Equality Impact Assessment for the Adult Social Care Mental Health Service Admin & Finance Restructure

Did you use the EIA Screening Tool?

No.

1. Explaining the matter being assessed

Is this a:

Change to a service or function

Summarise the strategy, policy, service(s), or function(s) being assessed. Describe current status followed by any changes that stakeholders would experience.

The restructure of the Adult Social Care (ASC) Mental Health service finance and administrative (admin) functions is part of Phase 2 of the ASC Mental Health Transformation Programme. Earlier work in this phase has focussed on the development of the longer-term operational structure and service model and has been subject to previous Equality Impact Assessments (EIAs).

The proposal is to agree and implement a revised and sustainable finance and admin model which best meets future service needs within available resources and which brings these functions in line with the wider operational reorganisation within Mental Health whilst building in opportunities for career development.

The intention is:

- For the current ASC Mental Health Resource team to become a pure finance support service for ASC Mental Health
- For the Admin support service to move from a locality to an area model to align with, and best support, the wider ASC Mental Health structure

The rationale for this proposal is as follows:

- Greater equity and consistency with the rest of ASC
- Career development and opportunities for staff
- Facilitates equitable distribution of admin resource to ASC Mental Health area/hub teams
- Clearer Admin service reporting lines
- Introduces consistency across the admin support service
- Proposed admin model is more flexible than current decentralised model being able to have an admin pool facilitates cover

Changes to the service model / workforce structure:

Whilst the number of posts within the ASC Mental Health finance and admin establishment has decreased due to a reduced overall staffing budget allocation, there is no planned reduction in the number of filled posts. The number of posts in the new structure will exceed the number of people in post at the time of writing.

However, there are proposed changes to the structure which will mean potential movement of staff between teams either as a result of opportunities for career progression / development or as the administrative service moves from a locality to an area-based model which may mean changes in a person's line-management or contractual office base. Any change in the workforce environment can cause uncertainty and a level of anxiety for some.

There will be a joint formal 30 day consultation for the Mental Health Resource Team and administrative functions as there are dependencies between the two. Under these proposals a path is needed to transfer the admin function from the current Mental Health Resource team to the wider admin support service to allow for the Mental Health finance restructure to progress.

People affected by the proposals outlined above:

All workers employed within the ASC Mental Health Resource Team and Admin support service including those within the Mental Health specialist teams.

This is an internal re-organisation of the structure and working pathway and people who use the ASC mental health services, carers and Surrey residents, are therefore not expected to be impacted by the proposals outlined above. More generally speaking the service ambition supported by all work in Phase 2 is to improve the outcomes for people and carers accessing these services.

Evidence gathered on the impact of your proposals:

Earlier work completed on the development of the longer-term Mental Health service operational structure and service model was informed by an analysis of performance which highlighted growing demand and increasing caseloads and also highlighted disparities between ASC Mental Health locality teams in terms of capacity v caseloads which then can impact on performance. This restructure will be an opportunity to right-size the finance and admin services to align with the ASC Mental Health Area model and best support teams to meet increased demands and any imbalances in workloads.

Assessment team

People consulted and kept informed:

- The ASC Mental Health Senior Management team and Workforce Leads.
- The ASC Modernising Mental Health Programme Board and ASC leadership Team.
- All ASC Mental Health staff directly involved in the restructure a formal 30-day consultation is planned and conversations with individuals during that period in line with current HR legislation and SCC policies. Frequently Asked Questions and Answers (FAQs) will be documented and shared throughout the process.

- HR have been consulted during the preparation of the consultation document and in the determination of HR processes to be applied.
- Trades Unions will be consulted as part of the process.
- Whilst undertaking this review we will also be monitoring for any dependencies with the planned wider ASC Finance review and ASC Admin Service review. We will be considering potential impacts and opportunities and how far Mental Health needs to align in terms of scope, structure and sequencing whilst also recognising differences between ASC Mental Health and wider ASC locality teams. These wider reviews are in their early stages and we did not want to delay further this internal Mental Health review work.

How does your service proposal support the outcomes in <u>the Community Vision for Surrey 2030?</u>

Specify which of the ten Vision outcomes this work is linked to.

- Everyone benefits from education, skills and employment opportunities that help them succeed in life.
- Everyone gets the health and social care support and information they need at the right time and place.

Are there any specific geographies in Surrey where this will make an impact?

County-wide

2. Service Users / Residents

Who may be affected by this activity?

There are 9 protected characteristics (Equality Act 2010) to consider in your proposal. These are:

- 1. Age including younger and older people
- 2. Disability
- 3. Gender reassignment
- 4. Pregnancy and maternity
- 5. Race including ethnic or national origins, colour or nationality
- 6. Religion or belief including lack of belief
- 7. Sex
- 8. Sexual orientation
- 9. Marriage/civil partnerships

Though not included in the Equality Act 2010, Surrey County Council recognises that there are other vulnerable groups which significantly contribute to inequality across the county and therefore they should also be considered within EIAs. If relevant, you will need to include information on the following vulnerable.

