsty Roberts, HR Business Partner (Trafford Council) Kate Roberts, HR Business Partner (PCFT)

B. Policy or Function		
1	Is this EIA for a policy or function?	Policy <input type="checkbox"/> Function <input checked="" type="checkbox"/>
2	Is this EIA for a new or existing policy or Function?	New <input type="checkbox"/> Existing <input type="checkbox"/> Change to an existing policy or function <input checked="" type="checkbox"/>
3	What is the main purpose of the Policy/function?	The main purpose is to develop existing administrative business support functions and roles in order to create a structure which aligns with the All Age Integrated Health and Social Care Service within Trafford. In creating a more equitable and robust model, the all age service will be better supported in meeting the objectives as set out in the partnership agreement as follows: <div style="margin-left: 40px;"> a) To create an All Integrated Health and Social Care Service by bringing together the: <ol style="list-style-type: none"> I. Operational services for Children’s and Adults Social Care </div>

		<p>services within Children, Families and Wellbeing, Trafford Council</p> <p>II. Pennine Care NHS Foundation Trust, (PCFT) Trafford Division Community Adult and Children's Health Services</p> <p>b) To bring together business support staff from health and social care to support the integration of all age services across Trafford.</p> <p>c) To provide the most effective, efficient and value-for-money services possible within the resources available, ensuring a sustain delivery model for the future</p> <p>The aims of the redesign of the business support teams are:</p> <ul style="list-style-type: none"> • Strengthen the way PCFT and Trafford Council work together as an integrated organisation in order to support the business of the organisation and avoid duplicated activities. • Create consistent business support models across the neighbourhoods, specialist services areas, clinics and leadership support. • Create a structure in which there are clear pathways for staff for career progression working in both organisations. • Create more generic roles which can support both health and social care, maintain specialist business support within the organisation as appropriate and make clear professional accountability arrangements within a defined business support model. • Release professional time to care by gearing tasks to appropriate staff and bands. • Support an integrated Senior Leadership Team so that functions and infrastructure are aligned with services. • Identify efficiency savings.
4	Is the policy/function associated with any other policies of the Authority?	<p>The business support proposals, as an integral part of the neighbourhood and specialist services approach, are linked to:</p> <p>a) the delivery of neighbourhood services</p> <p>b) the Strategic Partnership Agreement between Pennine Care & Trafford Council for Integrated All Age Community Health and Social Care Services April 2016</p>

		<p>c) Partnership Agreement (section 75) PCFT and Trafford Council</p> <p>d) Trafford Locality Plan</p> <p>e) Joint Business Plan</p>
5	Do any written procedures exist to enable delivery of this policy/function?	<p>The creation of the integrated service is on the basis of a formal partnership agreement between Trafford Council and Pennine Care NHS Foundation Trust. A formal Section 75 Agreement is in place already between the services and a revised agreement will revise the depth of integrated relationship and Leadership arrangements. The integration is supported by full programme delivery arrangements, including a project plan, governance arrangements and action plans for delivering the new service. The business support element is crucial to the successful delivery of the integration agenda.</p> <p>Certain areas where there are separate procedures, specifically around HR, will be retained as necessary and applied to Trafford Council and Trafford Division of PCFT staff respectively as required.</p> <p>The statutory requirements of PCFT and Trafford Council will remain unchanged: these are listed in the partnership agreement, and the integrated service will be required to ensure it meets these requirements on behalf of the partners and stakeholders.</p>
6	Are there elements of common practice not clearly defined within the written procedures? If yes, please state.	<p>Both Trafford Division of PCFT and Trafford Council have a wide range of operating procedures governing their current service delivery. As part of the development of the integrated service and business support development, these will be reviewed and, where required, will be updated into single procedures for the integrated teams and services.</p> <p>This will be overseen by the governance leads for both organisations as appropriate.</p>
7	Who are the main stakeholders of the policy? How are they expected to	<ul style="list-style-type: none"> • Business Support staff, operational staff and managers within PCFT Trafford Community Health Services and Social Care (Operational Services) in Trafford Council

