

Oldham Borough Council



**Council Meeting
Wednesday 4 November 2015**

OLDHAM BOROUGH COUNCIL

**To: ALL MEMBERS OF OLDHAM BOROUGH COUNCIL,
CIVIC CENTRE, OLDHAM**

Tuesday, 27 October 2015

**You are hereby summoned to attend a meeting of the Council which will be held on
Wednesday 4 November 2015 at 6.00 pm in the Council Chamber, Civic Centre, for
the following purposes:**

9 Budget Proposals 2016/17 2017/18 Tranche 1 (Pages 1 - 432)

PROCEDURE FOR NOTICE OF MOTIONS
NO AMENDMENT

MOTION – Mover of the Motion to MOVE



MOTION – Secunder of the Motion to SECOND – May reserve right to speak



DEBATE ON THE MOTION: Include Timings



MOVER of Motion – Right of Reply



VOTE – For/Against/Abstain



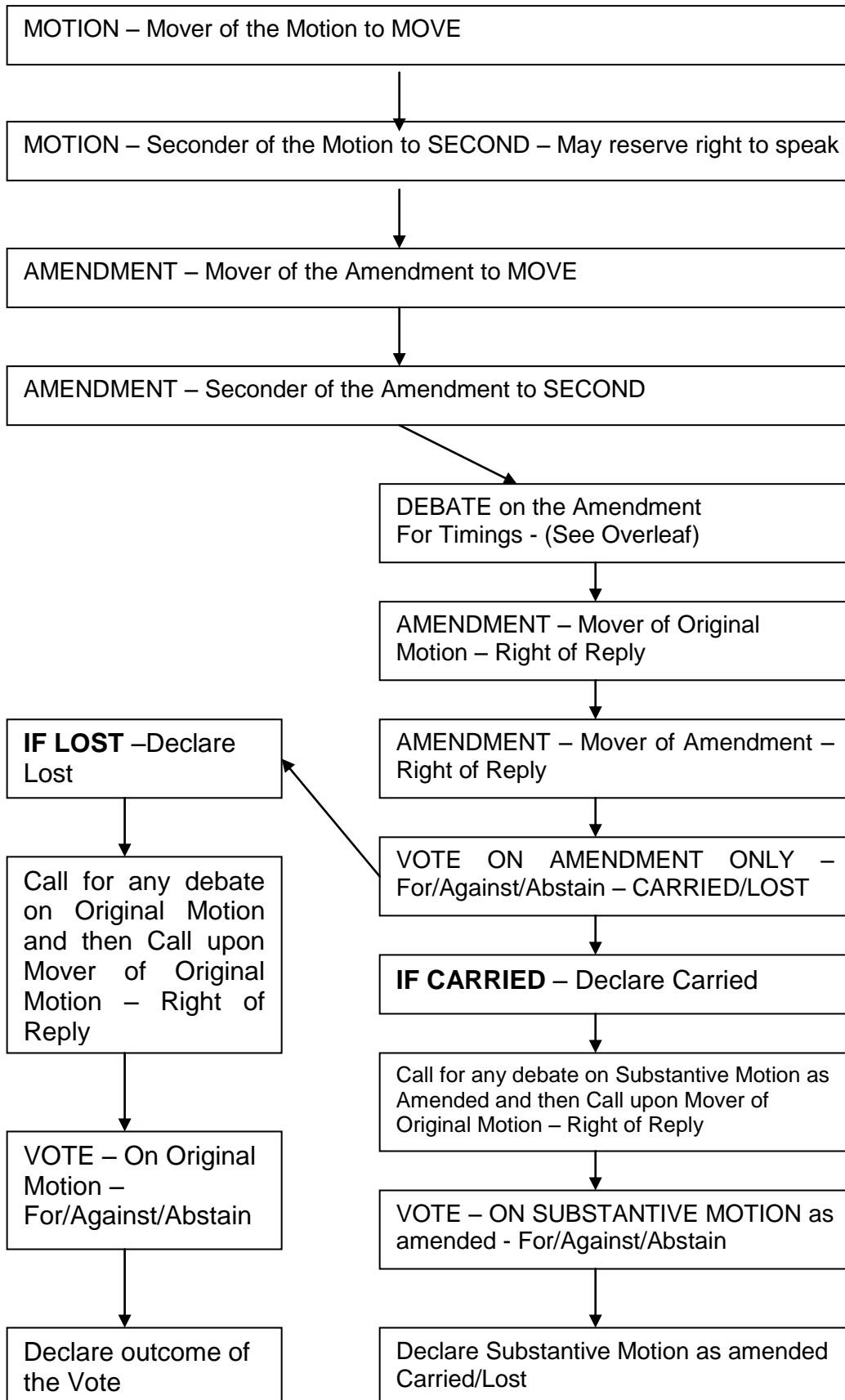
Declare outcome of the VOTE

RULE ON TIMINGS

(a) No Member shall speak longer than four minutes on any **Motion or Amendment**, or by way of question, observation or reply, unless by consent of the Members of the Council present, he/she is allowed an extension, in which case only one extension of 30 seconds shall be allowed.

(b) A Member replying to more than question will have up to six minutes to reply to each question with an extension of 30 seconds

WITH AMENDMENT



This page is intentionally left blank



Report to Council

Budget Proposals 2016/17 & 2017/18

Portfolio Holder: Councillor Abdul Jabbar – Finance & HR

Officer Contact: Anne Ryans, Director of Finance

Report Author: Anne Ryans, Director of Finance
Ext. 4902

4 November 2015

Reason for Decision

This report presents for Council, a revision to the 2016/17 and 2017/18 budget reduction requirement and also the Administration's detailed Tranche 1 budget reduction proposals for the financial year 2016/17 prior to the receipt of the Local Government Finance Settlement and other information which will impact on budget decisions. Further detailed budget reduction proposals will be presented to Council on 16 December 2015.

Executive Summary

The initial budget reduction requirement for 2016/17 was presented to Cabinet and Council in February 2015. Since then, there have been a number of developments both locally and nationally which have impacted on the estimates used in calculating the budget gap and hence the 2016/17 budget reduction target. This report therefore sets out a new reduced budget reduction target of £18.194m (as illustrated at Table 3), a reduction of £11.295m from the £29.489m that had previously been presented.

This report also presents for Council, the Administrations first set of detailed proposals towards bridging the revised 2016/17 budget gap of £18.194m. The total of Tranche 1 budget reductions is £9.353m which if approved would leave a balance of £8.646m still to be identified (after the use of reserves). However, there are eight proposals which total £3.379m for 2016/17 (see Appendix 5) for which staff consultation or public consultation has not yet been concluded and therefore these proposals are simply for noting at this time. Council is therefore requested to approve budget proposals for 2016/17 totalling £5.974m (as set out in summary at Appendix 3 and in detail at Appendix 4). These proposals build upon the work that has already been undertaken in previous financial years to address budget challenges and to ensure continued financial stability for the Council. Further Administration proposals to balance the budget will be presented to future meetings.

Budget setting for 2016/17 and 2017/18 has had to operate in the context of on-going economic, demographic and policy challenges at both a local and national level. At a local level, budget proposals are framed by the Council's ambitions for a cooperative future. At a national level, the Government is still striving to reduce the national deficit and part of its strategy is to continue to reduce public sector funding, particularly that for Local Government for a minimum of the next four financial years.

The Summer Budget Announcement on 8 July 2015 confirmed that £20 billion of additional public sector spending reductions will be required in this Parliament. The Summer Budget did not quantify the detailed impact of the reductions to Local Government. This will be included in the Comprehensive Spending Review, the outcome of which is due to be announced on 25 November 2015. This, together with the Chancellor of the Exchequers' recent announcement about a change in the Business Rates Regime will influence the level of Government resources available to the Council. The 2016/17 Provisional Local Government Finance Settlement will be issued by Central Government in December 2015 and the budget position cannot be finalised until this information has been issued, other Government funding has been notified, the Council Tax and Business Rates Tax-bases have been calculated and final levy notifications have been received.

Clearly, the planning assumptions have been revised in the light of local and national issues but it is considered that these revised assumptions are prudent. It is possible, however, that the financial position may change and that there may be a requirement for unanticipated budget proposals to be presented to the Performance and Value for Money (PVFM) Overview and Scrutiny Select Committee in January 2016 and the budget Cabinet and Council meetings in February 2016.

This report, however, provides information setting out the make-up of the initial and revised budget gaps as calculated for 2016/17 (£29.489m and £18.194m) and 2017/18 (£29.302m and £25.200m) and also the timetable to address in full the budget reduction target for 2016/17. Proforma budget reduction proposals together with Equality Impact Assessment (EIAs) documents as necessary in the sum of £9.353m for 2016/17 are presented for review. These have been presented in accordance with the budget protocol which has been to examine options for budget reductions via a Directorate approach as follows:

- Health and Wellbeing
- Cooperatives and Neighbourhoods
- Economy and Skills
- Chief Executive and Policy and Governance
- Corporate and Commercial

The budget reduction proposals included in this report at Appendices 2 to 6 were presented for scrutiny at the PVFM Overview and Scrutiny Select Committee on 24 September 2015. Each of the proposals were examined in detail with questions and comments being put forward by Committee Members. As a consequence, the Select Committee was content to commend all except one proposal for consideration by Cabinet. The Select Committee requested that Cabinet agreed that proposal B003 - Public Protection Environmental Health Section of Public Health at a value of £150k was given further consideration and that it should be deferred to Tranche 2 and thus not included in this report to Council for approval. The Cabinet meeting on 19 October 2015 agreed to defer the proposal B003 to Tranche 2.

Public consultation began for Tranche 1 items on 5 August 2015 and for most proposals concluded on 26 October 2015 thus allowing any comments to be included in this report. In addition, the S188 notice, starting the formal 45 day consultation was issued on 1 September 2015 and concluded on the 19 October 2015. However there are some proposals where consultations have not been finalised and so it is not possible for Council to approve these at this stage. There are six proposals (E002, E003, E004, E007, B005 and C005) where staff consultation has not ended, one where public consultation is still in train (E008) and one where the detailed business case has not

been received thus delaying the staff consultation process (C001). These proposals total £3.379m and can only be noted by Council at this time, leaving £5.974m for approval as presented in Appendix 3.

After the revision to estimates, and assuming all £5.974m of budget reductions as recommended are approved, there still remains a budget gap of £12.025m for 2016/17 after the approved use of £195k of reserves. This would reduce to £8.646m if proposals for noting are subsequently approved.

Directorates are undertaking a process of continuous review and challenge to identify further budget reduction proposals. As such, Tranche 2 proposals are to be considered at the PVFM meeting on 3 November 2015, Cabinet on 30 November 2015 and Council on 16 December 2015. There will be a requirement for Tranche 3 proposals and given that the final budgetary position will not be known until key Government announcements have been made, the budget cannot be finalised until the Budget Council meeting on 24 February 2016.

Recommendations

That Council:

- a) Approves the revised budget reduction targets for 2016/17 of £18.194m and 2017/18 of £25.200m
- b) Approves £5.974m of the Tranche 1 budget reduction proposals (presented in summary at Appendix 3 and in detail at Appendix 4)
- c) Notes eight budget proposals totalling £3.379m for 2016/17 for which the conclusion of consultation exercises is still required, as set out in Appendices 5 and 6.
- d) Notes that the budget reduction target may need to be revised depending on the Government funding and policy announcements, including the Provisional and Final Local Government Finance Settlements for 2016/17.

Budget Proposals 2016/17 & 2017/18

1 Background

- 1.1 Members will be aware that the Council's approach to budget setting has been to consider the financial challenge it is facing over a two year timeframe. In this regard, the financial strategy that has been agreed is to prepare a budget that addresses the estimated gap for the two year period 2016/17 and 2017/18. As would be expected at this stage, the emphasis of the budget process has been to prepare options to address the budget reduction target for 2016/17 in full detail. At the Budget Council meeting on 25 February 2015 the Medium Term Financial Strategy was presented and highlighted an overall budget gap for 2016/17 of £29.489m and £29.302m in 2017/18. This position has now been revised and an updated position is included in this report.
- 1.2 The budget report approved in February 2015, included budget proposals that not only balanced the 2015/16 budget but also had implications for 2016/17 with a net impact of £9.398m. These 2016/17 implications were noted by Council but established the starting position for the current budget process. In line with practice in previous years, the Administration has considered budget proposals in Tranches and this report sets out proposals which form Tranche 1 budget reductions for 2016/17. As may therefore be expected, a number of the Tranche 1 proposals are those which were considered as the 2016/17 implications of 2015/16 approved budget reductions and have therefore already been considered by Cabinet and Council. However, there has been a revision to the way in which some of the budget reductions are to be achieved and to the value which can be delivered. The pro formas therefore take these revisions into account. In total, there are 29 new or revised proposals with a total of £7.894m. These were subject to detailed scrutiny by the PVFM Select Committee on 24 September 2015.
- 1.3 This report therefore presents the Administration's Tranche 1 budget reduction proposals as a first step in delivering a balanced budget for 2016/17. Proposals impacting on 2017/18 are simply for noting at this time. As advised above, the PVFM Select Committee scrutinised Tranche 1 proposals at its recent meeting. It was content to commend all except one proposal it considered for approval by Cabinet. The Committee requested that Cabinet recommended that proposal B003 – Public Protection Environmental Health Section of Public Health at a value of £150k was given further consideration and that it was deferred to Tranche 2 and thus not commended to Council for approval. The Cabinet Meeting on 19 October 2015 agreed to defer the proposal B003 to Tranche 2, and has therefore recommended Council approves proposals totalling £9.353m.
- 1.4 All the proposals build upon the work that has been undertaken in previous financial years to address budget challenges. The budget process ensures that over the period to March 2018 there will be a firm financial base which will enable further service transformation to be delivered, providing budget reductions through improved processes and a continued long term efficiency programme. It will continue to provide the framework for enhancing relationships with citizens and partners supporting the agenda of a Cooperative Council.
- 1.5 It is important to note that the budget processes for 2016/17 and 2017/18 have to be considered within the context of significant on-going economic and policy changes at both a national and regional level. The Summer Budget Announcement on 8 July 2015 confirmed that £20 billion of additional public sector spending reductions will be required over the life of this Parliament. The Summer Budget did not quantify the detailed impact of the reductions to Local Government but the Government has initiated a Comprehensive

Spending Review and the outcome is due to be announced on 25 November 2015. This will have a key influence over the level of Government resources available to the Council.

- 1.6 Of particular importance is the Greater Manchester (GM) devolution agenda, the development of which has continued at a pace since the two year budget for 2015/16 and 2016/17 was approved in February 2015. New services, including health and social care were included in the agreement and further responsibilities may transfer in response to the Government's Northern Powerhouse initiative. As part of the current devolution agreement the Combined Authority has prepared a City Region Locality Plan detailing opportunities for pump priming investment within health and adult social care to lead to efficiency savings in future years. This document has been agreed and will be considered by the Treasury in the forthcoming Comprehensive Spending Review. The Summer Budget also agreed that the City Region could retain within its business rates pooling arrangements all income generated by a growth level in excess of 1%. Discussions are on-going within the Combined Authority about how this growth will be invested within the Region. The £300m GM Housing Fund has become operational from the beginning of the financial year with £66.3m being committed to projects including £1.45m to construct twenty three-bed semi- detached homes at a development in Oldham. There is still much work to do to fully determine the financial impact for the Council arising from devolution.
- 1.7 On 5 October 2015 The Chancellor of the Exchequer revealed plans for Local Authorities to retain 100% of Business Rates by the end of the Parliament. Detail and phasing of this has still to be announced but these proposed changes will have a significant impact on the budget position of the Council in future years which will change future budget reduction targets.
- 1.8 At a local level, the budget proposals have been framed by the Council's ambition for a cooperative future where everyone does their bit to create a confident and ambitious borough. There are three objectives that focus the activity of the Council in delivering in this ambition. These are:
- **A productive place** to invest where business and enterprise thrive;
 - **Confident Communities** where everyone does their bit; and
 - **Co-operative Council** creating responsive and high quality services

These objectives reflect the on-going commitment for the Council and its partners to work with the residents of Oldham to bring about positive change and provide strong leadership for the borough.

- 1.9 The initial 2016/17 budget reduction requirement was determined by taking into account a number of issues including a net reduction in Government grant funding and Oldham Council funding pressures. These matters have been the subject of on-going review to ensure that the pressures remain within the estimated levels and as set out in Section 2 of the report, have recently been revised. However it is important to consider the starting position for 2016/17 budget deliberations in order to understand the significant financial challenges the Council is facing.
- 1.10 The following table sets out the budget gap as approved at the 2015/16 Budget Council meeting. It shows how the initial budget gaps of £29.489m for 2016/17 and £29.302m for 2017/18 were arrived at and highlights all expenditure pressures and funding assumptions.

Table 1 – Initial 2016/17 & 2017/18 Budget Gap

Net Revenue Budget as per 25 February 2015 Budget Report	2016/17 £m	2017/18 £m
Prior Year Net Revenue Budget	195.800	179.227
Expenditure Pressures:		
- Pensions	0.263	2.709
- Pay Award	1.717	1.753
- Inflation	3.818	3.774
- Investment Fund	1.055	0.923
- Business Plan	1.500	0.500
- Levies	0.000	1.544
- Increase in NI Charges	2.363	0.000
- End of Change to Terms and Conditions	0.000	2.515
- Fair Employment Charter	0.600	1.030
Total Expenditure Pressures	11.316	14.748
Total Expenditure	207.116	193.975
Funded By:		
- Business Rates Top Up	30.587	31.198
- Revenue Support Grant	33.276	20.475
- Housing Benefit and Council Tax Administration	1.378	1.241
- Council Tax Freeze Grant	1.790	0.000
- Central Education Support Grant	2.266	2.111
- New Homes Bonus	2.000	1.500
- Multiplier Cap/Settlement Funding Adjustment	0.641	0.000
- Adults Social Care	0.585	0.000
Total Government Grant Funding	72.523	56.525
- Retained Business Rates	29.980	30.680
- Council Tax Income	75.124	77.468
Revised Budget Funding	177.627	164.673
Net Gap/Budget Reduction Requirement	29.489	29.302

- 1.11 To assist with identification of the budget reductions required, targets were set for each of the Council's Directorates, with an Executive Director as the responsible lead for each area. The initial targets were allocated using an agreed calculation to ensure budget reductions would be identified proportionately across the Council's Service budgets. Using this approach has enabled the identification of the budget reduction proposals, Tranche 1 of which is detailed in this report.

2. Financial Position

2015/16 Budget Position

- 2.1 The starting point for the consideration of the 2016/17 budget is the current 2015/16 budget position. Since the 2015/16 budget report was presented to Council, there have been a number of further funding allocations and amendments. These are detailed in the table below as reported in the month 3 Revenue Monitoring report approved by Cabinet at its meeting on 24 August. The budget for 2015/16 has therefore increased to £196.213m and this is therefore the revised base budget for 2016/17.

Table 2 - 2015/16 Revised Budget Position

		2015/16
Net Revenue Budget as at 25 February 2015		195.800
Adjusted for use of reserves		0.195
Adjusted Net Revenue Budget		195.995
New One-Off Grant Funding Received		
Revised Notification of General Grant Funding (including a Multiplier Cap Adjustment)	0.265	
Special Education Needs and Disability Regional Lead	0.055	
Staying Put Grant	0.039	
Welfare Reform Grant	0.054	
Adjustment to Use of reserves	(0.195)	
Total Budget Adjustments		0.218
Total Revised Net Revenue Budget		196.213

Revised 2016/17 and 2017/18 Budget Position

- 2.2 As in previous years the process for addressing the budget gap has used the forum of Leadership Star Chamber, which is a tried and tested methodology allowing the detailed review and examination of budget options so that there is clear Cabinet Member support for proposals before their submission for public consultation and scrutiny. Leadership Star Chamber meetings are chaired by the Leader of the Council with support from Cabinet Members and Senior Officers and allow the consideration of budget issues and proposals.
- 2.3 The budget has been reviewed by Directorate area with proposals put forward for consideration. The Directorate areas reviewed are as follows:
- Health and Wellbeing
 - Cooperatives and Neighbourhoods
 - Economy and Skills
 - Chief Executive and Policy and Governance
 - Corporate and Commercial
- 2.4 Work has also been undertaken to prepare cross cutting budget proposals where possible. Member support for proposals has been demonstrated by pro-formas bearing the signatures of the relevant Cabinet Member.
- 2.5 There has been a detailed review of assumptions used to calculate the budget gap and hence the budget reduction requirement. This has been informed by the Summer Budget, unexpected funding notifications from Central Government, trends in inflation, other Government policy announcements and changes in issues directly under the influence of the Council, for example revisions to capital spending plans. All these changes could not have been foreseen when the initial budget gap was calculated. The revised estimates suggest that the gap for 2016/17 can be reduced to £18.194m. Table 3 below sets out the revised budget gap in comparison to the original 2016/17 gap of £29.489m

Table 3 - 2016/17 Revised Budget Gap

Estimated Revenue Position 2016/17	Original 2016/17 £m	Revised 2016/17 £m	Change £m
Prior Year Revenue Budget	195.995	195.995	0
Use of reserves	(0.195)	0	0.195
Adjustment to Base Budget - Capital Related Items	0	(4.609)	(4.609)
Adjustment to Base Budget - New Burdens ILF Grant	0	2.013	2.013
Net Revenue Budget	195.800	193.399	(2.401)
Expenditure Pressures:			
- Pensions	0.263	0.263	0
- Pay Award	1.717	0.917	(0.800)
- Inflation	3.818	1.110	(2.708)
- Investment Fund	1.055	0.000	(1.055)
- Business Plan	1.500	1.005	(0.495)
- Increase in NI Charges	2.363	2.100	(0.263)
- Fair Employment Charter	0.600	0.600	0.000
- Demand Pressures OCS Pensions	0.000	0.200	0.200
- Unity – Achievement of Prior Year Savings	0.000	0.196	0.196
- Independent Living Fund (ILF)	0.000	0.987	0.987
Total Expenditure Pressures	11.316	7.378	(3.938)
Total Expenditure	207.116	200.777	(6.339)
Funded By:			
- Business Rates Top Up	30.587	30.587	0.000
- Revenue Support Grant	33.276	34.140	0.864
- Council Tax Freeze Grant	1.790	0.926	(0.864)
- New Burdens - ILF Grant	0.000	2.013	2.013
- Housing Benefit and Council Tax Administration	1.378	1.378	0.000
- Central Education Support Grant	2.266	2.500	0.234
- New Homes Bonus	2.000	2.700	0.700
- Multiplier Cap/Settlement Funding Adjustment	0.641	0.854	0.213
- Adults Social Care	0.585	0.585	0.000
Total Government Grant Funding	72.523	75.683	3.160
- Retained Business Rates	29.980	29.980	0.000
- Council Tax Income	74.885	76.485	1.600
- Parish Precepts	0.239	0.239	0.000
- Collection Fund Surplus	0.000	0.196	0.196
Revised Budget Funding	177.627	182.583	4.956
Net Gap/Budget Reduction Requirement	29.489	18.194	(11.295)

2.6 The changes in the assumptions to arrive at the reduced budget reduction gap, as highlighted in the “Change” column of Table 3, are explained in detail as follows:

Adjustments to 2016/17 Base Budget

There are two adjustments to the 2016/17 base budget as set out below:

- Capital Related Items – Reduction of £4.609m

Members will be aware through Treasury Management reports that the Council currently has significant cash balances which are being used to support capital expenditure and defer the requirement to undertake prudential borrowing. In addition as a result of slippage in the capital programme in the early part of 2015/16, and a review of the phasing of capital projects, there is no requirement to budget for costs of capital financing at existing levels. As a result £4.015m can be safely removed from the base budget. A review of the budget for PFI Schemes and property related expenditure suggests that £0.594m can also be safely removed from the base budget.

It should be noted that the costs of financing the capital programme are simply being deferred and as projects progress, the costs will be incurred. This will therefore be reflected in budget reduction requirements for future financial years.

- New Burdens Independent Living Fund Grant – Increase of £2.013m

With effect from 1 July 2015, the function of the Independent Living Fund has transferred to the Council. A grant will be paid to compensate for this new duty. The funding in 2015/16, included in the base budget from month 4, is considered adequate to support inherited commitments. It is however expected that grant funding in 2016/17 will be reduced in line with expected RSG reductions. The 2016/17 base budget has therefore been adjusted to reflect the impact of the increased costs of service and this is matched by expected funding of £2.013m.

Revision to Expenditure Pressures

There are eight revisions to expenditure pressures as set out below:

- Pay Award – Reduction of £0.800m

A review of the allowance for pay awards to align to a 1% increase rather than 2% reduces the budget gap by a further £800k. This adjustment reflects the Government’s budget announcement that public sector pay awards should be limited to 1%. Whilst this does not directly impact on Local Government, it sets out a statement of intent around which to frame budget estimates.

- Inflation – Reduction of £2.708m

Non-pay inflationary increases were initially based on the Office for National Statistics (ONS) data for October 2014. These were adjusted for local conditions resulting in an average inflation rate of 2.1%. Since this review has taken place, inflation rates have fallen significantly resulting in a 12 month CPI rate of 0.00% (based on ONS statistics for August 2015). As a result the budget increase to support inflationary pressures (including contractual inflation) can be contained within a sum of £1.110m thus reducing the estimate by £2.708m.

-
- Investment Fund – Reduction of £1.055m

As advised above, existing cash balances, slippage in the capital programme and a review of phasing of capital projects means that the additional budget of £1.055m to support anticipated financing costs of the Investment Fund in 2016/17 is no longer required. However, as advised above, this adjustment simply defers costs into future years and increases in funding requirements have been included in estimates for 2017/18 onwards.

- Business Plan – Reduction of £0.495m

The £1.5m budget to support initiatives to enhance the delivery of corporate plan objectives has been reduced by £0.495m after a review of budget pressures.

- National Insurance (NI) Employer Contribution Rates – Reduction of £0.263m

Following reductions in staffing budgets, the cost impact of national changes to NI employer contribution rates arising from changes in pension legislation effective in 2016/17 have been recalculated. As a result the estimated budget required to meet this cost can be reduced by £0.263m.

- Demand Pressures – Oldham Care and Support (OCS) Pensions – Increase of £0.200m

The 2015/16 budget included funding for pensions costs for OCS employees in line with the start-up agreement for OCS. This is phased across 2 years with a further budget requirement of £200k in 2016/17

- Achievement of Prior Year Savings – Increase of £0.196m

Budget reductions agreed in 2015/16 related to activities of the Unity Partnership in assisting the Council to make budget reductions by reducing spending or increasing income. The make-up of the budget reductions has changed as the programme of activity has developed and budget reductions linked to the increase in the level of Council Tax by means of reviewing issues such as Single Person Discount and aged debt have been added to the programme. As budget reductions have already been assumed from reduced expenditure, this requires the increase in Collection Fund income to be matched by a corresponding revenue pressure of £0.196m in order to produce a balanced position.

- Independent Living Fund (ILF) Pressure – Increase of £0.987m

It is expected that ILF grant funding will be reduced to £2.013m from 2016/17 in line with the reduction in Revenue Support Grant (RSG). It is estimated based on the assumed reductions in RSG, that this will create a £0.987m budget pressure. Budget growth of £0.987m has been built in to compensate for this reduction in funding.

Adjustment to Income Assumptions

There are eight adjustments to income assumptions as set out below:

- Revenue Support Grant (RSG) – Increase of £0.864m

In 2015/16 the Council Tax Freeze Grant for 2014/15 was rolled into the RSG. To be prudent, it has been assumed that the 2015/16 Freeze Grant will be rolled into the RSG for 2016/17, thus increasing RSG by £0.864m.

-
- Council Tax Freeze Grant – Reduction of £0.864m

Council policy for 2015/16 was to freeze Council Tax and this remains the policy for 2016/17 at this time. The Council therefore received Council Tax Freeze Grant in 2015/16 and this has also been assumed for 2016/17. The estimate of 2016/17 Council Tax Freeze grant previously calculated as £1.790m included both the 2015/16 allocation of £0.864m and the additional sum of £0.926m assumed for 2016/17. The 2015/16 element has been removed from Council Tax Freeze Grant funding and 'rolled in' to the RSG figure as detailed above.

- Independent Living Fund – Increase of £2.013m

As highlighted above, the Council takes responsibility for the operation of the Independent Living Fund during 2015/16. The level of grant expected from Central Government to support this activity in 2016/17 has been assessed as £2.013m.

- Central Education Support Grant – Increase of £0.234m

The 2016/17 Central Education Grant previously calculated at £2.266m included an assumption for a reduction in funding following schools transferring to academy status. These assumptions have been reviewed based on current knowledge of schools and whether they are likely to transfer in 2016/17. As a result the expected funding has been increased by £0.234m to £2.500m.

- New Homes Bonus – Increase of £0.700m

The New Homes Bonus grant previously calculated at £2.000m has been increased to £2.700m in 2016/17 following work to identify ways in which this grant can be maximised. It is estimated that an additional £0.700m of grant will be achieved through the increase in housing stock and targeting occupied properties recorded as long term empty properties on the council tax system.

- Multiplier Cap/Settlement Funding Adjustment – Increase of £0.213m

Within the 2015/16 Local Government Finance Settlement, the Government amended the level at which Business Rates income could be increased. It provided grant compensation to make good the reduced Business Rate income. Final allocations for 2015/16 resulted in an increase in grant of £0.213m thus increasing the 2015/16 budget. The uplifted 2015/16 allocation of £0.854m has also been assumed for 2016/17.

- Council Tax Income – Increase of £1.600m

Assumed Council Tax growth of £1.600m has been incorporated into estimates to align to the 2016/17 income assumptions included within the 2015/16 budget report. This reflects an anticipated increase in the number of properties for which Council Tax can be charged and not a variation in the level of Council Tax.

- Collection Fund Surplus – Increase of £0.196m

Budget reductions agreed in 2015/16 related to activities of the Unity Partnership in assisting the Council make budget reductions by reducing spending or increasing income. In order to realise the budget reduction represented by increased income, there is a requirement to present a surplus on the Collection Fund of £0.196m (as discussed above).

2.7 Appendix 1 shows the revised budget position for 2017/18 with a reduced budget gap of £25.200m (a change of £4.102m). This clearly highlights that issues impacting on the budget estimates for 2016/17 have a consequential implication for 2017/18 starting with an increase of £3.356m in the 2016/17 base budget carried forward. The revised projection shows the continuation of 2016/17 changes in relation to pay award, inflation, ILF, Central Education Support Grant, New Homes Bonus and the Multiplier Cap/ Settlement Funding Adjustment. It also shows that a revision to staff numbers applicable to 2016/17 estimates influences projected pension costs and the impact of the end to the change in terms and conditions.

Budget Proposals for 2016/17

- 2.8 During the 2015/16 Budget Process, budget proposals totalling £9.398m were initially identified towards bridging the 2016/17 gap of £29.489m leaving a balance of £20.091m still to find. This position is now updated given the information presented in this report. However, as highlighted earlier, many of the budget proposals with 2016/17 implications that were included in 2015/16 budget reports have been updated and are now submitted for approval by Council.
- 2.9 As part of the 2016/17 budget process, these original options were rated for deliverability and re-presented for consideration prior to submission to the PVFM Select Committee and Cabinet. In some instances, original proposals were considered to be no longer deliverable following further review. New budget reduction proposals have therefore been identified to make good any shortfall, and accordingly budget reductions of £9.353m are presented as Tranche 1 budget reduction proposals.
- 2.10 Public consultation commenced on Tranche 1 items on 5 August 2015 and for most of the proposals concluded by 26 October 2015 thus allowing comments to be incorporated into this report. In addition, the S188 notice starting the 45 day formal consultation with the recognised Trade Unions was issued on 1 September 2015 concluding on 19 October 2015. As outlined in section 2.15 not all consultation processes have yet concluded so Council is unable to consider all proposals in this report for approval. As a consequence Council is recommended to approve £5.974m of proposals which have finalised all stages of consultation, but note £3.379m where consultation has not or cannot yet be concluded.
- 2.11 Attached at Appendix 2 is the consolidated list of budget proposals highlighting Tranche 1 items, totalling £9.353m. This shows an anticipated staffing reduction of 53 FTE which was included in the S188 notice issued on 1 September 2015.
- 2.12 Appendix 2 also presents proposals which have had detailed Equality Impact Assessment (EIA) carried out prior to any decision being made. These proposals total £6.834m.
- 2.13 Attached at Appendix 3 is the consolidated list of budget proposals for approval totalling £5.974m
- 2.14 Appendix 4 sets out the budget reduction proposals for approval in detail using a pro forma presentation for each of the items. Each pro forma identifies how the budget reduction is to be achieved together with the implications for staff, service users or partners, and other information relevant to decision making. If required, the EIA document follows the related pro forma.
- 2.15 Appendix 5 is the consolidated list of budget proposals for noting totalling £3.379m with detailed proformas and draft EIA documents (if required) attached at Appendix 6. The reasons why these proposals cannot be approved at this time are set out below:

- A. There are six proposals at a value of £2.628m where staff consultation has not been completed. These are presented in Table 4.

Table 4 – Proposals yet to complete Staff Consultation

Ref	Brief Detail	2016/17 (£'000)	FTE 2016/17	2017/18 (£'000)
E002	Improved Value for Money within Oldham's Residential and Supported Accommodation Offer for Looked After Children and Care Leavers	234	0.0	0
E003	Looked After Children – Demand Management and Reduction (Therapeutic Fostering and the Adolescent Support Unit)	1,254	12.0	0
E004	Mental Health	843	1.5	0
E007	Workforce Re-design	150	5.0	0
B005	Street Lighting – Shared Client Team	22	1.0	13
C005	Strategic Sourcing & Strategic Relationship Management – Commercial Trading Model	125	2.0	0
	Total	2,628	21.5	13

- B. There is one proposal where public consultation is not complete at this time – (Adult Services E008 – Generating Additional Income (£0.401m)). This consultation is being conducted in tandem with that for Tranche 2 proposal (Adult Services – Income Maximisation E010) as it involves the same client service user group. It will therefore be completed in accordance with the timeline for Tranche 2 and presented to December Council.

- C. There is one proposal where the detailed business case is still not finalised thus delaying the consultation process – (Business Support Redesign C001 (£0.350m))

2.16 Having regard to the revised budget target and assuming Tranche 1 proposals recommended for approval are indeed agreed, it will leave a budget gap of £12.025m. Assuming that the proposals for noting are agreed at Council in December then the gap would be £8.646m after the approved use of reserves and prior to the consideration of Tranche 2 budget reduction proposals.

2.17 The table below shows the current budget position for 2016/17 and 2017/18 having regard to the revised budget reduction gap and Tranche 1 budget reduction proposals.

Table 5 Current Budget Position 2016/17 and 2017/18

Budget position	2016/17 £m	2017/18 £m
Prior Year Net Revenue Budget	196.213	182.583
Adjustment – 2015/16 one off changes	(0.218)	
Revised Prior Year Net Revenue Budget	195.995	182.583
Adjustment to Base budget	(2.596)	0.195
Total Expenditure Pressures:	7.378	11.175
Total Expenditure	200.777	193.953
Total Government Grant Funding	75.683	60.596
Retained Business Rates	29.980	29.980
Council Tax Income	76.724	78.177
Collection Fund Surplus	0.196	
Revised Budget Funding	182.583	168.753
Initial Budget Gap	18.194	25.200
Approved use of Reserves	(0.195)	0
Net Gap/Budget Reduction Requirement	17.999	25.200
Tranche 1 Budget Reductions Recommended	(5.974)	(0.137)
Budget Gap	12.025	25.063
Tranche 1 Budget Reductions for noting (if agreed in December)	(3.379)	(0.013)
Budget Gap to be Addressed	8.646	25.050

2.18 Work is continuing to prepare additional budget reduction proposals. Tranche 2 proposals totalling £4.131m are presented for scrutiny to the meeting of the PVFM Select Committee on 3 November 2015. Further budget reduction proposals as required will be presented at subsequent Select Committee, Cabinet and Council meetings. Tranche 3 proposals are currently being finalised.

3. New Responsibilities

3.1 Members will recall that the February 2015 budget report set out a range of new duties and responsibilities that the Council is required to undertake in 2015/16 and future years. An update on these new responsibilities and the impact upon the revenue budget is shown below.

Better Care Fund

3.2 The Better Care Fund (BCF) aims to transform local services to provide better integrated care and support. Clinical Commissioning Groups (CCG's) and Local Authorities must jointly agree how the funds are spent, so it is essential to ensure the fund is developed in the interests of both parties. The financial year 2015/16 introduced some significant developments including the requirement under BCF pooled fund arrangements for a Section 75 agreement which recognises financial contributions, service provision requirements and service quality risk in relation to pooled budgets.

3.3 In 2015/16 the Oldham share of the BCF was £16.036m (revenue) and £1.549m (capital). The revenue funding was allocated to Oldham CCG as part of the pooling arrangements

and £9.895m has been transferred to the Council as per the BCF agreement. Part of the funding is subject to satisfactory performance of agreed objectives and steps are being taken to ensure objectives are delivered.

- 3.4 The Council's Medium Term Financial Strategy (MTFS) currently assumes the same BCF revenue allocation in 2016/17 as 2015/16.

Independent Living Fund

- 3.5 The Independent Living Fund (ILF) ceased at the end of June 2015 and its functions transferred to Local Authorities. The Council has been allocated £2.244m additional funding for the nine months July 2015 to March 2016. This included a five percent funding reduction but was in line with financial plans. This will have a neutral impact in 2015/16 with spend matching resources. Over the remainder of the financial year the service is conducting reassessments of all users who were in receipt of ILF funding and aim to replace ILF with payments of a single individual budget. At present it is assumed from 2016/17 the ILF funding will be reduced in line with the main Revenue Support Grant cuts. As advised earlier, the revised assumptions include increased expenditure of £3m with compensating grant of £2.013m.

Care Act

- 3.6 The Council received a Care Act Implementation Grant of £1.088m in 2015/16 to fund the implementation of phase one of the Care Act, from April 2015, and to help prepare for phase two in 2016. Phase two of the Care Act has been put on hold until 2020. It is therefore uncertain whether the 2015/16 level of funding will be forthcoming in 2016/17. The Council's MTFS had prudently assumed a fifty percent reduction in this grant from 2016/17 which is in line with current expectations.

Public Health

- 3.7 The Council takes responsibility for the commissioning of 0-5 health visitor services and the services linked to an all age early help offer when the functions transfer from NHS England on 1 October 2015. This grant will form part of the ring-fenced public health grant and will be matched by an equivalent expenditure budget, thus having a neutral impact on the Council's finances.
- 3.8 On 4 June 2015, the Chancellor of the Exchequer announced savings of £200m from this year's public health grant. This decision affects the whole of the Council's 2015/16 public health funding of £17.079m (which includes part year funding of £2.164m for 0-5 children's public health service). The Department of Health has consulted Local Authorities on the most appropriate method for implementing this saving. A reduction of every Local Authority's allocation by a straight line 6.2% (the Government's preferred option) would mean an in-year cut of £1.059m for the Council and £1.193m if applied recurrently from 2016/17.
- 3.9 On October 8 2015 the Government issued a consultation paper on the allocation of Public Health Grant for 2016/17. The proposed revision to the grant allocation formula would have a significant impact if it is introduced, reducing funding for Oldham from 0.26% of the total national grant to 0.22%. The consultation period is open until 6 November and the actual funding notification will not be known until later in 2015 or early 2016. It is currently assumed any reduction can be managed without any impact on the budget position for 2016/17, but this will depend on the final funding position.