- Members/Ex members of armed forces
- Adult and young carers*
- Those experiencing digital exclusion*
- Those experiencing domestic abuse*
- Those with education/training (literacy) needs
- Those experiencing homelessness*
- Looked after children/Care leavers*
- Those living in rural/urban areas
- Those experiencing socioeconomic disadvantage*
- Out of work young people)*
- Adults with learning disabilities and/or autism*
- People with drug or alcohol use issues*
- People on probation
- People in prison
- Migrants, refugees, asylum seekers
- Sex workers
- Children with Special educational needs and disabilities*
- Adults with long term health conditions, disabilities (including SMI) and/or sensory impairment(s)*
- Older People in care homes*

- Gypsy, Roma and Traveller communities*
- Other (describe below)

This is an internal re-organisation and people who use ASC mental health services, carers and Surrey residents are therefore not expected to be directly impacted by the proposals outlined above. More generally speaking the service ambition supported by the proposed new service model is to improve the outcomes for people accessing these services.

Disability

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

Those who could be affected are people in Surrey with a lived experience of mental health in receipt of a service from Adult Social Care. In April 2022 there were 2,247 people with an open care case with the Mental Health service. The impact should be positive, with a smoother, more equitable service in place, with finance and admin services right-sized to support practitioners to meet demands.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

Senior Managers within the service to work with finance and admin support colleagues within the service to ensure a smooth transition to the new model of service.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

Mental Health Investment Fund focussing on early prevention and intervention.

Surrey Mental Health improvement programme which is designed to improve the mental health and emotional wellbeing of its residents and patients

Any negative impacts that cannot be mitigated?

n/a

3. Staff

Age

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

- Workforce MH data (as of September 2021): Age: 34% are aged 50 59; 14% are aged 60+
- Whilst there may be a change to the contractual office base for some staff this may also provide the opportunity for staff of all ages to work more flexibly and optimise mobile working opportunities. However, we do recognise that any change to a contract can cause anxiety for some workers.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

- SCC has shifted towards agile working where "employees have the autonomy and empowerment to choose where and when they work, in line with the business need; employees and managers alike focus on results and performance based on outcomes". SCC's Agile Working policy provides more staff with the opportunity to work more flexibly.
- Ensure staff have the tools and training to maximise opportunities for agile working and to consider any specific challenges for individual members of staff re more agile ways of working.
- Where there may be particular issues for individuals regarding changes to geographic / contractual base, these decisions will be taken after individual consultation to understand individual circumstances in line with the application of Council policies to support agile working objectives.
- Throughout the implementation phases, there will be on-going support through training and supervision once in post. Teams have already moved towards more agile working – this has been necessitated by the pandemic.

What other changes is the council planning/already in place that may affect the same groups of staff? Are there any dependencies decision makers need to be aware of?

NA

Any negative impacts that cannot be mitigated?

NA

Disability

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

- Data for the ASC Mental Health workforce cohort 5.6% identify as having a disability.
- Change in manager and anxiety related to this uncertainty and to adjusting to that change, may adversely impact more on those with a known disability and those who have chosen not to disclose a disability.
- Change in workplace may impact staff with a disability who will need to consider accessibility etc for any hub bases.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

- The management team will continue to engage with affected staff regarding the proposed changes and to understand any impact on individuals with a disability. 1:1's will explore wellbeing to identify any transitional support needs for staff with a disability.
- HR have been consulted during the preparation of the consultation document and in the determination of HR processes to be applied. This includes Trades Unions being consulted as part of the process and a formal 30-day consultation and conversations with individuals.

What other changes is the council planning/already in place that may affect the same groups of staffs? Are there any dependencies decision makers need to be aware of?

Council's agile office estate will impact upon all staff.

Any negative impacts that cannot be mitigated?

NA

Pregnancy and Maternity

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

Staff on maternity leave may not be kept informed in a timely way which may in turn
impact on their ability to take advantage of any opportunities that arise. Staff may feel
remote from the communications and discussions taking place.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

 Managers to ensure that all their staff, including those on maternity leave, are kept informed in a timely way throughout the process.

What other changes is the council planning/already in place that may affect the same groups of staff? Are there any dependencies decision makers need to be aware of?

NA

Any negative impacts that cannot be mitigated?

NA

Sexual Orientation

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

- Data for the ASC Mental Health workforce cohort 42% either did not disclose or preferred not to say; 3% identified as LGBTQ.
- An employee may or may not choose to disclose their sexuality and may feel anxious about the process of disclosing their sexual orientation with a new manager.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

- Individual consultation and wellbeing discussions with staff will help to identify any
 mitigation needed to avoid any adverse impact. HR advisors will be available and Council
 policies will be applied to support affected staff.
- There will ongoing consultation.
- Learning from previous realignment processes.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

Any negative impacts that cannot be mitigated?

NA

Carers

Describe here the considerations and concerns in relation to the programme/policy for the selected group.

- SAP does not hold data on staff members with caring responsibilities as caring records (and personal situations) can change over time.
- Staff Gender: 79% are female; 21% are male
- Staff with caring responsibilities (of which the majority may be female) may feel adversely
 impacted by a move to a workplace further away from home than their current contractual
 base.
- Some staff may be advantaged by the ability to work nearer to their home address.