	benefit?	<ul style="list-style-type: none"> • Service users/patients and Carers (current and future) • Trafford Social Services for Adults and Children • Health and Social Care Commissioners • Elected members at Trafford Council • Trafford Clinical Commissioning Group • Secondary care providers (UHSM, CMFT, Salford Royal) schools, GP's <p>Benefits are outlined in Section 3 above.</p>
8	How will the policy/function (or change/Improvement), be implemented?	<p>There is a full project/change management programme in place which is overseen by the Business Administration Insight Steering Group for both organisations. The steering group includes representatives at a senior level from both organisations including HR, Strategic Leads and the Director responsible for the project.</p> <p>A range of “pre-engagement” activities including a staff survey, workshops and roadshows and 1:1s with strategic leads have been undertaken in order to engage staff and trade union (staff side) representatives in the development of the proposals. Also a dedicated mailbox has been set up for enquiries.</p> <p>Proposals will be presented to staff side representatives and a full 45 day period of consultation (with additional 15 days extension to take account of holiday period) will be undertaken with staff so that they can influence the final structure.</p> <p>Consultation is expected to begin in December 2017 and this will form Phase 1 of business support developments. Where services and/or posts are considered out of scope for this phase of consultation, this is made clear. Further phases of business support developments are likely to include the development of systems and processes to better support an integrated approach and could include further review of roles that are considered out of scope in Phase 1.</p>
9	What factors could contribute or detract from achieving these outcomes for service users?	<p>There are a range of factors that could impact on the development of an integrated service, including</p> <ol style="list-style-type: none"> a) changes to the resource base for either Trafford Community Health Services or Trafford Council

		<p>b) change in the management arrangements for Trafford Community Health Services or Trafford Council</p> <p>c) change in the commissioning intentions by either Trafford Council or Trafford Clinical Commissioning Group as a result of local and general election.</p> <p>Currently none of these are seen as a significant risk to the proposals whilst issues and risks will be monitored via the project steering group.</p>
10	Is the responsibility for the proposed policy or function shared with another department or authority or organisation? If so, please state?	No – these proposals are the joint responsibility of Trafford Council and Pennine Care.

C. Data Collection		
1	What monitoring data do you have on the number of people (from different equality groups) who are using or are potentially impacted upon by your policy/ function?	Workforce monitoring information showing the equality profile of the Business Support Staff in scope for the proposal from the human resources systems of both organisations has been considered as part of this impact assessment.
2	Please specify monitoring information you have available and attach relevant information*	<p>Trafford Council and PCFT have equality monitoring data available for staff members potentially impacted by the proposed changes. The data includes:</p> <ul style="list-style-type: none"> • Age Profile • Religion (Council only) • Sexual Orientation (Council only) • Ethnic Origin • Disability • Gender <p>Please see attached Equality Monitoring Information in Appendix 1.</p>
3	If monitoring has NOT been undertaken, will it be done in the future or do you have access to relevant monitoring data?	N/A

**Your monitoring information should be compared to the current available census data to see whether a proportionate number of people are taking up your service*

D. Consultation & Involvement		
1	<p>Are you using information from any previous consultations and/or local/national consultations, research or practical guidance that will assist you in completing this EIA?</p>	<p>There is a range of examples of integrated working between health and social care. There is no evidence from these examples that indicates adverse impacts in regards to equality issues.</p> <p>There has also been local engagement with patients and users over the principles of integrated care across health services: there has been no evidence of adverse impacts through this engagement.</p> <p>Engagement with staff:</p> <ul style="list-style-type: none"> • Staff survey (August/September 2016) • Staff engagement workshops (October/November 2016) • Options development workshops with administrative managers (January 2017) • Staff roadshows (February/March 2017) • Strategic Leads (February to August 2017) • Consultation with staff – planned to take place approx. December 2017
2	<p>Please list any consultations planned, methods used and groups you plan to target. (If applicable)</p>	<p>Extensive engagement activities have been carried out with staff during 2016-17 with regards to administrative activities and business support needs (see outline of engagement with staff above).</p> <p>Extensive 45-day staff consultation is planned to take place from December 2017 (with additional 15 days extension to take account of holiday period) relating to business support proposals. These proposals build on the series of integration arrangements that have been implemented across Trafford in recent years in order to support the All-Age Integration agenda and approach.</p>

3	**What barriers, if any, exist to effective consultation with these groups and how will you overcome them?	There will be regular engagement with these groups via staff communications in verbal, written and electronic form including team briefings and formal meetings with HR, staff and Unions. Face-to-face consultations and briefings will be conducted on a variety of days/times and communication will be distributed via managers in order to ensure that part-time staff, people on maternity leave, long-term sick etc. are all fully informed and consulted.
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***It is important to consider all available information that could help determine whether the policy/ function could have any potential adverse impact. Please attach examples of available research and consultation reports*

E: The Impact – Identify the potential impact of the policy/function on different equality target groups

The potential impact could be negative, positive or neutral. If you have assessed negative potential impact for any of the target groups you will also need to assess whether that negative potential impact is high, medium or low

The Business Support proposals are developed based on the needs of the teams and the geographical location of these according to the Integration Plan.