4. Devolution

- 4.1 As highlighted in section 1 of this report, Devolution will clearly have a significant impact on the management and financing of the Council going forward, however at this stage of the budget process, Devolution is being treated as being financially neutral. There is still a substantial amount of work to take place to finalise all the arrangements and as a clearer picture emerges, this will be factored into future budget reports as appropriate.

5 Next Steps in the Budget Setting Process

- 5.1 There are still some key stages to be completed in the budget setting process for 2016/17. As a result the budget gap may be affected by a number of issues still to be determined and finalised. These issues include (but are not restricted to) the following:
- The announcement of the:
 - Comprehensive Spending Review (CSR) combined with the Autumn Statement scheduled for 25 November 2015
 - Local Government Finance Settlement 2016/17 (mid December)
 - Other Local Government Funding changes
 - Variations in the Council Tax and Business Rate Tax Bases
 - The announcement of the GM Waste Disposal Authority and GM Combined Authority Levies for 2016/17 (confirmed January/February 2016)
- 5.2 The CSR is expected to give a forward look about the Government's spending intentions throughout the life of this Parliament. This will be vital to informing the Councils MTFs and is likely to have a significant impact on budget reduction targets for 2017/18 and beyond.
- 5.3 The Autumn Statement is to be encompassed within the CSR which is likely to give greater policy direction, focussing initially on 2016/17. The Provisional Local Government Finance Settlement is not expected until mid-December. This will give definitive funding allocations for 2016/17 and possibly indicative allocations for future years. Until this is received, all Government grant and related figures must remain as best estimates.
- 5.4 The lateness of the receipt of information leaves little time to revisit the budget if the announcements vary significantly from estimated figures. Any revisions can only therefore be included in the final budget report presented to the 24 February 2016 budget meeting.
- 5.5 Whilst Oldham Council is progressing in the preparation of its 2016/17 budget, clearly much depends on key financial information yet to be received from Central Government as outlined above. The budget setting timetable, whilst framed by the statutory requirements is working towards a budget Council meeting where all final decisions are made on 24 February 2016. Table 6 below shows the timelines from November onwards for the 2016/17 budget approval process and reports that will be prepared for consideration at each meeting.

Table 6 - Budget Setting Timetable

<i>Date</i>	<i>Body/Issues</i>	<i>Action / Implication</i>
02/11/2015	12 week consultation starts	All proposals within Tranche 3
03/11/2015	Overview and Scrutiny Performance and Value for Money Select Committee (PVFM)	Scrutiny of detailed 2016/17 options (Tranche 2), progress on 2017/18 proposals and recommendations to Cabinet
04/11/2015	Council	Approval of 2016/17 options (Tranche 1) and progress on 2016/17 proposals
16/11/2015	Tranche 3 S188 notice issued	All proposals within Tranche 3
19/11/2015	S188 Staff Consultation period ends	All proposals within Tranche 2
25/11/2015	Notification of the Comprehensive Spending Review	Review of implications and update of estimates
25/11/2015	Autumn Statement	Review of implications and update of estimates
30/11/2015	Cabinet	Approval of 2016/17 options (Tranche 2) and progress so far on 2017/18 proposals and recommendation to Council (subject to consultation comments)
07/12/2015	12 Week public consultation ends	All proposals within Tranche 2
16/12/2015	Council	Approval of 2016/17 options (Tranche 2) and progress on 2017/18 proposals
Mid/late December	Notification of the Provisional Local Government Finance Settlement	Review of implications and update of budget position
11/01/2016	S188 Staff Consultation period ends	All proposals within Tranche 3
21/01/2016	Overview and Scrutiny Performance and Value for Money Select Committee (PVFM)*	Scrutiny of 2016/17 budget report and any amendments to the proposals (including Tranche 3 Proposals) and budget gap for recommendation to Cabinet*
25/01/2016	Cabinet	Setting of Council Tax and Business Rates Tax bases
25/01/2016	12 week public consultation ends	All proposals within Tranche 3
Early February	Notification of the Final Local Government Finance Settlement	Review of implications and update of final budget position
11/02/2016	Cabinet*	Recommendation to Council of Tranche 3 proposals and final budget report*
24/02/2016	Council*	Amendments to any proposals and budget gap if any late changes and approval of final Council budget setting report*

* These meetings will also consider reports on the Medium Term Financial Strategy, Capital Programme and Capital Strategy, Treasury Management Strategy and Housing Revenue Account Budget.

6 Options/Alternatives

6.1 There are two options Council may consider:

Option 1 – Council can approve all the budget proposals included in this report to the value of £5.974m and note additional proposals to the value of £3.379m.

Option 2 – Council can request that further work is undertaken on some or all of the budget proposals and that a decision on proposals is deferred.

7 Preferred Option

7.1 The preferred option is that Option 2 is approved and that £5.974m of budget reduction proposals are approved

8 Consultation

8.1 The presentation of these proposals forms part of the detailed consultation stage of the 2016/17 budget process.

8.2 Since 5 August 2015 the Council has been consulting the public about its budget challenge and about how we can work together to meet that challenge.

8.3 The Council commissioned an update of the short video used as part of the budget challenge campaign for 2015/16. This year we have focused on the need for co-operative working to help us reduce the impact of any reduction in services delivered by the Council. The video also asks residents to get involved in an online discussion about how the Council should spend its budget and invites them to share their money saving ideas. The video has been promoted via social media and the Council's website and since its launch on 5 August has already had more than 283,424 views.

8.4 Further engagement is being encouraged through the introduction of a budget consultation portal. Specific questions have been developed detailing key services and what percentage of the budget is spent on them. We are inviting residents and staff to participate in this short questionnaire to advise on which services they use the most, which they think we should protect, and which they think we could spend less money on. This questionnaire will provide us with key information as to whether the services most used by residents will drive their decision on whether or not to protect them or to reduce spend on them.

8.5 We are developing a new budget calculator tool for use during more in-depth and face to face engagement. The calculator is an advanced way of showing how much we spend on individual services and allows the user to reduce the spend by a chosen percentage. It will then detail the impact of this reduction on that service and highlight the challenges that we face in making these decisions.

8.6 To further share the scale of the budget challenge with residents, we shall also be commissioning a second short video. This will focus on Value for Money and will highlight the cost of services and how this equates to the cost of Council Tax payments.

8.7 To ensure we do not exclude residents who do not use digital channels we have included budget messaging in our resident newsletter, Borough Life distributed in October and in a two page feature in the Oldham Evening Chronicle. Both of these will also offer a tear-off reply slip asking for feedback and ideas.

-
- 8.8 We have also begun engagement with staff about our budget challenge, requesting them to share their money saving ideas through an internal poster campaign, via the intranet staff forum and direct to the 'Ask the Chief' and Internal Comms mailboxes.
- 8.9 Wherever possible we will respond directly to comments and suggestions offering further information about council spend and services.
- 8.10 Alongside the Council's public consultation around the 2016/17 budget challenge, we have also engaged in specific consultation around the budget reduction proposals in Adult and Children's Services and Community Services. Where appropriate the feedback received is reflected in the EIAs. The website information around the proposals included a link to a 'mailbox' for additional comment. There has been consultation with affected groups including staff and service users for those proposals having a frontline impact such as the reduction for residential accommodation for looked after children due to the introduction of the adolescent support unit. There has also been consultation with key partners including the Clinical Commissioning Group, provider organisations and the Voluntary and Community Sector (VCS).
- 8.11 In respect of public and user/carer consultation the Council's aim of reducing dependence on statutory services has been a factor particularly in instances where service users are more vulnerable.
- 8.12 Voluntary Sector partners have been actively involved in the work around reducing the commissioning and grant funding activity for VCF organisations.

9 Financial Implications

- 9.1 Dealt with in the detail of this report.

10 Legal Services Comments

- 10.1 The Council has a legal obligation to pass a resolution to pass its budget and Council Tax resolutions by March 2016. Appropriate statutory consultation is taking place in respect of the proposals. (Colin Brittain)

11 Co-operative Agenda

- 11.1 The Council will ensure that its budget setting process addresses the repositioning of the Council as a Co-operative Council linking to Oldham's ambition for a Co-operative Future.

12 People Services Comment

- 12.1 High level union and staff engagement on Tranche 1 options commenced on the 28 July in order to give an overview of where savings were being considered and the Councils initial thoughts on how these may be delivered .
- 12.2 The S188 document starting formal consultation on the Tranche 1 proposals was issued to the recognised trade unions on the 1 September and started the minimum 45-day formal consultation process. Consultation on individual options has been ongoing since that date. Consultation on any proposals should have ended ideally in advance of Cabinet on the 19 October but, at the latest, by 30 October. This to allow for full consideration of any comments or alternatives submitted by unions or staff to be considered in advance of, and where relevant presented to, Council on the 4 November 2015 prior to any final decisions.

-
- 12.3 Proper and meaningful consultation has to be exhausted in advance of the approval and subsequent implementation of any new arrangements. Where consultation has not been completed, consideration must be given to moving final approval to the Council meeting in December or February in order to ensure full and meaningful consultation based on complete proposals takes place. This will be the case for seven of the Tranche 1 options, specifically B005, C001, C005, E002, E003, E004 and E007, where due to either the complexity of the option, connectivity with other tranches and working with partner organisations, has meant that the development of the proposals and consultation are not completed.
- 12.4 The S188 document shows a potential 58 FTE staff losses in Tranche 1 (5 FTE of which are to be considered in Tranche 2) and it is hoped that the number of compulsory redundancies will be mitigated by deletion of relevant vacancies and seeking voluntary options in the first instance.
- 12.5 Tranche 2 options released were shared on the 8 September with the S188 being issued on the 5 October. Early Engagement on the Tranche 3 proposals commenced on the 26 October and it is expected that the S188 will be issued on 16 November 2015 with a view to the options being approved at Council in February.
- 12.6 People Services and the HR Advisory Service within Unity will continue to work with the Directorates to ensure that the proper process is followed and that the staff and unions have the opportunity to share their views and have input on the final outcomes. (Sally Blackman)

13 Risk Assessments

- 13.1 The Council has a statutory obligation to set a balanced budget. This report sets out a number of options by which the Council proposes to set its budget for 2016/17. Failure to agree a balanced budget will expose the Council to the risk of future censure by its external auditors. (Mark Stenson)

14 IT Implications

- 14.1 Many of the budget proposals require the more efficient use of existing computerised systems. Any costs associated with any improvements to systems have been factored into the net budget reductions put forward.

15 Property Implications

- 15.1 Any impacts on asset management have been factored into the proposals identified or will be dealt with as part of the previously approved asset management strategy.

16 Procurement Implications

- 16.1 Any proposals that impact on the procurement of goods, services etc. will be undertaken in full liaison with the Procurement Service and in compliance with all necessary Council and statutory requirements.

17 Environmental and Health & Safety Implications

- 17.1 Environmental and Health and Safety implications will be taken into account when dealing with the individual proposals as appropriate.

18 Equality, community cohesion and crime implications

18.1 In taking financial decisions the Council must demonstrate that it has given “due regard” to the need to eliminate discrimination, promote equality of opportunity and promote good relations between different groups.

18.2 Demonstrating that “due regard” has been given involves:

- assessing the potential equality impacts of proposed decisions at an appropriate stage in the decision making process - so that it informs the development of policy and is considered before a decision is taken;
- ensuring that decision makers are aware of the equality duties and any potential equality issues when making decisions.

NB – having due regard does not mean the Council cannot make decisions which have the potential to impact disproportionately, it means that we must be clear where this is the case, and must be able to demonstrate that we have consulted, understood and mitigated the impact.

18.3 To ensure that the process of impact assessment is robust, it needs to:

- Be specific to each individual proposal;
- Be clear about the purpose of the proposal;
- Consider available evidence;
- Include consultation and involvement with those affected by the decision, where appropriate;
- Consider proposals for mitigating any negative impact on particular groups;
- Set out arrangements for monitoring the actual impact of the proposal.

18.4 The Equality Act 2010 extends the public sector equality duties to cover nine protected characteristics, namely:

- age,
- disability,
- gender,
- gender reassignment,
- marriage and civil partnership,
- pregnancy and maternity,
- race,
- religion and belief and
- sexual orientation

18.5 In December 2010, the Government announced that it would not be taking forward the socio-economic duty for public bodies. Despite this we have continued to consider people on low incomes as part of our equality impact assessment process.

Oldham's approach to assessing the impact

- 18.6 Assessing the potential equality impact of proposed changes to policies procedures and practices is one of the key ways in which public authorities can show 'due regard'. Equality Impact Assessments (EIAs), therefore, provide a structured framework which enables the Council to ensure that it considers the equality impact of decisions, and to demonstrate to others that it has done so.
- 18.7 Oldham's EIA form is based on the experience of previous years and incorporates elements from good practice elsewhere. The main aims of our current EIA are to:
- strengthen the process through improved accountability – identifying a lead officer for each EIA;
 - stimulate a more rigorous and overt analysis of the impact and possible mitigations;
 - implement a stronger equality monitoring and management process to ensure that we follow through on what we said we would do. This includes identifying risks to implementation and how these will be managed.
- 18.8 Where complete, the final EIAs have been included. Where public consultation is currently ongoing, draft EIAs have been included for consideration.
- 18.9 The equality impact assessment process undertaken for the Council's budget process involves:
- An initial equality impact screening – The budget proposal action plan forms completed by each Director / Service Manager incorporate an initial equality screening to identify whether any proposal has the potential for significant disproportionate adverse impact in respect of any protected characteristic i.e. whether the impact of the proposal falls disproportionately on any particular group – such as people with a disability.
 - The initial screenings are then independently reviewed by a small group with knowledge of the equality legislation, comprising of the Cabinet Member for Social Care and Safeguarding, a senior officer from the Co-operatives & Neighbourhoods directorate, a lawyer from the Legal Services team, two senior officers from Commissioning and a senior officer from People Services.
- 18.10 The key aims of this review process are to:
- assess the potential equality impact of each proposal using the information provided.
 - provide challenge to those where the Group feel the initial screening does not accurately identify those equality groups potentially affected and that a further screening process needs to be completed.
- 18.11 Full equality impact assessment – An equality impact assessment is carried out if the initial screening identifies that the proposal could have a potential significant, disproportionate adverse equality impact.

Involving elected members

- 18.12 A key element to assessing the equality impact has been the involvement of elected members. This involvement has included:

- Cabinet Member for Social Care and Safeguarding sits on the Equality Challenge Group.
- Consideration of equality impact throughout the Leadership Star Chamber process, including through the initial screenings on the proposal forms and a briefing paper.
- Briefings between Executive Directors and Cabinet Members during development of proposals and working together to consider the equality impacts and identify any mitigating actions.
- Both the EIA screening information contained with the budget proposals and the EIA forms themselves, where available, are submitted to, and considered by the Performance and Value for Money Overview and Scrutiny Select Committee NB: Where public consultation is required and is ongoing, the EIA forms are still in draft form at this stage.
- Final EIAs are made available to Members alongside the budget proposals in the Council papers.

18.13 The Council in adhering to the legal requirements is already completing EIAs and progress will be reported on these throughout the budget preparation as it was last year.

19 Equality Impact Assessment Completed

19.1 An equality impact assessment is carried out if the initial screening identifies that the proposal could have a potential significant, disproportionate adverse equality impact.

20 Key Decision

20.1 Yes

21 Key Decision Reference

21.1 CFHR-17-15

22 Background Papers

22.1 The following is a list of background papers on which this report is based in accordance with the requirements of Section 100(1) of the Local Government Act 1972. It does not include documents which would disclose exempt or confidential information as defined by the Act:

File Ref: Background papers are contained in Appendices 1, 2, 3, 4, 5 and 6
 Officer Name: Anne Ryans
 Contact No: 0161 770 4902

23 Appendices

- 23.1 Appendix 1 – Revised 2017/18 Budget Gap
 Appendix 2 – Full Summary of Tranche 1 Budget Reductions
 Appendix 3 – Summary of Tranche 1 Budget Reductions to approve
 Appendix 4 - Budget proposals and EIAs in relation to Appendix 3
 Appendix 5 – Summary of Tranche 1 Budget Reductions to note
 Appendix 6 – Budget proposals and EIAs in relation to Appendix 5

APPENDIX 1 – REVISED BUDGET POSITION FOR 2017/18 WITH AN ADJUSTED BUDGET REDUCTION

Estimated Revenue Position 2017/18	Original 2017/18 £m	Revised 2017/18 £m	Change £m
Prior Year Revenue Budget	179.227	182.583	3.356
Adjustment to Base Budget - Use of Reserves		0.195	0.195
Net Revenue Budget	179.227	182.778	3.551
Expenditure Pressures:			
- Pensions	2.709	1.474	(1.235)
- Pay Award	1.753	1.000	(0.753)
- Inflation	3.774	1.880	(1.894)
- Investment Fund	0.923	1.682	0.759
- Business Plan	0.500	0.500	0.000
- Levies	1.544	1.544	0.000
- Increase in NI Charges	0.000	0.065	0.065
- Fair Employment Charter	1.030	1.030	0.000
- Change to end of Terms and Conditions	2.515	2.000	(0.515)
Total Expenditure Pressures	14.748	11.175	(3.573)
Total Expenditure	193.975	193.953	(0.022)
Funded By:			
- Business Rates Top Up	31.198	31.198	0.000
- Revenue Support Grant	20.475	20.475	0.000
- New Burdens - ILF Grant	0.000	1.799	1.799
- Housing Benefit and Council Tax Administration	1.241	1.241	0.000
- Central Education Support Grant	2.111	2.329	0.218
- New Homes Bonus	1.500	2.700	1.200
- Multiplier Cap/Settlement Funding Adjustment	0.000	0.854	0.854
Total Government Grant Funding	56.525	60.596	4.071
- Retained Business Rates	30.680	29.980	(0.700)
- Council Tax Income	77.229	77.938	0.709
- Parish Precepts	0.239	0.239	0.000
Revised Budget Funding	164.673	168.753	4.080
Net Gap/Budget Reduction Requirement	29.302	25.200	(4.102)

Budget Reduction Proposals Tranche 1

Ref	Brief Detail	Responsible Officer	Cabinet Member	2016/17 (£'000)	FTE 2016/17	2017/18 (£'000)	EIA Required?	Page No.
E001	Public Health Savings through Transformation	Alan Higgins	Cllr J Stretton	604	2.0	0	Yes	App 4 Pg 2
E002	Improved Value for Money within Oldham's Residential and Supported Accommodation Offer for Looked After Children and Care Leavers	Kim Scragg	Cllr J Harrison	234	0.0	0	Yes	App 6 Pg 2
E003	Looked After Children - Demand Management and Reduction (Therapeutic Fostering and the Adolescent Support Unit)	Kim Scragg	Cllr J Harrison	1,254	12.0	0	Yes	App 6 Pg 14
E004	Mental Health	Maggie Kufeldt	Cllr J Harrison	843	1.5	0	Yes	App 6 Pg 27
E005	Contracts within Adult Services	Maggie Kufeldt	Cllr J Harrison	2,139	0.0	0	Yes	App 4 Pg 25
E006	Adult Social Care - Care Package Reviews	Maggie Kufeldt	Cllr J Harrison	613	0.0	0	Yes	App 4 Pg 77
E007	Workforce Re-design	Maggie Kufeldt	Cllr J Harrison	150	5.0	0	Yes	App 6 Pg 46
E008	Adult Services - Generating Additional Income	Maggie Kufeldt	Cllr J Harrison	401	0.0	0	Yes	App 6 Pg 69
	Total - Health and Wellbeing			6,238	20.5	0		
B001	Building Control - Income Generation	Carol Brown	Cllr D Hibbert	25	0.0	0	No	App 4 Pg 91
B005	Street Lighting - Shared Client Team	Carol Brown	Cllr D Hibbert	22	1.0	13	No	App 6 Pg 97
B008	Efficiencies from combining into Community Services Directorate	Liz Hume	Cllr B Brownridge	105	1.0	0	No	App 4 Pg 96
B009	Targeted Youth - Reduction in overall contract value	Jill Beaumont	Cllr B Brownridge	130	0.0	0	Yes	App 4 Pg 101
B010	Universal Youth - Removing contingency	Jill Beaumont	Cllr B Brownridge	100	0.0	0	No	App 4 Pg 109
B012	Voluntary, Community and Faith Sector Commissioning	Bruce Penhale	Cllr B Brownridge	80	0.0	0	Yes	App 4 Pg 114
B013	Targeted Early Help Team Support for PFI Housing Neighbourhoods	Debbie Holland/John Rooney	Cllr B Brownridge	50	0.0	0	No	App 4 Pg 166
B014	Early Help use of libraries for community portion of offer	Debbie Holland/Sheena Macfarlane	Cllr B Brownridge	50	0.0	0	No	App 4 Pg 171
B015	Transfer Independent Domestic Violence Advocacy (IDVA) function from Community Safety to Early Help	Haydn Roberts/Debbie Holland	Cllr B Brownridge	70	0.0	0	No	App 4 Pg 176
B016	Early Help re-tendering to re-focus service on supporting families at an earlier stage	Debbie Holland	Cllr B Brownridge	130	0.0	0	No	App 4 Pg 182
B018	Increased income into First Response through new CCTV or security contracts	John Rooney	Cllr B Brownridge	50	0.0	0	No	App 4 Pg 187
B019	Review of PFI Contract Arrangements	John Rooney/Andy Cooper	Cllr B Brownridge/Cllr A Jabbar	150	0.0	0	No	App 4 Pg 192
	Total - Cooperatives and Neighbourhoods			962	2.0	13		
D001	Lifelong Learning Service - Income Generation	Lynda Fairhurst	Cllr S Akhtar	20	0.0	0	No	App 4 Pg 197
D003	Education - Transfer of Income	Caroline Sutton	Cllr S Akhtar	36	0.0	0	Yes	App 4 Pg 206
D004	Use of Pupil Premium Plus Grant	Caroline Sutton	Cllr S Akhtar	38	0.0	0	No	App 4 Pg 215
D005	Income Generation - Educational Psychology	Caroline Sutton	Cllr S Akhtar	55	0.0	0	No	App 4 Pg 221
	Total - Economy and Skills			149	0.0	0		
A001	Organisational Redesign	Carolyn Wilkins	Cllr J McMahon	150	0.0	0	No	App 4 Pg 226
A002	Professional Fees	Heather Moore	Cllr A Shah	24	0.0	0	No	App 4 Pg 231
	Total Chief Executive and Policy & Governance			174	0.0	0		
C001	Business Support Redesign	Anne Ryans	Cllr A Jabbar	350	15.0	0	Yes	App 6 Pg 103
C002	Financial Services Redesign	Anne Ryans	Cllr A Jabbar	375	13.5	137	No	App 4 Pg 237
C003	Schools ICT - Income Generation	Helen Gerling	Cllr A Jabbar	75	0.0	0	No	App 4 Pg 243
C004	Programme Management Office - Income Generation	Christopher Lewis	Cllr A Jabbar	55	0.0	0	No	App 4 Pg 251
C005	Strategic Sourcing & Strategic Relationship Management - Commercial Trading Model	Nicola Spence	Cllr A Jabbar	125	2.0	0	No	App 6 Pg 115
C006	Investment Income through Treasury Management	Anne Ryans/Andy Cooper	Cllr A Jabbar	400	0.0	0	No	App 4 Pg 258
C009	Project Diamond - Unity Partnership	Helen Gerling	Cllr A Jabbar	150	0.0	0	No	App 4 Pg 263
C010	Reduction in Unity Contract	Helen Gerling	Cllr A Jabbar	100	0.0	0	No	App 4 Pg 268
C013	Insurance review	Mark Stenson	Cllr A Jabbar	200	0.0	0	No	App 4 Pg 274
	Total - Corporate and Commercial			1,830	30.5	137		
	Total Budget Reduction Proposals (Tranche 1)			9,353	53.0	150		

This page is intentionally left blank

Budget Reduction Proposals Tranche 1 - For Approval

Ref	Brief Detail	Responsible Officer	Cabinet Member	2016/17 (£'000)	FTE 2016/17	2017/18 (£'000)	EIA Required?	Page No.
E001	Public Health Savings through Transformation	Alan Higgins	Cllr J Stretton	604	2.0	0	Yes	2
E005	Contracts within Adult Services	Maggie Kufeldt	Cllr J Harrison	2,139	0.0	0	Yes	25
E006	Adult Social Care - Care Package Reviews	Maggie Kufeldt	Cllr J Harrison	613	0.0	0	Yes	77
Total - Health and Wellbeing				3,356	2.0	0		
B001	Building Control - Income Generation	Carol Brown	Cllr D Hibbert	25	0.0	0	No	91
B008	Efficiencies from combining into Community Services Directorate	Liz Hume	Cllr B Brownridge	105	1.0	0	No	96
B009	Targeted Youth - Reduction in overall contract value	Jill Beaumont	Cllr B Brownridge	130	0.0	0	Yes	101
B010	Universal Youth - Removing contingency	Jill Beaumont	Cllr B Brownridge	100	0.0	0	No	109
B012	Voluntary, Community and Faith Sector Commissioning	Bruce Penhale	Cllr B Brownridge	80	0.0	0	Yes	114
B013	Targeted Early Help Team Support for PFI Housing Neighbourhoods	Debbie Holland/John Rooney	Cllr B Brownridge	50	0.0	0	No	166
B014	Early Help use of libraries for community portion of offer	Debbie Holland/Sheena Macfarlane	Cllr B Brownridge	50	0.0	0	No	171
B015	Transfer Independent Domestic Violence Advocacy (IDVA) function from Community Safety to Early Help	Haydn Roberts/Debbie Holland	Cllr B Brownridge	70	0.0	0	No	176
B016	Early Help re-tendering to re-focus service on supporting families at an earlier stage	Debbie Holland	Cllr B Brownridge	130	0.0	0	No	182
B018	Increased income into First Response through new CCTV or security contracts	John Rooney	Cllr B Brownridge	50	0.0	0	No	187
B019	Review of PFI Contract Arrangements	John Rooney/Andy Cooper	Cllr B Brownridge/Cllr A Jabbar	150	0.0	0	No	192
Total - Cooperatives and Neighbourhoods				940	1.0	0		
D001	Lifelong Learning Service - Income Generation	Lynda Fairhurst	Cllr S Akhtar	20	0.0	0	No	197
D003	Education - Transfer of Income	Caroline Sutton	Cllr S Akhtar	36	0.0	0	Yes	206
D004	Use of Pupil Premium Plus Grant	Caroline Sutton	Cllr S Akhtar	38	0.0	0	No	215
D005	Income Generation - Educational Psychology	Caroline Sutton	Cllr S Akhtar	55	0.0	0	No	221
Total - Economy and Skills				149	0.0	0		
A001	Organisational Redesign	Carolyn Wilkins	Cllr J McMahon	150	0.0	0	No	226
A002	Professional Fees	Heather Moore	Cllr A Shah	24	0.0	0	No	231
Total Chief Executive and Policy & Governance				174	0.0	0		
C002	Financial Services Redesign	Anne Ryans	Cllr A Jabbar	375	13.5	137	No	237
C003	Schools ICT - Income Generation	Helen Gerling	Cllr A Jabbar	75	0.0	0	No	243
C004	Programme Management Office - Income Generation	Christopher Lewis	Cllr A Jabbar	55	0.0	0	No	251
C006	Investment Income through Treasury Management	Anne Ryans/Andy Cooper	Cllr A Jabbar	400	0.0	0	No	258
C009	Project Diamond - Unity Partnership	Helen Gerling	Cllr A Jabbar	150	0.0	0	No	263
C010	Reduction in Unity Contract	Helen Gerling	Cllr A Jabbar	100	0.0	0	No	268
C013	Insurance review	Mark Stenson	Cllr A Jabbar	200	0.0	0	No	274
Total - Corporate and Commercial				1,355	13.5	137		
Total Budget Reduction Proposals (Tranche 1)				5,974	16.5	137		

This page is intentionally left blank

Appendix 4

Detailed Pro-formas Tranche 1

Budget Reductions to Approve

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	E001
Portfolio	Health and Wellbeing
Directorate:	Health and Wellbeing
Division:	Public Health
Responsible Officer and role:	Alan Higgins, Director of Public Health
Cabinet Member and Cluster :	Cllr J Stretton, Health and Wellbeing

Title:	Public Health Savings through transformation
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£14,915k
	Income	(£14,915k) (Public Health Grant)
	Net Expenditure	£0k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	14.6 (HWB)

	2016/17 £k	2017/18 £k
Proposed Financial saving:	604	0
Proposed reduction in FTE's	2	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>This proposal represents the second year of savings to be achieved from the public health grant. Much of the activity to achieve the savings has either been completed or has already started during 2015/16 and will be completed throughout 2016/17.</p> <p>The council's public health grant is an opportunity to shift the balance of the council's overall budget towards activity which prevents problems and accelerates service transformation to meet Co-operative Oldham goals.</p>
--	--

Proposed Savings £k:

Through efficiency, income generation, transformation, decommissioning, etc

The total level of proposed savings is £604k.

The proposals to generate this level of savings are outlined below. It is anticipated that all savings will be achieved during 2016/17.

PROPOSAL ONE: SEXUAL HEALTH SERVICES

The provision of sexual health services is a mandatory function of the council under the Health and Social Care Act. The original proposal submitted in 2015/16 was to reduce investment in access to sexual health services by £151,455 from the 2014/15 baseline of £1,934k to £1,782k by 2016/17. £78k of this was actioned in 2015/6, the remainder will be actioned in 2016/17 as follows:

- Reduced spend on the integrated sexual health service from £1,264k to £1,100k. This will result in a saving of £163k but this will be offset by an increased spend against out of area activity spend by £100k.

2016/17 recurrent savings: £63,000

PROPOSAL TWO: HEALTH IMPROVEMENT SERVICE

The original proposal was to reduce investment in health improvement activity by £740k from the baseline 2014/15 investment of £2,002k to £1,262k by 2016/17. £670k was due for actioning in 2015/16 which was then increased to £695k by bringing forward a saving into 2015/16. This has been achieved. The remainder will be achieved in 2016/17 by:

- Decommissioning of the Probation Service health trainer initiative.

2016/17 Recurrent Savings: £45k

PROPOSAL THREE: CHILD AND MATERNAL HEALTH SERVICES

The original proposal was to reduce investment in child and maternal health services by £298k from the baseline 2014/15 investment of £1,390k to £1,121k. Further £20k of savings was identified and was brought forward into 2015/16.

The remainder is due to be actioned in 2016/17 and will be achieved by:

- Reducing the spend against School Nursing services:

2016/17 recurrent savings: £232k

PROPOSAL FOUR: HEALTH EVENTS AND MEDICINE MANAGEMENT

The original proposal was to reduce investment in miscellaneous project and support costs by £436k from the 2014/15 baseline of £698k to £262k by 2016/17. A reduction of £282k has been achieved in 2015/16. The remaining savings are planned for 2016/17 as follows:

- Reduction in contribution to medicines management (£4k)
- Reduction in budget for health events (£100k)

2016/17 recurrent savings: £104k

PROPOSAL FIVE: CORE FUNCTION AND SUPPORT COSTS

The original proposal was to reduce investment in the core public health team by £230k; to reduce investment in analytical capacity in Business Intelligence Unit by £34k; to reduce investment in Drugs/Alcohol Management by £40k and reduce investment in the general commissioning function by £160k. Total proposed savings of £464k.

Savings relating to 2015/16 have been delayed but are mostly on track for a saving of £304k. The remainder of £160k is due in 2016/17 and relates to efficiencies in relation to the commissioning function.

2016/17 recurrent savings: £160k

Further Financial Implications & Considerations

ie Capital implications or invest to save, pump priming etc , variations to budget

None

Economic Impact Summary

Total net FTE job losses (gains):
(including Council, Unity partnership, 3rd sector, other partners, private sector)

Not known – only proposal five – core function and support costs may impact on jobs.

Total financial loss to partners (£k)
(including Unity partnership, 3rd sector, other partners, private sector)

£440,000
(Main providers are Pennine Care Foundation Trust, GM probation Service)

Type of impact on partners	Negative
-----------------------------------	----------

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Sexual Health Services - procurement completed and new service model implemented	March 2017
Health Improvement Service – decommissioned Probation Service health trainer service	March 2017
School Nursing Service and School Health Services procurement completed and new service model implemented	December 2016
Health events and medicines management planned	June 2017
Review of commissioning service completed	March 2016

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
<p><u>Sexual Health:</u> A potential reduction in provision of contraception and treatment of STIs may result in longer term costs (unwanted pregnancies, infertility treatment, and treatment of STIs some of which are long-term such as HIV). Decreased provision may result in increased uptake of Out of area services, for which Oldham council will be liable for costs (pricing unfixed)</p>	<p>An integrated sexual health service is currently out to procurement</p>
<p><u>Health Improvement:</u> services related reductions are focused upon behaviour change thus there may be a direct impact on rates of smoking, physical inactivity and adult and childhood obesity, although this will mainly affect ex-offenders.</p> <p>This service component is where the majority of health related community development occurs, thus programmes such as Get Oldham growing, and the provision of physical activity projects and programmes in districts is likely to be significantly reduced or will stop.</p>	<p>It is likely that council services (including leisure for example) might be able to fill some of the gaps. Although this will only partially compensate</p> <p>Investment in wider council services (through the transformation fund) will result in behaviour change activity through these services, however this investment will require review to ensure value for money for outcomes achieved.</p>

<p><u>Child and maternal services:</u> Reductions solely relate to the deflation of the School Nursing contract by around 25%. The service had a reduction of 15% (£230,000) during 2014/15 hence this additional £232,000 represents a significant reduction from the original service at point of transfer.</p>	<p>The contract for the School Nursing Service was agreed at the Cabinet meeting on the 19th October and will be part of a larger £7.5m commission (including Health Visiting and Children's Centres).</p>
<p><u>Health events and medicine management:</u> Several activities within the council would not be able to be funded, including the affordable warmth project, the innovations hub, devolvement of any funding to Districts would be unlikely, and there would be no funding available for short term support of projects (eg Cancer Support Network funding would stop) Such projects have strong political support with significant potential for reputational damage.</p>	<p>Investment in wider council services (through the transformation fund) will result in some of this activity through these services, however this investment will require review to ensure value for money for outcomes achieved</p>
<p><u>Core Function and Support Costs:</u> The savings under this category relate to the reduction in costs for the Commissioning team.</p>	<p>Redesign of the commissioning team is underway and the transition of health visiting to the local authority is being factored into this redesign (as it brings additional commissioning burdens)</p>

Section 5

What impact might the proposal have on the following?

<p><u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i></p>
<p>None</p>

<p><u>Service delivery and future expected outcomes:</u></p>
<p>Procurement of integrated Sexual Health Service as part of a tri-borough arrangement presents an opportunity to achieve additional savings however this cannot yet be quantified. Key Performance outcomes have been set out in the tender documentation.</p> <p>The commissioning of a new integrated 0-4 service alongside School Nursing Services will result in transformed service models. Key performance indicators have been set out in the tender documentation.</p> <p>The disinvestment in the probation health trainer service should not result in a total loss of service as these clients can access the generic health trainer service via the All-age Early Help Service.</p>

Organisation (other services)

None known

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

There is likely to be a reduction in school nursing staffing in particular but how many staff this will affect is still unclear as the service is also out to procurement.

Communities

A reduction in the Get Oldham Growing budget will result in reduced activity in community settings.

Service Users

Not known

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

Some of the funding relates to small organisations and thus this may result in a disproportionate impact on their viability as organisations. However the majority relates to larger public sector providers.

Section 6

Supplementary Information

None

Section 7

Consultation Information –	
<i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	Trade Union meeting 28 July.
Staff Consultation	Staff engagement 30 July
Public Consultation	Public consultation process to be completed by 26 October for approval by Council
Service User Consultation	
Any other consultation	Please note, that a full consultation process was actioned last year with regard to these savings as they were part of the original savings through transformation (star chamber) proposals.

Section 8

Equality Impact Screening

Note that the full EIA process has already been undertaken for the entirety of these proposals as they were part of the original 2 year Savings through transformation (star Chamber) proposals for the public health budget that were approved last year.

Is there potential for the proposed saving to have a disproportionate adverse impact on any of following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	Yes
People in particular age groups	Yes
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	Yes
EIA to be completed by:	Alan Higgins
By:	Completed in 2014 (proposals were proposed last year for 2016/17 and underwent EIA during 2014) and reviewed July 2015.

Section 9

Responsible Officer:	Maggie Kufeldt, Executive Director, Health and Wellbeing
----------------------	--

Support Officer Contact:	Claire Hill
Support Officer Ext:	0161 770 3125


Cabinet Member Comments and/or approval	
Approved	

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	29 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr J Stretton
Signed:	
Date:	29 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Equality Impact Assessment Tool

E001: Public Health Savings through transformation

Stage 1: Initial screening

Lead Officer:	Mike Bridges, Public Health Specialist
People involved in completing EIA:	Alan Higgins, Director of Public Health
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	Yes

General Information

1a	Which service does this project, policy, or proposal relate to?	<p>Public Health – B039a (<u>Proposal Four</u>) Review of the School Nursing Contract (one of six included in B039a)</p> <p>A second EIA has been completed on the element of proposal four covering Healthy Schools funding and follows this EIA in the appendix.</p>
1b	What is the project, policy or proposal?	<p>To reduce the value of the School Nursing contract from £1.232M in 2015/16 to £1M in 2016/17. This is following GM benchmarking information around comparable SNS spend and in the context of reviewed 0-4 commissioning arrangements.</p> <p>The reduction in the value of the contract is part of the council saving target but will be re-invested into the Councils 'Public Health Investment Fund' maintaining the integrity of the ring fenced use of the Public Health Grant to Local Authorities.</p> <p>The service will be expected to make savings from existing management and overheads in the first instance and we will look to set out a new service specification for 2016/7 that reflects the local priorities and context.</p> <p>The provider also has responsibility for Health Visiting which is commissioned by NHS England. There is a service relationship between Health Visiting and School Nursing which includes clinical supervision, line management and safeguarding. The responsibility for Health Visiting commissioning transferred to Local Authorities in October 2015.</p>

		The saving from the reduction in the value of the contract will be reinvested into wider council services that can demonstrate their ability to deliver activities for children and young people which meet Key Performance Indicators and Public Health Outcomes.
1c	What are the main aims of the project, policy or proposal?	To reduce the value of School Nursing contract in 2016/17 from £1.232m to £1m.
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	<p>The School Nursing Service provides a progressive universal service for all children and young people aged between 5 and 19 years olds attending free schools and academies within Oldham Borough Council (including home taught children). The service delivers universal elements of the Healthy Child Programme which is under pinned by the Oldham Joint Strategic Needs Assessment (JSNA).</p> <p>The service intensifies its offer for children and young people who have more complex and long term needs (Universal Plus) e.g. vulnerable and at risk groups, including young carers, children in care, young offenders, those not in education, employment or training (NEET) and children with disabilities.</p> <p>School nurses are instrumental in co-ordinating services for children and young people with multiple needs (Universal Partnership Plus). The service aligns to the Health Visiting Services to provide continuity of service from 0 to 19 years of age.</p> <p>The school nursing service is central to the co-ordination of the Healthy Child Programme 5 to 19 (HCP). The reduction in the value of the School Nursing Service contract may disproportionately affect the physical and mental of children and adolescents by:</p> <ul style="list-style-type: none"> • Limiting the range of evidence based early interventions to address physical and mental health as part of the Health Child Programme support 5 to 19 including families. There is an increased recognition of the importance of early intervention early intervention to prevent physical and mental health problems during childhood and adolescence which, if undetected, may subsequently have a lifelong impact throughout adulthood. • A schools lack of access to a school nurse is likely inhibits their ability to address health issues across the school, including the tackling of unhealthy life styles issues such as obesity and sexual health problems. The current emphasis on educational attainment further highlights the value of the School Nursing Service; a healthy child has an increased capacity to learn and achieve full potential. • The service may become over stretched with Education, Health and Care Plans (Children and Families Act 2014), Safeguarding and Child Protection Work. This may limit

		<p>the time school health nurse have to undertake wider public health interventions to improve physical and mental health outcomes for children.</p> <ul style="list-style-type: none"> As such we intend to review the role of School Nurses in the context of their current roles, to ensure that the service is commissioned in such a way as to ensure that SNS efforts are focused upon activities for which there is sound evidence of positive outcomes.
--	--	--

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Groups with particular faiths and beliefs	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
		<input type="checkbox"/>	<input type="checkbox"/>	

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input type="checkbox"/>	<input checked="" type="checkbox"/>

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
1h	How have you come to this decision?	The decision to undertake a full EIA

Stage 2: What do you know?