Describe here suggested mitigations to inform the actions needed to reduce inequalities.

- SCC has shifted towards agile working where "employees have the autonomy and empowerment to choose where and when they work, in line with the business need; employees and managers alike focus on results and performance based on outcomes".
- SCC's Agile Working policy provides more staff with the opportunity to work more flexibly.
- Need to consider staff feedback and learning from previous realignment processes.
- Ensure staff have the tools and training to maximise opportunities for agile working and to consider any specific challenges for individual members of staff re more agile ways of working.
- Where there may be particular issues for individuals re changes to geographic / contractual base, decisions will be taken after individual consultation to understand individual circumstances, with continued application of Council policies to support agile working objectives.

What other changes is the council planning/already in place that may affect the same groups of residents? Are there any dependencies decision makers need to be aware of?

NA

Any negative impacts that cannot be mitigated?

NA

4. Recommendation

Based your assessment, please indicate which course of action you are recommending to decision makers. You should explain your recommendation below.

- Outcome One: No major change to the policy/service/function required. This EIA
 has not identified any potential for discrimination or negative impact, and all opportunities
 to promote equality have been undertaken
- Outcome Two: Adjust the policy/service/function to remove barriers identified by the EIA or better advance equality. Are you satisfied that the proposed adjustments will remove the barriers you identified?
- Outcome Three: Continue the policy/service/function despite potential for negative impact or missed opportunities to advance equality identified. You will need to make sure the EIA clearly sets out the justifications for continuing with it. You need to consider whether there are:
 - Sufficient plans to stop or minimise the negative impact
 - Mitigating actions for any remaining negative impacts plans to monitor the actual impact.
- Outcome Four: Stop and rethink the policy when the EIA shows actual or potential
 unlawful discrimination. (For guidance on what is unlawful discrimination, refer to the
 Equality and Human Rights Commission's guidance and Codes of Practice on the
 Equality Act concerning employment, goods and services and equal pay).

Recommended outcome:

Outcome one:

Explanation: This is a restructure and pathway change, but this will not impact people who use services. Any potential negative impact for staff will be mitigated.

5. Action plan and monitoring arrangements

Insert your action plan here, based on the mitigations recommended. Involve you Assessment Team in monitoring progress against the actions above.

Table 1 below describes the EIA action plan and monitoring arrangements based on recommended mitigations. Actions and mitigations will be completed throughout the planned consultation and implementation period (October to December 2022)

Item	Initiation Date	Action/Item	Person Actioning	Target Completion Date	Update/Notes	Open/ Closed
1	19.9.22	Audit that staff understand agile working arrangements and tools	Senior Managers & Team Managers	November / December 2022	To be part of the induction to the new finance and admin model	
2	From start of formal consultation Sept 2022	Consultation with individual conversations with staff with a protected characteristic to ensure any issues are understood and addressed	Senior Managers & Team Managers	Throughout the consultation period		
3	From start of formal consultation Sept 2022	Access to HR and employee support	Consultation	Throughout the consultation period		
4	From start of formal consultation Sept 2022	Staff on maternity leave are engaged throughout the process	Senior Managers & Team Managers, Consultation process	Throughout the consultation period		

6a. Version control

Table 2 below provides historical data about each update made to the Equality Impact Assessment including the name of the author, the date and notes about changes made and reasons for any updates.

Version Number	Purpose/Change	Author	Date
1	ASC Mental Health Service Finance & Admin restructure	Rosey Barker	2 September 2022
2	Feedback from ASC Mental Health Senior Managers and HR reps	Rosey Barker	9 September 2022
3	Feedback from Head of Service Liz Uliasz – minor edits made for clarity.	Rosey Barker	9 September 2022
4	Feedback from Kathryn Pyper, Chair, ASC Directorate Equalities Group (DEG)		23 September 2022
5	Final sign-off by Head of Service Liz Uliasz		23 September 2022

6b. Approval

Secure approval from the appropriate level of management based on nature of issue and scale of change being assessed.

Table 3 below details the people / groups involved in the approval of this EIA and the date the document was approved by each person / group. The final version was approved during September 2022 by the Head of Service and by the Directorate Equality Group.

Approved by	Date approved
Head of Service/Liz Uliasz	9 September 2022
Executive Director	n/a
Cabinet Member	n/a
Directorate Equality Group	23 September 2022

Publish:

It is recommended that all EIAs are published on Surrey County Council's website.

Please send approved EIAs to: **INSERT EMAIL ACCOUNT ADDRESS**

EIA author:

6c. EIA Team

Table 4 below details the name, job title, organisation and EIA team role of each person involved in the writing of this EIA.

Name	Job Title	Organisation	Team Role
Rosey Barker	Project Manager (ASC Projects Team)	SCC Adult Social Care	EIA lead
Chrissie Caines, Augustine Blankson and Caroline Hewlett	Senior Managers (Mental Health)	SCC Adult Social Care	Senior service managers feeding into the EIA
Helen Lockett & Ben Straffon	HR Reps	SCC Adult Social Care	Advisory role

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