

# Thurrock Council

## Community Equality Impact Assessment

### Service area and lead officer

Name of service	Adult Social Care
CEIA Lead Officer	'Bosa Osunde
CEIA Lead Officer job title	Head of Social Work Support
CEIA Lead Officer email address	<a href="mailto:iosunde@thurrock.gov.uk">iosunde@thurrock.gov.uk</a>

### Subject of this assessment

<b>What specific policy, strategy, function or service is the subject of this assessment?</b>
Expansion of Community Led Support Teams to include all Social Work Teams
<b>Borough-wide or location-specific?</b>
<input checked="" type="checkbox"/> Borough-wide <input type="checkbox"/> Location-specific – please state locations below.
Click or tap here to enter text.
<b>Why is this policy, strategy, function or service development or review needed?</b>
<p>This proposal is in line with Thurrock Transformation Programme and the aim is to develop an integrated social work team – reducing unnecessary bureaucracy, improving place-based working for all teams, and ultimately improving the experience for the person being supported. Having an integrated team will ensure that all team members have good awareness of each other's areas of work and are better able to identify, develop and deliver integrated solutions at first point of access. The Team will continue to form a network with other professionals working in the same area of the Borough to be able to provide integrated solutions beyond social work.</p> <p>The project is required as people's experiences with health and care are often fragmented. The health and care system has developed to respond to individual needs and conditions rather than the person. This is also the case in social care. People requiring support can often get caught between 'generic' and 'specialist' teams. The project will start with the person and the outcomes most important to them, and build an integrated response that prevents, unless necessary, the person from requiring different access points, pathways, and responses. This will also be the most effective use of available resource.</p>

## 1. Engagement, consultation and supporting information

- 1.1. What steps you have taken, or do you plan to take, to engage or consult (where applicable) the whole community or specific groups affected by this development or review? **This is a vital step.**

### **Steps you have taken, or plan to take, to engage or consult**

There is significant evidence, reported nationally and locally, that the system is fragmented and not focused on achieving the best outcomes for people. There is also evidence that the way that the system has been operating is the least efficient – waiting until people get to crisis point or are ‘needy’ enough to meet eligibility criteria and various thresholds. Evidence supports the system being redesigned to a) act as early as possible, and b) provide integrated solutions that focus on the outcomes an individual wishes to achieve.

Through drop-in sessions known as ‘Talking Shops’, ongoing consultation and engagement takes place through which feedback is and can be used to further develop and improve what is offered and how it is offered.

- 1.2. What data or intelligence sources have you used to inform your assessment of the impact? How have these helped you understand who will be affected by the development or review?

### **Sources of data or intelligence, and how they have been used**

We believe the best way to serve a community is to be a part of it. Social workers are encouraged to work remotely from various locations within their communities to get a true feel for the area. This makes them more familiar to the residents, which can remove some of the barriers that often exist. Ensuring bureaucracy is the absolute minimum it has to be, people get the right support and information, and advice at the right time and the main principle behind this is the Human Learning Systems model of change.

We have worked with the National Development Team for Inclusion for a number of years. The NDTI own the CLS concept. The NDTI has carried out significant research and provided data and intelligence from all members which has helped to support our initiative.

We have also recently carried out an evaluation of our integrated social work initiative which has been positive and shown the benefits of working in place and across social work teams that were previously separate.

## **2. Community and workforce impact**

- 2.1. What impacts will this development or review have on communities, workforce and the health and wellbeing of local residents?

Communities and groups	Positive	Neutral	Negative	Summary of positive and negative impacts	How will positives be maximised, and negatives minimised or eliminated?
<b>Local communities in general</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Integrated Social Work Teams will reduce the possibility of 'hand offs' and failure demand and make social care more accessible. As teams are based within communities, they will be able to understand the communities they serve far better and be able to offer a greater range of innovative and strength-based solutions.	<p>Implementation group implemented, which would include key leads and support a collaborative approach to integrated working to remove silo working teams and any existing barriers.</p> <p>We are aware of demand of each one of our community-based teams and the resource required, and will continue to monitor potential impact.</p> <p>Approaches to monitoring</p> <ul style="list-style-type: none"> <li>• Case studies and mapping exercise</li> <li>• Community engagement exercises</li> <li>• Staff engagement and feedback</li> </ul>
<b>Age</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	As 'local communities in general'.	There are no concerns identified - age should not impact ability to work within the integrated teams.