What do you know already?

1. Health and Wellbeing of Children in Oldham

The health of children and young people is generally worse than the England average. The level of child poverty is worse than the England average with 26.8% of children aged under 16 years living in poverty. The rate of family homelessness is better than the England average. Children in Oldham have average levels of obesity: 10.1% of children aged 4-5 years and 19.4% of children aged 10-11 years are classified as obese. The MMR immunisation rate is better than the England average. The immunisation rate for diphtheria, tetanus, polio, pertussis and Hib in children aged two is better than the England average. In 2012, there were 907 acute sexually transmitted infection diagnoses in young people aged 15 to 24 years. This represents a rate of 30.7 diagnoses for every 1,000 people in this age range which is lower than the England average.

2. Population Profile Children and Young People

2.1: The 2011 Census estimated Oldham had 45,900 residents aged five to nineteen of whom:

- 34,000 were aged 5 to 15 years
- 18,300 were aged 14 to 19 years
- 11,800 were aged 16 to 19 years

2.2: The wards with the highest populations of 5 to 19 year olds were:

- St. Mary's (with 3,800 aged 5-19, of whom 2,850 were aged 5-15 and 950 were aged 16-19);
- Coldhurst (with 3,650 aged 5-19, of whom 2,770 were aged 5-15 and 880 were aged 16-19); and
- Werneth (with 3,110 aged 5-19, of whom 2,340 were aged 5-15 and 770 were aged 16-19).

2.3: Oldham's population aged 5-19 is projected to increase from 2016, reaching around 48,700 by 2021 – an increase of 2,800 (or around 6%) over the 2011 midyear population estimate. Within this group, the population aged 5-15 is projected to increase more rapidly, reaching around 34,400 by 2016 and 37,400 by 2021, an increase of around 10% and 3,400 over the 2011 estimate. The population aged 16-19 is projected to decrease, dropping to 11,200 by 2019 and recovering to 11,300 by 2021.

2.4: The ethnic group composition of Oldham's population aged 5-19 is more diverse than that of Oldham overall (as would be expected given the youthful age structures of Oldham's Bangladeshi, Pakistani and mixed populations). There are no new population projections with an ethnic group component currently available, yet based on the increasing diversity amongst 0-4 year olds, the ethnic group composition of Oldham's population aged 5-19 may be expected to change substantially over the next ten years.

3. National Context and Evidence

3.1: The importance of giving every child the best start in life and reducing health inequalities throughout life has been highlighted by Marmot and the Chief Medical Officer (CMO). The Healthy Child Programme (HCP) is available to all children and aims to ensure that every child gets the good start they need to lay the foundations of a healthy life. School Nursing Services are a key component of the Healthy Child Programme (5-19) and support school-aged children to achieve the best possible health outcomes.

3.2: Marmot and the CMO both recognised the importance of building on the support in the early years and sustaining this across the life course for school-aged children and young people to improve outcomes and reduce inequalities through targeted support. There will be challenges within a child's or young person's life and times when they need additional support. Universal and targeted public health

services provided by school nursing teams are crucial to improving health and wellbeing of school-aged children.

3.3: Department of Health, NHS England, Public Health England and Local Government association signed up to the pledge for better health outcomes for children and young people in February 2013. The pledge puts children, young people and families at the heart of decision making and improving every aspect of health services, and sets out shared ambitions to improve physical and mental health outcomes for all children and young people and reduce health inequalities.

4. Expected Outcomes of the School Nursing Service

4.1: The School Nursing Service leads and contributes to improving the outcomes for children and young people but **are not solely responsible** for achieving these as a partnership approach is required. The service will need to work with a number of partners including health and social care teams, teachers and youth workers to deliver the evidence based public health interventions as outlined in the Healthy Child Programme (5-19), and using the core principles of Making Every Contact Count for intelligent, opportunistic interventions.

4.2: The Public Health Outcomes Framework and NHS Outcomes Framework clearly define a range of outcome measures that are significant to the school aged population.

- Improving School readiness
- Reducing Pupil absence
- Reducing first time entrants to the youth justice system
- Reducing the number of 16-18 year olds not in education, employment or training
- Reducing under 18 conceptions
- Reducing excess weight in 4-5 and 10-11 year olds (all sub-indicators)
- Reducing hospital admissions caused by unintentional and deliberate injuries in children and young people aged 0-14 and 15-24 years
- Improving emotional wellbeing of looked-after children
- Reducing smoking prevalence – 15 year olds
- Reducing Self harm
- Chlamydia diagnoses (15-24 year olds)
- Improving population vaccination coverage (all sub-indicators)
- Reducing tooth decay in children aged 5

5. Description of the Current School Nursing Service

5.1: The service proactively works within, and provides an on-going commitment to an integrated model of service delivery that promotes health, prevents illness and enables children to reach their full potential within school, the family and the wider community.

5.2: The primary aims of the service are:

To achieve the best health and well-being outcomes for all children and young people through a programme of public health intervention and advice, health assessments, health screening, guidance and support;

- They work closely with partner agencies in Oldham to help individuals or groups to achieve optimum health;
- They deliver preventative services through information and education of children and young people;
- Where necessary they refer children and young people to specialised services, thus providing targeted services to those who are in most need;

- They develop in line with national and local priorities and guidelines effective and evidence-led approaches;
- They provide a high quality service that is accessible to children and young people in Oldham; and ensure quality improvements and as well as providing an appropriate “young people friendly” service by meeting the quality standards laid out in 'You're Welcome': quality criteria for young people friendly health services (2011).

5.3: In addition to the above the School Nursing Service has a crucial role in identifying 'at risk' children and young people becoming the most vulnerable adults in the future. The service will aims to reduce risk through early intervention and long term investment to support children, young people and their families to reach their full potential.

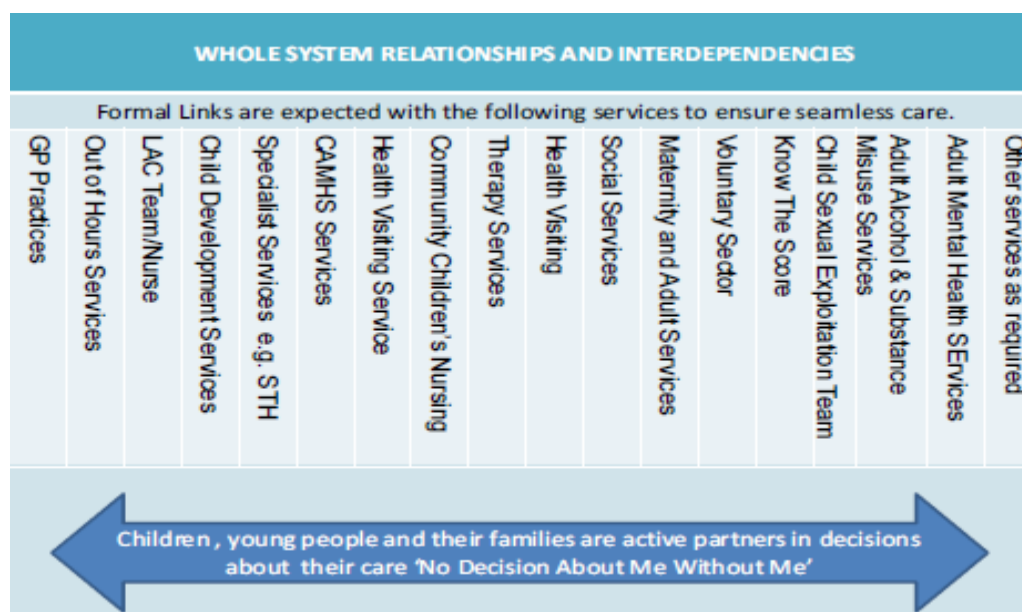
Early indicators (not exhaustive) of needs include:

- Truancy or school exclusion
- Behavioural Problems
- Poor emotional, social or coping skills
- Poor Mental Health
- Learning difficulties
- Low aspirations low self esteem
- Poor family support or problems in the family
- Domestic Abuse
- Friends or family members involved in risky, antisocial behaviour or criminal behaviour
- Deprivation or poverty
- Family instability
- Drug or Alcohol misuse
- Not being in education, employment or training (NEET)
- Homelessness
- Health protection (infectious disease, emergencies)

5.4: The service also provides health action plans for each young person in need (SEN), including children with long term conditions, looked after children, those on a child protection plan and any other child deemed appropriate.

5.5: The School Nursing service is a universally accessible service acceptable to all backgrounds and communities which has proven key to the delivery of the Government Public Health agenda. Drop-in sessions are available in all Secondary Schools across the Borough and there is a health team based in Positive Steps Oldham (PSO). This health team provides health advice on a drop-in basis.

Whole System Relationships



5.6 The Service has a range of skill mix with Bands 4-8 included in the staffing structure.

- Band 8a 1.0wte
- Band 7 3.64wte
- Band 6 15.84wte
- Band 5 1.39wte
- Band 4 1.77wte

6. Service Activity 2013/14

The GM School Nursing Commissioners are currently bench marking the school nursing services across Greater Manchester. However, this is proving slightly difficult as a number of local authorities include other services as part of their school nursing contract such as weight management, sexual health services and some mental health. It is anticipated that the benchmarking will be completed by October 2014.

Average Caseload size:

The average school nurse case load is 2429 children/young people compared to Health Visitors that have 250.

Key Stage (KS)	School years (Y)	Age	Population size
1	1-2	5-7	9676
2	3-6	7-11	12087
3	7-9	11-14	9051
4	10-11	14-16	6275
5	12-13	16-18	6110
Total			43199

There are also **(these figures change consistently):**

160 LAC living in Oldham

680 children on safeguarding monitor system.
200 missing education or educated at home

7. Special Educational Needs (SEN)

7.1: As part of the Children and Families Act 2014 Local Authorities will be required to consider new requests for an assessment of special educational needs and co-ordinate services around a child or young person. Under the new rules, SEN statements and learning difficulty assessments (LDAs) will be replaced with education, health and care (EHC) plans taking children and young people up to the age of 25. From September, new assessments of SEN will follow the new rules, and support will be provided through an EHC plan. Existing statements and LDAs will remain in force until all children and young people have completed the transition. Transfers from statements to EHC plans should be completed within three years, so for pupils who already receive support, you'll need to follow the old guidelines until September 2017.

7.2: This may place additional burdens on the School Nursing Service to support EHC's. At present there are 7,340 children and young people with an SEN. Table 2 shows the total number of children and young people in School Action, School Action Plus and with an SEN statement at primary, secondary and special school.

Table 2: SEN numbers in Oldham

SCHOOL CENSUS					
January 2014					
SEN - by LA (numbers)					
First or only registrations					
Phase	Total	No special provision	School Action	School Action Plus	Statements
Primary	25195	20634	2683	1565	313
Secondary	15445	13219	1396	583	247
Special	514	0	0	4	510
Total	41201	33861	4083	2186	1071

8. Summary

A reduction in the value of the school nursing contract is set against poor health outcomes for children and young people in Oldham, increases in the school aged population, high levels of child poverty and deprivation, increase in ethnic population and greater demands on the service from the Child and Family Bill (SEND Reform) and reduction other statutory services.

9. Key Points

There is likely to be a projected increase in the number of 5 to 19 year olds which could impact on the School Nursing Service and affect the services ability to deliver universal elements of the Healthy Child Programme 5 to 19 years.

Changes in Oldham's ethnic group composition are likely to affect patterns of residence by ethnic groups. There may be an increased need for work within the community, particularly within schools to work with families. At present 38.1% of school children are from a minority ethnic group in Oldham.

If the trend in Oldham's general fertility rate continues to be higher than the regional and national average, there may be increased demand in the future and future investment may be required.

The health and wellbeing of children in Oldham is generally worse than the England average, the Healthy Child Programme is central to improving the health outcomes of children and young people 5 to 19.

The level of child poverty is worse than the England average with 26.8% of children aged under 16 years are living in poverty. Children living in deprived areas of Oldham are likely to have a higher prevalence of disease and chronic illnesses such as Asthma. The average level of obesity is 10.1% of children aged 4-5 years and 19.4% of children aged 10-11 years are classified as obese.

There is likely to be an increase in the number of children requiring time from a school health nurse for the education, health and care plans identified with SEN reforms. The outcome will be an increased caseload. The ability to deliver PHSE lessons such as sexual health and personal relationships is likely to be affected by the expected increase in the school population, SEN education reforms, as well as changes within the changing ethnic composition of Oldham.

The teenage pregnancy rate in Oldham has slowed down and there is a risk that teenage pregnancy rates may increase as School Nurses are unable to deliver PHSE including other preventive interventions.

Summary (to be completed following analysis of the evidence above)

Does the project, policy or proposal have the potential to have a <u>disproportionate</u> impact on any of the following groups? If so, is the impact positive or negative?	None	Positive	Negative	Not sure
Disabled people	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	X	<input type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input type="checkbox"/>	X	<input type="checkbox"/>
Groups with particular faiths and beliefs	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think that this proposal may affect negatively or positively?				
		<input type="checkbox"/>	<input type="checkbox"/>	

Stage 3: What do we think the potential impact might be?

Consultation information

<p>3a. Who have you consulted with?</p>	<p><u>What consultation have we been undertaking?</u> Consultation on the public health savings proposals have wherever possible, been included as part of larger consultation events and activities as services users were identified as overlapping with those for other services which were part of wider consultations taking place. Thus we were able to maximize our reach, and reduce the need for stakeholders to input into numerous different consultations.</p> <p>Since public health investment overall is not decreasing, we have also been working across the council to establish a Public Health Transformation Fund. This fund will support delivery against key public health outcomes from within wider council services.</p> <p><u>Consultation undertaken so far with/via:</u></p> <ul style="list-style-type: none"> • Public Consultation via OMBC website. • Through open access public consultation meetings. • Consultation with NHS Oldham Clinical Commissioning Group. • Consultation relating to the establishment of an All Age Early Help Service, including Health trainers and stop smoking services(separate consultation) • Consultation relating to the review of all 0-19s services (see specific template) • Consultation in relation to Drugs and Alcohol Services (see separate template) <p><u>Further consultation we may need to do.</u> We have received a small number of queries and suggestions relating to public health savings and have been considering and amending plans where it is appropriate to do so. We do not foresee at this point that further consultation may be needed but will revisit this on an ongoing basis where it becomes evident that this would be appropriate.</p>
<p>3b. How did you consult?</p>	<p>See above</p>

3c. What do you know?

The reduction in the value of the School Nursing Contract may disproportionately affect children and young people, in particular those children living within more deprived wards of Oldham where there is a greater need for the scheduled delivery of the Healthy Child Programme to improve health outcomes, referral to health services, chronic disease management and early intervention and prevention.

3d. What don't you know?

The ability of wider council services to start to pick up public health activity to improve physical, Emotional and Mental Health of children and adolescents using the Public Health Investment Fund.

- The impact of the Children and Families Act 2014 and SEND Reforms on the service.
- The increase of Safeguarding and Child Protection workload on the role of School Nursing Service.
- The increase in the school age population on the service and caseloads of school nurses.
- The future increase in free schools in Oldham
- The numbers of children being taught at home who do not access statutory services
- The increase in the number of Looked After Children (LAC)

3e. What might the potential impact on individuals or groups be?	
Generic (impact across all groups)	There should be no adverse effects across disability, race, sexual orientation, faith or belief. The main areas of concern are children and young people and those living in low income areas.
Men or women (include impacts due to pregnancy / maternity)	N/A
People of particular sexual orientation/s	N/A
Disabled people	N/A These is a specialist service that is commissioned by Oldham Clinical Commissioning Group for disabled children and those with complex medical needs.
Particular ethnic groups	Children from particular BME groups may have a greater need for early interventions for physical and emotional health improvement as the prevalence of behaviour related risk factors are greater in adults amongst this proportion of the population
People proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	N/A
People on low incomes	Children and young people living low income households are more likely to suffer from physical, emotional and mental health issues. The service is universal but is required to provide a targeted service for the most at-risk children and families and to help parents give their children the best possible care. A reduction in the value of the school nursing contact is likely to affect the universal offer of the health child programme 5 – 19 in other more affluent areas of the Borough.
People in particular age groups	Children and young people aged between 5 to 19 may be affected with the reduction in the value of the contract and loss of school schools funding as the service may have to move towards a more targeted service. The delivery of the Healthy Child Programme 5 to 19 as a universal offer will be affected impacting on the health outcomes for some children and young people in some wards of Oldham.
Groups with particular faiths and beliefs	N/A
Other excluded individuals and groups (e.g. <i>vulnerable residents, individuals at risk of loneliness or carers</i>)	N/A

Stage 4: Reducing / mitigating the impact	
4a. Where you have identified an impact, what can be done to reduce or mitigate the impact?	
Impact 1: Low Income	Ensure the service weights individual school nursing caseloads by deprivation and other relevant factors such as ethnicity.
Impact 2: Children and Young people	School nursing teams lead and contribute to improving the outcomes for children and young people but are not solely responsible for achieving these, there needs to be a partnership approach. School nursing teams need to work with a number of partners including health and social care teams, teachers and youth workers to deliver the evidence based public health interventions as outlined in the HCP

	5-19. The school nursing service operates with a skill mix team overseen by School nurses to provide the HCP. In addition the service is expected to provide opportunities for schools to purchase additional bespoke support from the School Nursing Service provider.
Impact 3: SEN	The SEND reforms required as a result of the Children's and Families Act 2014 has meant that all children with SEND will have their needs re-assessed under Education, Health and Care Plan format. This may mean an increase in work load during this period. This transition is being lead and managed by the multi-agency SEND Partnership Board to support and ensure a safe transition within the correct timeframe.

4b. Have you done, or will you do, anything differently as a result of the EIA?

The reduction in the contract value has been identified as saving for the council to be reinvested into the Public Health Investment Fund. As a result of the EIA there is an urgency to engage with Schools to raise the profile of the School Nursing Service and opportunities to co-commission early prevention interventions based on evidence and the Health Child Programme 5 to 19 years of age.

A new set of outcome measures has been developed through the Greater Manchester School Nursing Commissioner Group to improve health outcomes for children and young people and drive some efficiency through co-commissioning.

4c. How will the impact of the project, policy or proposal and any changes made to reduce the impact be monitored?

The impact will be monitored through quarterly contract monitoring with the service. The Public Health Outcomes Framework and Child Health Profile (including readiness to learn and GCSE results and health and wellbeing impacts on school attainment).

Conclusion

The reduction in the value of the School Nursing Contract and Healthy Schools likely to disproportionately affect children and young people, in particular those children living within more deprived wards of Oldham where there is a greater need for the scheduled delivery of the Healthy Child Programme to improve health outcomes, through early intervention, referral to health services, chronic disease management and prevention initiatives.

As a result of the EIA there is an urgency to engage with Schools to raise the profile of the School Nursing Service and opportunities to co-commission early prevention interventions based on evidence and the Health Child Programme 5 to 19 years of age.

A new set of outcome measures has been developed through the Greater Manchester School Nursing Commissioner Group / alongside a new service specification to improve health outcomes for children and young people and drive some efficiency through co-commissioning with schools and other potential partners e.g. Oldham Clinical Commissioning Group.

Stage 5: Signature

Lead Officer:

Date: 24.11.14



(Mike Bridges)

Approver signature:



(Alan Higgins)

Date: 24.11.14

EIA review date: December 2015

APPENDIX 1: Action Plan and Risk Table
Action Plan

Number	Action	Required outcomes	By who?	By when?	Review date
1	New Service Outcomes	New service outcome measures to be implemented in October as part of contract variation.	Mike Bridges	Beginning Oct 2014	Oct 2014

Risk table

Ref.	Risk	Impact	Actions in Place to mitigate the risk	Current Risk Score	Further Actions to be developed
R1.1	Increase in Safeguarding and Child Protection Case	Capacity of the service to deliver universal elements of Healthy Child Programme	Asked service to undertake a review of safeguarding and child protection review	Likelihood C = significant Impact = II critical	Actions to be taken forward with school nursing steering group.
R1.2	Wider council services do not come forward to deliver against health, emotional and mental health for children and young people.	Possible breach of conditions of the Public Health Grant	Executive Directors to identify services which are able to deliver against children and young people public health outcomes	Likelihood C = significant Impact = II critical	Workshop with Executive directors Workshops with frontline staff SLA development and robust KPI development
R1.3	Increase in free schools and children taught at home	Capacity of the service to deliver universal elements of Healthy Child Programme	Monitoring the number of free schools and children being taught at home.	Likelihood C = significant Impact = II critical	



Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	E005
Portfolio	Health and Wellbeing
Directorate:	Health and Wellbeing
Division:	Adult Services
Responsible Officer and role:	Maggie Kufeldt, Executive Director, Health and Wellbeing
Cabinet Member and Cluster :	Cllr J Harrison, Health and Wellbeing Cluster

Title:	Contracts within Adult Services
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£29,029k
	Income	(£0)
	Net Expenditure	£29,029k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	0

	2016/17	2017/18
Proposed Financial saving:	2,139	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>This budget pro-forma provides information on a number of different savings targets associated with contracts within Adult Social Care. It provides a summary of current saving targets for 2016/17, presents an additional savings of £300k within supporting people contracts to go towards fulfilling the gap caused by a removal of an element of Better Care Fund monies (1800k), and savings allocated to other contracts which cannot safely be met (£211k).</p> <p>For 2016/17, adult social care contract reduction total £2139K</p>
---	--

Proposed Savings £k:

Through efficiency, income generation, transformation, decommissioning, etc

- A) (Alternatives to Residential Care) Ongoing Reablement**
– changing the model of the reablement service offer through the commissioning of new care at home provision utilising an incentive-based method for providers to adopt a reablement approach. (£164k)
- B) (Alternatives to Residential Care) End of Life Homecare** - the development of a new service to enhance care at home services in partnership with providers of end of life care to reduce care home admissions. (£100k)
- C) (Review of OCS) OCS Management Fee** - reduction in management fee at OCS (£475k)
- D) (Review of OCS) OCS & Age UK** - reduction in OCAS and Age UK contracts planned for 2016/17. (£328k)
- E) (Review of OCS) Supported Living** - focus on redesigning services to meet living and accommodation needs of people with learning disabilities and the implementation of a delivery model and a commissioning framework in two phases. (£481k)
- F) (Review of OCS) Willow House** - review of the current OCS contract at Willow House for short-term respite care. (£21k)
- G) Housing Related Support** - Ongoing review of the contracts provided as part of the former supporting people programme including community equipment, sheltered housing, floating support; short-term housing provision. (£75k)
- Additional Saving Proposal - Supporting People Contract Review** - The Council still has a number of contracts relating to supporting vulnerable people in a variety of accommodation settings and is paid to delivery organisations. An element of this may be deemed non statutory and the potential to further reduce the level of spend which has been reduced in recent years is being explored. This is an additional savings target to go towards fulfilling the gap caused by a removal of an element of Better Care Fund monies (1800k), and savings allocated to contracts which cannot safely be met (£211k). (£300k)
- H) Carers Project** - Project has 3 strands: i) carers self-assessment ii) review of the individual budget criteria and awards and iii) a review of the current Carers Centre contract. (£145k)
- I) External LD Supported Living** - This supported living element is non-OCS provision. Procurement taking place. (£50k)

For 2016/17, adult social care contract reductions, as set out above, total £2139k

Further Financial Implications & Considerations	None
<i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	Total financial loss to partners will be difficult to quantify, because of the complexity of the service areas in question, and the specific outcomes of the commissioning processes associated.
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	
Type of impact on partners	Negative

Section 4

Key Milestones	
Project Area	Timescale
A) (Alternatives to Residential Care) Ongoing Reablement	23/03/2015 – 04/10/2016
B) (Alternatives to Residential Care) End of Life Homecare	23/05/2015 – 04/10/2016
C) (Review of OCS) OCS Management Fee	Achieved but potential risk of at least £100k being held over to 16/17
D) (Review of OCS) OCS & Age UK	01/04/2015 – 01/04/2016
E) (Review of OCS) Supported Living	30/09/2015 – 01/04/2017
F) (Review of OCS) Willow House	Achieved and on track to achieve 16/17 savings
G) Housing Related Support	01/04/2014 – 31/03/2017
H) Carers Project	01/12/2014- 01/10/2015
I) External LD Supported Living	30/03/2015 – 31/03/2016

Key Risks and Mitigations	
Risk	Mitigating Factor
Destabilising and de-motivating current provision and providers over a relatively short period of time. Such destabilisation could lead to a shift in the balance of supply and demand, increased unemployment and increased empty properties.	Early discussions and engagement with current providers to see if they can reconfigure to operate new ways of working within the new funding envelope. Each proposal will include a provider impact assessment to understand the key risks associated with specific providers.
Insufficient resources to make the necessary investment in prevention and	Ensure a robust programme management approach to managing projects, ensuring

early intervention, resulting in an acceleration of demand for social care.	resources needed to carry out projects are clearly stipulated.
A reduction in the quality of provider service provision	The council must ensure contracts are not reduced beyond sustainable levels. Demand on services, and best value pricing must be fully considered when reducing contract values.
Additional pressure on voluntary and community organisations as they try to fill gaps in provision	It will be important to provide support to voluntary / community organisations in their role as part of the council's wider approach.
Additional risk to health, wellbeing and safety where vulnerable adults receive less support than they would in the past	The council must ensure service users are provided with a safe level of care.
Supporting people services for socially excluded groups help prevent repeat homelessness as well as addressing issues around worklessness, substance misuse and offending behaviour. Without adequate provision of these services the likelihood would be greater demands on statutory services, plus a range of negative consequences for individuals and the wider community. Potential increases in street homelessness and unsafe 'sofa-surfing', increases in crime and a reduction in the health and wellbeing of a significant group of Oldham residents	Ensuring effective, timely engagement and consultation will be important to ensuring these proposals are tenable.

Section 5

What impact might the proposal have on the following?

<u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
None

<u>Service Delivery and future expected outcomes:</u>
<p>The overall vision for adult care in Oldham is to ensure as many people as possible are enabled to stay healthy and actively involved in their communities for longer and delay or avoid the need for targeted services. In order to achieve this and manage the expected future demands, there is a need to move away from traditional "social" and "health" care, and focus on prevention, integration and a more person centered model of holistic care. The proposals contained within this paper will help to deliver this vision.</p> <p>At a strategic level we will plan and commission services to improve outcomes and reduce demand, working with partners to reform the current public service offer</p>

recognising the connectivity and interdependencies across agencies and sectors. We will work to achieve best value with public money and manage and develop provider markets to meet current and future need.

The approach to manage the expected demand within reduced resources will be one that:

- Intends to lessen demand
- Is focused on outcomes
- Promotes delivery models that can deliver savings
- Supports people to avoid using residential care services, but where they do reduces the length of stay and delays the point of admission
- Invests in preventative services

Organisation (other services)

The success of the transformation programme depends heavily on the engagement of all parts of the organisation and our key partners to establish a joined up approach. To support this we have established a fortnightly Transforming Adult Services group, which aims to engage with key elements of the business in our transformation programme.

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

The proposals create an opportunity to work in a more integrated way with partners, and to develop our workforce to focus more on demand management, prevention and outcomes.

There may be staffing implications for commissioned services, in that contract reductions may require a reduction in staff numbers.

In all cases, the impact of FTE reductions, including the impact on the remaining workforce must be assessed as the proposals are further developed.

Communities

There may be additional pressure on voluntary and community organisations as they try to fill gaps in provision. The proposals will generally have a positive impact on communities in that as many people as possible are enabled to stay healthy and actively involved for longer by delaying or avoiding the need for targeted services. There may be additional pressure on families and carers, as well as service users to continue to cope under stress and against a backdrop of reducing provision.

Service Users

In general, people will experience an improved, joined up customer journey. There may be additional risks to health, wellbeing and safety where vulnerable adults receive less support than they would in the past, and again, additional pressure on families and carers, as well as service users to continue to cope under stress.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

There may be additional pressure on voluntary and community organisations as they try to fill gaps in provision.

Provider organisations will face pressures as contract values are reduced, and demand increases.

Section 6

Supplementary Information

None

Section 7

Consultation Information –

Consultation has been ongoing with providers about future models of delivery focusing on early intervention and prevention and a move away from long term residential care options except in exceptional circumstances.

Consultation has taken place with partners around those options that are dependent on integration.

Further consultation will take place during the agreed consultation period with providers, partners, carers and service users, as appropriate for each of the proposals.

If the need for further consultation beyond this point is identified, in relation to specific elements of these proposals, this will be reflected in the equality impact assessment.

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	A Trade Union meeting took place in late July with staffing consultation taking place following this. A full overall public consultation will be completed by mid-October.
Staff Consultation	This will be required if staffing proposals require a reduction in posts, or a re-structure of the service.
Public Consultation	Started 3 August 2015

Service User Consultation	As below
Any other consultation	Where relevant, consultation with all affected staff, service users, carers, providers and partners, has been undertaken for specific projects.

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	Yes
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	Yes
People in particular age groups	Yes
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	YES (Excluding G) Housing related support)
EIA to be completed by:	Helen Ramsden
By:	26 October 2015

Section 9

Responsible Officer:	Maggie Kufeldt, Executive Director, Health and Wellbeing
----------------------	--

Support Officer Contact:	Claire Hill
Support Officer Ext:	3125

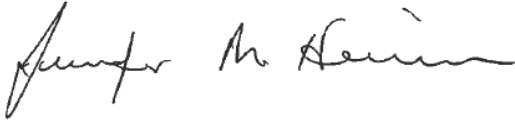
Cabinet Member Comments and/or approval	
Approved	

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	29 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member	Cllr J. Harrison Social Care and Safeguarding
Signed:	

Equality Impact Assessment Tool

E005: EIA: Adult Social Care Redesign

A - (Alternatives to Residential Care) Ongoing Reablement

B – (Alternatives to Residential Care) End of Life Homecare

Stage 1: Initial screening

Lead Officer:	Jonathan Sutton
People involved in completing EIA:	Jonathan Sutton
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	No Date of original EIA: 31/10/14

General Information

1a	Which service does this project, policy, or proposal relate to?	<p>The project, Alternatives to Residential Care, relates to services for older people, and forms part of the budget savings reference E005, Contracts within Adult Services.</p> <p>This is a continuation of budget proposal C046 2015/17.</p> <p>This strand of work within the Transformation of Adult Services Programme, links with the Better Care Fund, in that the basis of this proposal is to work with providers to shift service delivery to a reablement model, and one that better supports people in the community. The project aim is to save £264k in a full financial year. This saving will be made out of a total budget of £29,029k</p>
1b	What is the project, policy or proposal?	<p>The emphasis of the Alternative to Residential Care project is about ensuring that, wherever possible, service users are given the option of remaining in their own homes instead of going into a care home on a short-term basis or permanent bases. This approach would potentially generate savings for the Council and provide choice and better outcomes for service users and their carers.</p> <p>There are two streams in the Alternatives to Residential Care Project;</p> <ul style="list-style-type: none"> - A. Extended Reablement/Gain Share Model

		<p style="text-align: center;">- B. End of Life Care</p> <p>A. The extended reablement stream seeks to maintain, and enhance, the reablement work carried out by the Oldham Care and Support Reablement Service after the service user has left their service. The way in which this will work is by commissioning a new reablement service from care at home providers instead of the traditional care at home service currently provided. Currently care at home providers have no financial incentive to adopt a reablement approach and are actually more likely to benefit financially if service users become more dependent and require more services. The extended reablement stream will have the potential to reduce short-term admissions to residential care if service users, also supported by their carers, are more independent.</p> <p>The extended reablement stream will be based on giving care at home providers a financial incentive to maintain or reduce care; the Council in effect will be willing to share the savings achieved by the reduction in care with the care at home provider.(£164k)</p> <p>B. The End of Life Stream seeks to offer a new service for people on the end of life care pathway. The new service will be an enhanced care at home service, which works in partnership with other providers of end of life care.</p> <p>It is anticipated that by offering an enhanced care at home service for people on the end of life care pathway that fewer people will need to be admitted to care homes for the final stages of their lives. The research relating to end of life care suggests that many people would chose to die in their own homes if they believe that they, and their carers, would be supported by appropriate services. (£100k)</p>
1c	What are the main aims of the project, policy or proposal?	<ul style="list-style-type: none"> • To ensure older people are provided with the best possible services and widest choice when they need enhanced support to live independently at home. • To ensure the mix and availability of alternatives to short-term residential care meets current and future needs across Oldham. • To improve value for money and to deliver enhanced services within the available budget, ensuring the Star Chamber savings targets for

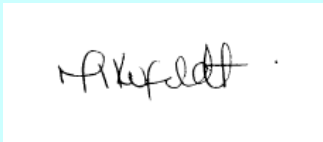
		2016/17 can be achieved.
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	<p>Older people, their carers and families.</p> <p>The project will benefit older people, their carers and families by offering a wider range of choice of services at critical times in their lives.</p> <p>The palliative care pathway will be enhanced by greater service provision which will allow people to die at home if they chose.</p> <p>The extended reablement offer will mean that older people's level of independence is either enhanced or maintained for longer which will result in less people needing a residential care service.</p> <p>The alternatives to respite stream of the project will increase the choice of respite care options for older people and their carers.</p> <p>There should not be any detrimental effect on older people and their carers because the range of services and options available to them will be increased. However the option of receiving a care home service will be maintained.</p> <p>The risks associated with the project will be managed through the risk register for the project. The overall performance of the project will be subject to monitoring through the Star Chamber process.</p>

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a marriage or civil partnership	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

People in particular age groups	<input type="checkbox"/>	x	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
<i>Carers</i>		x	<input type="checkbox"/>	

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes <input type="checkbox"/> No x
1h	How have you come to this decision?	This project seeks to reduce the reliance that older people sometimes have on a residential care home service by providing an enhanced range of alternative services. However the option of using a residential care home service is not being removed and will be available if it best meets the needs of an older person and their carers.

Stage 5: Signature	
Lead Officer: Jonathan Sutton	Date: 27/10/15
Approver signature:	Date: 27/10/15
	
Review date: October 2016	

Equality Impact Assessment Tool

E005: EIA: Adult Social Care Redesign (Oldham Care and Support)

C – OCS Management

D – OCS & Age UK

E – Supported Living

F – Willow House

Stage 1: Initial screening

Lead Officer:	Helen Ramsden
People involved in completing EIA:	Helen Ramsden
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	No Date of original EIA: 26/11/14

General Information

1a	Which service does this project, policy, or proposal relate to?	The proposal, relates to services provided by Oldham Care and Support, and forms part of the budget savings reference E005, Contracts within Adult Services. This is a continuation of budget proposal C046 2015/17. The proposal will save £1,304k in a full financial year from the SLA with Oldham Care of Support, which in total for 2015/16 is just under £14 million.
1b	What is the project, policy or proposal?	The proposal is a reduction in the management fee payable to OCS; a specific reduction of £481k in respect of the OCS supported living service (see EIA 4), and a further reduction of £823k across the rest of the business
1c	What are the main aims of the project, policy or proposal?	The main aim of the proposal is to work with OCS to review all areas of the business, and identify those areas that can be decommissioned, redesigned, recommissioned, as a result of reductions in demand, or an assessment of OCS relative strengths or otherwise to deliver that aspect of the service.
1d	Who, potentially, could this project, policy or proposal have a	Older people, adults with mental ill health, and adults with learning disabilities will benefit from this proposal,

detrimental effect on, or benefit, and how?	as the review of all services will take account of outcomes being achieved and value for money.
---	---

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	x
Particular ethnic groups	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a marriage or civil partnership	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input type="checkbox"/>		<input type="checkbox"/>	x
Groups with particular faiths and beliefs	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes x No <input type="checkbox"/>
1h	How have you come to this decision?	The most significant single reduction relates to supported living services, which have been part of a full EIA (see EIA 4). Other reductions will be made on the basis of reduced demand, redesign or recommissioning but are significant enough to require full EIA

Stage 2: What do you know?

What do you know already?

Savings of over £2 million have already been achieved, with further savings to be delivered in 2015/16.

A full review of OCS activity is being undertaken to identify those parts of the contract that require a more detailed review which may result in recommissioning/recommissioning/redesign.

What don't you know?

We don't know the outcome of this review and therefore the areas of the business from where these services may come.

Until areas are identified, it is difficult to predict the potential impact on users of current services.

Further data collection

Completion of the high level review by mid October will then lead to more detailed reviews of those areas identified for further work, which in turn will help us to determine the potential impact for current users of the services.

Summary (to be completed following analysis of the evidence above)

Does the project, policy or proposal have the potential to have a <u>disproportionate</u> impact on any of the following groups? If so, is the impact positive or negative?	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a Marriage or Civil Partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think that this proposal may affect negatively or positively?				
Carers		<input type="checkbox"/>	<input type="checkbox"/>	X

Stage 3: What do we think the potential impact might be?

Consultation information

This section should record the consultation activity undertaken in relation to this project, policy or proposal.

3a. Who have you consulted with?	<p>High level consultation has been undertaken with OCS and will continue as we further develop the review of services</p> <p>Consultation with key stakeholders will be undertaken once those services likely to be affected have been identified.</p>
3b. How did you consult? (inc meeting dates, activity undertaken & groups consulted)	<p>Consultation was carried out via monthly client meetings with OCS and through contract review workshops</p>

3c. What do you know?

We know from our performance information and the initial findings of our review that there is scope to commission and/or provide some services differently.