	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
Gender – both men and women, and transgender;			X	The majority of the workforce is predominantly women. Some staff (both men and women) have caring responsibilities which is a contributory factor to staff working part time hours. The proposals should not impact disproportionately upon part time workers.
Pregnant women & women on maternity leave			X	The majority of the workforce are female. There could be a change in base or working hours for some staff. Staff on maternity leave are protected in line with Equality Act legislation and ACAS guidance. In practice this means that

	Positive	Negative (please specify if High, Medium or Low)	Neutral	Reason
				certain individuals have a right to 'slot in' to available suitable alternative roles. Individual circumstances will be reviewed during the course of the consultation process and, where this process applies, this will be clearly outlined as part of the final feedback document.
Gender Reassignment			X	There is no anticipated negative impact on staff.
Marriage & Civil Partnership			X	There is no anticipated negative impact on staff.
Race- include race, nationality & ethnicity (NB: the experiences may be different for different groups)			X	There is no anticipated negative impact on staff.
Disability – physical, sensory & mental impairments		Low		It is not anticipated the any specific age groups will be disproportionately affected.
Age Group - specify e.g.; older, younger etc)			X	It is not anticipated the any specific age groups will be disproportionately affected.
Sexual Orientation – Heterosexual, Lesbian, Gay Men, Bisexual people			X	There is no anticipated negative impact on staff.
Religious/Faith groups (specify)			X	There is no anticipated negative impact as plans are in place to continue to accommodate religious holidays.

As a result of completing the above what is the potential negative impact of your policy?

High Medium Low X

F. Could you minimise or remove any potential negative impact? If yes, explain how.	
Race:	
Gender, including pregnancy & maternity, gender reassignment, marriage & civil partnership	<ul style="list-style-type: none"> • In relation to many staff working part-time hours, ultimately although the posts are proposed to be 1 WTE, this does not mean that this has to be undertaken by 1 full time employee. • Flexible working arrangements will be considered by managers as part of the 1:1 meeting process. • Females on maternity leave are protected in line with Equality Act legislation and ACAS guidance. In practice this means that certain individuals have a right to 'slot in' to available suitable alternative roles.
Disability:	<ul style="list-style-type: none"> • Managers will consider individual needs, preferences and any reasonable adjustments required as part of the 1:1 meeting process and ensure that adjustments are put in place as appropriate. • Accessible venues will be used for staff briefing sessions and staff bases.
Age:	N/A
Sexual Orientation:	N/A
Religious/Faith groups:	<ul style="list-style-type: none"> • Consultation briefing sessions will not be held on religious holidays. • There will be a series of briefing sessions and 1:1s available for staff so that there is a choice in terms of time, date and location of meetings. • Prayers rooms are available in some venues and arrangements to accommodate prayer times in venues where dedicated rooms are not available will be considered.
Also consider the following:	
1	If there is an adverse impact, can it be justified on N/A

	the grounds of promoting equality of opportunity for a particular equality group or for another legitimate reason?	
2	Could the policy have an adverse impact on relations between different groups?	It is not anticipated that there would be any such impact.
3	If there is no evidence that the policy <i>promotes</i> equal opportunity, could it be adapted so that it does? If yes, how?	The integration and co-location of business support teams and functions should promote equal opportunity by providing a more consistent model across both health and social care. The model will also provide clearer career pathways for staff.

G. EIA Action Plan

Recommendation	Key activity	When	Officer Responsible	Links to other Plans e.g.; Corporate Plan, Business Plan	Progress milestones	Progress
Consider flexible working needs and reasonable adjustments to working conditions	Managers to assess needs and preferences via 1:1 meetings (follow up with referrals and/or more detailed assessments as necessary)	Throughout the consultation period	Service Managers	HR policies	Reconsider needs at: <ul style="list-style-type: none"> - Close of consultation period - Recruitment period - Implementation period 	
Confirm circumstances for those who are pregnant or on maternity leave	Managers to liaise with HR and the project group HR and project team to consider impact and confirm	Pre consultation and throughout the consultation period	Service Managers, HR, Project Team	Organisational change policy	As above	

Recommendation	Key activity	When	Officer Responsible	Links to other Plans e.g.; Corporate Plan, Business Plan	Progress milestones	Progress
	as part of proposals					
Deliver communication and staff briefings to all staff	Consider absences, religious holidays, individual communication needs, accessible venues etc.	Throughout consultation	Project Team HR and Service Managers			

Please ensure that all actions identified are included in the attached action plan and in your service plan.

Signed Richard Spearing

Signed Diane Eaton

Lead Officer: Network Director

Service Head Director of Integrated

Date: 12/1/2018

Date: 12/01/2018

Appendix 1: workforce monitoring data

Trafford Council:

PCFT:



EIA
data_council.docx



EIA PCFT Data.docx