Communities and groups	Positive	Neutral	Negative	Summary of positive and negative impacts	How will positives be maximised, and negatives minimised or eliminated?
<b>Disability</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	As 'local communities in general'.	There are no concerns identified - any disability concerns have not been raised during scoping exercises, information gathering and implementation processes
<b>Gender reassignment</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The proposal will be applied across the service with the potential to impact all groups considered by this CEIA.</p> <p>Diversity data relating to gender reassignment is not presently collected for individuals that are service users to determine impact specific to this characteristic.</p>	There are no concerns identified - any gender reassignment concerns have not been raised during scoping exercises, information gathering and implementation processes
<b>Marriage and civil partnership</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The proposal will be applied across the service with the potential to impact all groups considered by this CEIA.</p> <p>Diversity data relating to marriage and civil partnership is not presently collected for individuals that are service users to determine impact specific to this characteristic.</p>	There are no concerns identified - any marriage and civil partnership concerns have not been raised during scoping exercises, information gathering and implementation processes

Communities and groups	Positive	Neutral	Negative	Summary of positive and negative impacts	How will positives be maximised, and negatives minimised or eliminated?
<b>Pregnancy and maternity</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<p>The proposal will be applied across the service with the potential to impact all groups considered by this CEIA.</p> <p>Diversity data relating to pregnancy and maternity is not presently collected for individuals that are service users to determine impact specific to this characteristic.</p>	Any staff on maternity leave will receive letters in writing and will be offered 1:1 session's to discuss via HR process- no concerns raised during scoping exercises, information gathering and implementation processes
<b>Race</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Information about race will be recorded as part of any care and support assessment. No implications have been identified.	There are no concerns identified - any race concerns have not been raised during scoping exercises, information gathering and implementation processes
<b>Religion or belief</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Information and data is collected in relation to the care and support assessment, but this proposal is about ability to reduce failure demand and to have greater accessibility within the community itself. Implications on religion or belief per se have not been identified.	There are no concerns identified - any religion or belief concerns have not been raised during scoping exercises, information gathering and implementation processes
<b>Sex</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	We collect information on sex in relation to care and support assessments, but changes being made have no implications on sex.	There are no concerns identified - any sex concerns have not been raised during scoping exercises, information gathering and implementation processes

Communities and groups	Positive	Neutral	Negative	Summary of positive and negative impacts	How will positives be maximised, and negatives minimised or eliminated?
<b>Sexual orientation</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	None identified	There are no concerns identified - any sexual orientation concerns have not been raised during scoping exercises, information gathering and implementation processes
<b>Location-specific impact, if any</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No anticipated impact that is location specific.	<p>No anticipated impact that is location specific. Monitored via</p> <ul style="list-style-type: none"> <li>• Case studies and mapping exercise</li> <li>• Community engagement exercises</li> <li>• Staff engagement and feedback</li> </ul>
<b>Workforce</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	The proposal will impact some members of the workforce in that they may have a change of line manager or be responsible for managing different staff or service users.	<p>To be supported by Change Management process.</p> <p>Workforce diversity data will be considered as part of the review process to determine if there are any disproportionate impacts across all groups.</p>

<p><b>Health and wellbeing of residents</b></p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> <p>Community members and people who live and work within place, will have a better understanding of support available at an earlier point, they will have direct access to place-based teams and be able to seek advice and guidance at the earliest opportunity to reduce escalation of crisis.</p> <p>Place based teams offer consistency to people, there will be a reduced number of case transfers to different teams, this provides people with familiar staff, who they have already built relationships with, making it easier for people to gain trust, they will not need to repeat their story and establish new relationships with different case workers.</p> <p>All tasks are managed at place through integrated working partnerships, place based teams work collaboratively with partners, this reduces onward referrals as many solutions can be found by working collaboratively with a multi-agency team approach , this means there are opportunities for joint visits and coworking with partner organisations, this reduces the person having to repeat their</p>	<p>No anticipated impact that is location specific. Monitored via</p> <ul style="list-style-type: none"> <li>• Case studies and mapping exercise</li> <li>• Community engagement exercises</li> <li>• Staff engagement and feedback</li> </ul>
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Communities and groups	Positive	Neutral	Negative	Summary of positive and negative impacts	How will positives be maximised, and negatives minimised or eliminated?
				story or speak to multiple staff members from different teams, a true person centred approach and ensuring the right support at the right time	
<b>Socio-economic outcomes</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No anticipated impact on socio-economic outcomes.	<p>No anticipated impact that is Socio-economic specific outcomes. Monitored via</p> <ul style="list-style-type: none"> <li>• Case studies and mapping exercise</li> <li>• Community engagement exercises</li> <li>• Staff engagement and feedback</li> </ul>
<b>Veterans and serving members of the armed forces</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No anticipated impact on veterans and serving members of the armed forces.	<p>No anticipated impact that is Veterans and serving members of the armed forces specific. Monitored via</p> <ul style="list-style-type: none"> <li>• Case studies and mapping exercise</li> <li>• Community engagement exercises</li> <li>• Staff engagement and feedback</li> </ul>



### 3. Monitoring and review

3.1. How will you review community and equality impact once the policy, strategy, function or service has been implemented? These actions should be developed using the information gathered in sections 1 and 2 and included in your service area's business plans.