We know that significant savings have already been and continue to be achieved by OCS

3d. What don't you know?

We don't know those areas of the business where further reductions might be made or what the potential impact might be.

3e. What might the potential impact on individuals or groups be?

Generic (impact across all groups)	N/A
Disabled people	<p>Additional pressure on families and carers, as well as the service user, to continue to cope under stress</p> <p>Additional risk to health, wellbeing and safety where vulnerable adults receive less support than they would in the past</p>
Particular ethnic groups	N/A
Men or women (include impacts due to pregnancy / maternity)	N/A
People of particular sexual orientation/s	N/A
People in a Marriage or Civil	N/A

Partnership	
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	N/A
People on low incomes	N/A
People in particular age groups	Additional pressure on families and carers, as well as the service user, to continue to cope under stress Additional risk to health, wellbeing and safety where vulnerable adults receive less support than they would in the past
Groups with particular faiths and beliefs	N/A
Carers	Additional pressure on families and carers, as well as the service user, to continue to cope under stress Additional risk to health, wellbeing and safety where vulnerable adults receive less support than they would in the past

Stage 4: Reducing / mitigating the impact

4a. Where you have identified an impact, what can be done to reduce or mitigate the impact?

Additional pressure on families and carers, as well as the service user to continue to cope under stress Additional risk to health, wellbeing and safety where vulnerable adults receive less support than they would in the past.	Once particular services have been identified, users of these services and their families will be consulted on to better understand the individual impact for them, and what mitigations may be put in place.
---	---

4b. Have you done, or will you do, anything differently as a result of the EIA?

No

4c. How will the impact of the project, policy or proposal and any changes made to reduce the impact be monitored?

Monitoring of the proposal will form part of the Transformation of Adult Services Programme Board and OCS monthly client meetings

Conclusion

This section should record the overall impact, who will be impacted upon and the steps being taken to reduce / mitigate the impact

While there is the potential to make reductions to the management fee of OCS, once the specific areas of service have been identified, further work needs to be undertaken to assess overall and individual impact and necessary mitigating actions.

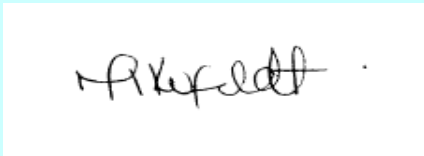
Stage 5: Signature

Lead Officer: Helen Ramsden

Date: 27/10/15

Approver signature:

Date: 27/10/15



EIA review date: December 2015

Equality Impact Assessment Tool

E005: EIA: Adult Social Services Redesign
H - (Carers Project)

Stage 1: Initial screening

Lead Officer:	Hayley Summers
People involved in completing EIA:	Hayley Summers
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	No 26/11/14

General Information

1a	Which service does this project, policy, or proposal relate to?	<p>The project relates to the carers service, and forms part of the budget savings reference E005, Contracts within Adult Services.</p> <p>This is a continuation of budget proposal C046 2015/17.</p> <p>Oldham Carers Services, which supports those Carers known to us in Oldham. (Although the service is available to any carer in Oldham who would like to utilise the services or support available)</p>
1b	What is the project, policy or proposal?	<p>There are three parts to the project as follows:</p> <p><u>Carers Self-Assessment and new assessment forms</u> The carer's assessment process is currently under review nationally and it is recommended that there is a move towards enabling a carer's self- assessment which could be undertaken online. As well as potentially reducing costs and time self-assessment enables carers more empowerment as they are completing the forms themselves and supports the co-operative agenda as it encourages self-help and reduces reliance on the carer's service. For those carers who may not have access to a computer or who haven't got an understanding of how to use a computer they would be able to complete a self-assessment using the ICT facilities at the Link Centre were there would be volunteers available to assist carers to complete the assessment form and access the computers. We will</p>

also look to support carers and former carers to assist other carers in completing an assessment form as part of peer support assessment. Carers will still be able to request a supported assessment to be undertaken by an assessment worker in line with the Care Act.

Carers Personal Budget (PB) Criteria

Currently the Council and Clinical Commissioning Group (CCG) jointly fund the Carers Individual budgets at £178k each; although the CCG would like to see more evidence of the health impacts of using a carers PB on the carers if they are to continue the funding beyond in year.

If carers are deemed eligible for a Carer's Individual Budget (IB) they will receive a one off payment of up to £300 (Band A £100, Band B £200 & Band C £300); this should be used to provide the carer with a break. Carers do not automatically receive a carers PB the following year but can apply for a review to see if they are again eligible. The proposal is to review the Carers PB criteria and bandings. The carers criteria was set up as a pilot and at that time was deemed fit for purpose however there are examples of carers/ cared for receiving a number of services and support and then receiving the highest Carers PB. There is no statutory indication dictating the amounts to be awarded, however the Care Act states that a PB should be used to reduce any negative significant impact on a carer brought about by their caring role. Any new bandings will be in line with the eligibility of the Care Act and sit a side other North West Authorities. Also we will be encouraging social workers and assessment workers to think outside of the box and look at different ways to support and meet the needs of carers which may not always be through a PB. If the amounts awarded to carers are reduced overall then this will enable more carers in Oldham to receive a PB and therefore assist more carers overall from the same budget.

Review current carers centre contract and provision

The Carers Centre is currently delivered by Wired whose contract runs through to May 2015 with an option to extend monthly or upto 2 years, there is a 3 month notice period to terminate the contract early. This creates an opportunity to look at delivery of the Carers Centre and consider feedback from carers as to what they feel should be offered in line with the Care Act. Whilst we are faced with delivering efficiencies, the review will include looking at ways to continue delivery

		<p>of much needed carers services whilst also offering value for money and ensuring optimum use of the Oldham pound. Some carers have questioned if it has not been a consideration for the Council to run an in-house carers centre as there is a perception this might cost less than an external provider. Therefore the review will consider and consult with carers to find out if there is an appetite for an in-house Carers Centre alongside groups of and individual carers who could provide peer support and services for other carers (supported by professionals when appropriate). We know from reviewing the carers groups in Oldham those that seem to be most popular and effective of the groups are the ones where they are illness specific and ran by carers. Some of these groups we already support either financially, helping them overcome barriers or just providing them a go to person when they have any ad hoc queries or support requirements Therefore the ask from Cabinet will be to agree a principal model of a ‘Carers Cooperative Commission’ which could achieve required savings. Although some carers have been consulted with on their thoughts of such a model and it was included in the wider directorate consultation; further consultation took place early in 2015. To either have an in-house carer’s service or alternatively to retender for an external provider to run our Carers Centre for a reduced value contract to meet savings required. The outcome of this was only 16% opted for an external provider to run a carers service, this was signed off in May 2015 and since then work has focussed on continuing much needed carers services but developing new carers services. The staff who worked for Wired will TUPE to the Council on the 1st October 2015. A review and restructure of the resource to underpin the suggested new model will take place in line with council consultation and restructure processes and timelines.</p>
1c	<p>What are the main aims of the project, policy or proposal?</p>	<p>The various three elements of the project aim to bring about:</p> <ul style="list-style-type: none"> • A revised carer’s assessment form. • A choice for carers to undertake an electronic internet based Carers Self-Assessment enabling carers to feel empowered and in control of their assessment. • Supporting carers to undertake the assessment online and therefore potentially increasing skill of carers to utilise ICT skills. • A fairer carer’s individual budget process/ criteria

		<p>where only those carers most in need and or not in receipt of other services will receive the higher amounts.</p> <ul style="list-style-type: none"> • An increased number of carers than currently will receive a Carers Personal Budget from the same pot of monies. • Review of current carers centre provision with a view to continue much needed carer's services. • Potential to work with more carers and volunteers to help support services and provide a peer support service, support and groups. • Generation of time and budget efficiencies in order to achieve the budget reduction that Oldham Council currently faces.
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	Any effect either detrimental or positive would be on the carers of Oldham and or the staff who are currently employed to support the carers of Oldham.

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a marriage or civil partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
People in particular age groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
Carers		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	<ul style="list-style-type: none"> • Hope new provider of Carers Centre will continue to deliver the much needed carers services for carers in Oldham. • The new carers assessment forms will be more carers specific and easy to undertake with clear support plan derived for carers in line with the Care Act requirements.. • A fairer PB criteria will enable more carers to receive a carers PB from the same pot of monies and will be Care Act compliant. 	<ul style="list-style-type: none"> • If a carer receives a reduced amount of Carers PB this may have a detrimental impact. Although it should be noted that a carers PB does not have a dictated amount other than reducing negative impact on carers caused by caring role. There are a whole host of other support activities and methods which can be utilised to reduce impacts on carers.

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
1h	How have you come to this decision?	<p>As there is so much unknown in terms of the impact and although I feel the impact is more likely to be none or positive I would like to ensure we have considered all angles and have looked at all mitigating actions to ensure we continue to support carers in Oldham in the best way possible with the budget available.</p> <p>Also although we believe Oldham is already delivering what the Care Act asks of carer's services to deliver and offers higher amount of services to carers in comparison to neighbouring boroughs/ areas.</p>

Stage 2: What do you know?

What do you know already?

According to the 2011 census there are 24,322 carers in the Borough of Oldham, with just under 4500 carers currently registered with the Oldham Carers Centre. The caring role is often very demanding, draining and tiring both physically and mentally; with a high proportion of carers giving up their own work, hobbies and interests to focus on the life and support of the cared for. More often than not support, provision, health care or health checks are aimed at the cared for as they are recognised as needing care. However it is often the carer who is left exhausted and run down and in many cases at crisis point. The role of carers and the support that is provided to them is of critical importance in addressing health and social care needs in Oldham. This is a key theme in Oldham's Health and Wellbeing Strategy and high on the council's agenda also. Without carers giving up their time to take care of loved ones there is an estimated cost to the care system of several billion pounds. Therefore it is essential we support carers in the best way possible to ensure they can continue to carry out their caring role.

The current provision is a Carers Centre which Oldham Council Commission Wired to deliver and this is in contract until October 2015. There is also a small in house Council team who support the delivery of carer's services in Oldham in particular supporting several carers groups. From April 2015, all carers will be entitled to a carer's assessment which could lead to a range of services and support being put into place, signposting and information on a range of services. Oldham council Carers Services also offer carers the option to apply for a one off carer's individual budget of up to £300 based on criteria met, a range of drop in facilities with a number of activities, various support groups and services available at the Link entre, emergency card and short term respite facilities.

What don't you know?

We don't yet know the full impact the Care Act 2014 will have on numbers of carers in Oldham known to us and or reregistered with us receiving services and support. Although we believe Oldham is already delivering what the Care Act asks carers services to deliver and offers higher amount of services to carers in comparison to neighbouring boroughs/ areas. We are not clear as to whether the Care Act will increase the amount of carers registered and therefore how we will meet the demand with a backdrop of reduced resources.

Further data collection

Ongoing review of numbers of carers registered and those who have come forward for an assessment.

Summary (to be completed following analysis of the evidence above)

Does the project, policy or proposal have the potential to have a <u>disproportionate</u> impact on any of the following groups? If so, is the impact positive or negative?	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a marriage or civil partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think that this proposal may affect negatively or positively?				
Carers		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

Stage 3: What do we think the potential impact might be?

Consultation information

3a. Who have you consulted with?	Consultation with some carers and representative groups has taken place also discussed the options with the current Carers Centre Providers Wired. Also shared with the Carers Commissioning Group and Carers Partnership Group. The options were also included in the wider Directorate consultations.
3b. How did you consult? (inc meeting dates, activity undertaken & groups consulted)	<p>Via meetings and updating various representative Carers Groups. Via written feedback from carers to ask their thoughts on the provider of the carers centre. Via workshops with carers on how a potential alternative model of carers services might look & feel for carers.</p> <p>In a full carer's consultation in early 2015, also Clinical commissioning Group, staff, partners and providers of Carers services were consulted with. The outcome was only 16% opting for an externally provided provision as opposed to an in house delivery of Oldham's carers services.</p>
3c. What do you know?	
<ul style="list-style-type: none"> • Carers have reported that the drop-ins delivered by Wired have not been well attended at late. • Carers have reported that the drop- ins provided by wired don't include the activities and services that they used to. • Carers have reported that they leave the carers drop ins early as a session booked after which they cannot stay for and they don't want to leave part way through this and feel that it 	

should be at a different time.

- Carers have reported that the services of Wired have not been what they feel they should have been.
- Carers spoken to acknowledge that the Carers IB might be reduced and are grateful of any help and support.
- Carers spoken to during a Carers IB review acknowledge that new Carers IB criteria will enable more carers to receive a carers IB and feel this is positive.
- Carers spoken to welcome a new carers assessment form if it is more carers centred and have given comment on lay out and what should be included
- Carers at the Carers commissioning Group are happy with the carers centre being ran and managed by the Council rather than an external organisation.

3d. What don't you know?

3e. What might the potential impact on individuals or groups be?

Generic (impact across all groups)	NA
Men or women (include impacts due to pregnancy / maternity)	NA
People of particular sexual orientation/s	NA
People in a marriage or civil partnership	NA
Disabled people	<p>As Carers mainly care for those who would be deemed as being in disabled groups there may be an indirect impact on disabled people.</p> <p>If a carer who cares for a disabled person receives a smaller amount from their Carers Personal Budget or if the carer receives an increase or decrease in a service provided to them; therefore if the carer is impacted on (negative or positive) then this impact may in turn have an impact on the person they care for. For instance if the Cares PB was used to provide a carer with a carers break in the form of a holiday, but that carer cannot afford to take a holiday if the amount is reduced then the carer may be tired and this may affect the person cared for.</p> <p>However it should be noted that carer's assessments are undertaken based on the national Care Act criteria which has a clear eligibility. Any support (Personal Budget or other) is recommended based on the assessment of a carers needs and how support can reduce any negative impact on a carer created by the caring role.</p>
Particular ethnic groups	NA

People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	NA
People on low incomes	Most carers tend to be in the low income group particularly for those who have had to give up work to care for their loved one as they have no other support. Therefore if there is an impact on carers (positive or negative) then this is an impact on low income groups.
People in particular age groups	NA
Groups with particular faiths and beliefs	NA
Carers	<p>If there is a negative impact on carers it will likely be if they receive a reduced amount of Carers PB due to the new Care Act criteria which may have a detrimental impact on them. However The Care Act eligibility criteria is a national statutory criteria which authorities are asked to use. It should be noted that there are a whole host of other service and support and not just a carers PB which can be offered to support a carer.</p> <p>Positive Impacts may include: More groups provided by carers for carers with peer support which we know from meeting with existing groups that are ran/led by carers and supported by the Council appear to be the most successful and highly attended groups in Oldham.</p> <p>Fairer Carers PB criteria in line with the Care Act and based on a carers need this is likely to mean an increased number of carers will receive a carers PB.</p> <p>New Assessment forms which will be more carers centred and enable a production of a support plan for the carer.</p> <p>The option for a carer to undertake a carer's self-assessment giving feeling of empowerment in the process and great levels of input. This is in line with the Care Act. Carers will also get support and access to a computer to complete the self-assessment and therefore may help develop ICT skills.</p>

Stage 4: Reducing / mitigating the impact

4a. Where you have identified an impact, what can be done to reduce or mitigate the impact?

<p>Impact 1: New Assessment Forms for Carers Assessments</p>	<p>This will likely bring a positive impact as the forms are more carers specific and focussed. Staff will be trained on the new assessment forms and how these will be entered onto Frameworki. Staff will be able to get a support plan for the carers from the form which will make the process easier and more in line with the Care Act. Staff will also be made aware of the range of services available to carers and not just carers PB</p>
<p>Impact 2: Carers Self-Assessment</p>	<p>Carers may not be confident at undertaking a self-assessment particularly using IT. Therefore there will be carers and former carers who are trained up and able to support carers undertake a carer's self-assessment. This creates a peer supporting opportunity and one were potential for lasting and supporting relationships, shared experiences and support for one another might be created. For those who really struggle with technology we could still provide a paper form for them to complete and offer the peer support. The Link Centre would be used to utilise the computer facilities there. Carers can still request there is assessment to be undertaken by a carer's assessment worker in line with the Care Act requirements.</p>
<p>Impact 3: Carers IB – New Criteria</p>	<p>Some carers through the new Care Act eligibility criteria may not get the same amount as previous years. However this enables us to make the same pot of monies go further so that we can support more carers with some monies. As well as a Carers PB, Staff undertaking a Carers PB Assessment, would be made aware of the numerous other services that are available to carers. These include information and signposting as and when they need it, numerous groups and services provided by cares for carers and the facilities at the Link Centre which includes over 70 self-help groups and over 40 services. There may even be an opportunity for carers to set up their own groups if they feel there is a gap.</p> <p>If a carer is really struggling as they have been awarded a reduced carers PB amount in comparison to other Carers PB payments they have received previously. It may be possible to look at a transitional arrangement were they are given an amount in between the two or alternatively the case could be reviewed to see if there are any alternative services for them.</p>
<p>Impact 4: Proposed model of a 'Carers Cooperative Commission'</p>	<p>As part of the proposed model of a carer's services in Oldham we will support carers to form groups which will in turn support other carers. Also support carers and former carers via peer support, help support other carers. We know from groups already up and running in Oldham that this works well and</p>

	<p>carers get a lot of support from one another. Therefore this model could be expanded. There would be a carer's strategy service that would support the groups by arranging some form of funding, assisting with signposting and information and also supporting the groups in overcoming challenges and any barriers.</p> <p>There would be a carer's forum set up where representatives from the carers groups would meet regularly with a carer's strategy team. Information would be shared, updates on carers initiatives or schemes/ themes affecting carers and would also create an arena for carers to share ideas and experiences of what is successful in their groups etc.</p> <p>Carers would not just have the services and facilities of a carers cooperative commission and carers strategy team but a much wider offer through the services and facilities at the Link Centre which is available to all carers and not just the cared for.</p>
--	---

4b. Have you done, or will you do, anything differently as a result of the EIA?

There has been a lot more careful consideration given to the potential model of a Carer's Cooperative Commission and how this would work and be supported. There has also been more consultation and planning of the proposals outlined.

4c. How will the impact of the project, policy or proposal and any changes made to reduce the impact be monitored?

There will be a detailed action plan which will be generated for each element of the proposal including a detailed high level project plan which will be reviewed and progress monitored by the Adults Transformation Programme and Care Act Implementation group.

Conclusion

From undertaking the EIA it has been found that the likelihood will be an overall positive or no impact on carers in Oldham. This is because a new Carers Assessment form will be more carers centred/ focussed which will generate a support plan for carers and enable carers to be aware of the wide range of services available to them. It will also generate the possibility to offer a carer a self-assessment option.

In terms of a Carers PB although it is recognised that some carers may receive a reduced amount of a carers PB than in previous years, it will enable Care Act and transparent eligibility criteria which overall is likely to mean that we can increase the amount of carers receiving a Carers PB than currently. One mitigating action that we are currently undertaking is speaking to carers during the review assessment to consult with them suggesting that the amounts of Carers PB received may vary in following years dependent on new criteria. Carers are reacting positively to this and suggesting it is the recognition that is important and not necessarily the

amount received. Carers also seemed happy if this generates a way for more carers to receive a Carers PB. Carers are also aware that this is part of the national Care Act eligibility criteria and that assessment is of their needs and how we can meet and support these. This is in a number of ways and not just a PB. The other mitigating action could be if a carer really struggles with the amount awarded we would look at a transitional amount between the two.

In regards to the redesign of carers services in line with the consultation outcomes this will be rolled out after the TUPE of WIRED staff to the Council. The team will then be part of the review and restructure of carers services resource to meet the outcomes of the Care Act, Better Care Fund, Cooperative agenda and also the needs of carers.

Stage 5: Signature

Lead Officer: Hayley Summers

Date: 27/10/15

Approver signature:

Date: 27/10/15



Reviewed: September 2015 – Helen Ramsden. Next review: October 2016

APPENDIX 1: Action Plan and Risk Table

Action Plan

Once you have decided on the course of action to be taken in order to reduce or mitigate the impact, please complete the action plan below (An example is provided in order to help you)

Number	Action	Required outcomes	By who?	By when?	Review date
1	New Carers Assessment Form	<ul style="list-style-type: none"> ➤ Carers are more at the centre/ focus of the assessment forms ➤ Carers assessment forms are Care Act compliant 	Carers Strategy Team	March 31 st 2015	
2	Carers Self-Assessment process mapping and development of Self-Assessment process	<ul style="list-style-type: none"> ➤ Review of forms to enable carers to undertake a self-assessment 	Carers Strategy Team	March 31 st 2015	
3	Carers Self-Assessment Go Live	<ul style="list-style-type: none"> ➤ Alternative option for carers to undertake carers self-assessment ➤ Go Live date, carers to be engaged and informed 	Carers Strategy Team	September 30 th 2016	
4	Carers PB criteria review	<ul style="list-style-type: none"> ➤ Ensure a fairer criteria in line with the Care Act 	Carers Strategy Team	March 31 st 2015	
5	Carers review and redesign in line with Care Act and Carers needs	<ul style="list-style-type: none"> ➤ Consultation and engagement with Carers to define detail of a potential model ➤ New carers service and forum set up with clear processes mapped out ➤ Engagement with carers, staff and partners 	Carers Strategy Team	April 2016	

Equality Impact Assessment Tool

E005: EIA: - Adult Social Care Redesign

I) – External LD Supported Living Provision)

Lead Officer:	Claire Hill
People involved in completing EIA:	Claire Hill
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	No – 04/11/14

General Information

1a	Which service does this project, policy, or proposal relate to?	<p>Services for Adults with Learning Disabilities – Supported Living Provision</p> <p>The project, Alternatives to Residential Care, relates to services for older people, and forms part of the budget savings reference E005, Contracts within Adult Services</p> <p>This is a continuation of budget proposal C046 2015/17.</p> <p>This EIA relates to the Supported Living element of the budget proposals for adults with learning disabilities.</p> <p>The council spends £6m per annum on supported living as part of its contractual arrangements with Oldham Care and Support. The council also spends £2.5m per annum on externally provided supported living provision. In total, the council spends £8.5m per annum on supported living provision.</p> <p>As part of our proposals to re-design this area of provision, we are aiming to achieve a reduction in spend as follows:</p> <p>External provision - £50k</p> <p>The plans outlined in this document have the potential to realise more savings than the figures outlined above. Specifically how much more will become clearer as the commissioning framework is developed and implemented. Savings beyond the figures outlined above will contribute to wider plans and savings targets relating to the re-design of provision for adults with learning disabilities.</p>
----	---	---

1b	What is the project, policy or proposal?	<p>A project to improve supported living provision for adults with learning disabilities in Oldham.</p> <p>‘Supported Living’ is a term which refers to a form of arrangements where social care and support is provided to adults with learning disabilities in their own homes. Supported living services are for people who need extra help to live in their own homes, whether as tenants or owner occupiers, living alone or with others. Support can mean 24-hour care or simply a few hours a week to help with every-day tasks. Supported living aims to ensure that people have choice and control in their lives, and can live as independently as possible.</p> <p>Over the last 12 months, an audit process has been carried out to review the way people with learning disabilities are cared for in supported living environments in Oldham. Supported living placements are secured from a range of service providers across Oldham. This review has enabled the council to develop much needed intelligence on the numbers of people living in supported living accommodation, where they are, and who provides services to them.</p> <p>In addition to this, the recent Learning Disabilities Self-Assessment Framework, and Joint Commissioning Strategy for Learning Disabilities currently being developed, has highlighted the need for a more consistent approach to the way supported living is organised and managed.</p> <p>The project has a number of specific work streams which aim to improve the way in which supported living is provided to adults with a learning disability in Oldham. The major element of the project is to implement a commissioning framework for supported living, which will culminate in a tender process for providers, and aims to ensure that better outcomes for people, and better value for money from supported living can be achieved in Oldham.</p> <p>The commissioning framework will include new contracts for providers and a self-assessment framework for providers to complete. This will ensure robust quality and monitoring processes are put in place, and that provider standards are consistent and of the highest quality. The framework will also include a pricing structure which will apply to all providers of</p>
----	--	---

		<p>supported living services, and will ensure the council can achieve better value for money in this area. The framework will be applied in two phases. During 2015/16, all external supported living provision will be tendered against the framework, and during 2016/17, all Oldham Care and Support supported living provision will be tendered against the framework.</p> <p>The work-streams of the project are as follows;</p> <p>Commissioning / Procurement</p> <ol style="list-style-type: none"> 1. Supported living audit, reviews and re-alignment of individual budgets 2. Market mapping / Market Position Statement for supported accommodation for people with learning disabilities 3. Re-design (procurement) of supported living care provision – phase 1 (non OCS provision) 4. Re-design (procurement) of supported living care provision – phase 2 (OCS provision) <p>Contracts</p> <ol style="list-style-type: none"> 5. Developing clear mechanisms for payment systems 6. SLA's between housing providers, care providers and the Council <p>Internal Controls</p> <ol style="list-style-type: none"> 7. Vacancy Management Panel transition from OCS to the Council
1c	<p>What are the main aims of the project, policy or proposal?</p>	<p>Key objectives of the project:</p> <ul style="list-style-type: none"> • To ensure people with learning disabilities and complex needs are provided with the best possible service with regards to their living and accommodation needs, and that they are fully supported to live their lives as independently as possible. • To implement a commissioning framework and delivery model for supported living in Oldham. • To ensure the mix and availability of supported accommodation meets current and future supported living needs across the Borough.

		<ul style="list-style-type: none"> • To ensure specific problems and issues brought to light from the supported living review can be resolved for all parties involved. • To ensure risks and safeguarding are managed in a clear way using a defined process. • To improve value for money and to deliver supported living provision within the available budget, ensuring we can meet the requirements of the savings targets for 16/17.
1d	<p>Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?</p>	<p>Adults with learning disabilities, and parents, families and carers of adults with learning disabilities.</p> <p>The project and its associated work streams will, in the long term, have a positive effect on people with learning disabilities living in supported living environments, as a new framework for service provision will be implemented, including new standards, monitoring, and performance indicators that providers must deliver as part of their contract with the local authority.</p> <p>However, it may have possible negative impacts on some individuals in the short term, as the service is re-developed and plans put in place through developing the commissioning framework and implementing the procurement exercise. Some people with learning disabilities may change their care provider, or may even move into a new home which is more suitable for their needs. Any new care package or living environment would improve a person's outcomes in the longer term, as the framework would introduce a new set of service standards and improvements to the way services are delivered. However, people whose circumstances do change might experience a short period of instability.</p> <p>Any changes to a persons living environment or care provision would involve consultation, discussion and agreement with the person in question and their parents, families and carers, to ensure people retain choice and control over their lives.</p>

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a marriage or civil partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
Families, parents and carers of people with learning disabilities		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
1h	How have you come to this decision?	The project aims to improve service provision for adults with learning disabilities; however, due to the complexity and monetary values associated with the project, and also the particular vulnerability of the client group, a Full EIA is considered best practice in this instance.

Stage 2: What do you know?

What do you know already?

Demographics

The following data has been taken from the recent Joint Strategic Needs Assessment for Adults with Learning Disabilities in Oldham, which was published earlier in 2014. It provides a summary of population numbers, and predicted future changes to the demography of adults with learning disabilities in Oldham:

- It is estimated that 1.8% of the Oldham population will have some level of learning disability.
Overall, number of people with a learning disability is expected to increase by 3.5% from 4003 to 4143 by 2020.
- The largest expected increase will be in the 65+ age group which will steadily increase from 712 to 813, which will impact on service provision.
- The increase in expected rates is partly due to longer life expectancy (especially those with Down's syndrome), with more children and young people with complex and multiple disabilities surviving into adulthood, the rise in the reported number of school aged children 27 with autistic spectrum disorders and the greater prevalence of learning disability in some minority ethnic groups.
- Those adults with a moderate learning disability are expected to increase from 837 to 867 by 2020, with the largest increase in the 55 – 64 age group.
- The identification of people with a learning disability by GPs has steadily increased from 613 (2007/08) to 857 (2011/12).
- The numbers of people with a learning disability known to the local authority (4.5 per 1000) is above the England average (4.27 per 1000).

Table 5: Numbers predicted to have a learning disability in Oldham projected to 2020

	2012	2013	2014	2015	2016	2018	2020	% change
18-24	553	545	539	541	533	519	510	-7.7
25-34	740	757	769	772	782	792	794	+7.3
35-44	735	716	704	702	693	694	714	-2.9
45-54	705	715	723	728	731	724	698	-1
55-64	558	549	554	559	568	587	612	+9.7
65-74	415	428	432	441	446	454	455	+9.6
75-84	216	220	228	231	233	247	260	+20.4
85+	81	82	84	84	88	92	98	+21
total	4003	4012	4033	4058	4074	4109	4141	+3.5

Projecting Adult Needs and services Information (PANSI) and the Projecting Older People Population Information (POPPI) (2012)

Table 8: Known Adults 18 – 65+ with learning disability 2013

	Predicted Number	GP Practices (All ages)	Local Authority	Number Not Known to GP Practices	Number Not Known to Local Authority Services
Oldham	1013	818	595	195	418

Table 8 above, shows the predicted number of adults with a 'moderate to severe' and severe learning disability against adults known to Oldham Council and GP Practices as of the 31st March 2013. Although, a direct comparison cannot be made with the ASCOF and NHS IC QOF data set because of the difference in definitions it gives some indication of unmet need, because of the gap in predicted numbers and those known to services. The numbers of adults being identified by GPs has steadily been increasing since 2007/08 from 3.43 per 1000 to 4.69 per 1000 in 2011/12, which is above the England average of 4.54 per 1000.

How many adults with learning disabilities use Supported Living Services in Oldham? How many Care providers? Housing Providers?

A strategic review of supported living accommodation and the needs of people with learning disabilities in Oldham is currently being carried out, and is due to be completed over the next 6 months.

This review has enabled the council to develop much needed intelligence on the numbers of people living in supported living accommodation, where they are, and who provides services to them. The following provides an overview of information collected from this process;

Numbers of adults with a learning disability in supported living accommodation in Oldham: 168, plus 10 clients in rehabilitation services, 20 clients with very low support in the form of social care 'pop-ins' and 65 clients resident in properties where the Council no longer retains nomination rights and/or clients purchase their own support via a cash IB (individual budget).

Numbers of supported living care providers: 11, providers as follows;

- Oldham Care and Support
- Imagine, Act, Succeed
- Mencap
- Seva Support
- Able Care
- Care Uk
- Future Directions
- North West Initiatives
- Select Support Partnerships
- Prime Time
- Oxygen

Number of Supported Living properties known to the council: 63

Number of Landlords (property owners of supported living establishments): 8. Landlords are as follows;

- Great Places
- Places for People
- Regenda
- Partners
- Contour Housing
- Aksa
- FCHO
- Guinness Northern Counties

Interim contracts have been put in place with the major care providers of supported living services in Oldham. These were implemented on the 1st July 2014. This is enabling the council to collect better monitoring information from care providers, and to ensure robust, more formal contract monitoring can take place, until a new commissioning framework and tender process for providers can be finalised.

What don't you know?

- Further information and analysis is needed on the current performance of providers – information is being gathered from the interim contracts recently put in place.
- Further analysis on specific locations of supported living properties is also currently being developed.
- A market position statement and more detailed analysis of current and future needs of people with learning disabilities is also being finalised, which will help develop further intelligence for this project.

Further data collection

We have carried out a number of consultation events to discuss these proposals with people with learning disabilities, and their parents, families and carers. We are also holding ongoing forums for supported living care providers.

Summary (to be completed following analysis of the evidence above)				
Does the project, policy or proposal have the potential to have a <u>disproportionate</u> impact on any of the following groups? If so, is the impact positive or negative?	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a marriage or civil partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think that this proposal may affect negatively or positively?				
Families, parents and carers of people with learning disabilities		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	

Stage 3: What do we think the potential impact might be?

Consultation information

3a. Who have you consulted with?	<p>Two main groups have been consulted on these proposals;</p> <ul style="list-style-type: none"> • Adults with learning disabilities, and their parents, families and carers • Providers of Supported Living Services
3b. How did you consult? (inc meeting dates, activity undertaken & groups consulted)	<p>People with learning disabilities can often have communication difficulties. In developing the approach to this consultation, it was recognised that a specialist, bespoke approach was necessary,</p>

using people who understand ways to effectively communicate with people with learning disabilities.

To ensure people's voices were heard clearly, and to ensure the consultation was done in a robust and meaningful way, OPAL, (Oldham Personal Advocacy Ltd – who provide advocacy and day care services to people with learning disabilities) were commissioned to carry out the consultation with people with learning disabilities and their parents, families and carers.

Three events were held:

- Weds 8th October 2014 – 1pm – 4pm at the Link Centre
- Weds 15th October 2014 – 9.30am – 12pm at the Link Centre
- Thurs 16th October 2014 – 4.30pm – 7pm at OPAL

In addition to these events, OPAL have also been carrying out a number of 1:1 consultation meetings with individuals who might not be comfortable attending larger events, or may have not been free to attend.

As part of the consultation, questions and discussions focussed on key areas such as;

- What is important to you to make sure you are feeling settled, safe and well at home.
- How you have choice and control over where you live and who you live with
- What works well
- How things could be done differently

A provider forum has also been set up to ensure an ongoing mechanism for consulting with providers of supported living services. The first forum was held on 15th October 2014, where our commissioning intentions were discussed with all the main providers of supported living services in Oldham. As we develop the commissioning framework over the coming months, these meetings will continue to be held on an ongoing (two monthly) basis – to ensure providers are engaged and understand the implications throughout and beyond the process.

3c. What do you know?

We are currently developing a market map and market position statement for services and support for people with learning disabilities – and this will include a strategic analysis of need over time using the demographic data developed from the Learning Disabilities Needs

Assessment, and the information presented in Stage 2 of this document. This will help to develop a clear picture of the availability and mix of supported living provision and other housing options for people with learning disabilities, and will inform the development of the commissioning framework and wider Learning Disabilities Joint Commissioning Strategy also being developed. This will ensure the council and its partners are clearer on how we will need to respond to the demographic changes over time as set out in stage 2. This will also ensure the council sets out its strategic direction and focus going forward for the provider market in terms of the mix and availability of supported housing options for people with learning disabilities more broadly.

Information and feedback collected from the public consultation exercise described in section 3b will be used to directly shape the detail within the commissioning framework and our broader Joint Commissioning Strategy for people with learning disabilities.

The **overarching themes** which emerged from the consultation are as follows;

- **Choice**
- **Staff**
- **Planning**
- **Information**
- **Looking to the future**

The following provides a **summary of the main points raised in the consultation** under each of the above themes;

CHOICE

- **It is important that people have choice about the other people they live with** - Where the matching process had worked well in the past, people were happy and felt secure, settled and safe, however sometimes people had experienced problems getting on with the people they live with.
- **It is important that people have choice about where they live/ the location they live** - People talked about the importance of being close to family members and in communities they knew and were known. People talked about feeling safe to go out and confident in familiar areas and unsafe and vulnerable if they were near schools and groups of rowdy people.
- **It is important that people have choice over the service provider that provides them with care** - a number of service providers were responsible for the provision of supported living services many of which were working well.
- **It is important that people have choice about how they spend their time** - The importance of doing a range of activities both at home and in the community or town was important to many people. Fulfilling days covered a wide range of topics including doing more cooking, visiting family, having a job/volunteering, getting away and going on holiday. Many people talked about not wanting to feel lonely and isolated and stuck in the house without friends.

STAFF

- **It is important that the staff who provide care to individuals are of a high quality -** Well trained professional staff was a key feature of discussions in all groups.
- **It is important that people have consistency of staff -** The consistency of staff providing care was seen as critical by all groups- they possess detailed knowledge of the person they are caring for, which is important for being able to quickly notice and act on changes of behaviour spotting signs of illness at an early stage, for recognising what is important to the people they care for and use that knowledge to provide exceptional support. This was seen as important with care managers and social workers who had time to get to know the individuals on their case load and therefore could work more effectively when planning care and advising on supported living options and conduct a matching process based on detailed knowledge of the individuals.

PLANNING

- **We need to ensure a long term approach when placing people in supported living arrangements.** Most groups talked about the need for a longer term approach to supported living arrangements to take account of people's changing needs as they grew older.
- **People need enough time to make important decisions about where they live.** Having trial periods and being introduced to a new living environment slowly is important for a smoother transition.

INFORMATION

- **Better awareness of the options available to people is needed -** there was little understanding of the range of supported living options open to people.
- **Better information about the process is also needed -** in terms of what happens when and who does what.

LOOKING TO THE FUTURE

- **Learn** from other areas where good practice exists and research what works well – for example look at management models which are values based and combine economies of scale and avoid institutionalisation.
- **Look at how we can utilise existing resources more -** are there any old buildings in the borough which could be updated and utilised?
- **People's transport needs also need to be** an integral part of the planning process so that people know how they can access activities within the wider community.

3d. What don't you know?

Following the conclusion of the public consultation, we now have a good idea about the how we need to re-shape supported living services in the borough. However, we will need to continue to gather specific feedback on the detail of the commissioning framework as this is now currently being developed. The commissioning framework will be directly shaped using the feedback from

the consultation, however further consultation will be undertaken on an ongoing basis with the current providers of services, health partners, and with people with learning disabilities and their families, parents and carers.

When the framework has been developed, further consultation with people with learning disabilities and their families, parents and carers will be undertaken through the Learning Disability Partnership Board, and current providers of supported living services will continue to be consulted through the recently established Supported Living Provider forum. Consultation and discussion with health partners will be conducted both informally and through the Integrated Commissioning Partnership Forum.

3e. What might the potential impact on individuals or groups be?

Generic (impact across all groups)	n/a
Men or women (include impacts due to pregnancy / maternity)	n/a
People of particular sexual orientation/s	n/a
People in a marriage or civil partnership	n/a
Disabled people	<p>As previously mentioned in this document, the project and its associated work streams will, in the long term, have a positive effect on people with learning disabilities living in supported living environments, as a new framework for service provision will be implemented, including new standards, monitoring, and performance indicators that providers must deliver as part of their contract with the local authority.</p> <p>However, it may have possible negative impacts on some individuals in the short term, as the service is re-developed and plans put in place through developing the commissioning framework and implementing the procurement exercise. Some people with learning disabilities may change their care provider, or may even move into a new home which is more suitable for their needs. Any new care package or living environment would improve a person's outcomes in the longer term, as the framework would introduce a new set of service standards and improvements to the way services are delivered. However, people whose circumstances do change might experience a short period of instability. Any changes to a persons living environment or care provision would involve consultation, discussion and agreement with the person in question and their parents, families</p>

	<p>and carers, to ensure people retain choice and control over their lives.</p> <p>In addition to ensuring people are supported properly with any transition period, the points raised through the consultation will also need to be addressed to ensure any risks to providers, individuals and parent / family carers are addressed and mitigated. The detail of this is set out in stage 4a and the action plan at appendix 1.</p>
Particular ethnic groups	n/a
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	n/a
People on low incomes	n/a
People in particular age groups	n/a
Groups with particular faiths and beliefs	n/a
Other excluded individuals and groups (e.g. <i>vulnerable residents, individuals at risk of loneliness, carers or serving and ex-serving members of the armed forces</i>)	<p>Similarly with the families, parents and carers of people with learning disabilities, they may also be negatively impacted in the short term if their relative goes through a period of change, either with a change in care provider, or if they move to a more suitable living environment. However, as already highlighted, the impact of these changes in the long term will support a better outcome for their relative, and will support a more consistently higher quality of service.</p> <p>Mitigating actions to ensure transitions are smooth for the individual concerned are set out in stage 4a and the action plan at appendix 1.</p>

Stage 4: Reducing / mitigating the impact

4a. Where you have identified an impact, what can be done to reduce or mitigate the impact?

Impact 1: Change	Any changes to a persons living environment or care
-------------------------	---

<ul style="list-style-type: none"> • A person or family member who experiences a short term period of change – for example a change in care provider or change in living environment. 	<p>provision would involve consultation, discussion and agreement with the person in question and their parents, families and carers, to ensure people retain choice and control over their lives. This will be documented and managed through the care planning process.</p>
<p>Impact 2: Choice</p> <ul style="list-style-type: none"> • about the other people they live with • where they live/ the location they live • choice over the service provider that provides them with care • choice about how they spend their time 	<p>We will ensure that people who move to a new property are properly engaged in the decision making process – which will also include the desires of parents and family members – however it will remain most important to understand the views of the person themselves. Choice about where they live, who they live with, who provides their care, and what their package of care looks like will take a person-centred approach, and this will be specified and delivered through the care planning process. Daytime activities and ensuring people have choice and variety of daytime activities will also be specified through care planning.</p>
<p>Impact 3: Staff</p> <ul style="list-style-type: none"> • High quality staff • Consistency of staff 	<p>The commissioning framework and service specification will specify training and other requirements of provider staff to ensure good quality provision and approach to staff management, and will also include performance indicators for providers to support and encourage continuity of staffing.</p>
<p>Impact 4: Planning</p> <ul style="list-style-type: none"> • Long term approach to planning placements • Ensuring enough time for decision making 	<p>We will ensure that the care planning process includes clear requirements with regards to reasonable implementation timescales and that there is a stepped approach to decision making on any changes to a person's accommodation – to ensure any changes are implemented in a way that is comfortable for the individual concerned, and that they make use of approaches such as informal visits and trial periods.</p>
<p>Impact 5: Information</p> <ul style="list-style-type: none"> • Better awareness of the options available • Better information about the process 	<p>As part of developing and publishing the Market Position Statement and Market Mapping outlined in this document, a suite of information about the housing options that are available, and the process of moving will be made available on the council's website. This information will be aimed at people with learning disabilities and parents / family carers, and will also be available in Easy Read format.</p>
<p>Impact 6: Looking to the future</p> <ul style="list-style-type: none"> • Learning from other areas / research • utilise existing resources • transport needs 	<p>As part of developing the commissioning framework, best practice from other areas and an analysis of existing resources will be undertaken to inform the process. Transport needs of the individual will be taken into consideration as part of the care planning process, and the accommodation decision making.</p>
<p>Impact 7: Change impacts on providers</p>	<p>To mitigate any potential impacts on the provider market, a regular provider forum has been established to ensure open lines of communication are present and that providers understand and are engaged with the</p>

development of plans in a fair and timely manner.

4b. Have you done, or will you do, anything differently as a result of the EIA?

Yes, following the feedback from the consultation outlined in section 3c, actions will be put in place as set out in **Appendix 1 – action plan and risk table**.

4c. How will the impact of the project, policy or proposal and any changes made to reduce the impact be monitored?

The impact of the new framework and changes described in this document will be monitored and measured via contract monitoring procedures which will be put in place as part of the framework and following the implementation of the tender process. Key performance indicators will be set out in the service specification. This quality monitoring will ensure a consistent level of quality, ensure safeguarding and other risks are picked up quickly, and will include qualitative feedback information gathered from service users.

We will also monitor the ongoing experience and outcomes of service users through the social work review process, which will monitor whether people's needs are being met and whether specified personal outcomes are being achieved.

Conclusion

The project and its associated work streams will, in the long term, have a positive effect on people with learning disabilities living in supported living environments, as a new framework for service provision will be implemented, including new standards, monitoring, and performance indicators that providers must deliver as part of their contract with the local authority.

However, it may have possible negative impacts on some individuals in the short term, as the service is re-developed and plans put in place through developing the commissioning framework and implementing the procurement exercise. Some people with learning disabilities may change their care provider, or may even move into a new home which is more suitable for their needs. Any new care package or living environment would improve a person's outcomes in the longer term, as the framework would introduce a new set of service standards and improvements to the way services are delivered. However, people whose circumstances do change might experience a short period of instability.

Any changes to a person's living environment or care provision would involve consultation, discussion and agreement with the person in question and their parents, families and carers, to ensure people retain choice and control over their lives.

All feedback from the consultation will be used to inform the commissioning framework going forward, and further consultation will be undertaken on an ongoing basis with the current providers of services, health partners, and with people with learning disabilities and their families, parents and carers.

Summary of proposal

- 'Supported Living' is a term which refers to a form of arrangements where social care and support is provided to adults with learning disabilities in their own homes.
- The major element of the project is to implement a commissioning framework for supported living, which will culminate in a tender process for providers, and aims to ensure that better outcomes for people, and better value for money from supported living can be achieved in Oldham.
- The commissioning framework will include new contracts for providers and a self-assessment framework to ensure robust quality and monitoring processes. The framework will also include a pricing structure to achieve better value for money.
- The framework will be applied in two phases. During 2015/16, all external supported living provision will be tendered against the framework, and during 2016/17, all Oldham Care and Support supported living provision will be tendered against the framework.

Potential Impact on groups identified

- In the long term, the project will have a positive effect on people with learning disabilities living in supported living environments, as a new framework for service provision will be implemented, including new standards, monitoring, and performance indicators that providers must deliver as part of their contract with the local authority.
- Possible negative impacts on some individuals may be felt in the short term, as some people may change their care provider, or may even move into a new home which is more suitable for their needs.
- Some providers might also be impacted as they go through a period of instability and change whilst the framework and tender process is implemented.

Mitigating the potential impact


- To mitigate any potential impacts on individuals during implementation, we would ensure that any changes to a persons living environment or care provision would involve meaningful and timely consultation, discussion and agreement with the person in question and their parents, families and carers, to ensure people retain choice and control over their lives.
- To mitigate any potential impacts on the provider market, a regular provider forum has been established to ensure open lines of communication are present and that providers understand and are engaged with the development of plans in a fair and timely manner.

Stage 5: Signature

Lead Officer: Claire Hill, Planning and Commissioning Manager
Date: 11/09/15

Approver signature:

Date: 27/10/15

A handwritten signature in black ink on a white rectangular background. The signature appears to be 'H. Ramsden'.

Reviewed: September 2015 – Helen Ramsden – Next review October 2016

APPENDIX 1: Action Plan and Risk Table

Once you have decided on the course of action to be taken in order to reduce or mitigate the impact, please complete the action plan below (An example is provided in order to help you)

Number	Action	Required outcomes	By who?	By when?	Review date
Impact 1: Change	Ensure consultation, discussion and agreement with the person in question and their parents, families and carers, is documented and managed through the care planning process.	Ensure people retain choice and control over their lives	Care Management	Ongoing process	Annual review
Impact 2: Choice	Ensure choice about where they live, who they live with, who provides their care is included in care packages and person centred plans and that this is delivered through the care planning process and commissioning framework.	Ensure people retain choice and control over their lives	Care Management	Ongoing process	Annual review
Impact 3: Staff	Ensure these considerations are incorporated into the commissioning framework.	Ensure people receive a good quality and consistent service from provider staff	Michelle Hope	April 2015	n/a
Impact 4: Planning	Ensure that the care planning process includes clear requirements with regards to reasonable implementation timescales and that there is a stepped approach to decision making on any changes to a person's accommodation	People feel comfortable with any changes	Care Management	Ongoing process	Annual review
Impact 5: Information	Develop information package on supported accommodation options for people with learning disabilities on the council website.	People are better informed of the options and support available to them	Michelle Hope	April 2015	Annual review

Impact 6: Looking to the future	Ensure best practice from other areas and an analysis of existing resources will be undertaken to inform the process. Transport needs of the individual will be taken into consideration as part of the care planning process, and the accommodation decision making.	Best practice and current resources taken into account when developing the approach	Michelle Hope	April 2015	n/a
Impact 7: Change impacts on providers	Ensure provider forum continues as a formal communication mechanism with providers.	Providers are informed and are able to shape their business according to need	Michelle Hope	Ongoing	n/a

Action Plan

Risk table

Record any risks to the implementation of the project, policy or proposal and record any actions that you have put in place to reduce the likelihood of this happening.

Ref.	Risk	Impact	Actions in Place to mitigate the risk	Current Risk Score	Further Actions to be developed
1	Rationalisation of provision for some service providers may lead to destabilization and de-motivation	Destabilisation of provider	Regular provider forums have been established to ensure provider concerns are heard and providers are communicated with in a timely manner.	D III	n/a
2	Implications of the Care Act - The introduction of the Act will result in a significant increase in the cost of care provision from April 2016 onwards that is not fully quantifiable at the moment and will impact the sustainability of current social care funding and plans.	Impact on resources	A programme management approach has been set up to ensure social care activity is Care Act compliant, and that the future implications are clearly understood, including the impact on people with learning disabilities.	C II	n/a
3	Operational pressures may restrict the ability of the workforce to deliver the proposals	Non-delivery of the project	A robust project management framework is put in place to ensure implementation timescales are met.	D III	n/a
4	Risk of individual projects and work streams not meeting required timescales	Non-delivery of the project	A robust project management framework is put in place to ensure implementation timescales are met.	D III	n/a



Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	E006
Portfolio	Health and Wellbeing
Directorate:	Health and Wellbeing
Division:	Adult Services
Responsible Officer and role:	Maggie Kufeldt, Executive Director, Health and Wellbeing
Cabinet Member and Cluster :	Cllr J Harrison, Health and Wellbeing Cluster

Title:	Adult Social Care – Care Package Reviews
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£14,339k
	Income	(£0)
	Net Expenditure	£14,339k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	N/A

	2016/17	2017/18
Proposed Financial saving:	613	0
Proposed reduction in FTE's	0	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>This budget pro-forma presents savings targets associated with care package reviews within Adult Social Care for 2016/17. It provides a summary of current saving targets already promised for 2016/17, and presents an additional savings target to go towards fulfilling the gap caused by a removal of an element of Better Care Fund monies (1800k), and savings allocated to contracts which cannot safely be met (£211k).</p> <p>Savings presented cover the following areas;</p> <ul style="list-style-type: none"> a) Learning Disability Supported Living reviews - £113k b) Additional adult social care package reviews across client groups - £500k <p>Together, these total £613k</p>
--	---

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>a) Learning Disability Supported Living Care Package Reviews - £113k</p> <p>Involves audits of both individual care packages and provider costs including those of Oldham Care and Support and external providers in order to ensure care packages are at appropriate levels.</p> <p>b) Adult Social Care Package Reviews – across client groups - £500k</p> <p>A Review Team is carrying out reassessments of care packages across a range of social care client groups, in order to ensure care is provided at appropriate levels. For 15/16, work is already underway to achieve savings of £612k with team costs of £240k - making a gross saving requirement of £852k. Further analysis will be required to understand the specific level of savings that could be achieved by extending this activity beyond the current level of savings promised by this activity.</p>
---	---

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>Additional resources may be required to increase social worker capacity in order to undertake further reviews.</p> <p>As already mentioned, further analysis will be required to understand the specific level of savings that could be achieved by extending review team activity beyond the current level of savings already promised for 2015/16.</p>
---	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	N/A
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	N/A
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Project Area	Timescale
a) LD Supported Living Reviews	01/04/2015 – 31/03/2017
b) Review Team Activity	01/04/2015 – 31/03/2017

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
A key risk with this proposal is that reductions (and increases) in care packages that result following reviews, do not reach the savings target specified	Ensuring an effective analysis of review activity, and understanding the cost benefit of additional social worker resources, will enable a clearer picture of specific savings that could be realised.
Longer waiting times for assessment and review if fewer care management staff are employed.	The review team is well established and operating effectively.
The additional responsibilities imposed by the Care Act will need to be absorbed, and may have an impact on the achievement of our strategic aims and objectives.	Further government funding may (or may not) be provided to local authorities for this purpose. The council must ensure it continues to develop an understanding of the impact of increased demand, and additional responsibilities when the financial measures are introduced in April 2016.
Insufficient resources to make the necessary investment in prevention and early intervention, resulting in an acceleration of demand for social care.	Ensure a robust programme management approach to managing projects, ensuring resources needed to carry out projects are clearly stipulated.
Additional risk to health, wellbeing and safety where vulnerable adults receive less support than they would in the past.	The council must ensure service users are provided with a safe level of care.

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None.

Service Delivery and future expected outcomes:

The overall vision for adult care in Oldham is to ensure as many people as possible are enabled to stay healthy and actively involved in their communities for longer and delay or avoid the need for targeted services. In order to achieve this and manage the expected future demands, there is a need to move away from traditional “social” and “health” care, and focus on prevention, integration and a more person centered model of holistic care. The proposals contained within this paper will help to deliver this vision.

Whilst we must reduce community care expenditure we must also make sure we are able to discharge our statutory duties in respect of vulnerable adults, a proportion of whom will need intensive and /or long term care and support.

Maintaining safe services whilst delivering a complex programme to transform services, reduce costs and improve longer term outcomes will be challenging, not least because as our resources reduce local need and demand for social care are projected to increase and the introduction of the Care Act in 2015 presents additional duties for local government.

The approach to manage the expected demand within reduced resources will be one that:

- Intends to lessen demand
- Is focused on improving outcomes
- Promotes delivery models that reduce costs by achieving better outcomes
- Supports people to avoid using residential care and other intensive services, services, but where they do reduces the length of stay and delays the point of admission
- Invests in preventative services

Organisation (other services)

The success of the transformation programme depends heavily on the engagement of all parts of the organisation and our key partners to establish a joined up approach. To support this we have established the Adult Services group, which engages key elements of the business in our transformation programme.

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

This proposal creates an opportunity to work in a more integrated way with partners, and to develop our workforce to focus more on demand management, prevention and outcomes.

Communities

The proposal will generally have a positive impact on communities in that as many people as possible are enabled to stay healthy and actively involved for longer by delaying or avoiding the need for targeted services. However there may be additional pressure on families and carers, as well as service users to continue to cope against a backdrop of reducing provision.

Service Users

In general, people will experience an improved, joined up customer journey. There may be additional risks to health, wellbeing and safety if vulnerable adults receive less support than they would in the past, and again, additional pressure on families and carers, as well as service users to continue to cope for longer, with less support than in the past.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

Reducing support commissioned by the council may displace demand to voluntary and community sector organisations.

Section 6

Supplementary Information

None.

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation

A Trade Union meeting took place in late July with staffing consultation following this. A full overall public consultation was completed by mid-October.

Staff Consultation

This will be required if staffing proposals require

	a reduction in posts, or a re-structure of the service.
Public Consultation	From 3 August 2015
Service User Consultation	As below
Any other consultation	Where relevant, consultation with all affected staff, service users, carers, providers and partners, has been undertaken for specific projects.

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	Yes
Particular ethnic groups	Yes
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	Yes
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	Yes
EIA to be completed by:	Colin Elliot
By:	26 October 2015

Section 9

Responsible Officer:	Maggie Kufeldt, Executive Director, Health and Wellbeing
Support Officer Contact:	Claire Hill
Support Officer Ext:	3125

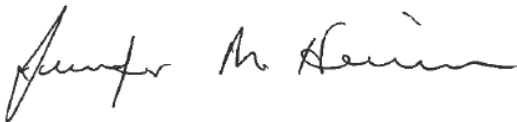
Cabinet Member Comments and/or approval	
Approved	

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	29 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr J. Harrison Social Care and Safeguarding
Signed:	
Date:	29 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Equality Impact Assessment Tool

E006 - Adult Social Care - Care Package Reviews

Lead Officer:	Gwen Irving
People involved in completing EIA:	Helen Ramsden
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	Yes as an individual issue. In 2015/16 this formed part of C046

General Information

1a	Which service does this project, policy, or proposal relate to?	Adult Social Care - Care Package Reviews
1b	What is the project, policy or proposal?	To review care packages across client groups to ensure care is provided at appropriate levels, and by considering different options available to meet need. Significant progress has been achieved in 15/16 with no adverse consequences and this proposal is an extension of that already being undertaken.
1c	What are the main aims of the project, policy or proposal?	<p>The main aims of this proposal are to ensure that current care packages meet needs at appropriate levels, and where it is identified that there are lower cost alternatives, and/or more innovative ways to meet needs, that these are implemented in consultation with users and carers.</p> <p>The proposal can be split into two areas:</p> <ol style="list-style-type: none"> a) Learning Disability Supported Living Care Package Reviews – this involves audits of both individual care packages and provider costs in order to ensure care packages are at appropriate levels, and supports the implementation of the supported living commissioning framework (C046 – EIA 4)Adult Social Care Package Reviews – across client groups – a review team is carrying out reassessments of care packages across a range of social care client groups, in order to ensure care is provided at appropriate levels.
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	<p>Whilst for some, this proposal may reduce the financial value of the care package they receive, it will ensure that needs are met, and will achieve a range of benefits:</p> <ul style="list-style-type: none"> • Value for money

		<ul style="list-style-type: none"> • Equitable assessment of need through a transparent process • Empowerment of those in need and their carers and providers to shape the packages of support that meet their needs • Flexible use of resources and development of innovative solution leading to improved outcomes • Increasing self-reliance and self-management skills, removing any barriers to universal services and community inclusion thereby deflecting demand for high cost specialist services.
--	--	--

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Particular ethnic groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a Marriage or Civil Partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
<i>Carers</i>		<input type="checkbox"/>	<input type="checkbox"/>	X

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
----	---	---

	policy or proposal?	
1h	How have you come to this decision?	<p>Experience during 2015/16 of implementing this proposal has shown that whilst some care packages have reduced, some have increased as a result of reviews undertaken, and where needs have been identified, a way of meeting those needs has been agreed.</p> <p>Where packages of care have reduced, this has been because it has been identified that needs have changed, or that there is a different way in which needs can be met, for example through support naturally available in communities, via universal services, or through more innovative use of allocated resources.</p> <p>However, it is expected that for some people there will be a reduction in the levels of care and support they receive and therefore the impact of this needs to be determined.</p>

Stage 2: What do you know?	
What do you know already?	
<p>Significant savings from the review of care packages have been achieved in 2015/16 and this is projected to continue. There have been no complaints or concerns arising from these reductions, as alternative solutions have been agreed to meet need.</p>	
What don't you know?	
<p>We don't know the outcome of reviews that will be undertaken in 2016/17, or the availability of alternative solutions to meet needs.</p> <p>We don't know whether, if the outcome of an assessment is to reduce a package of care, this will result in an appeal or complaint.</p> <p>We don't know if there will be any adverse consequences arising from the reduction of care and support to any individual.</p>	
Further data collection	
<p>We will be able to profile the outcome of reviews undertaken in 2015/16 across different client groups, to better understand where those reductions are likely to be realised. This will help us to better understand any potential impact.</p>	

Summary (to be completed following analysis of the evidence above)

Does the project, policy or proposal have the potential to have a <u>disproportionate</u> impact on any of the following groups? If so, is the impact positive or negative?	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Particular ethnic groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a Marriage or Civil Partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think that this proposal may affect negatively or positively?				
Carers		<input type="checkbox"/>	<input type="checkbox"/>	X

Stage 3: What do we think the potential impact might be?	
Consultation information <i>This section should record the consultation activity undertaken in relation to this project, policy or proposal.</i>	
3a. Who have you consulted with?	<p>Consultation was undertaken throughout 2015/16 and 2014/15 with partners, providers, users and carers.</p> <p>Consultation will be undertaken on a 1:1 basis with users and carers as part of the review process</p>
3b. How did you consult? (inc meeting dates, activity undertaken & groups consulted)	<p>Consultation was carried out via provider forums, carers forums, as part of wider partnership groups and on a 1:1 basis during individual reviews.</p>

3c. What do you know?

Overall feedback has been that it is understood and accepted that any care and support commissioned is only at a level required to appropriately meet needs, and that any opportunities for broader social integration, and participation in every day community activities, achieved through natural support or universal services was positive.

3d. What don't you know?

We don't know what the outcomes of individual reviews will be, and therefore what opportunities there may be for people's care and support needs to be met by alternative means, or via increased support from carers.

3e. What might the potential impact on individuals or groups be?

Generic (impact across all groups)	N/A
Disabled people	Additional pressure on families and carers, as well as the service user, to continue to cope under stress Additional risk to health, wellbeing and safety where vulnerable adults receive less support than they would in the past
Particular ethnic groups	Additional pressure on families and carers, as well as the service user, to continue to cope under stress Additional risk to health, wellbeing and safety where vulnerable adults receive less support than they would in the past
Men or women (include impacts due to pregnancy / maternity)	N/A
People of particular sexual orientation/s	N/A
People in a Marriage or Civil Partnership	N/A
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	N/A
People on low incomes	N/A
People in particular age groups	Additional pressure on families and carers, as well as the service user, to continue to cope under stress

	Additional risk to health, wellbeing and safety where vulnerable adults receive less support than they would in the past
Groups with particular faiths and beliefs	N/A
Carers	Additional pressure on families and carers, as well as the service user, to continue to cope under stress Additional risk to health, wellbeing and safety where vulnerable adults receive less support than they would in the past


Stage 4: Reducing / mitigating the impact

4a. Where you have identified an impact, what can be done to reduce or mitigate the impact?	
Additional pressure on families and carers, as well as the service user to continue to cope under stress Additional risk to health, wellbeing and safety where vulnerable adults receive less support than they would in the past.	Risk assessments form part of the assessment and review process, and these will be undertaken with service users and their families to determine whether commissioned care and support services can be safely and sustainably reduced.

4b. Have you done, or will you do, anything differently as a result of the EIA?
No

4c. How will the impact of the project, policy or proposal and any changes made to reduce the impact be monitored?
Monitoring of the proposal will form part of the Transformation of Adult Services Programme Board, the Adult Management Meetings and the Performance Dashboard reporting.

Conclusion <i>This section should record the overall impact, who will be impacted upon and the steps being taken to reduce / mitigate the impact</i>
There is the potential that the review of care packages in a more enabling way will mean that needs are met more cost effectively through identifying more innovative approaches in partnership with service users, their families and providers.

Stage 5: Signature		
Lead Officer:	Helen Ramsden (For Gwen Irving)	Date: 27/10/15
Approver signature:	Date: 27/10/15	
		
EIA review date: October 2016		

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B001
Portfolio	Co-operatives and Neighbourhoods
Directorate:	Co-operatives and Neighbourhoods
Division:	Environmental Services
Responsible Officer and role:	Carol Brown – Director of Environmental Services
Cabinet Member and Cluster :	Cllr D Hibbert – Housing, Planning and Highways

Title:	Building Control – Income Generation
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£414k controllable £201k uncontrollable Corporate Support Services
	Income	(£615k)
	Net Expenditure	£0k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	7

	2016/17 £k	2017/18 £k
Proposed Financial saving:	25	0
Proposed reduction in FTE's	0	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>A proposal was submitted in the 2015/17 budget round and outlined the opportunity to create a council owned Approved Inspector Service. It is still envisaged that this is the appropriate way forward however as the business model is being developed it is showing that the estimated income target put forward is unrealistic.</p> <p>Officers have been working with external advisors DAC Beachcroft and the additional income predicted for Year One 2015/16 was £50k to £75k the actual income realised through</p>
--	--

	additional contracts has yet to be reported on but given the existing income target for the service of £615k there is considerable work to undertaken to attain this position.
--	--

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	For the reasons outlined above it is proposed to examine the opportunities to be gained from shared working with Tameside and Rochdale Councils and a target saving of £25k has been placed against the service for the work which will be undertaken over the next 3 months.
---	---

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	Non noted
---	-----------

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	0
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Failure to derive savings from shared working model	Full appraisal to be undertaken of opportunities and potential business model
Partner fails to engage	Support from shared leadership across the three Councils

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None

Service Delivery and future expected outcomes:

Shared service delivery model with opportunity to increase resilience across the 3 Councils

Organisation (other services)

Rochdale and Tameside Councils

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

Cover for partner authorities should provide additional income within existing resource

Communities

None envisaged at this stage as implementation of any service changes would be taken from a residents/service user perspective

Service Users

None envisaged at this stage as implementation of any service changes would be taken from a residents/service user perspective

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

None

Section 6

Supplementary Information
None

Section 7

Consultation Information – <i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	None undertaken to this point
Staff Consultation	None undertaken to this point
Public Consultation	None undertaken to this point
Service User Consultation	None undertaken to this point
Any other consultation	None undertaken to this point

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Carol Brown
----------------------	-------------

Support Officer Contact:	Ellen Marchbank-Smith
Support Officer Ext:	0161 770 5690

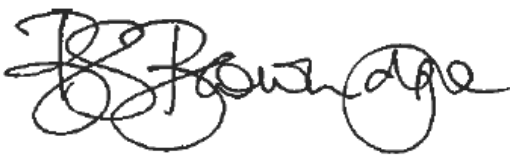
Cabinet Member Comments and/or approval	
Approved	

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	24 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Councillor Barbara Brownridge
Signed:	
Date:	24 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B008
Portfolio	Co-operatives and Neighbourhoods
Directorate:	Co-operatives and Neighbourhoods
Division:	Community Services
Responsible Officer and role:	Liz Hume, Community Services Strategic Change Manager
Cabinet Member and Cluster :	Cllr B Brownridge – Neighbourhoods & Co-operatives

Title:	Efficiencies achievable as a result of combining services to form the Community Services Directorate
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Response Services)</i>	Expenditure	£1,554k (Districts: £855k Community Safety: £699k)
	Income	(£200k) (all PH Transformation Fund)
	Net Expenditure	£1,354k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	Districts: 19 Community Safety: 10

	2016/17 £k	2017/18 £k
Proposed Financial saving:	105	0
Proposed reduction in FTE's	1	0

Section 3

Background: <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>Bringing together services, for example:</p> <ul style="list-style-type: none"> - Access to capacity elsewhere in Community Services removes the need for external professional fees; - A vacancy within the District teams can be sustained pending the longer term District review with support from other services in the Directorate; - Cross-service support can be delivered more efficiently, enabling the amalgamation of two Principal Officer posts
--	---

	<p>into one;</p> <ul style="list-style-type: none"> - The MASH Manager post can be filled on an interim basis by the Head of Stronger Communities; - Requirements for one-off expenditure within Community Services can be managed more effectively by drawing on capacity from other services. <p>These are initial proposals, which will be supplemented by further proposals for future years as the full review of district working arrangements both within the Council and partners is completed.</p>
--	---

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	£105,000 recurrent
---	--------------------

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>It should be noted that £200k of the District budgets is underpinned by the Public Health Transformation Fund. We have received no information to suggest that this is likely to reduce, but if it were to do so then this would create an additional pressure.</p>
---	--

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	1
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	£0 direct
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Expenditure controls put in place for 2015/16 to generate one-off savings	July 2015
Informal staff engagement undertaken on staffing changes	August 2015
Formal staff consultation on staffing changes	September-October 2015

Staffing changes signed off	End October 2015
Staffing changes implemented	November 2015-March 2016
Mandatory – Completion of EIA & Consultation within PVFM timeline	*Proposal unlikely to be relevant for EIA

Key Risks and Mitigations	
Risk	Mitigating Factor
Staff identify through consultation barriers to changes that managers have not considered	Engagement has begun with staff

Section 5

What impact might the proposal have on the following?

<u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
None

<u>Service Delivery and future expected outcomes:</u>
None – the proposals are genuine efficiencies enabled by the restructure to create Community Services

<u>Organisation (other services)</u>
None

<u>Workforce</u>
<i>Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models</i>
The Head of Stronger Communities will take on a broader remit including the MASH management role – this is already in place.

<u>Communities</u>
None

<u>Service Users</u>
None

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)
None

Section 6

<u>Supplementary Information</u>
None

Section 7

<u>Consultation Information –</u> <i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • What has been consulted on so far? With whom and when? • Further consultation required? • Date consultation to be started and concluded 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	Informally initially with formal engagement alongside staff consultation in the Autumn
Staff Consultation	None to date other than in relation to MASH manager role but will be undertaken in the Autumn.
Public Consultation	Not considered necessary
Service User Consultation	Not considered necessary
Any other consultation	Not considered necessary

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone	No

a process or part of a process of gender reassignment	
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Liz Hume
----------------------	----------

Support Officer Contact:	Ellen Marchbank-Smith
Support Officer Ext:	0161 770 5690


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	6 July 2015
-----------------------	-------------

Section 10

Approval by Cabinet Member

Cabinet Member:	Cllr Brownridge
Signed:	
Date:	6 July 2015

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B009
Portfolio	Co-operatives and Neighbourhoods
Directorate:	Co-operatives and Neighbourhoods
Division:	Community Services
Responsible Officer and role:	Jill Beaumont, Director of Community Services
Cabinet Member and Cluster :	Cllr B Brownridge – Neighbourhoods & Co-operatives

Title:	Targeted Youth – reduction in the overall contract value
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Response Services)</i>	Expenditure	£2,444k
	Income	(£1,785k) (£1,150k is public health funding)
	Net Expenditure	£659k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	0

	2016/17 £k	2017/18 £k
Proposed Financial saving:	130	0
Proposed reduction in FTE's	0	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>Last year, Positive Steps were awarded all three contracts to provide Targeted Youth support:</p> <p>Lot 1 - Health and Wellbeing</p> <p>Lot 2 - YOS and Youth Crime Prevention</p> <p>Lot 3 - Vulnerable Groups</p> <p>As a new contract establishes, it is usually possible to achieve efficiencies as up-front costs of establishing a service and</p>
--	--

	<p>working in new ways reduce. We are therefore proposing that there is an 8% reduction in the contract value. This is a total reduction of £190,000.</p> <p>However, £60,000 of this is required to meet the in-year reduction of the YJB Grant Allocation for 2015/16. This leaves £130,000 that will be taken as a recurrent saving on the overall contract.</p> <p>Early discussions with Positive Steps have suggested that this level of reduction would be achievable.</p>
--	---

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	£130,000 recurrent
---	--------------------

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>It should be noted that £1,150,000 of this budget is currently funded by the Public Health Transformation Fund. We have received no information to suggest that this is likely to reduce, but if it were to do so then this would create an additional pressure.</p>
---	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0 to Council – there may be redundancies for Positive Steps dependent on how the efficiency is managed
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	£130,000
Type of impact on partners	Negative

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Informal discussions with Positive Steps to determine how the efficiency saving could be delivered and likely impact on staff	July 2015
Formal decision on progressing with efficiency based on	September 2015

Formal notification to Positive Steps	October 2015
Reduced contract value takes effect	April 2016

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Positive Steps identify barriers to the reduction that have not been anticipated in terms of impact on service delivery	Informal engagement suggests that the saving is achievable and will continue before finally confirming the reduction in contract value.

Section 5

What impact might the proposal have on the following?

<u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
None

<u>Service Delivery and future expected outcomes:</u>
Likely to be limited given the potential for generating efficiencies as a result of the contract being in its later stages. However, this will be more fully explored in the more detailed discussions planned with Positive Steps over the summer.

<u>Organisation (other services)</u>
Reduction in contract value for Positive Steps.

<u>Workforce</u>
<i>Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models</i>
None

<u>Communities</u>
None

<u>Service Users</u>
See above in relation to service delivery.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)
Reduction in contract value for Positive Steps.

Section 6

Supplementary Information
None

Section 7

Consultation Information – <i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • What has been consulted on so far? With whom and when? • Further consultation required? • Date consultation to be started and concluded 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	Not considered necessary as no impact on Council staff
Staff Consultation	Not considered necessary as no impact on Council staff
Public Consultation	Not considered necessary
Service User Consultation	Not considered necessary
Any other consultation	Not considered necessary

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	Potentially
People in particular age groups	Potentially
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	Yes
EIA to be completed by:	Jill Beaumont and Steph Bolshaw
By:	1 September 2015

Section 9

Responsible Officer:	Jill Beaumont
----------------------	---------------

Support Officer Contact:	Ellen Marchbank-Smith
Support Officer Ext:	0161 770 5690


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	6 July 2015
-----------------------	-------------

Section 10

Approval by Cabinet Member

Cabinet Member:	Cllr Brownridge
Signed:	
Date:	6 July 2015

Equality Impact Assessment Tool

B009 Targeted Youth - Reduction in overall contract value

Stage 1: Initial screening

Lead Officer:	Liz Hume
People involved in completing EIA:	Steph Bolshaw, Jill Beaumont
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	Yes

General Information

1a	Which service does this project, policy, or proposal relate to?	<p>Targeted Youth support currently provided by Positive Steps in the following areas:</p> <ul style="list-style-type: none"> • Health and Wellbeing • YOS and Youth Crime Prevention • Vulnerable Groups
1b	What is the project, policy or proposal?	<p>As a new contract establishes, it is usually possible to achieve efficiencies as up-front costs of establishing a service and working in new ways reduce. We are therefore proposing that there is an 8% reduction in the contract value to take account of the ability to deliver more efficiently now that the new delivery model has been developed. From discussions with Positive Steps, we anticipate that this will have minimal impact on front-line delivery.</p> <p>An 8% reduction is a total reduction of £190,000.</p> <p>However, £60,000 of this is required to meet the in-year reduction of the YJB Grant Allocation for 2015/16. This leaves £130,000 that will be taken as a recurrent saving on the overall contract.</p>
1c	What are the main aims of the project, policy or proposal?	<p>The main aims are to:</p> <ul style="list-style-type: none"> • Reduce the overall contract value to meet budget reductions across the Council • Maintain a good level of Targeted Youth Support by achieving reductions through working more efficiently, therefore minimising impact on front-line delivery.

1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	<p>Early discussions with Positive Steps have suggested that this level of reduction would be achievable.</p> <p>We anticipate that the impact is likely to be limited given the potential for generating efficiencies as a result of the contract being in its later stages but no final decisions have been made as to how this would be achieved. This is due to go to the Positive Steps board in the next few weeks.</p> <p>If any disproportionately negative impacts on any of the protected groups emerge as discussions continue, we will review this stage one and complete a full EIA if required.</p>
----	---	---

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a Marriage or Civil Partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
<i>E.g. vulnerable residents, homeless people, individuals at risk of loneliness, carers or serving and ex-serving members of the armed forces</i>		<input type="checkbox"/>	<input type="checkbox"/>	

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
1h	How have you come to this decision?	At this stage we believe it is possible to deliver the savings through efficiencies that will not impact significantly on front-line delivery. However, a final decision on how the savings will be delivered has not been made, and we will therefore keep the position under review and complete a full EIA if needed.

Stage 5: Signature	
Lead Officer: Liz Hume	Date: 27/10/15
Approver signature: Jill Beaumont	Date: 27/10/15
EIA review date: October 2016	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B010
Portfolio	Co-operatives and Neighbourhoods
Directorate:	Co-operatives and Neighbourhoods
Division:	Community Services
Responsible Officer and role:	Jill Beaumont, Director of Community Services
Cabinet Member and Cluster :	Cllr B Brownridge –Neighbourhoods & Co-operatives

Title:	Universal Youth – removing contingency
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Response Services)</i>	Expenditure	£383k
	Income	(£0k)
	Net Expenditure	£383k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	6

	2016/17 £k	2017/18 £k
Proposed Financial saving:	100	0
Proposed reduction in FTE's	0	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>In April 2015 Mahdlo took over the delivery of the Council's universal youth offer. However, £100,000 of youth development funding was retained within the Council to provide a contingency should the new delivery model not operate effectively. Mahdlo have so far delivered well, and this contingency is therefore no longer required.</p>
--	--

Proposed Savings £k: <i>Through efficiency, income generation, transformation, decommissioning, etc</i>	£100,000 recurrent
---	--------------------

Further Financial Implications & Considerations <i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	None
---	------

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	0
Type of impact on partners	Neutral or marginal

Section 4

Key Milestones	
Milestone	Timescale
First quarter monitoring with Mahdlo to confirm that the contingency is no longer needed	July 2015
Formal decision on progressing with removing this contingency	September 2015

Key Risks and Mitigations	
Risk	Mitigating Factor
Mahdlo contract is still in its early days, so initial positive signs may not be sustained	Progress to date is positive and suggests good level of delivery will be sustained

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None

Service Delivery and future expected outcomes:

None

Organisation (other services)

None

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

None

Communities

None

Service Users

None

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

None

Section 6

Supplementary Information

None

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	Not considered necessary as no impact on Council staff
Staff Consultation	Not considered necessary as no impact on Council staff
Public Consultation	Not considered necessary
Service User Consultation	Not considered necessary
Any other consultation	Not considered necessary

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Jill Beaumont
Support Officer Contact:	Ellen Marchbank-Smith
Support Officer Ext:	0161 770 5690


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	6 July 2015
-----------------------	-------------

Section 10

Approval by Cabinet Member

Cabinet Member:	Cllr Brownridge
Signed:	
Date:	6 July 2015

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B012
Portfolio	Co-operatives and Neighbourhoods
Directorate:	Co-operatives and Neighbourhoods
Division:	Community Services
Responsible Officer and role:	Bruce Penhale Head of Service MASH / Stronger Communities Service / Oldham District Team
Cabinet Member and Cluster :	Cllr B Brownridge, Neighbourhoods & Co-operatives

Title:	Voluntary, community and faith sector commissioning
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£1,041k
	Income	(£0k)
	Net Expenditure	£1,041k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	3

	2016/17 £k	2017/18 £k
Proposed Financial saving:	80	0
Proposed reduction in FTE's	0	0

Section 3

Background: <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>The proposal relates to grant funding of voluntary, community and faith sector organisations delivering services which support the Council's priorities.</p> <p>The proposals overall represent a reduction of around 10% of the service's commissioning/activity budget.</p>
--	--

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>The proposals involve reductions in the funding for:</p> <ul style="list-style-type: none"> • Community festivals (£12k to £7k) – reducing number of events funded (3 to 2) and the maximum funding available • Voluntary sector infrastructure (£280k to £252k) through working with Voluntary Action Oldham to deliver efficiencies • Oldham Credit Union (£40k to £36k) through working with the organisation to increase income from loans / operating efficiencies • Community Transport (£50k to £45k) through achieving service efficiencies (NB This budget is being transferred to Commissioning to explore opportunities for greater co-ordination around delivery of transport services) • Community Centres and organisations (£135k to £115k) linked to the development of the Community Horizons project, which is piloting a more sustainable model for the operation of community facilities • Other projects and activities supporting development of stronger communities (£52k to £34k)
---	---

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>In relation to the Community Horizons pilot, this is receiving funding of £45k in 2015/16 which is additional to these budgets. The pilot will receive further pump priming in 2016/17, but funded out of the Community Centres and Organisations budget. On top of a reduction of £20k in this budget overall, this will substantially reduce the resources available to meet the costs of other facilities. The intention is that the project will encourage income generation from other sources to reduce the need for grant funding of community facilities.</p>
---	--

<p><u>Property Implications</u></p> <p><i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i></p>	<p>The Community Horizons project involves developing a more sustainable approach to the operation of community facilities, some of which are in premises owned by the Council but operated by community groups</p>
--	---

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Letter to organisations providing advance notice of likely change to current funding agreements	May 2015 (complete)
Consultation event with voluntary, community and faith sector to discuss proposals and explore potential options	July 2015
Deadline for organisations to submit details of likely impact of reduced funding on the organisation and service users (to inform EIA)	Mid-August 2015
EIA completion	Available for Overview & Scrutiny meeting in September

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Reduced funding results in organisations becoming insolvent	Providing early notice of changes, and exploring opportunities to achieve efficiencies (e.g. through shared use of premises, seeking alternative funding)
Loss of services of high value to communities	Early consultation on potential consequences to inform risk mitigation including exploring alternative sources of funding / operating more efficiently

Section 5

What impact might the proposal have on the following?