Action	By when	By who
Are there any routine monitoring cycles relating to feedback from staff and individuals that are service users.	Ongoing	Principal Social Worker
Review CEIA after consultation with staff	Ongoing	Principal Social Worker / Transformation team
Review any additional feedback from engagement and update this CEIA accordingly	January 2024	'Bosa Osunde
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### 4. Next steps

4.1. The information gathered must be used to inform reports presented to Cabinet or overview and scrutiny committees. This will give members a necessary understanding of the impact their decisions will have on different groups and the whole community.

Summarise the implications and customer impact below. This summary should be added to the committee reports template in the Diversity and Equality Implications section for review and sign-off at the consultation stage of the report preparation cycle.

<b>Summary of implications and customer impact</b>
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People too often receive fragmented care from services that are not effectively co-ordinated around their needs. This can negatively impact their experiences, lead to poorer outcomes, and create duplication and inefficiency.

Implications for individuals that are service users will be considered through case studies and mapping, community and staff engagement, and service and day to day interaction with members of the workforce.

### **Workforce- Potential loss of income**

As public servants working for local authority, we must ensure the best possible use of public funds whilst ensuring we provide the best possible service to individuals using the resources and funds available. We need to be transparent and ensure that any additional payments to workforce either via overtime or shift allowance are reasonable, justified and fair.

**Standard rota (Fixed or Variable Hours)** – A standard rota is defined as working hours which are irregular and on a rota basis including hours which fall outside of normal working hours (outside 8:00 to 20:00 Monday to Friday). A rota will apply for service cover which includes Saturday and Sunday working. The rota may be planned with fixed rota hours or variable in nature depending on the service needs. Variable rotas may fluctuate and vary from day to day. Staff working standard rotas will receive a premium of 7.5% of their basic pay.

We have agreed that no changes will be made to HSWT who currently have the opportunity to receive additional income immediately, this needs to be explored and reasoning found behind the need should be understood, overtime is not guaranteed and is payable to any staff who work additional hours over and above contractual hours.

### **Workforce- Wellbeing**

Any changes will be mindful of team structure and where possible we will endeavour to ensure supervisors remain the same.

The HSWT will play a key role in planning the new operational model. The implementation and planning stage will take time and the HSWT will be key drivers.

The transformation team are here to support staff as well as senior leaders to adjust to change. TBC provides support with staff who may struggle with change and enable them to build resilience in the evolving workforce of Health and Social care.

- [Health and well-being events](#)
- [Health and well-being support](#)
- [Employee Assistance Programme \(EAP\)](#)
- [My Health and Well-being and Stress Management Policy \(EDRMS link\) \(312.00 B\)](#)
- [Here For You newsletter shared with team- a confidential mental health and wellbeing service available to all health, social care and voluntary sector workers across Essex and Hertfordshire](#)
- [Change management support.](#)

- Full CLS training available to support with upskilling and understanding community working.

### Local communities in general

Having an ASC team based within the community who can access a wide range of skills within their team benefits the individuals we support.

### Community Led Support Core Principles

- People can get support and advice easily, when they need it, so crises are avoided
- The culture is based on trust, empowerment and shared values within and across teams and organisations
- There is a focus on 'place' and on the 'whole' person
- Coproduction brings people and organisations together around a shared vision
- The system is responsive, proportionate and focussed on outcomes
- Bureaucracy is the absolute minimum- it has to be
- Support is strength based, building independence, control, and community connections

As we start to explore true integrated teams at place consisting of a range of service both statutory and voluntary, it is crucial that hospital discharge and pathways from acute are linked into the CLS teams to ensure the best possible outcome for the patient.

We are also exploring transfer of care hubs which will support us to bring in therapies, reablement and supporting services to minimise the risk of unsafe discharge and admission avoidance. By aligning discharge to place staff will have greater access to resources and be able to use a more collaborative approach toward discharge and explore longer term needs of our residents.

## 5. Sign off

5.1. This Community Equality Impact Assessment must be authorised by the relevant project sponsor, strategic lead, or assistant director. This should not be the CEIA Lead Officer. Officers authorising this assessment are responsible for:

- the accuracy of the information
- making sure actions are undertaken

Name	Role	Date
Ceri Armstrong	Head of Transformation & Commissioning, AHH	07/11/2023
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