<u>Service Delivery and future expected outcomes:</u>
<p>There may be a reduction in the services provided by organisations – for example they might need to reduce the range or volume of services provided to communities.</p> <p>Organisations might need to explore options around shared premises which means the location of service delivery may not be as readily accessible for people in some communities</p> <p>Officers will work with organisations to seek to minimise the impact on outcomes for communities</p>
<u>Organisation (other services)</u>
<p>There is potential that the proposals will result in some community organisations ceasing to operate. Others may explore potential for mergers / co-location</p>

<u>Workforce</u>
<i>Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models</i>
No impact on jobs within the Council, but there are likely to be job losses in voluntary, community and faith (VCF) groups
<u>Communities</u>
Changes to the operation of VCF groups will impact on services delivered to communities. For example, service users may need to travel further to access services, some services may need to be scaled down and others may require greater unpaid community involvement to remain sustainable.
<u>Service Users</u>
As Communities above

<u>Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)</u>
The proposals will reduce funding to a number of VCF groups. Work will be done with these to mitigate the impact for organisations, service users and the wider community, but there are likely to be some adverse impacts.
The proposals may result in some organisations ceasing to exist and others merging or co-locating. Some activities may no longer be delivered, or need to be scaled down. However, options will be explored for delivering services differently in order to minimize this.

Section 6

<u>Supplementary Information</u>
None

Section 7

<u>Consultation Information –</u> <i>This should include as a minimum the following:</i>
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i>
NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	N/A
Staff Consultation	N/A
Public Consultation	<p>A consultation meeting was held with affected organisations on 13 July 2015</p> <p>Letters were sent to affected organisations on 28/29 July confirming proposals in writing, with an impact assessment form which they were invited to complete and return by 21st August (though they may continue to contribute additional information to the consultation in advance of the meetings of Cabinet on 19th October and Council on 4th November). Groups have been requested to seek the views of their service users / the communities they serve.</p> <p>Each organisation had an individual meeting with Council officers in the first two weeks of August to discuss the proposals and their impact.</p> <p>A meeting about the proposals was held with ward councillors from St. Mary's, Waterhead and Werneth on 29 July.</p>
Service User Consultation	
Any other consultation	

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	Yes
Men or Women (include impacts due to pregnancy/maternity)	Yes
People who are married or in a civil partnership	No
People of particular sexual orientation/s	Yes
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	Yes
People in particular age groups	Yes
Groups with particular faiths/beliefs	Yes

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	Yes
EIA to be completed by:	Natalie Downs
By:	7 September 2015

Section 9

Responsible Officer:	Natalie Downs
----------------------	---------------

Support Officer Contact:	Ellen Marchbank-Smith
Support Officer Ext:	0161 770 5690


Cabinet Member Comments and/or approval	
Approved	

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	6 July 2015
-----------------------	-------------

Section 10

Approval by Cabinet Member

Cabinet Member:	Cllr Brownridge
Signed:	
Date:	6 July 2015

Equality Impact Assessment Tool

B012 Voluntary Community and Faith Sector Commissioning

Stage 1: Initial screening

Lead Officer:	Natalie Downs
People involved in completing EIA:	
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	Yes Date of original EIA: N/A

General Information

1a	Which service does this project, policy, or proposal relate to?	Priority Programme Funded voluntary, community and faith sector organisations delivering services, which support the Council's priorities. [Ref: B012 Voluntary, Community and Faith sector commissioning]
1b	What is the project, policy or proposal?	To reduce the overall service's commissioning/activity budget by 10%, which equates to a proposed financial saving of £80k.
1c	What are the main aims of the project, policy or proposal?	The proposals involve reductions in the funding for: <ul style="list-style-type: none"> • Impact 1: Voluntary sector infrastructure (£280k to £275k) through working with Voluntary Action Oldham to deliver efficiencies • Impact 2: Oldham Credit Union (£40k to £36k) through working with the organisation to increase income from loans / operating efficiencies [See Impact 1] • Impact 3: Community Transport (£50k to £45k) through achieving service efficiencies (NB This budget is being transferred to Commissioning to

		<p>explore opportunities for greater co-ordination around delivery of transport services)</p> <ul style="list-style-type: none"> • Impact 4-7: Community Centres and organisations (£135k to £101k) linked to the development of the Community Horizons project, which is piloting a more sustainable model for the operation of community facilities • Impact 8-10: Community festivals (£12k to £7k) – reducing number of events funded (3 to 2) and the maximum funding available. <p>Other projects and activities supporting development of stronger communities (£52k to £25k)</p>
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	Residents accessing services and/or undertaking volunteering with Priority Funded organisations affected by the proposals.

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Particular ethnic groups	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People of particular sexual orientation/s	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People in a Marriage or Civil Partnership	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>

Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
Other excluded individuals and groups Individuals facing isolation, carers, single parents, asylum seekers; health issues (including mental health)		<input type="checkbox"/>	x	

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input type="checkbox"/>	x

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes
1h	How have you come to this decision?	The budget proposals have the potential for some services to be removed if the Council and/or affected groups are unable to identify other opportunities to mitigate the impact.

Stage 2: What do you know?
What do you know already?
A summary of the potential impact of budget reductions for each organisation is given in the table at Appendix 2 below. This information was gathered through meetings with each organisation and completion of a simple proforma. Consultation with organisations and proposed budget reductions were based upon those submitted to Star Chamber.
What don't you know?
While not all the data is highly specific about numbers of service users and their characteristics, the information gathered provides a sufficient picture of who would be affected by changes to the funding of organisations.
Further data collection
There is no intention to undertake further data collection.

Summary (to be completed following analysis of the evidence above)				
Does the project, policy or proposal have the potential to have a <u>disproportionate</u> impact on any of the following groups? If so, is the impact positive or negative?	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>

Particular ethnic groups	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People of particular sexual orientation/s	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People in a Marriage or Civil Partnership	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Are there any other groups that you think that this proposal may affect negatively or positively?				
Other excluded individuals and groups Individuals facing isolation, carers, single parents, asylum seekers; health issues (including mental health)		<input type="checkbox"/>	x	

Stage 3: What do we think the potential impact might be?

Consultation information

This section should record the consultation activity undertaken in relation to this project, policy or proposal.

3a. Who have you consulted with?	All VCF organisations affected by the proposals have been consulted.
3b. How did you consult? (inc meeting dates, activity undertaken & groups consulted)	<p>Consultation has taken place as follows:</p> <p>Community Centres and Organisations / Third Sector Infrastructure Support / Community Support:</p> <p>First Stage Consultation:</p> <p>13th July: Consultation meeting with PPF funded organisations. 28th July: Letter outlining the consultation process and the Council's proposals emailed to PPF funded organisations. A simple EIA proforma was also sent to groups for completion. 31st July: Consultation meeting with Voluntary Action Oldham 5th August: Consultation meeting with Fatima Women's Association 6th August: Consultation meeting with Werneth and Freehold C.D.P 10th August: Consultation meeting with Greenacres C.C. 10th August: Consultation meeting with Community Transport 10th August: Consultation meeting with Oldham Play Action Group 11th August: Consultation meeting with Oldham Credit Union 12th August: Consultation meeting with Men Behaving Dably</p>

	<p>17th August: Consultation meeting with Coppice Neighbourhood Group.</p> <p>Community Festivals</p> <p>29th July: Letter outlining the consultation process and the Council's proposals emailed to community festival organisations. A simple EIA proforma was also sent to groups for completion.</p> <p>Website Consultation:</p> <p>4th August: The Council's budget proposals were uploaded onto the intranet, seeking resident's views. One responder gave general feedback in relation to the overall proposed savings in Co-operative and Neighbourhoods, none of which related directly to the proposals contained within this EIA. The suggestions were related to how the Council could save money overall and how projects, such as Bloom and Grow and the beach themed event were not essential.</p> <p>Second Stage Consultation:</p> <p>21st September:: Consultation meeting with Voluntary Action Oldham 28th September: Consultation meeting with Fatima Women's Assoc 1st October: Consultation meeting with Oldham Play Action Group 1st October: Consultation meeting with Men Behaving Dadly 1st October: Consultation meeting with Greenacres C.C. 5th October: Consultation meeting with Werneth and Freehold C.D.P 7th October: Consultation meeting with Coppice Neighbourhood Group. 7th October: Letter outlining the Council's proposals to be submitted to Cabinet and Council sent to all Priority Programme Funded groups and Community Festivals.</p>
--	--

3c. What do you know?

Please refer to Appendix 2.

3d. What don't you know?

While not all the data is highly specific about numbers of service users and their characteristics, the information gathered provides sufficient detail of who would be affected by changes to the funding of organisations.

3e. What might the potential impact on individuals or groups be?

(think about disability, race, gender, sexual orientation, transgender, age, faith or belief and those on low incomes and other excluded individuals or groups)

Generic (impact across all groups)

Disabled people	Refer to Section 4: Impact: 1: Voluntary Action Oldham Impact: 2: Oldham Credit Union Impact: 3: Community Transport Impact: 4: Fatima Women's Association Impact: 7: Coppice Neighbourhood Group
Particular ethnic groups	Refer to Section 4: Impact: 1: Voluntary Action Oldham Impact: 4: Fatima Women's Association Impact: 5: Oldham Play Action Group Impact: 6: Men Behaving Dadly Impact: 7: Coppice Neighbourhood Group Impact: 9: Oldham Play Action Group – National Play Day
Men or women (include impacts due to pregnancy / maternity)	Refer to Section 4: Impact: 4: Fatima Women's Association Impact: 5: Oldham Play Action Group Impact: 6: Men Behaving Dadly
People of particular sexual orientation/s	Refer to Section 4: Impact 10: Oldham Pride
People in a Marriage or Civil Partnership	No direct impact is anticipated on this group
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	Refer to Section 4: Impact 10: Oldham Pride
People on low incomes	Refer to Section 4: Impact: 1: Voluntary Action Oldham Impact: 2: Oldham Credit Union Impact: 4: Fatima Women's Association Impact: 5: Oldham Play Action Group Impact: 6: Men Behaving Dadly Impact: 7: Coppice Neighbourhood Group Impact : 8: Oldham Carnival & RootZ Festival Impact: 9: Oldham Play Action Group – National Play Day
People in particular age groups	Refer to Section 4: Impact: 2: Oldham Credit Union Impact: 3: Community Transport Impact: 4: Fatima Women's Association Impact: 5: Oldham Play Action Group Impact: 6: Men Behaving Dadly Impact: 7: Coppice Neighbourhood Group Impact : 8: Oldham Carnival & RootZ Festival Impact: 9: Oldham Play Action Group – National Play Day
Groups with particular faiths and beliefs	Impact: 4: Fatima Women's Association
Other excluded individuals and groups Individuals facing isolation, carers, single	Refer to Section 4: Impact: 3: Community Transport Impact: 4: Fatima Women's Association

parents, asylum seekers; health issues (including mental health)	Impact: 6: Men Behaving Dadly Impact: 7: Coppice Neighbourhood Group
--	---

Stage 4: Reducing / mitigating the impact
As a result of what you have learned, what can you do to minimise the impact of the proposed changes on equality groups and other excluded / vulnerable groups, as outlined above?

4a. Where you have identified an impact, what can be done to reduce or mitigate the impact?	
Impact 1: Voluntary Action Oldham (VAO): Impact on low income households, particular ethnic groups and people with a disability.	Since VAO was originally consulted on 31 st July on a proposed budget reduction of £28k (from £280k to £252k), additional resources have been secured and this therefore mitigates some risk to the organisation. The proposal is to reduce funding to VAO by £5k (from £280k to £275k).
Impact 2: Oldham Credit Union: Impact on low income households affecting children and young people, older people, families, disabled	Identifying possible alternative funding sources to secure resources for additional community development, which in turn will increase the membership/savings/loans. If alternative monies cannot be secured, then there is no opportunity to mitigate the impact arising from this proposal.
Impact 3: Community Transport Impact on older people, people with a disability, socially isolated	The commissioning of Community Transport will be transferred to the Joint Commissioning People Service from 2016/17. Whilst this will not initially mitigate the impact of the budget reduction, relocating the commissioning of this service will ensure that is aligned with other services delivering activities to these client groups. In addition, it may offer more commissioning opportunities to Community Transport in the future.
Impact 4: Fatima Women's Association (FWA): Impact on women, particular ethnic groups, low income households, people with a disability; older people	Since FWA was originally consulted on 5 th August on a proposal to withdraw funding to the organisation, additional resources have been secured and this therefore mitigates some risk to the organisation. The proposal is now to reduce funding to FWA from £16.2k to £8.1k. Funding will be provided to FWA in 2016/17 as development monies in order to allow additional time to secure funding from other sources.
Impact 5: Oldham Play Action Group (OPAG): Impact on low income households, children, women, particular ethnic groups.	PPF funding allocated to OPAG is for a specific project in Waterhead and falls within the 'Big Local' programme area. There is therefore an opportunity for OPAG to apply to Big Local to continue to this project. Discussions have taken place to try and identify alternative funding streams, including the possibility of amending OPAG's constitution so that they can undertake work outside the Oldham Borough. There is also potential to explore undertaking 'private' functions (i.e. children's parties and events) to increase revenue. OPAG is an anchor tenant at Greenacres Community Centre. The proposal for 2016/17 is to increase funding to Greenacres C.C. and it will be at their discretion whether they propose to reduce rental charges to OPAG to offset the reduction in funding. If alternative monies cannot be secured, then there is no opportunity to mitigate the impact arising from this proposal.
Impact 6: Men Behaving Dadly (MBD): Impact on men, young people, low income households, particular	Men Behaving Dadly is located within the 'Big Local' programme area. There are opportunities for MBD to apply to Big Local to secure additional resources. The District Team will continue to try and identify alternative funding opportunities for MBD, although it is acknowledged that the delivery of alternative projects might not necessarily take place in Higginsshaw and

<p>ethnic groups.</p>	<p>instead, delivered at different geographic locations.</p> <p>MBD is an anchor tenant at Greenacres Community Centre. The proposal for 2016/17 is to increase funding to Greenacres C.C. and it will be at their discretion whether they propose to reduce rental charges to MBD to offset the reduction in funding.</p> <p>If alternative monies cannot be secured, then there is no opportunity to mitigate the impact arising from this proposal.</p>
<p>Impact 7: Coppice Neighbourhood Group (CNG.)</p> <p>Impact on asylum seekers, disabled people, low income households, particular ethnic groups.</p>	<p>CNG needs to expand its business and increase revenue in order to develop a sustainable business model.</p> <p>Initial discussions have taken place with a local VCF organisation that demonstrates strong leadership and governance, with a view to exploring options regarding the future use of the building and any possibility of collaboration with the existing management group. If this is not a viable option, the future of Coppice Neighbourhood Group and the Community Centre is uncertain and the organisation is likely to cease as a result.</p> <p>Initial discussions have also taken place with Early Years to explore the possibility of increasing the offer at Coppice Community Centre. It is unlikely that the offer would be expanded under the current management arrangements, but there is potential for this to be considered if the governance changes in due time. Increasing the Early Years provision would increase the Centre's income and reduce the need for Council funding.</p>
<p>Impact 8: Festival Activity Oldham Carnival and RootZ Festival</p> <p>Impact on children and young people, low-income households.</p>	<p>The organisation states that there will be no adverse effect on equality groups and other vulnerable groups and that the budget reductions will be offset against stage performance fees. It would be suggested that if there was an impact arising from the proposals, young people and low-income households would be affected.</p>
<p>Impact 9: Festival Activity Oldham Play Action Group.</p> <p>Impact on children, low income households, particular ethnic groups</p>	<p>Discussions have taken place with OPAG regarding alternative funding sources available to deliver the National Playday event. Options for charging for certain aspects of the event were also explored to raise additional revenue.</p> <p>If alternative monies cannot be secured, then there is no opportunity to mitigate the impact arising from this proposal.</p>
<p>Impact 10: Festival Activity Oldham Pride</p> <p>Impact on people of a particular sexual orientation / people who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment</p>	<p>Oldham Pride did not submit any information to inform the development of the Equality Impact Assessment. Whilst the proposals would primarily affect the LGBT community, the impact of the proposals in delivering the event are unknown. It would be suggested that if there was an impact arising from the proposals, people of a particular sexual orientation / people who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment would be affected.</p> <p>In the event that the event receives reduced or no funding in 2016/17, the event organisers would need to seek additional funding from other sources e.g. grant funding, business sponsorship etc.</p> <p>If alternative monies cannot be secured, then there is no opportunity to mitigate any impact arising from this proposal.</p>

4b. Have you done, or will you do, anything differently as a result of the EIA?

Options identified above will still be explored to mitigate the impact. However, the budget options will still be presented to Council for approval.

4c. How will the impact of the project, policy or proposal and any changes made to reduce the impact be monitored?

The impact will be monitored through quarterly monitoring meetings. Additional meetings will be arranged as necessary to manage the impact arising from the proposals.

Conclusion

This section should record the overall impact, who will be impacted upon and the steps being taken to reduce / mitigate the impact

There is potential for a disproportionate adverse impact across a number of the protected groups. In some cases, there are potential mitigations, however, this is not the case in all instances.

Stage 5: Signature

Lead Officer: Natalie Downs Date: 02/10/2015

Approver signature: Bruce Penhale Date: 02/10/2015

EIA review date: January 2016

APPENDIX 1: Action Plan and Risk Table

Action Plan

Once you have decided on the course of action to be taken in order to reduce or mitigate the impact, please complete the action plan below (An example is provided in order to help you)

Number	Action	Required outcomes	By who?	By when?	Review date
1	Organisations informed of the budget proposals to be submitted to Council for approval.	➤ Organisations fully understand the implications for their respective organisations.	Natalie Downs	September 2015	N/A
2	District Team to explore options for alternative funding for organisations affected by the proposals	➤ To mitigate the impact arising from the budget proposals upon organisations and service users	District Team	December 2015	N/A
3	Organisations encouraged to identify alternative sources of funding	➤ To secure additional funding to maintain service delivery.	Organisational responsibility	December 2015	N/A

Risk table

Record any risks to the implementation of the project, policy or proposal and record any actions that you have put in place to reduce the likelihood of this happening.

Ref.	Risk	Impact	Actions in Place to mitigate the risk	Current Risk Score	Further Actions to be developed
R1.1	Organisations and/or services cease to exist	Negative impact upon the Council as a consequence. Reductions in staffing and volunteering Residents have reduced access to services.	Alternative sources of funding are being sought to mitigate the risk.	A II	



APPENDIX 2

Impact of budget proposals on organisations and service users

PPF Theme:	Organisation:	PPF Allocation 2015/16:	Proposed Allocation 2016/17:
Third Sector Infrastructure	Impact 1: Voluntary Action Oldham	£280k	£275k
<p>Description of project activity:</p> <p>Voluntary Action Oldham (VAO) is a member of the National Association of Voluntary and Community Action and is the recognised support and development agency for Oldham. VAO is a charity and company limited by guarantee and has a workforce of 12fte. Using the infrastructure funding as a core resource VAO lever over 50% of other resources to support its charitable work form a range of commissioned activities, grants and income generation.</p> <p>VAO connects people, ideas and resources and aims to build vibrant communities by increasing volunteering and strengthening social action. We provide;</p> <ul style="list-style-type: none"> • A volunteer centre that brokers over 1000 people a year into opportunities and provides bespoke pathways to increase social action. VAO secures grants to provide additional pathways for the most excluded people in Oldham such as people with a criminal record, long term unemployed and where language can be a barrier. • A development team that gives practical help in good governance, quality assurance, securing funding and managing finance ensuring there is effective and safe practice • Partnership services that ensure that the communities of interest that voluntary, community and faith groups support are given a voice and are connected as equal partners with public and private organisations. We lead Oldham’s Voluntary Sector Provider Forum – Society Works, Oldham’s Voluntary, Community and Faith Partnership and coordinate Oldham’s Poverty Action Group and Health and Wellbeing Advisory Group and the Friends of Parks and Green Spaces Network. We develop new ways of co-designing initiatives with local people and leaders such as developing a BME providers group that is sub contracted to deliver health initiatives such as increasing access to cancer screening and researching end of life preferences. • Strategic partnership resources to help Oldham achieve its ambitions for a Cooperative Borough and develop initiatives that build community and individual resilience. We represent the VCSE at Greater Manchester Devolution Reference Group and ensure the needs of communities in Oldham are being reflected. <p>VAO are the trustees of the Action Oldham Fund which has an endowment of £650,000. Working in partnership with key stakeholders, VAO distributes a range of grants to support community action, including:</p> <ul style="list-style-type: none"> - helping to develop the skills and knowledge to improve quality of life and help people to make a difference to their community; - promoting well-being amongst Oldham Borough residents - Promoting the ability of communities to manage change and to help themselves. <p>VAO also works with local businesses to make it easier for them to develop more corporate social engagement in Oldham and provide a practical brokerage service to pass on goods, skills and support local businesses can offer local community action.</p>			

Impact of 10% reduction in funding on service delivery:

A 10% cut across the 3 main services described above; volunteering, development and partnerships would mean;

- Less resource to lever in grant funding to support the most excluded people in volunteering and a reduction in the number of face to face brokerage hours we can offer. Approximately 10% less across the year would equate to 100 people not brokered into opportunities. For example VAO's New Horizons project works with 60 ex-offenders a year where over 85% do not go on to re-offend. The additional benefits to improved mental health, confidence and their 'civic' understanding are demonstrated through powerful case studies and stories with over 50% that continue to volunteer post the intensive support they receive with us.
- A reduction in the development service will mean limited capacity to provide services that ensure safe and effective practice within community organisations. The current service providers support packages for over 250 groups in Oldham. A cut of 10% is likely to mean 25 more groups a year will not have the support they need to effectively manage and sustain their organisations. Part of this service provides practical support to help charities manage their money and legal responsibilities well. A cut to this service offer will increase the risk of poor financial management and monies not being most effectively used to make a difference to people living in Oldham. This service helps to lever in additional resources and provide support on community fundraising. A 10% reduction in the resources that small community groups receive may equate to approximately £10k. When multiplied with the volunteering that this type of resource underpins and levers in it will reduce cooperative action led by communities by at least 10%.
- A cut to the partnerships offer will mean limited capacity to maintain the effective action groups and thematic work of the poverty action group, limit our ability to work with Society Works on market development and our ability to develop new resources and opportunities for Oldham Partnership on reducing social isolation and increasing community resilience.

Equality Impact of 10% reduction in funding:

VAO's work and the services our members deliver directly impact the most vulnerable people living in Oldham.

Using a recent footfall analysis of the people using our service it is likely that a cut by 10% to the volunteer brokerage service will predominately adversely affect people on low incomes (70% of people using the service), BME residents (27%) and people with a disability (18%).

According to the State of the Sector research conducted by Sheffield Hallam University (2013) that we commissioned it shows that a significant proportion of groups in Oldham support children and young people (over 60%) and that other equalities groups such as BME, disabilities, refugees and asylum seekers, people with mental health problems are a core focus of the work of the groups that we support. We estimate that over 80% of the groups we support help people facing multiple and complex needs and would be disproportionately adversely effected. The vast majority of activities delivered by the VCF groups in Oldham are targeted at people on a low income and support people to access help at low or no cost.

38% of the support we provided to groups in Oldham last year were to groups that support Oldham's BME communities. A cut in 10% of this service would mean a disproportionate cut to the support and quality of services that BME communities will receive from their local community organisations.

Reducing funding by 10% will limit VAO's ability to facilitate and coordinate action groups like the Poverty Action Group that has supported the development of practical joint initiatives that enable people in crisis to receive support and borough partners together to work with the DWP on reducing the amount of sanctions that Oldham residents face – therefore reducing the burden on public sector support services.

PPF Theme:	Organisation:	PPF Allocation 2015/16:	Proposed Allocation 2016/17:
Third Sector Infrastructure	Impact 2: Oldham Credit Union	£40k	£36k
Description of project activity:			
<p>The Credit Union exists to promote greater financial equality in Oldham Borough by providing accessible, secure savings and an ethical source of credit at fair and reasonable rates of interest. It particularly benefits people who otherwise would be financially excluded and therefore have difficulty accessing mainstream financial services, and might otherwise become dependent upon loan sharks charging extortionate rates of interest</p>			
Impact of 10% reduction in funding on service delivery:			
<p>OCU's ability to maintain staffing levels is dependent on the ongoing performance of the organisation in generating income. The current Business Plan lays out a strategy for growth with the aim of driving the organisation towards sustainability and ultimately reducing the reliance on external grant funding. This strategy has had a measure of success with significant increases in membership, savings and loans over the past 2 years. However this still leaves the organisation reliant on grant funding whilst it builds its capacity.</p>			
<p>OCU promotes financial inclusion by providing access to basic financial services. In order to achieve this goal they need to expand the service offering beyond Savings and Loans to include payment services such as the Jam Jar Budget Account, the Pre-paid Visa Card and Saturday morning opening. The provision of these services has been dependent on providing an adequate level of staffing resource.</p>			
<p>A sustained reduction in grant income would affect the ability to maintain this level of staffing resource with implications for maintaining this level of service offering.</p>			
<p>As a community business Oldham Credit Union is well placed to support volunteering and work experience opportunities. Volunteering is something they encourage and promote via their community engagement activities. However this activity is increasingly difficult to support adequately within existing resources. Funding reductions would further squeeze OCU's ability to support this activity.</p>			
<p>OCU provides a Borough wide service, available to anyone who lives or works in Oldham.</p>			
<p>The majority of our members are drawn from pre-dominantly low income groups in some of the most deprived wards in the Borough</p>			
<p>The services provided by OCU address several key policy areas. They</p>			
<ul style="list-style-type: none"> • Build Resilience and promote behaviour change - through the promotion of a savings culture, affordable credit, schools savings clubs. • Improve Health and Well-being - The impact of financial issues on health and well-being particularly stress and mental health are well documented. • Combat Financial Exclusion - Through access to entry level financial services - Basic savings account that allows for direct payment of benefits and wages addressing the issue of the unbanked and removing a barrier to employment, Jam Jar Budget Account – enabling development of budgeting 			

skills. Pre -paid Visa Debit Card - helping to combat the poverty premium.

- Worklessness - Removal of barriers to employment through the provision of entry level bank accounts, helping with work related costs in the transition to employment . Providing good quality volunteering and work experience opportunities.

As indicated above Oldham Credit Union is facing some key challenges namely growing the enterprise sufficiently to reduce reliance on external funding whilst striving to meet its' social goals within an increasingly tight fiscal and regulatory environment.

The need to absorb increased costs due to reductions in grant income and increased regulatory provisions are likely to impact on the level and scope of the services they are able to offer moving forward. A reduction in their service offering would therefore impact disproportionately on the groups identified above.

Equality Impact of 10% reduction in funding:

The majority of OCU's members are drawn from pre-dominantly **low income** groups in some of the most deprived wards in the Borough. Issues of financial exclusion are closely linked to areas of deprivation. Within these areas the issue cuts across almost all sections - Children, young people, the elderly, families, the disabled.

Research indicates about one in five Oldham residents don't have access to a bank, building society or credit union account. Residents without an account were more likely to be in fair or poor health, to have a disability, to be concerned about their financial situation, and to not be able to afford to heat their homes.

PPF Theme:	Organisation:	PPF Allocation 2015/16:	Proposed Allocation 2016/17:
Third Sector Infrastructure	Impact 3: Community Transport	£50k	£45k
<p>Description of project activity: Community Transport is a national charity and social enterprise concerned with generating and sustaining transport activities, in partnership with others, that promote social inclusion, stronger communities and opportunities for individuals. CT delivers services that:</p> <ul style="list-style-type: none"> ▪ Meet mobility and access needs ▪ Extend new opportunities; and ▪ Enable more active and cohesive communities. <p>For the duration of the grant, CT provides the following services in Oldham:</p> <ul style="list-style-type: none"> ▪ Promobility (Shopmobility) – the hire of scooters and wheelchairs on a daily basis to people with mobility difficulties, whether through permanent disability or through short, medium or long-term illness ▪ Dial-a-ride: a pre-booked, door-to-door transport service for individuals with complex mobility needs, particularly people who use wheelchairs. ▪ Group travel: minibus travel for registered user groups. CT has a fleet of 12 (mainly wheelchair accessible) minibuses in Greater Manchester, 3 of which are permanently based in Oldham. ▪ Volunteering opportunities: CT provides opportunities and appropriate training, for people wishing to access volunteering opportunities with a view to facilitating a return to paid employment or simply wishing to give something back to the community ▪ Training – utilising its dedicated G.M. trainer, CT provides training to the national recognised MIDAS standard to third sector and statutory organisations in the Borough. 			
<p>Impact of 10% reduction in funding on service delivery:</p>			
<p>A 10% reduction in funding in 2015/2016 would not lead to a redundancy situation, unless any proposed reduction in hours was unacceptable to staff through a consultation exercise. 2 individuals would be affected.</p> <p>A reduction in the number of hours that the Promobility service is available on each of the 4 days on which it currently operates, or, a reduction to 3 days of operation per week would be proposed. Analysis of use of the scheme by Oldham residents has highlighted that Thursdays attract the least users, which would leave days of operation as Mondays, Wednesdays and Fridays. Contractually this would be less attractive to employees, and is proportionately harder to accommodate, and so a proposal may include Monday to Wednesday or Wednesday to Friday operating.</p> <p>Feedback from users states that many residents simply would not visit Oldham centre without the access that a wheelchair or scooter provides; reducing the days of operation from 4 to 3 will have a financial impact on traders based in the centre. (39% of users who provided feedback in the last 2 user surveys said that they use the services to access the town centre for shopping).</p> <ul style="list-style-type: none"> • Preserving the availability of the Promobility service would mean a reduction in the availability of the Dial-A-Ride service, again in terms of hours of 			

operation over 6 days, or by reducing the number of days on which it is available to 4 ½ or 5.

There is no anticipated reduction in volunteering. 3 volunteers are directly and regularly involved at present (limited due to space). They provide, on average, 10 hours per week and it is anticipated that this would not reduce.

Users of the service include any residents of Oldham who experience disability or mobility issues, for whom accessible transport or the use of scooters or wheelchairs allows access to the town centre and beyond. Through the provision of accessible minibuses, local community groups are able to extend their services to local residents, ensuring a wide reaching impact for the Oldham community.

Provision of accessible transport with a regular and known driver provides for additional security and a sense of safety that may not be experienced on other forms of less individualised transport. The feedback obtained from users of the services provided by Community Transport suggests that independence and choice are valued most highly and would be denigrated should the services be reduced or simply not be available. Where access to health appointments is limited to what can be for some, expensive taxi services, then preventative interaction is likely to reduce, which means that health intervention then happens at a later stage of illness, where impact on the resources of the Health Service becomes more acute. Access to leisure and learning contributes to mental wellbeing and inclusion, delaying or reducing residential care provision.

Based on the 2 most recent quarterly user surveys: 21% of users will struggle to access their finances; 17% would not be able to access social contact with friends; 11% would not be able to access health appointments without significant cost.

On terms of what the service means to local residents: 23% said that the services allowed them to retain independence; 20% said that they allowed them to be in control of their own choices; 15% said that they found it easier to get around; 10% said that their quality of life was improved by having accessible transport services

If the services were no longer available: 39% said that they would be reliant on others; 22% said that they would be isolated; 18% said that they would find it difficult to get out at all

Asked how they would manage without the services: 35% said that they would have to rely on relatives which would be restrictive; 22% said that they would not be able to leave home; 21% said that they would be restricted in where they could access

Specific comments included: "it would be a disaster for me if I could not attend Heathbank Day Centre" "Wouldn't come into Oldham" "Would be housebound" "Would need to use a taxi but could only afford to do that once a month"

Equality Impact of 10% reduction in funding:

A reduction in funding will disproportionately affect those residents of Oldham who experience mobility issues, or who experience health issues which prevent independent travel. A reduction in funding of the services and facilities available to local residents, such as day care centres will have an impact on the physical

and mental wellbeing of residents for whom those services are a lifeline. A reduction in the ability to travel to what services remain will serve to compound that impact.

Those residents who experience a **disability** will be disproportionately affected by the proposed funding reduction. Many of those experiencing a disability are older members of the community, who may be on limited income and may not have relatives or friends on whom they can rely for transport, and so would also be disproportionately affected.

Reducing services for people with a disability has the potential to indirectly impact upon carers and family members.

PPF Theme: Community Centres and Organisations	Organisation: Impact 4: Fatima Women's Association	PPF Allocation 2015/16: £16,200	Proposed Allocation 2016/17: £8,100
Description of project activity: Provision of a community space, supporting the needs of the area of East Oldham with flexible opening hours accessible to organisations delivering services, including evenings and weekends; Offer a range of activities related to health and well-being, education and training, social welfare and volunteering to the local community; Provide a venue for a number of provider services Provide a number of volunteer opportunities via direct project delivery and community centre management			
Impact of 10% / 50% / 100% reduction in funding on service delivery:			
10%	50%	100%	
6 staff members equivalent to 2 full time hours will need to be made redundant. Currently, 14 volunteers deliver 118 hours per month. This would reduce to 6 volunteers delivering 24 hours per month. The association is the only organisation in the Oldham East area that provides services to women only, especially of BME background. It currently benefits 495 different individuals each year. The association needs to sustain many existing projects: ESOL; Spoken English Programme; Employability Skills Programme; Health and Wellbeing Programme; 50+ Group; NLDCF Programme; Trips; Supervision Management To sustain 0.4 full time equivalent will enable the worker to deliver the above. Small trusts and foundations have given long term small grants to deliver these programmes and FWA wants to be	7 staff members equivalent to 2.2 full time hours will need to be made redundant. Currently, 14 volunteers deliver 118 hours per month. This would reduce to 3 volunteers delivering 12 hours per month. With the 50% reduction on top of other funding coming to an end, the association will only be able to benefit an estimated 33 individuals per year. This will impact on all the services we have listed under 10% reduction. Children and young people – may be affected as although BBC Children In Need funding is for a further 2 years, FWA will need to provide support to workers and volunteers and help to ensure the safeguarding of children.	7 staff members equivalent to 2.4 full time hours will need to be made redundant. No staff remaining for women's work. Currently, 14 volunteers deliver 118 hours per month. 3 volunteers will remain delivering 12 hours per month to ensure The BBC Children in Need Project is delivered. No delivery to women at all. Children and young people – may be affected as although BBC Children In Need funding is for a further 2 years, FWA will need to provide support to workers and volunteers and help to ensure the safeguarding of children.	

<p>able to maintain this delivery. This is only possible if the association has funding to sustain a staff position to co-ordinate these programmes.</p> <p>With the 10% reduction on top of other funding coming to an end the association will only be able to benefit an estimated 66 individuals per year.</p>		
Equality Impact of reduction in funding:		
10%	50%	100%
<p>Ethnicity: FWA is open to people of all communities but is predominantly accessed by women of Pakistani and Bangladeshi heritage.</p> <p>Gender: Women aged 18 + - 67% of current service users will be affected.</p> <p>Age: Women of pensionable age – 30% less pensioners will be able to access FWA.</p> <p>Disability: Disability - 90% of current users that are disabled will be affected.</p> <p>People of a particular faith or belief: Muslim women mainly of Pakistani and Bangladeshi heritage - 67% of current service users will be affected.</p> <p>Low income: Families on low income - 67% of current service users will be affected. A high percentage of women claim tax credits. They benefit by finding adequate and relevant training, employment, cook healthily</p>	<p>Gender: Women aged 18 + - 73% of current service users will be affected.</p> <p>Age: Women of pensionable age - 60% of current service users will be affected.</p> <p>Disability: Disability - 95% of current service users will be affected.</p> <p>People of a particular faith: Muslim women mainly of Pakistani and Bangladeshi heritage - 73% of current service users will be affected.</p> <p>Low Income: Families on low income - 73% of current service users will be affected.</p> <p>Single Parents: Single Parents - 60% of current service users will be affected.</p> <p>Health issues (including mental health) Women with health issues and suffering from depression - 80% of current service users will be</p>	<p>Gender: Women aged 18 + - 100% of current service users will be affected.</p> <p>Age: Women of pensionable age Women aged 18 + - 100% of current service users will be affected.</p> <p>Disability: Disability Women aged 18 + - 100% of current service users will be affected.</p> <p>People of a particular faith: Muslim women mainly of Pakistani and Bangladeshi heritage - 100% of current service users will be affected.</p> <p>Low Income: Families on low income - 100% of current service users will be affected.</p> <p>Single Parents: Single Parents – 100% of current service users will be affected.</p> <p>Health issues (including mental health) Women with health issues and suffering from</p>

<p>on a budget, manage finances etc.</p> <p>Single parents: Single Parents-30% of current service users will be affected. Reduction in support will adversely impact on their children.</p> <p>Health issues (including mental health) Women with health issues and suffering from depression - 50% of current service users will be affected.</p> <p>Age: Children and young people – may be affected as although BBC Children In Need funding is for a further 2 years, FWA will need to provide support to workers and volunteers and help to ensure the safeguarding of children.</p>	<p>affected.</p> <p>Age: Children and young people – may be affected as although BBC Children In Need funding is for a further 2 years, FWA will need to provide support to workers and volunteers and help to ensure the safeguarding of children.</p>	<p>depression - 100% of current service users will be affected.</p> <p>Age: Children and young people – may be affected as although BBC Children In Need funding is for a further 2 years, FWA will need to provide support to workers and volunteers and help to ensure the safeguarding of children.</p>
--	--	---

To access Fatima Women Association's Annual Report for 2014/15, please click on the following icon:



ANNUAL REPORT
FATIMA WOMENS AS

PPF Theme:	Organisation:	PPF Allocation 2015/16:	Proposed Allocation 2016/17:
Community Centres and Organisations	Impact 5: Oldham Play Action Group	£9,738	£0
Description of project activity:			
<ul style="list-style-type: none"> ▪ To develop and deliver regular junior youth activities for the Waterhead area. ▪ Roll out of a programme of training for creative practical skills for staff and volunteers involved in the junior youth club network. This will include 5 training events for groups from Oldham working with children, young people and families. ▪ Incorporate activities into local engagement and consultation programmes such as the Big Local, other consultation programmes relating to the area and local meetings Provision of a number of volunteer opportunities via direct project delivery. 			
Impact of 10% / 50% / 100% reduction in funding on service delivery:			
10%	50%	100%	
<p>Reduce provision by 45 hours and reduced hours for sessional team. Reduced support for Co-ordinaton and Financial administration. Initial loss of 5 sessions</p> <p>12 events would be lost.</p> <p>Figures from OPAGs last year returns reported 24 individuals, some of whom progressed to become volunteers involved in community based play were supported through training and advice.</p> <p>Play is a highly effective vehicle to bring people together across generational, cultural and social communities. With this level of reduction the team will be able to commit less time to facilitating joint projects.</p> <p>Wellbeing activities will be lost as outdoor, physical play activities and activities in parks and open spaces are reduced.</p> <p>General social and emotional health promotion reduced due to less facilitated play and freetime opportunities. Affecting approx. 100</p>	<p>Reduced hours from 432 to 216 for sessional team of 3..</p> <p>Reduced support for Co-ordinaton and Financial administration.</p> <p>Delivery reduced to school holiday periods only</p> <p>Ability to recruit and support existing volunteers and to recruit new volunteers severely restricted.</p> <p>Currently people drawn in through sessions and the 4 opendays/arts and training events linked with this project 2 events would be lost.</p> <p>Figures from OPAGs last year returns reported 24 individuals, some of whom progressed to become volunteers involved in community based play were supported through training and advice. This would no longer have adequate staff support to continue the development and current support would be wound down.</p> <p>Play is a highly effective vehicle to bring people together across generational, cultural and social communities. With this level of reduction the team</p>	<p>Total loss of 432 hours for sessional workers covering this project. Reduced support for Co-ordinaton and Financial administration.</p> <p>Loss of all sessions from Waterhead Park.</p> <p>No support available to clusters of volunteers working to develop community based play across Oldham provision</p> <p>Currently people drawn in through sessions and the 4 opendays/arts and training events linked with this project. All 4 sessions would be lost.</p> <p>Figures from OPAGs last year returns reported 24 individuals, some of whom progressed to become volunteers involved in community based play were supported through training and advice. All support for this work would be forced to cease immediately and volunteers and small local organisations left without support, direction or alternative organisations to offer development support. This would be lost as core team remaining hours will focus on income generation</p>	

<p>Children’s development is significant in terms of all aspects of OPAGs operations with a range of activities selected to support children’s social, physical, creative and emotional development.</p> <p>Last years monitoring reports approx. 100 individual children participating.</p> <p>A 10% reduction will represent less direct opportunities for children to positively engage in OPAG run activities and in a significant reduction of support to community groups resulting in further cuts to quantity and potentially quality of opportunities offered.</p> <p>98 people participated in training over the last financial year. Reduction at this level will have the impact of a reduced number of sessions delivered in order to mitigate the shortfall. Loss of 1 of the 4 key arts/training events</p> <p>Overall consequence is the small yet significant reduction and no new opportunities generated in services Loss of 5 sessions and 1 arts training session affecting 100 and 24 adults children</p>	<p>will be unable to commit any dedicated time to facilitating joint projects, cross cultural open days and key events will be lost.</p> <p>Wellbeing activities will be lost as outdoor, physical play activities in parks and open spaces are reduced to holiday periods only as restricted funding for such activities concludes.</p> <p>General social and emotional health promotion reduced due limited facilitated play and freetime opportunities. Affecting approx. 100</p> <p>Leisure opportunities seriously reduced to holiday periods only. Affecting 100 plus participants</p> <p>A 50% reduction will represent a wind down of direct opportunities for children to positively engage in OPAG run activities and in a significant reduction of support to community groups resulting in further cuts to quantity and potentially quality of opportunities offered.</p> <p>Training is a key component of OPAG support to volunteers and community groups. 24 local people participated in training over the last financial year. Reduction at this level will limit capacity of core</p>	<p>Play is a highly effective vehicle to bring people together across generational, cultural and social communities. With this level of reduction sessions generally will be massively reduced and this will leave us without a focus or opportunities to facilitate and encourage greater cohesion. It will remove one of the most effective and natural arenas for greater cohesion and shared interactions.</p> <p>Wellbeing activities will be lost as outdoor, physical play activities are stopped with immediate effect. Adversely affecting childhood obesity agenda, emotional wellbeing and connection with outdoors. General social and emotional health promotion reduced due to lack of facilitated play and freetime opportunities. Affecting 100</p> <p>Leisure opportunities will be delivered only though external funded opportunities, charged at market rates. Affecting 100 plus participants</p> <p>Children’s development is significant in terms of all aspects of OPAGs operations with a range of activities selected to support children’s social, physical, creative and emotional development.</p> <p>A 100% reduction will represent a halt to all current direct opportunities for children to positively engage in OPAG run activities and in a significant reduction of support to community groups resulting in further cuts to quantity and potentially quality of opportunities offered.</p> <p>Only activities charged at external market rates will be delivered by the team as we are forced to focus on income generation and the expense of development and values.</p>
---	---	--

	<p>staff. There will limited follow through for further and other subsequent participants at a loss of potential volunteer time invested into Oldham voluntary sector to support activities for children and young people. Loss of two key arts/training events</p> <p>Overall consequence is the substantial reduction of all services for children , volunteers and community groups, affecting 100 children and 24 adults. Loss of all term time activity as we move to holiday provision only and loss of 2 of the 4 arts/training days</p>	<p>Training is a key component of OPAG support to volunteers and community groups. 98 people participated in training over the last financial year. Reduction at this level will result in a struggle to co-deliver training with Life Long Learning with whom we have again secured funding as a community partner. Loss of 4 training/arts events</p> <p>Overall consequence is the drastic reduction in levels of activity delivered, leaving no start up or subsidised activity and focusing solely on income generation and selling market rate services. Detrimental impact on free to the public services. Affecting 100 children plus 24 adults. Loss of all provision in Waterhead Park and all of the 4 arts/training events</p> <p>The current funding of activities in Waterhead Park and linked training, community development opportunities from Oldham Council represents more than simply the direct delivery of activities to that value. It represents the loss of the investment that facilitates the consistency, continuation and development of all areas of OPAGs operations, which enables the generation of all other external funding, commissions and sales.</p>
Equality Impact of reduction in funding:		
10%	50%	100%
<p>Other small community organisations that benefit from OPAG support to set up, plan, organise and develop community activities will be most affected in the short term. There will be no offers to new clusters of volunteers for support as we will be forced to shift focus to externally paid for services. The answer cannot be a simplistic ‘volunteers can</p>	<p>Other small community organisations who in the early stages of development who currently benefit from OPAG support to set up, plan, organise and develop community activities will have only the most limited access to support and may cease to operate.</p>	<p>Other small community organisations who benefit from OPAG advice and practical help to set up, plan, organise and develop community activities will have no further support from OPAG and no alternative source for such development support.</p> <p>Loss of all of the 4 arts/training events</p>

<p>take on greater responsibility for provision of services'. This will take time, proper resourcing, training and nurturing support to adequately equip volunteers to do this. Loss of 1 of the 4 arts/training events</p> <p>Age: Children primarily aged 5 – 13 years old, who are already less well served for play and free-time opportunities without cost than other age ranges. No new activities starting. Children need localised provision and this approach also generates interest, support from parents/carers and draws people in as volunteers.</p> <p>Loss of 5 sessions annually for 100 children</p> <p>Low Income Households: Families on low incomes will be the first to be adversely affected by reduction in free opportunities offered at a community level, close to home and without incurring additional transport costs which may exclude them. This impact of reduction may be patchy initially. Loss of 5 sessions annually</p> <p>Social Isolation: Families experiencing social isolation will experience in a small yet significant reduction of direct opportunities 5 sessions lost, 1 arts/training session lost</p> <p>Contact with playworkers as a regular, positive presence for children and with an understanding of safeguarding will be reduced.</p> <p>Gender:</p>	<p>Loss of 2 of the 4 arts/training events</p> <p>Age: Children primarily aged 5 – 13 years old who are already less well served for play and free-time opportunities without cost than other age ranges. Provision reduced to holiday periods only</p> <p>Low Income Households: Families on low incomes will be the first to be adversely affected by reduction in free opportunities offered at a community level, close to home and without incurring additional transport costs which may exclude them. The impact of reduction at this level will cause free opportunities to be restricted to holiday periods only.</p> <p>Social Isolation: Families experiencing social isolation will experience winding down of services the currently access to holiday periods only and training/arts days cut from 4 to 2 events</p> <p>Contact with playworkers as a regular, positive presence for children and with an understanding of safeguarding will be reduced. Consistency and continuity will be lost</p> <p>Gender: Women will lose out disproportionately as both having primary responsibility for childcare and engaging in opportunities for/with their children, as volunteers with OPAG or community partners and as participants in training delivered by OPAG which has enabled women to gain new skills training and take steps towards employment, further training and volunteering. Current levels of support and</p>	<p>Age: Children primarily aged 5 – 13 years old who are already less well served for play and free-time opportunities without cost than other age ranges. All non- externally funded or subsidised development work will cease with immediate effect. This will be coupled with substantially reduced capacity to write new funding bids to restore provision.</p> <p>Low Income Households: Families on low incomes incomes will be the first to be adversely affected by reduction in free opportunities offered at a community level, close to home and without incurring additional transport costs which may exclude them. The impact of reduction at this level will cause free opportunities to cease immediately.</p> <p>This will be compounded substantially by the reduced capacity within the core team to write new funding bids to restore provision.</p> <p>Social Isolation: Families experiencing social isolation will experience the ceasing of direct opportunities through play sessions and services stopping with immediate effect. All sessions and training lost</p> <p>Contact with playworkers as a regular, positive presence for children and with an understanding of safeguarding will cease to be effective</p> <p>Gender: Women will lose out disproportionately as both having primary responsibility for childcare and</p>
--	---	--

<p>Women will lose out disproportionately as both having primary responsibility for childcare and engaging in opportunities for/with their children, as volunteers with OPAG or community partners and as participants in training delivered by OPAG which has enabled women to gain new skills training and take steps towards employment, further training and volunteering. No new opportunities will be created due to reduced capacity of staff to enable this.</p> <p>Other aspects of OPAG operations will suffer from a knock on effect of this reduction.</p> <p>Ethnicity: OPAG works closely with BME community members to plan and deliver community based play activities. Uptake for recent training was been strong with 25 plus participants from BME communities including emerging communities, but this reduction would hamper this growth</p> <p>With regard to numbers adversely affected figures from last year's monitoring reports indicate approx. 100 individual children participating.</p> <p>The vast majority of participants are from one of the groups outlined above. Many of the individuals and their families will have multiple characteristics</p>	<p>delivery of subsidised art/training activity sessions will drop by half and will leave an inadequate support structure for existing contacts.</p> <p>Other aspects of OPAG operations will suffer from a knock on effect of this reduction</p> <p>Ethnicity: OPAG works closely with BME community members to plan and deliver community based play activities. Uptake for recent training was been strong from BME communities but this level of reduction would prevent us from building on these community relationships will be set back and left unsupported. A great potential for expanding work would be lost.</p> <p>With regard to numbers adversely affected figures from last year's monitoring reports indicate approx. 100 individual children participating</p> <p>The vast majority of participants are from one of the groups outlined above. Many of the individuals and their families will have multiple characteristics</p>	<p>engaging in opportunities for/with their children, as volunteers with OPAG or community partners and as participants in training delivered by OPAG which has enabled women to gain new skills training and take steps towards employment, further training and volunteering. Current levels of support will cease in entirety.</p> <p>Other aspects of OPAG operations will suffer from a knock on effect of this reduction and be substantially hampered leading to closure of much needed opportunities including junior youth activities, community development, outreach and school holiday provision.</p> <p>Ethnicity: OPAG works closely with BME community members to plan and deliver community based play activities Uptake for recent training was been strong from BME communities but this total cut would mean staff time is forced to move away from this important development and focused on income generation.</p> <p>With regard to numbers adversely affected figures from last year's monitoring reports indicate approx. 100 individual children participating.</p> <p>The vast majority of participants are from one of the groups outlined above. Many of the individuals and their families will have multiple characteristics</p>
---	--	---

PPF Theme: Community Centres and Organisations	Organisation: Impact 6: Men Behaving Dadly	PPF Allocation 2015/16: £9,612	Proposed Allocation 2016/17: £0
Description of project activity:			
<ul style="list-style-type: none"> ▪ Provision of engagement and involvement activities with dads and male carers to reduce isolation, increase opportunities and address parenting issues in a non-threatening environment. ▪ Provision of outreach sessions, incorporating awareness raising, information provision and offering personal invitation and signposting to other agencies at 3 high profile community events. ▪ Incorporate activities into local engagement and consultation programmes such as the Connecting Communities consultation programme, Big Conversation, local PACT meetings to ensure that dads/male carers and their children are fully engaged. ▪ Provision of a number of volunteer opportunities via direct project delivery. 			
Impact of 10% / 50% / 100% reduction in funding on service delivery:			
10%	50%	100%	
<p>Loss of an hour of the staff time would have an impact in terms of preparation, publicity and development time. It would result in shorter delivery session or 5 less sessions delivered over the year.</p> <p>Family Support is a key component of all MBD work. The worker offers safe, supported, creative opportunities for dads/male carers and their children to play and learn together. The weekly sessions offer sign posting, advice and support, networking and peer support. The dads/male carers are developing an understanding of child development and how to support and nurture their children and understand the valuable role play has in this.</p> <p>Sessions offer active play, information on children's and men's health - Physical wellbeing - Emotional wellbeing alongside opportunities to actively promote wellbeing.</p> <p>Positive free time activities are promoted and</p>	<p>Loss of the 4 weekly staff hours dedicated to delivery of MBD session for dads/ male carers in Higginshaw, making it unrealistic to continue delivery of sessions.</p> <p>Family Support is a key component of all MBD work. The worker offers safe, supported, creative opportunities for dads/male carers and their children to play and learn together. The weekly sessions offer sign posting, advice and support, networking and peer support. The dads/male carers are developing an understanding of child development and how to support and nurture their children and understand the valuable role play has in this.</p> <p>Sessions offer active play, information on children's and men's health - Physical wellbeing Emotional wellbeing alongside opportunities to actively promote wellbeing. Positive free time activities are promoted and dads/male carers get ideas for</p>	<p>Loss of the 4 staff hours dedicated to delivery of MBD session for dads/ male carers in Higginshaw.</p> <p>Family Support is a key component of all MBD work. The worker offers safe, supported, creative opportunities for dads/male carers and their children to play and learn together. The weekly sessions offer sign posting, advice and support, networking and peer support. The dads/male carers are developing an understanding of child development and how to support and nurture their children and understand the valuable role play has in this.</p> <p>Sessions offer active play, information on children's and men's health - Physical wellbeing Emotional wellbeing alongside opportunities to actively promote wellbeing.</p> <p>Positive free time activities are promoted and dads/male carers get ideas for free and low cost family activities</p>	

<p>dads/male carers get ideas for free and low cost family activities</p> <p>Community cohesion is reflected in the group make up and interactions with a high degree of mutual peer support and the willingness to engage with and learn from other dads/male carers from a range of cultural, religious and social backgrounds. This is further enhanced by a strong link and regular joint activity with MBD central at Greenacres.</p> <p>At this level of reduction there will be a loss of 5 of the 48 sessions currently delivered, significant impact on MBDs capacity to develop and enhance the opportunities for the group, to support dads/male carers to have greater involvement in the group and to be able to commit time to secure further funding.</p>	<p>free and low cost family activities</p> <p>Community cohesion is reflected in the group make up and interactions with a high degree of mutual peer support and the willingness to engage with and learn from other dads/male carers from a range of cultural, religious and social backgrounds. This is further enhanced by a strong link and regular joint activity with MBD central at Greenacres.</p> <p>At this level of reduction future delivery from within Higginshaw will no longer be viable. Numbers affected by the loss of this innovative and valuable provision which has achieved high levels of sustained engagement with dads/male carers detailed under the Equality Impact section There is no credible replacement as no other agencies are offering this focused provision.</p>	<p>Community cohesion is reflected in the group make up and interactions with a high degree of mutual peer support and the willingness to engage with and learn from other dads/male carers from a range of cultural, religious and social backgrounds. This is further enhanced by a strong link and regular joint activity with MBD central at Greenacres.</p> <p>At this level of reduction future delivery from within Higginshaw will no longer be viable. Numbers affected by the loss of this innovative and valuable provision which has achieved high levels of sustained engagement with dads/male carers detailed under the Equality Impact section There is no credible replacement as no other agencies are offering this focused provision.</p>
Equality Impact of reduction in funding:		
10%	50%	100%
<p>Men – it is universally acknowledged that it is difficult to engage Dads/Male Carers. MBD has consistently managed to do this effectively and to retain those levels of engagement.</p> <p>Children currently enjoy and benefit from opportunities to spend quality time in a safe, supportive and creative atmosphere engaging in positive activities with their dads/male carers. Reduction at this level would mean the loss of 5 of the 48 sessions over the year</p> <p>Families on low incomes - will be hardest hit, as overall families living in Higginshaw experience higher levels of disadvantage that most of Oldham.</p>	<p>Men – it is universally acknowledged that it is difficult to engage Dads/Male Carers. MBD has consistently managed to do this effectively and to retain those levels of engagement. We have discussed a move to either fortnightly provision or of holiday periods only and also including older siblings although both options will lack the continuity and consistency that makes this project valuable to dads/male carers and their families. A reduction at this level will mean provision for Higginshaw will not be viable.</p> <p>Children will lose the opportunity to spend quality time in a safe, supportive and creative atmosphere engaging in positive activities with their dads/male carers. Reduction at this level would mean this</p>	<p>Men – it is universally acknowledged that it is difficult to engage Dads/Male Carers. MBD has consistently managed to do this effectively and to retain those levels of engagement. A reduction at this level will mean provision for Higginshaw will not be viable.</p> <p>Number affected 5</p> <p>Children will lose the opportunity to spend quality time in a safe, supportive and creative atmosphere engaging in positive activities with their dads/male carers. Reduction at this level would mean this whole opportunity is lost.</p> <p>Number affected 7.</p>

<p>BME Community members are fully involved in the group at both Higginshaw and MBD central group at Greenacres. The group is strong and a positive example of all dads/male carers coming together for a purpose and mutual support. Reduction at this level will see the loss of 5 of 48 sessions currently delivered</p>	<p>whole opportunity is lost.</p> <p>Families on low incomes - A reduction at this level will mean provision for Higginshaw will not be viable. Families will lose this valuable provision delivered from within their own community and will also lose the link and additional opportunities of involvement with MBD central group</p> <p>BME Community members are fully involved in the group at both Higginshaw and MBD central group at Greenacres. The group is strong and a positive example of all dads/male carers coming together for a purpose and mutual support. Reduction at this level will mean delivery within the Higginshaw area is no longer viable.</p>	<p>Families on low incomes -A reduction at this level will mean provision for Higginshaw will not be viable. Families will lose this valuable provision delivered from within their own community and will also lose the link and additional opportunities of involvement with MBD central group</p> <p>Number affected 12</p> <p>BME Community members are fully involved in the group at both Higginshaw and MBD central group at Greenacres. The group is strong and a positive example of all dads/male carers coming together for a purpose and mutual support. Reduction at this level will mean delivery within the Higginshaw area is no longer viable. Number affected 5</p>
--	--	---

PPF Theme:	Organisation:	PPF Allocation 2015/16:	Proposed Allocation 2016/17:
Community Centres and Organisations	Impact 7: Coppice Neighbourhood Group	£29,250	£0
Description of project activity:			
<ul style="list-style-type: none"> ▪ Delivery of youth activities, advice sessions, stop smoking sessions, a pre-school, luncheon clubs and exercise classes. 			
Impact of 10% / 50% / 100% reduction in funding on service delivery:			
10%	50%	100%	
<ul style="list-style-type: none"> - Reduction in staff hours - One full time and one part-time post a) Centre manager and Funding & Development Manager sharing 36 hours. If reduced by 10% the hours will be reduced to 32.5 hours (16.15 hours each) b) Administration hours are 10 hours. If reduced by 10% it will be reduced to 9 hours - Currently four volunteers 24 hours (6 hours each) we will have to reduce one volunteer, due to supervision and support from centre manager due to reduced hours. Reducing one volunteer could affect the coordination of luncheon club and the female development activities at the centre. - Our current services at the centre are used by the BME and Eastern European community mainly from the Coppice area of Werneth Ward and we also have service users from Westwood area of Coldhurst Ward and Hathershaw area. The service users are women, men, young people and the elderly. Below are the following services and activities that will be affected by the 10% reduction. - The reduction of 10% will affect further 	<ul style="list-style-type: none"> - Reduction in staff hours - One full time and one part-time post a) Centre Manager and Funding & Development Manager sharing 36 hours. It will be reduced to 18 hours (9 hours each). b) Administration hours are 10 hours. If reduced by 50% it will be reduced to 5 hours - Currently four volunteers providing 24 hours (6 hours each). We will have to reduce two volunteers, due to supervision and support from centre manager due to reduced hours. It will affect the coordination of luncheon club, female development activities, advice, reception cover, gardening activities, weekend homework club. <p>Majority of the services will cease except advice, gardening activities and few other small projects subjected to funding.</p>	<ul style="list-style-type: none"> - Staff will be made redundant. One full time and one part-time post - The staff at CNG will be directly affected and subsequently other sessional workers, and volunteers will also have to be made redundant. - Other agencies who also rely on their staff to provide relevant community services such as the NHS, OAK CD, Highfly YCO, WCI, Link Centre, Alzheimer Society, WEA etc. will struggle to meet their targets and not being able to provide a service will indirectly affect their service delivery. - Reduction in all volunteers will affect the delivery of the services and all the community activities will fade out eventually due to support and guidance. - If the funding was to be reduced by 100 % then the services will have to gradually cease or come to an abrupt halt. - Cease of all services and project subject to core funding secured elsewhere. - 100% reduction in these services would affect all the services as we have not yet 	

<p>development of new activities, provisions and services. And on the long run it will affect one or two existing services that are currently being benefitted by the community.</p> <p>a) Community safety and cohesion:</p> <ul style="list-style-type: none"> - Valuable information sessions such as fire safety, home safety and many others will be reduced. Our cohesion work between different communities and agencies will also be reduced e.g. cookery sessions and recipe sharing between Coldhurst and Werneth area. - Physical and mental health and well-being: Health and wellbeing groups for males and females - Advice and information/workshops and healthy lifestyle, self-care courses, Health MOT, diabetes awareness, kidney scans, over 50's bowel cancer screening information, Health Walks, Access to BME Health, digging for health, delivered by CNG and NHS at the centre will be affected - Dementia awareness workshop for carers programme workshop delivered by IPSA trained facilitators. - Healthy eating and cooking sessions, exercise and relaxation sessions. - Leisure opportunities (for male & female): Luncheon clubs; Exercise, yoga and health walks; Tea and coffee morning; Youth activities; Women's weekly discussion group; Trips, 		<p>managed to secure core funding elsewhere despite the effort and time we have put in. As mentioned in the first section of 'impact upon staffing', that the competition for the same pot of funding are overwhelmingly high.</p> <ul style="list-style-type: none"> - The local community would struggle to find or access these vital services that we provide at the centre. There would be no staff at the centre to seek funding, develop projects, organise and manage the following services listed below; - Elderly project, luncheon clubs, exercise classes, healthy eating training and courses, workshops on self-care etc. - Training classes and courses: I.T courses, British citizenship, ESOL, Sewing classes, and other personal development courses. - NHS Services: Health MOT, self-care courses and general health/wellbeing group for both male, females and other activities delivering to lead a healthy life style. - Advice surgery: housing, education, welfare benefits, immigration and council tax. - Young People: youth group activities - Female development: training and courses for women. - Employability skills and training.
--	--	---

<p>excursions, gardening and community fundraising activities.</p> <ul style="list-style-type: none"> - Improving skills and employability:ESOL, I.T and sewing classes; Job club/employability skills short courses. Help and support BME into employment referred by Job Centre Plus i.e. work placement and volunteering. - Child development; N/A <p>b) Advice Project: Housing, welfare benefit, debt management, domestic violence referral, and basic immigration advice</p>		
<p>Equality Impact of reduction in funding:</p>		
<p>10%</p>	<p>50%</p>	<p>100%</p>
<ul style="list-style-type: none"> - The reduction will affect almost all categories on the left column specifically BME community, asylum seekers, disabled, people with low income and language barriers. 	<ul style="list-style-type: none"> - Majority of the groups listed on the left column will be affected due to cutting down on the services. 	<ul style="list-style-type: none"> - As mentioned above, the 100% reduction will affect all of the groups listed on the left column.

PPF Theme:	Organisation:	Allocation 2015/16:	Proposed Allocation 2016/17:
Festivals Activity	Impact 8: Oldham Carnival and RootZ Festival	£4,500	Between £0 - £3,500
<p>Description of project activity: Oldham Carnival and RootZ festival takes place each year at Alexandra Park.</p> <p>It consists of live music stages on which local musicians, dancers and performers get the opportunity to entertain to a live, outside audience on a grand stage with high quality sound and lighting equipment and technicians to enhance their experience.</p>			
<p>Impact of reduction in funding on service delivery:</p>			
<p>The consultation submission suggests that there will be no impact upon volunteers or staffing identified and no impact upon service delivery, as savings will be made from stage performances.</p>			
<p>Equality Impact of reduction in funding:</p>			
<p>The consultation submission suggests that there will be no impact upon equality groups arising from the proposals.</p> <p>It is therefore assumed that in the event of any negative impact arising from the proposals, people of a particular age group and people on low incomes would be affected.</p>			

PPF Theme:	Organisation:	Allocation 2015/16:	Proposed Allocation 2016/17:
Festivals Activity	Impact 9: Oldham Play Action Group - National Play Day	£3,000	Between £0 - £3,500
Description of project activity:			
<p>National Playday is a high profile event taking place across the country and increasingly across Europe. The purpose is to celebrate and demonstrate the role of play in the lives of individual children and in the life of the community, and to generate a lot of fun and enjoyment whilst doing so. It is a celebration of children's right to play as enshrined in Article 31 of the UN Convention of The Rights Of The Child.</p>			
Impact of reduction in funding on service delivery:			
<p>If this funding were reduced OPAG would be unable to bring in experienced play, youth and arts workers from the sessional pool to set up this event. This currently offers an excellent value for money approach to running an annual large scale event and which benefits from the wide range of skills and interests from across the team. Organisation and co-ordination hours, which contribute to annual salaries, will be lost from the core team to set up the event. 100 hours of delivery would be lost from the combined OPAG team to facilitate and deliver this key event</p> <p>This year's event benefitted from the active participation of 24 volunteers including regular OPAG volunteers, members of Youth Council and Oldham Council Employee Volunteering Scheme. For this event volunteers provided 192 hours of support. Type of involvement included assistance with set up, sign posting, traffic management, litter picking, planning and delivering an activity eg water fight and grass seed heads, support and supervision of activities eg haybales, badge making.. If this funding is reduced it would mean the OPAG team would have less capacity to support, nurture and supervise volunteers. The event, if it continue, would be on a greatly reduced scale which would not attract volunteers to the same degree</p> <p>Community cohesion is an important part of our intended outcomes for National Playday. As an event, with its range of activities and active involvement from partner groups OPAG has supported to deliver community based play opportunities National Playday attracts a diverse audience which we have intentionally built on. Play is an excellent and a natural vehicle for promoting community cohesion. This event is underpinned by OPAGs year round working across communities and facilitating shared projects to promote cohesion, understanding and positive interactions across cultural, social and generational lines. OPAG has been fully committed to been delivering effectively with this message and practical outworking since before the phrase was coined.</p> <p>Play is vital in building children's physical and mental health and wellbeing. Every National Playday offers opportunities to support this through a range of challenging physical activities, enabling children to identify and manage risk, have new experience, be creative and learn through play. Engagement in positive out of school leisure and free-time opportunities is enhanced for 2000 children, young people and family members. Physical and outdoor play contributes to the childhood obesity agenda, takes children away from sedentary and digital leisure options to reengage with adventure and imagination.</p> <p>This event is significant in terms child development with a range of activities selected to support children's social, physical, creative and emotional development. The benefits of play across these areas is well documented. Community development is OPAG approach to building play development opportunities. OPAG</p>			

works with groups boroughwide year round, with clusters of committed volunteers supported and encourage to get involved and contribute ideas and energy to National Playday

A 10% reduction will impact on the scope of activities and opportunities offered as part of the event. It would mean the loss of key items which draw people in eg free inflatables. A reduction of any further amount will then represent direct cuts to delivery hours seriously curtailing the range of activities offered, the level of supervision which would mean the event would need to be intentionally scaled down for safety. In the last three years we have effectively built on the event which has increased from 500 to 2000 participants and with continued investment from Oldham Festival Fund we intend to keep the momentum building.

Equality Impact of reduction in funding:

Children and young people and their families are the target audience for this event. The aim is to highlight the value of play in the lives of individual children and in the lives of communities. It would represent the 'watering down' or one of the key events in Oldham's calendar of community events

Families on a **low income** will be particularly adversely affected by any reduction to or loss of this event. In increasingly difficult financial times for so many families, free events that offer such a wide range of activity for children and young people play an important role in the school holiday experience. Families tell us that the need for free access, free play and free choice is becoming even more important to them as their real income diminishes whilst the cost of commercial leisure opportunities rise.

Families from a diverse range of **racial/ ethnic, cultural and social backgrounds** get involved in National Playday. This has always been the case and we have consciously been able to build on this over the years. The Director of Oldham's Festival Of Diversity described OPAGs National Playday event as the most naturally diverse of all the programmed events. Play offers a non-threatening way in to meet and interact with people from across cultures and generations. Play is a universal need for all our children to grow and develop and that is a strong basis upon which to bring people together. People come as individual families and as community led playscheme groups to get involved in the event.

Re-institute a back to basics approach with sole focus on handmade, reuse, recycle a possible solution and potentially marketable

If reduction was modest 10% we would mitigate by losing larger items eg inflatables. Mid-level reductions by losing key attractions and seeking donations at entry points or alongside each activity on the day or more sponsorship and potentially put the event on a more commercial footing eg stalls etc Possible relocation of event if other areas could offer greater funding possibilities eg district teams, ward councillors budgets.

Possible free areas and charged for activities , although reservations regarding exclusion of families on low incomes and potential two tier experience.

PPF Theme:	Organisation:	Allocation 2015/16:	Proposed Allocation 2016/17:
Festivals Activity	Impact 10: Oldham Pride	£4,500	Between £0 - £3,500
<p>Description of project activity: Oldham Lesbian, Gay, Bisexual and Trans Pride has become an important annual event in Oldham's civic calendar. Oldham Pride is organised and co-ordinated by Oldham LGBT Forum and Events Group, with support from Oldham Council, NHS Oldham, Voluntary Action Oldham, Greater Manchester Police Oldham Division and FCHO, amongst others. It aims to raise public awareness of lesbian, gay, bisexual and trans issues and to celebrate LGBT identity, visibility and diversity.</p>			
<p>Impact of reduction in funding on service delivery:</p>			
<p>No submission was provided by Oldham Pride which could be used to contribute towards the development of the Equality Impact Assessment. It is therefore unclear whether there will be an impact upon service delivery or whether alternative funding can be secured.</p>			
<p>Equality Impact of reduction in funding:</p>			
<p>No equality information has been provided by Oldham Pride as part of the consultation process. It is therefore assumed that in the event of any negative impact arising from the proposals, people of a particular sexual orientation / people who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment would be primarily affected.</p>			

PPF Theme: Community Centres and Organisations	Organisation: Greenacres Community Association (No impact arising from this proposal)	PPF Allocation 2015/16: £27,450	Proposed Allocation 2016/17: £35,000
Description of project activity:			
<ul style="list-style-type: none"> ▪ Provision of a community space, used Monday – Friday 7.30am – 10.30pm, Saturday 9am – 2.30pm and Sunday by arrangement. ▪ Provision of a venue for a number of provider services such as First Choice Homes, Threshold Housing and continue to provide opportunities for external organisations wishing to provide outreach into the Greenacres, Waterhead and Clarksfield areas. ▪ Provision of a number of volunteer opportunities via direct project delivery and community centre management. ▪ Implementation of a room hire and agreement policy to ensure a range of organisations are able to access the centre at reasonable cost. ▪ Consultation with users of the centre to ensure ongoing quality and variety of services. 			
Impact of 10% / 50% / 100% reduction in funding on service delivery:			
10%	50%	100%	
<p>Small yet significantly reduced hours all staff centre manager (job shared over 30 hours), and two cleaners</p> <p>Volunteer hours would be less well supported. Regular volunteers currently contribute 120 hours every week totalling 6000 per year. Plus a further 80 in support of open days</p> <p>GCC plays a valuable role in contributing towards community safety and cohesion, activities which intentionally bring people together across culture, generation and social and economic backgrounds makes people feel safer and more confident.</p> <p>Wellbeing activities at GCC currently include fitness, diet, weight management, healthy cooking classes, dance, yoga and social activities. Some</p>	<p>Substantially reduced hours all staff, Centre manager job shared over 30hrs potentially reduced by half, possible redundancy of one cleaner.</p> <p>Supported volunteering opportunities will be lost. Volunteer hours will be lost.</p> <p>Community safety and cohesion is a key value and staff will still commit some, albeit limited time to this work. Writing of bids to bring in small yet vital funds to run activities will be seriously curtailed.</p> <p>Wellbeing activities may be forced to relocate or wind down resulting in loss of effective health and wellbeing opportunities for local people.</p> <p>Advice and signposting, opportunities, information and knowledge of support services will not be</p>	<p>Redundancies.</p> <p>Volunteer led groups for example, three days of parent and toddler groups with 8 committed volunteers consistently engaging large numbers would be put at risk by substantially increasing rents and without support from GCA team which may make them unviable.</p> <p>Community safety and cohesion will be harmed due to lack of a focus, supporting events and of GCAs strong and credible presence within the community. The momentum and relationships will be lost due to lack of continuity and work which embodies the message.</p> <p>Wellbeing activities will struggle with increased rent, reduced GCA team support, promotion and joint</p>	

<p>run as small businesses, social enterprises, delivered as GCA projects or volunteer led. All will struggle with increased rent, reduced GCA team support, promotion and joint publicity.</p> <p>Advice and signposting will initially be largely unchanged. Centre is the base for 12 Social Enterprises, including 5 created over the last two years with support from GCA and UnLtd. Small rent increase would be absorbed by majority.</p> <p>Children's development opportunities will continue with some commensurate reduction in activity. Community development will continue largely unchanged.</p> <p>Reducing isolation is currently a core function which runs through all operations and will decrease in relation to groups and sessions operating.</p> <p>Training and education opportunities delivered by other agencies will be largely unchanged.</p> <p>Leisure opportunities across the board will largely be unchanged with extra costs absorbed or passed on by hobby groups and the social enterprises.</p> <p>Local and Parliamentary election facility largely unchanged</p> <p>Greenacres Community Centre is a designated Emergency Contact Centre within OMBC Emergency Strategy. Reduction at this level would have minimal impact.</p> <p>Overall consequence of cuts at this level will see rent increases across the board, slight reduction in</p>	<p>regularly updated and there will be less staff availability to offer support in which they have been trained eg Universal Credits, personal budgeting, CV writing etc.</p> <p>Centre is the base for 12 Social Enterprises, including 5 created over the last two years with support from GCA and UnLtd. No staff capacity to support new groups. Rising rents would adversely impact on these social enterprises</p> <p>Opportunities for children's development will systematically be reduced and decline in response to the negative impact this has on providers.</p> <p>Community development time and opportunities will be reduced by half or more as focus shifts balance towards income generation</p> <p>Reducing isolation will be negatively impacted as services and substantially reduced.</p> <p>Training and education opportunities delivered by other agencies will no longer benefit from staff time to support recruitment, outreach and wrap around support.</p> <p>Leisure opportunities will be reduced considerably and it is envisaged that some smaller, unfunded groups, often involving people on low incomes may cease. Please see equality impact for those most affected.</p> <p>Local and Parliamentary election facility at risk</p> <p>Greenacres Community Centre is a designated Emergency Contact Centre within</p>	<p>publicity, most of the volunteer led groups and several of the social enterprises, offering catering for individuals in greater need may be forced to relocate or wind down resulting in loss of effective health and wellbeing opportunities 772 sessions for approximately 340 regular users local people.</p> <p>Advice and signposting, opportunities, information and knowledge of support services as detailed in previous column will no longer be available.</p> <p>Centre is the base for 12 Social Enterprises, including 5 created over the last two years with support from GCA and UnLtd. No staff capacity to support existing enterprises or new groups. Rising rents would be seriously detrimental to these social enterprises</p> <p>Opportunities for children's development will immediately be drastically reduced in response to the negative impact this has on providers. This will be far reaching and have a detrimental impact on family and community life.</p> <p>Community development function lost.</p> <p>Reducing isolation will be negatively impacted as services drastically reduced and in some cases discontinued.</p> <p>Training and education delivered by other agencies would no longer have staff support and structure to deliver programmes effectively in a suitable venue.</p> <p>Leisure opportunities will be severely curtailed with rent increases and lack of direction and development support. Volunteer led groups will be</p>
---	--	--

capacity for support and development of new opportunities.	OMBC Emergency Strategy/. Reduction at this level would compromise capacity to fulfil this role.	hit hardest and groups requiring large spaces will be without a local base. Local and Parliamentary election facility unavailable Greenacres Community Centre is a designated Emergency Contact Centre within OMBC Emergency Strategy. Reduction at this level would seriously jeopardise Emergency Centre function
Equality Impact of reduction in funding:		
10%	50%	100%
<p>Older people - Targeted activities include the over 50s keep fit, lunch club and intergenerational arts. Older people do, of course, get involved with the wider programme. Largely unchanged.</p> <p>Preschool children Registered early years provision. Children 5–16 yrs. Registered before and after school club. Anticipated only minor difficulties faced. Three times weekly parent and toddler groups feed into preschool uptake.</p> <p>Parents currently benefit from a range of childcare services, social opportunities which it is hoped would continue with minimal disruption.</p> <p>People on low incomes will be directly and immediately affected as free and subsidised opportunities may be reduced at a rate commensurate with the cut, although we will work to try to mitigate this as far as is possible</p> <p>People facing social isolation benefit from participation in a wide range of the sessions delivered from GCC also unemployed people who</p>	<p>Older people are served through many of the opportunities available at Greenacres. Targeted activities include the over 50s keep fit, lunch club and intergenerational arts. Older people do, of course, get involved with the wider programme. Substantial reductions in level of delivery, possible move to fortnightly or blocks of provision. This would lose continuity, regular contact, opportunity for staff to notice vulnerabilities and point to support and potential loss of chef and fitness instructor to secure more regular work.</p> <p>Preschool children Registered early years provision will struggle to absorb or pass on additional rent cost Children 5 – 16 years Registered before and after school club will struggle to absorb or pass on additional rent cost</p> <p>Parents currently benefit from a range of childcare services, social opportunities which is most likely to be hit hard by reduction in support, maintenance of building and ofsted requirements, increased rents and resultant raised fees.</p>	<p>Older people are served through many of the opportunities available at Greenacres. Targeted activities include the over 50s keep fit, lunch club and intergenerational arts. Older people do, of course, get involved with the wider programme. 108 sessions delivered annually with 30 regular attenders plus occasional attenders</p> <p>Preschool children Registered early years provision club will be unable to absorb or pass on rising costs of rent and will put provision for local families at risk 220 sessions for 30 regular users and their families Children 5 – 16 years Registered before and after school club will be unable to absorb or pass on rising costs of rent and will put provision for local families at risk 500 sessions for 24 regular users and their</p>

<p>look to the centre for support, signposting and training to enable them to take steps towards employment.</p> <p>People seeking to improve their health will continue to attend classes and opportunities without major chance initially.</p> <p>BME Community, including established and emerging communities will continue to participate in all activities without major upheaval</p> <p>Start up groups currently supported with initial rent free or subsidised space, assistance with identifying and applying for external funding</p> <p>Over the year 14/15 2042 sessions have been delivered from GCC with 800 very regular (daily or weekly users) and in excess of 1800 individuals through the doors.</p>	<p>People on low incomes will be directly and immediately affected as free and subsidised opportunities will be reduced substantially and with immediate effect. Staff time to seek alternative external funding for continuation will be seriously impeded by reduced working hours.</p> <p>People facing social isolation access opportunities including but not exclusively detailed in the previous column. Serious reduction in sessions delivered. Staff availability and presence limited so less likely to pick up on issues relating to vulnerability. It will take away an important link for unemployed who look to the centre for support, signposting and training to enable them to take steps towards employment</p> <p>People seeking to improve their health will see less opportunities for free or subsidised classes to support health promotion. This is a serious impact and coupled with the cuts to community based services for cooking, diet and fitness formerly delivered by the PCT. Staff time will be reduced for bid writing to buy in these services and no cost to participants which to date we have been successful with in relation to the development of a training kitchen and rolling programme of healthy cooking, budgeting and food hygiene and preparation accredited courses.</p> <p>BME Community, including established and emergent communities will be adversely affected as some services have to be substantially reduced or wound down. This is particularly true of the childcare/children's activities, cooking classes and training opportunities all of which have a consistently strong uptake by BME members.</p>	<p>families</p> <p>Parents currently benefit from a range of childcare services, social opportunities for which is a high likelihood that volunteer led social groups would fold due to lack of worker support, rent increases, lack of cleaning services etc. Small business providers would be forced to relocate out of the area. Represents a loss of 720 sessions annually supporting 148 daily of multiple weekly users</p> <p>People on low incomes will be directly and hardest hit by this cut. They will be immediately affected as free and subsidised opportunities will be reduced substantially and with immediate effect. There will be no staff time to seek alternative external funding for continuation.</p> <p>People facing social isolation access opportunities including but not exclusively detailed in the first column, opportunity lost for approx. 180 individuals to have regular meaningful contact with others. Anecdotally and as reflected in are profiling the majority of centre users and groups can be considered on low incomes.</p> <p>Support to unemployed who look to the centre for advice signposting and training to enable them to take steps towards employment will be lost in entirety. Many share multiple characteristics of disadvantage as referred to in this equality impact assessment.</p> <p>People seeking to improve their health. Will be adversely affected resulting in loss of effective health and wellbeing opportunities 772 sessions</p>
--	---	---

	<p>Functions in support of start-ups for groups will no longer be possible.</p> <p>Over the year 14/15 2042 sessions have been delivered from GCC with 800 very regular (daily or weekly users) and in excess of 1800 individuals through the doors. This will be reduced in line with sessions and services substantially reduced</p>	<p>for approximately 340 regular users local people.</p> <p>BME Community will lose a wide range of appropriate services and the opportunity to work with staff and volunteers develop new opportunities.</p> <p>Functions in support of start-ups for groups will no longer be possible.</p> <p>Over the year 14/15 2042 sessions have been delivered from GCC with 800 very regular (daily or weekly users) and in excess of 1800 individuals through the doors. This will be reduced in line with services severely restricted and those services and groups which are no longer viable but no less needed particularly for those local people most in need of support.</p>
--	---	---

PPF Theme: Community Centres and Organisations	Organisation: Werneth and Freehold CDP (No impact arising from this proposal)	PPF Allocation 2015/16: £29,250	Proposed Allocation 2016/17: £29,250 (£15,750 contingency funding to explore options regarding Coppice Community Centre. In principle total allocation of £45,000 available)
Description of project activity:			
<ul style="list-style-type: none"> Delivery of junior and senior youth activities, community cohesion activities and events, two pre-schools, advice sessions and volunteer opportunities. 			
Impact of 10% / 50% / 100% reduction in funding on service delivery:			
10%	50%	100%	
<p>PPF Funds 2 part time post (currently 20 hrs each). These staff members will manage and support 29 staff (Equivalent to 20 f/time posts)</p> <p>This reduction will mean a further reduction in hours possible to 12 hrs per week. This is an unrealistic scenario when managing 29 staff.</p> <p>This will have an impact on the safe running of the organisation through the management of staff (safeguarding, health and safety, personnel issues, supervisions and appraisals)</p> <p>Time management will be difficult and networking will be significantly lower.</p> <p>Funding applications and the search for sustainable funding will be affected.</p> <p>Core staff would be expected to volunteer time to attend meetings and training outside their normal working hours.</p>	<p>PPF Funds 2 part time post (currently 20 hrs each). These staff members will manage and support 29 staff (Equivalent to 20 f/time posts)</p> <p>The core staff would work 5 hours each (10 hrs per week), there would be no money for operational costs of running the building, ie rent, insurances, safety checks, (Gas/Elec/Fire) The running costs for this centre are currently £22K</p> <p>This reduction would mean that this organisation could not operate to a safe and acceptable standard unless significant other <u>core</u> funding was found.</p> <p>This would mean the loss of experienced and qualified staff at all levels.</p> <p>The Children in Need/JP Getty award uses PPF as match funding for the supervision and management of staff and the use of the building.</p>	<p>This would entail redundancies for 2 core staff and cleaner. And therefore the closure of the organisation.</p> <p>All charities money would have to be returned in this instance. Resulting in the redundancies of 6 youth development workers.</p> <p>It would also mean the closure of three pre-schools in the area, resulting in 18 redundancies.</p> <p>In this instance, at least 3 months would be required to wind down the Charity.</p> <p>The building would be closed as a community facility.</p> <p>The electricity for the floodlights on the Milne Street All weather pitch is run from the centre. This facility would be stopped on the closure of the building.</p> <p>There would be no volunteering due to the closure</p>	

<p>The building would be opened on reduced hours, due to insufficient staff to open safely</p> <p>There would be a small impact upon the volunteering recruitment procedure, the DBS checks, identification and references checks and some impact upon the management time of the workers supporting the volunteers.</p> <p>This is an area that we put a lot of energy into and a vital part of the smooth operation of our organisation, therefore, we would continue to enroll and support volunteers as far as possible.</p> <p>There would be an impact upon the placement of students due to the reduction of core team hours. These placements are required to have a minimum number of hours per week, which would not be supported. (20 per year)</p> <p>PPF Funds 2 part time post (currently 20 hrs each). These staff members will manage and support 29 staff (Equivalent to 20 f/time posts)</p> <p>There will be a reduction in all these areas due to the reduction in networking and cross community work. There would be no joint projects with other organisations.</p> <p>There will be a loss of overall partnership work on which WFCDP pride ourselves and they currently work with over 25 external agencies</p> <p>The core team will be expected to attend priority meetings in their own time in order to keep up to date with the changes, opportunities and information/support networks. Eg Ward meetings,</p>	<p>The Centre would only open during key group session times.(If we found an alternative building)</p> <p>There would be a severe loss on the ability to recruit and support volunteers. This is due to the loss of the building and the reduction of workers hours.</p> <p>All time and energy would be put into the funding applications and the need to relocate.</p> <p>The organisation would need to realign due to the loss of the building.</p> <p>There would not be any classes or activities without the use of a building, ie church/mosque hall. (In some cases these are not deemed as a safe environment to some of our most vulnerable users.)</p> <p>If there was an alternative building, WFCDP would need to rent and use it at the discretion of the landlords – opening only at key group session times. This would mean the loss of other community development activities.</p> <ul style="list-style-type: none"> • There would be no advice sessions, which currently are run through partnership agencies and WFCDP staff and volunteers working with families in most need (180 sessions). • WFCDP would not be able to support and run classes for the community. Lifelong Learning and WEA are our current facilitators of our weekly classes.(200 adult learners) • At the moment WFCDP are one of the 5 providers for NDLC. (1500 hrs of learning) 	<p>of the organisation</p> <p>There will be no service to deliver due to the loss of staff.</p> <p>WFCDP estimate this will have an impact on over 1500 families living in an area of high deprivation and low income.</p> <p>These families are classed as 'hard to reach' by other statutory services, who access WFCDP groups and experienced staff to make contact in order to deliver their own services.</p> <p>This loss will significantly increase the pressure on the community as a whole, and other service providers who will need to bridge the gap..</p> <p>WFCDP currently own and manage two pre-schools, with a third opening in September 2015. These pre-schools will be lost due to the closure of the organisation.</p> <p>There is already a shortfall of places in the area of 2 and 3 years olds. WFCDP not only support the children, but their families too, many of whom have complex needs. Due to the imminent closure of the two local childrens' centres, the pre-schools will be the first contact in the Early Years provision in the area.</p>
--	---	---

<p>AG Meetings, the support of other agencies.</p> <p>The building would be opened on reduced hours due to the loss of hours of core staff, therefore, some of these activities would not be able to take place.</p>	<p>Some of this money would have to be returned. These classes are aimed at the most vulnerable, who have no qualifications or experience in work (pre-entry classes).</p> <ul style="list-style-type: none"> • There would be no Work clubs run for NEET, Apprenticeships and the wider unemployed community.(600 people) • Women’s’ groups would no longer be able to meet (minimum of 40 per week) • The domestic violence outreach work would cease, and there would be no support for families experiencing domestic abuse (4 – 6 per week) • There would be no avenues to provide information and awareness raising around drugs and alcohol abuse, health and wellbeing, physical and mental health. • There would be no opportunities for cross/inter-generational work which happens daily in the organisation • There would be no play days or play schemes during school holidays (300 children per year) • There would be no volunteering opportunities • The loss of “readymade” groups and sessions for other agencies to access and deliver their services. Ie PCSO, Fire Service, Health Teams, Sport Development, consultations and information. • Activities run by staff on the Milne Street Pitch would Cease <p>There would be a knock-on effect to other organisations WFCDP support, for example</p>	
--	--	--

	<p>cooking for the church soup kitchen (done by volunteers), local charity fund raising, and fund raising for our own activities (done by young people).</p> <p>There will be a financial impact to the buildings WFCDP pay rent to for Pre-schools.(All these buildings are in the Oldham area.</p> <p>All the above is presuming that WFCDP can find an alternative venue to run youth clubs. If this does not happen, then WFCDP will be unable to run youth clubs. Current provision is 6 days a week, (every day apart from Friday).</p> <p>WFCDP also run drop-in sessions where young people can come in to speak confidentially to youth workers. These sessions will be lost. There has already been an increase in demand due to the withdrawal of statutory provision in the area.</p> <p>These losses are on top of the loss of the statutory provision.</p>	
Equality Impact of reduction in funding:		
10%	50%	100%
<p>Freehold area is in the worst 10% of wards nationally, having a disproportionately high youth unemployment and the lack of qualifications.</p> <p>Therefore any potential cuts will be a direct hit to the community work, less staff and hours equals less services delivered.</p> <p>WFCDP works with members of the community from all these groups, as services are open to all.</p>	<p>Any cuts will be a direct hit to the community work, less staff equals less hours equals less services delivered.</p> <ul style="list-style-type: none"> • Families experiencing isolation and poverty will have no new opportunities as core development work will be seriously reduced. • Inter-generational work would no longer be sustainable. • People in this area have a disproportionately higher mortality rate and long term disability/sick 	<p>This cut will directly hit the community through the withdrawal of all the services delivered by WFCDP.</p> <p>The whole staff team would face redundancies, 95% of whom are resident in Oldham.</p>

<p>WFCDP respond to the needs of the community by re-inventing their approach. There are new groups moving into the area all the time (currently Romanian families) and WFCDP's capacity to respond to their needs will be lost due to the loss of core hours.</p>	<p>level than in other areas in Oldham, living on average just short of 10 years less. There will be no direct 'grass roots' outreach on behalf of other statutory agencies.</p> <ul style="list-style-type: none"> • Low income families would take a direct hit as our services are withdrawn or reduced. All services are free and local, therefore easily accessible to the community. • The benefit advice sessions will be cut or closed. • WFCDP offers language support, which would no longer be available. • Many of the groups and activities are accessed by BME families. A reduction in the availability of these would have a direct impact upon these families. • WFCDP works with families, children from 2yrs old in Pre-school, 6 years old in Junior Youth Club and 11-19 years in Seniors Youth Clubs. Both boys only and girls only sessions are run, which is a cultural requirement in the community. These sessions would be reduced or lost. • The girl's only groups would be reduced or closed due to the lack of support from core staff. • Families suffering from domestic violence will no longer be able to access support from the worker as hours and venue would be cut. • Forced/arranged marriage support will no longer be available. 	
--	--	--

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B013
Portfolio	Co-operatives and Neighbourhoods
Directorate:	Co-operatives and Neighbourhoods
Division:	Community Services
Responsible Officer and role:	Debbie Holland – Early Help Service Manager John Rooney – Head of Housing Strategy
Cabinet Member and Cluster :	Cllr B Brownridge – Neighbourhoods & Co-operatives

Title:	Targeted Early Help Team support for PFI Housing Neighbourhoods
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Response Services)</i>	Expenditure	£5,129 k
	Income	(£1,589k) (inc. £1,500k PH Transformation Fund)
	Net Expenditure	£3,540k (Total Early Help)
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	Early Help: 34 FTE Development team: 11.5 FTE

	2016/17 £k	2017/18 £k
Proposed Financial saving:	50	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>Following the investment in the PFI Housing neighbourhoods (Primrose Bank, Fitton Hill, Crossley & Dew Way), a need has arisen for a targeted offer from the Early Help Team. This would include supporting residents around issues such as behaviour change, managing debt and improving community resilience. These elements wouldn't normally be addressed through housing management.</p> <p>It is proposed that the Early Help Team provides a more targeted approach in these neighbourhoods. The costs of £50k would be</p>
---	---

	recharged against the Housing Revenue Account, thus creating a saving in the Early Help Team budget.
--	--

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	£50k from 16/17 recurring arising from additional income into staffing budget.
---	--

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>A provision of £50k recurring would be made for this work from the Housing Revenue Account.</p> <p>It should be noted that £1,500,000 of the Early Help service is currently funded by the Public Health Transformation Fund. We have received no information to suggest that this is likely to reduce, but if it were to do so then this would create an additional pressure.</p>
---	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	0
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Intense Early Help Team support goes live	1 st April 2016
Mandatory – Completion of EIA & Consultation within PVFM timeline	*Proposal unlikely to be relevant for EIA

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Funding not available through Housing Revenue Account	Discussion has already taken place and provision can be found

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None

Service Delivery and future expected outcomes:

It is anticipated that the targeted support within the PFI neighbourhoods will help address behavior issues. A quarterly update report would be provided internally outlining cases and referrals.

The proposal will assist with staffing costs in the Early Help Team.

Organisation (other services)

None

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

Some elements of individual staff time will be focused on the PFI neighbourhoods to support this intense offer.

Communities

This will enhance the Council's Early Help offer in the PFI neighbourhoods.

Service Users

This will enhance the Council's Early Help offer to service users in the PFI neighbourhoods.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

None

Section 6

<u>Supplementary Information</u>
None

Section 7

<u>Consultation Information –</u> <i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	N/A
Staff Consultation	N/A
Public Consultation	N/A
Service User Consultation	N/A
Any other consultation	N/A

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Debbie Holland, John Rooney
----------------------	-----------------------------

Support Officer Contact:	Ellen Marchbank-Smith
Support Officer Ext:	0161 770 5690


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	6 July 2015
-----------------------	-------------

Section 10

Approval by Cabinet Member

Cabinet Member:	Cllr Brownridge
Signed:	
Date:	6 July 2015

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B014
Portfolio	Co-operatives and Neighbourhoods
Directorate:	Co-operatives and Neighbourhoods
Division:	Community Services
Responsible Officer and role:	Debbie Holland – Early Help Service Manager Sheena Macfarlane – Head of Heritage, Libraries and Arts
Cabinet Member and Cluster :	Cllr B Brownridge – Neighbourhoods & Co-operatives

Title:	Early Help use of libraries for delivery of community offer
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Response Services)</i>	Expenditure	£5,129 k
	Income	£1,589k (inc. £1,500k PH Transformation Fund)
	Net Expenditure	£3,540k (Total Early Help)
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	Early Help: 34 FTE
		Development team: 11.5 FTE

	2016/17 £k	2017/18 £k
Proposed Financial saving:	50	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	Library teams can deliver a flexible offer of Early Help community activity according need as follows; support into training and towards employment, delivery of sessions and activity for families with children aged 0-4 to prevent escalation into specialist services, IT access for families eligible for the 2yr old offer
---	--

<u>Proposed Savings £k:</u> <i>Through efficiency, income generation, transformation, decommissioning, etc</i>	£50K from 16/17 recurring arising from additional income via Early Help
--	---

<u>Further Financial Implications & Considerations</u> <i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	It should be noted that £1,500,000 of the Early Help service and £250,000 of the Libraries Service is currently funded by the Public Health Transformation Fund. We have received no information to suggest that this is likely to reduce, but if it were to do so then this would create an additional pressure.
--	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
<u>Total financial loss to partners (£k)</u> <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	£50k opportunity cost of money being spent in libraries means it will not be spent elsewhere, but no existing commitments have been made so will not result in removal of existing or promised funding
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Pilot delivery in Library's	Nov 2015
Delivery agreement between Oldham Together and Library's to deliver elements of EH	Jan 2016
Delivery	April 2016

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Oldham Together do not utilize the library for delivery of the offer	Early discussions with Oldham together are taking place

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None

Service Delivery and future expected outcomes:

More integrated delivery of Early Help and Library services.

Organisation (other services)

None

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

Library staff will work more closely with EH teams; EH staff will add capacity, including through their volunteers.

Communities

There will be no loss of service or reduction in quality of service. It will support the development of Early Help offer being delivered in communities

Service Users

There will be no impact on service users

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

none

Section 6

<u>Supplementary Information</u>
None

Section 7

<u>Consultation Information –</u> <i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	Not considered necessary
Staff Consultation	Not considered necessary
Public Consultation	Not considered necessary
Service User Consultation	Not considered necessary
Any other consultation	Not considered necessary

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Debbie Holland/Sheena Macfarlane
----------------------	----------------------------------

Support Officer Contact:	Ellen Marchbank-Smith
Support Officer Ext:	0161 770 5690


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	6 July 2015
-----------------------	-------------

Section 10

Approval by Cabinet Member

Cabinet Member:	Cllr Brownridge
Signed:	
Date:	6 July 2015

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B015
Portfolio	Co-operatives and Neighbourhoods
Directorate:	Co-operatives and Neighbourhoods
Division:	Community Services
Responsible Officer and role:	Haydn Roberts – Head of Community Safety Debbie Holland – Early Help Service Manager
Cabinet Member and Cluster :	Cllr B Brownridge – Neighbourhoods & Co-operatives

Title:	Transfer Independent Domestic Violence Advisor (IDVA) function from Community Safety to Early Help
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Response Services)</i>	Expenditure	Community Safety:£699k
	Income	(£0k)
	Net Expenditure	Community Safety:£699k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	Independent Domestic Violence Advisor 3 posts transfer to Early Help from Community Safety

	2016/17 £k	2017/18 £k
Proposed Financial saving:	70	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>The Independent Domestic Violence Advisor service currently supports people at high risk of domestic violence. The Early Help Service currently supports people at low and medium risk from domestic violence.</p> <p>Many of the skills and development needs of the two teams are the same. Efficiencies can therefore be achieved by managing this holistically rather than as two separate services. This would involve merging the two teams, retaining the specialist knowledge of the Independent Domestic Violence Advisor but requiring them</p>
---	--

	to work differently by actively working with whole families rather than just victims.
--	---

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	£70,000 through efficiency by combining the two teams
---	---

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	It should be noted that £1,500,000 of the Early Help service is currently funded by the Public Health Transformation Fund. We have received no information to suggest that this is likely to reduce, but if it were to do so then this would create an additional pressure.
---	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	0
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Teams informally co-located	September 2015
Staff consultation undertaken on longer term structural merger	August - October 2015
Final structure signed off	End December 2015
New structure implemented	January-March 2016

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Staff identify through consultation barriers to merger that managers have not considered	Staff have been involved informally in discussions about working more closely together, and have been supported and encouraged to do so for the past three months

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None

Service Delivery and future expected outcomes:

More integrated offer for people as they move between the Domestic Violence risk levels, including increased ability to support the whole family rather than just victims of Domestic Violence.

Organisation (other services)

Simplified referral route for low and medium risk cases – only need to refer to one service, not two.

Services currently use the Greater Manchester wide Multi Agency Risk Assessment Conference (MARAC) Sharepoint process to refer 'High Risk' cases into the Multi Agency Risk Assessment Conference process. This administration process is currently being undertaken by Community Safety Services Business Support. This referral route will remain as it is the Greater Manchester agreed process and enables agencies from outside of Oldham to access services and support for clients who may move to or transition through Oldham but the back office functions can be merged into 1 process.

Workforce

Note: *Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models*

Staff will need to change working methods to integrate the two teams – e.g. Early Help staff needing to take a more directive approach on occasions; Independent Domestic Violence Advisors needing to work with whole families as well as the victims of Domestic Violence and undertake more face-to-face casework. Total staffing Early Help Development team 10.5 FE. Total staffing IDVA 3

Communities

More integrated offer for people as they move between the Domestic Violence risk levels, including increased ability to support the whole family rather than just victims of Domestic Violence.

Service Users

More integrated offer for people as they move between the Domestic Violence risk levels, including increased ability to support the whole family rather than just victims of Domestic Violence.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

Simplified referral route for low and medium risk cases – only need to refer to one service, not two.

Services currently use the Greater Manchester wide Multi Agency Risk Assessment Conference (MARAC) Sharepoint process to refer 'High Risk' cases into the Multi Agency Risk Assessment Conference process. This administration process is currently being undertaken by Community Safety Services Business Support. This referral route will remain as it is the Greater Manchester agreed process and enables agencies from outside of Oldham to access services and support for clients who may move to or transition through Oldham but the back office functions can be merged into 1 process.

Section 6

Supplementary Information

None

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	Informally initially with formal engagement alongside staff consultation in the Autumn.
Staff Consultation	None to date but will be undertaken in the Autumn.
Public Consultation	Not considered necessary
Service User Consultation	Not considered necessary
Any other consultation	Not considered necessary

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Haydn Roberts/Debbie Holland
Support Officer Contact:	Ellen Marchbank-Smith
Support Officer Ext:	0161 770 5690


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	6 July 2015
-----------------------	-------------

Section 10

Approval by Cabinet Member

Cabinet Member:	Cllr Brownridge
Signed:	
Date:	6 July 2015

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B016
Portfolio	Co-operatives and Neighbourhoods
Directorate:	Co-operatives and Neighbourhoods
Division:	Community Services
Responsible Officer and role:	Debbie Holland – Early Help Service Manager
Cabinet Member and Cluster :	Cllr B Brownridge – Neighbourhoods & Co-operatives

Title:	Early Help re-tendering to re-focus service on supporting families at an earlier stage
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Response Services)</i>	Expenditure	£5,129 k
	Income	(£1,589k) (inc. £1,500k PH Transformation Fund)
	Net Expenditure	£3,540k (Total Early Help)
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	Positive Steps: 7 Threshold: 18

	2016/17 £k	2017/18 £k
Proposed Financial saving:	130	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	The Early Help service was created in April 2015, bringing together a range of existing services. At this point, it was not possible to fully align two contracts (one with Positive Steps and one with Threshold) due to the contract end-dates. These contracts have now been aligned and end on 31 st March 2016. This provides an opportunity to re-focus the new contract on supporting people at an earlier stage, in line with the ethos of Early Help.
---	---

<u>Proposed Savings £k:</u> <i>Through efficiency, income generation, transformation, decommissioning, etc</i>	£130k recurrent The two contracts currently total £630,000. By bringing them together and re-focusing on earlier help (which is cheaper to deliver) more people can be supported, earlier, for less money.
--	--

<u>Further Financial Implications & Considerations</u> <i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	It should be noted that £1,500,000 of this service is currently funded by the Public Health Transformation Fund. We have received no information to suggest that this is likely to reduce, but if it were to do so then this would create an additional pressure.
--	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	£130
Type of impact on partners	Negative

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Notify current contract-holders of intention to end contracts 31 st March 2016	July 2015
Re-tender for re-specified contract	September 2015
Award new contract	December 2015

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Do not receive high quality bids for the revised contract specification	Work will be undertaken with the market to ensure they are geared up to respond positively to the re-specified service

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None

Service Delivery and future expected outcomes:

Supporting people at an earlier stage was the basis for establishing Early Help – this proposal furthers this ambition. This is better for residents as they receive support before reaching crisis point and better for services as it is less time-intensive and therefore less costly.

Organisation (other services)

None

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

None

Communities

None identified.

Service Users

Supporting people at an earlier stage was the basis for establishing Early Help – this proposal furthers this ambition. This is better for residents as they receive support before reaching crisis point and better for services as it is less time-intensive and therefore less costly.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

Direct impacts for the two organisations currently holding the contracts – Positive Steps and Threshold.

Section 6

<u>Supplementary Information</u>
None

Section 7

<u>Consultation Information –</u> <i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	Not considered necessary
Staff Consultation	Not considered necessary
Public Consultation	Not considered necessary
Service User Consultation	Not considered necessary
Any other consultation	Not considered necessary

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Debbie Holland
----------------------	----------------

Support Officer Contact:	Ellen Marchbank-Smith
Support Officer Ext:	0161 770 5690


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	6 July 2015
-----------------------	-------------

Section 10

Approval by Cabinet Member

Cabinet Member:	Cllr Barbara Brownridge
Signed:	
Date:	2 July 2015

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B018
Portfolio	Co-operatives and Neighbourhoods
Directorate:	Co-operatives and Neighbourhoods
Division:	Community Services
Responsible Officer and role:	John Rooney – Head of Housing & Response Services
Cabinet Member and Cluster :	Cllr B Brownridge – Neighbourhoods & Co-operatives

Title:	Increased income into First Response through new CCTV or security contracts
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Response Services)</i>	Expenditure	£1,428k
	Income	(£1,900k) *Current income target
	Net Expenditure	(£472k)
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	28

	2016/17 £k	2017/18 £k
Proposed Financial saving:	50	0
Proposed reduction in FTE's	0	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>First Response (part of Response Services) undertakes security patrols, guarding, CCTV monitoring, out of hours calls and co-ordinates emergency planning issues for the Council. The service also undertakes support for a number of major events in the Borough.</p> <p>The Service has undertaken a number of restructures to generate further efficiencies in recent years.</p>
--	--

	Following the upgrade in the Council's CCTV Control Room and increased engagement with housing providers, there is considered an opportunity to generate additional income in 15/16. This could be found through contract work with housing providers or other partners.
--	--

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	£50k from 16/17 recurring above current surplus target through generating additional CCTV/ security contracts.
---	--

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	This would mean that Response Services revised net expenditure target would be - £522k from 16/17 onwards.
---	--

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	0
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
New contract/ contracts secured	July 2016 or option to reduce staffing further considered

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Additional contract not secured	Seek to generate income through other parts of service or reduce staffing
Additional contract don't meet income target	Seek to generate income through other parts of service or reduce staffing

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

Should the service secure a major new external CCTV contract (50 cameras +) above the capacity of its current system, the capital element would be charged direct to the client as well as relevant revenue costs.

Service Delivery and future expected outcomes:

The existing CCTV Control Room system has remaining capacity to record and view around 50 additional cameras.

Any larger-scale investment would require direct investment by the partner and a long-term contract.

As well as CCTV, a focus of the service has been 'upselling' of other security and pest control services to schools and public bodies.

Organisation (other services)

None

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

Should income not be generated, this could potentially result in loss of 2 FTE posts.

Communities

None identified.

Service Users

None identified

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

The Service would still be able to deliver its patrolling, CCTV monitoring and other security commitments to schools, public bodies and the Council.

Section 6

<u>Supplementary Information</u>
None

Section 7

<u>Consultation Information –</u> <i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	Not considered necessary
Staff Consultation	None
Public Consultation	None
Service User Consultation	None
Any other consultation	None

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	John Rooney
----------------------	-------------

Support Officer Contact:	Ellen Marchbank-Smith
Support Officer Ext:	0161 770 5690


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	6 July 2015
-----------------------	-------------

Section 10

Approval by Cabinet Member

Cabinet Member:	Cllr Brownridge
Signed:	
Date:	6 July 2015

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B019
Portfolio	Corporate / Neighbourhoods- Savings to be realised in Economy & Skills
Directorate:	Co-operatives & Neighbourhoods
Division:	Community Services
Responsible Officer and role:	John Rooney/ Andy Cooper
Cabinet Member and Cluster :	Cllr B Brownridge - Neighbourhoods & Co-operatives Cllr A Jabbar – Finance and HR

Title:	Reduced PFI costs through enhanced PFI Contract Monitoring
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£19,900k
	Income	(£0k)
	Net Expenditure	£19,900k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	0

	2016/17 £k	2017/18 £k
Proposed Financial saving:	150	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented,</i>	A corporate saving; four of the General Fund PFI contracts; BSF, Grouped Schools, Street Lighting and Oldham Library have a combined budgeted unitary charge for 2016/17 of £19.9m, the proposal is to make a £250k saving on the combined charges through more thorough and enhanced monitoring arrangements, utilising existing resources. Contractual agreements require that savings on both the Schools and BSF contracts are shared with the schools concerned; the net saving is therefore £150k. It is
--	--

<i>timescale for implementation</i>	anticipated that the majority of savings will arise through the schools contracts.
-------------------------------------	--

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	£250k from continued PFI contract monitoring and enforcement and where appropriate reviewing and amending the contractual service level provision. Of this £100k would be passed, contractually on to the schools.
---	--

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	The proposal cuts across 4 PFI schemes and three different services/ directorates. The exact allocation of the required saving will be confirmed prior to the commencement of the 2016/17 financial year following a review of the current arrangements.
---	--

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	0
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Contract and Monitoring review	Jan 16
Ongoing contract monitoring	Monthly throughout 2016/17

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Lack of scope in current arrangements to deliver the required savings	Completion of an initial review by 31/01/2016

Insufficient deductions	<p>Monthly monitoring and contract enforcement will identify non-compliances.</p> <p>If issues are resolved before deductions are levied then the Council will benefit from improved service performance.</p>
-------------------------	---

Section 5

What impact might the proposal have on the following?

<p><u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i></p>
<p>The review will ensure that the standard of the assets, which will revert back to the Council at the end of the PFI contract are maintained.</p>

<p><u>Service Delivery and future expected outcomes:</u></p>
<p>The contractor's service standards will improve in order to avoid or reduce future deductions. If this proves impractical then the review will provide the basis for negotiating a lower annual charge.</p>

<p><u>Organisation (other services)</u></p>
<p>None</p>

<p><u>Workforce</u> <i>Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models</i></p>
<p>None</p>

<p><u>Communities</u></p>
<p>None</p>

<p><u>Service Users</u></p>
<p>Service users will benefit as service standards will improve Any change to performance standards would need to be taken following consultation with users.</p>

<p><u>Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)</u></p>
<p>None</p>

Section 6

Supplementary Information

The Council's Housing Team has developed expertise from managing PFI Housing contracts which has been transferred into reviewing and monitoring of PFI schools. This has generated efficiencies from those additional contracts and there is the opportunity to extend this with income targets for future years.

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	N/A
Staff Consultation	N/A
Public Consultation	N/A
Service User Consultation	N/A
Any other consultation	N/A

Section 8

Equality Impact Screening

Is there **potential** for the proposed saving to have a disproportionate adverse impact on any of the following groups:

	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at: http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	n/a
By:	n/a

Section 9

Responsible Officer:	Anne Ryans, Director of Finance
----------------------	---------------------------------

Support Officer Contact:	John Rooney /Andy Cooper
Support Officer Ext:	4558/4925


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk


Submitted to Finance:	15 July 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr Abdul Jabbar
Signed:	
Date:	15 July 2015

Approval by Supporting Cabinet Members

Cabinet Member:	Cllr B Brownridge
Signed:	
Date:	15 July 2015

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	D001
Portfolio	Economy and Skills
Directorate:	Economy and Skills
Division:	Enterprise and Skills
Responsible Officer and role:	Lynda Fairhurst Head of Service, Oldham Lifelong Learning Service
Cabinet Member and Cluster :	Cllr S Akhtar - Economy and Skills

Title:	Lifelong Learning Service – Income Generation
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Division):</i>	Expenditure	£4,348k
	Income	(£3,525k)
	Net Expenditure	£823k
		Note: This includes Capital Charges – Depreciation £414,210 this is a central cost to the Authority. Revised Net Expenditure £408,770
Total posts numbers in section: <i>(By Division):</i>	FTE	80 FTE

	2016/17 £k	2017/18 £k
Proposed Financial saving:	20	0
Proposed reduction in FTE's	0	0

Section 3

Background: <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>The proposal is that the Service contributes £20k from additional external bids for 2016/17 and £0 for 2017/18.</p> <p>This will strengthen the strong contribution that the Service makes to the Council's vision and priorities, especially in relation to Get Oldham Working and the Co-operative Council. It will enable the Council to influence the shaping of services for local citizens.</p>
--	--

	<p>The proposal is an annual income target of £20k for 2016/17.</p> <p>There should be little impact on the Service's ability to deliver outcomes and meet targets. The high quality of the Service will be maintained and outcomes and targets will remain in line with Skills Funding Agency (SFA) and Council requirements.</p> <p>The development of a non SFA element of delivery will help to diversify the offer from the Service. It will extend opportunities for delivery of targeted programmes which focus on disadvantaged learners and communities.</p> <p>Competition for funding is high and to be successful bids will have to be made in strong partnerships. These partnerships may be with Greater Manchester groupings or across wider areas such as the North West.</p>
--	---

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>Proposed income target £20k 2016/17. The £20k income target for 2016/17 is RAG rated green.</p> <p>The proposal is that the Service contributes £20k from additional external bids.</p> <p>Actions being taken to deliver the £20k income target from external bids:</p> <ul style="list-style-type: none"> • The Service is working with the Heads of Service from the Greater Manchester authorities to explore bidding opportunities in the next round of ESF. Any bid will have to engage a wide range of partners across authorities to be successful. <ul style="list-style-type: none"> ○ ESF Funds 2014-2020 ESF lots relating to GM Devolution Agreement and Growth / City Deals – Skills and Employment <p>Lot E1 Innovative programme for marginalised groups to help bring them to / support them to be more socially included, targeting specific communities, groups or ethnic minorities with high level of poverty (pre-support) Total value £10 million Likely timetable – call specifications published for partner input September 2015; call specifications issued by Opt Ins / directs October 2015</p>
---	--

	<p style="text-align: center;">Income target £10k</p> <ul style="list-style-type: none"> Working Well Phase 2 programme <p>The Service is working with Jon Bloor, Head of Enterprise and Skills, to potentially submit a bid for the Working Well Phase 2 programme. If successful, the bid may bring in a maximum of £1.4 million over two and a half years running from October 2015 – March 2017.</p> <p>If funding is awarded, the Service will deliver the skills training which will provide additional funding for the Service and potentially economies of scale.</p> <p style="text-align: center;">Income target £10k</p>
--	--

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>There are unknown risks to funding in the future in terms of the devolution to Greater Manchester of the Adult Skills Budget. The Service’s funding from the Skills Funding Agency (SFA) has been reduced for the 2015-16 academic funding year which runs into the Council’s financial year 2016-17. The Service’s SFA Adult Skills funding allocation for 2015-16 (academic year) is £1,305,588. This is £463,267 lower than the revised allocation of £1,768,855 in 2014-15 (academic year).</p> <p>There was an additional £200k received as a one off (in year) payment in 2014-15 for Adult Skills, meaning the above reduction is actually only £263,267 against the original baseline allocation for the 2014-15 academic year of £1,568,855.</p> <p>The additional £200k payment was directly linked to the delivery of ‘additional and challenging Adult Skills learner targets’.</p> <p>No permanent changes were made to the Service’s delivery programme as a result of the £200k funding; therefore no additional delivery costs will be incurred in 2015-2016.</p> <p>The Service will ensure, by flexing its 2015-2016 budgets, that Service delivery will be met within the revised budget allocation.</p>
---	--

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	None.
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	None.
Type of impact on partners	Positive

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
ESF Lot E1 Call Specification for Partner Input published	September 2015 (Likely timescale)
Call Specification issued	October 2015 (Likely timescale)
Partner bid submitted	To timescale when published
Notification of outcome of bid	To timescale when published
If successful, funding allocated and delivery commences	To timescale when published
Working Well Phase 2 Programme Bid submitted in partnership with Enterprise and Skills team – lead Jon Bloor	To published timescale
If successful, funding allocated and delivery commences	October 2015 – March 2017
Completion of EIA Equality impact screening completed and an EIA is not required	June 2015
Consultation within PVFM timeline No formal consultation is required	N/A

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Failure to secure funding from bids due to competitive nature of bidding and the need to work in partnership	The Service is working with a wide range of networks to maximise opportunities for successful partnership

	bids e.g. Greater Manchester Local Authorities Heads of Service Network, Greater Manchester Learner Provider Network.
Unknown risks to funding in the future in terms of the devolution of the SFA's Adult Skills Budget to Greater Manchester	Senior officers of the Council sit on key groups and are directly involved in planning and decision making. They are working to position the Council and the Service to maximise funding allocations to meet the needs of Oldham citizens.
The percentage of funding that can be drawn down for costs other than direct delivery is limited	The Council and Service will ensure that funding is utilised in line with the funding rules / guidance of the additional funding streams.

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

There are no property implications. The Service will continue to operate from dedicated Lifelong Learning centres and community outreach locations. Community based delivery is an essential feature of delivery and is vital in maximising engagement of learners, especially in disadvantaged communities.

Service Delivery and future expected outcomes:

The Service currently:

- Has circa 10,360 enrolments and engages circa 5,250 learners (as at June 2015)
- Contributes significantly to the Council's Get Oldham Working ambitions, the Public Service Reform agenda and our Health and Wellbeing ambitions by delivering provision which focuses on people who are:
 - Unemployed
 - Seeking work
 - Jobcentre Plus clients
 - Hard to reach and most disadvantaged
 - Parents and families
 - Minority ethnic groups
 - Experiencing learning difficulties and/or disabilities
 - Full level 2 learners

- Delivers vocational learning, English, Maths and English for Speakers of Other Languages (ESOL), Family English, Maths and Language (FEML), ICT, community learning and community engagement, health and wellbeing
- Works closely with key partners to deliver the Council's vision and priorities. These include:
 - Enterprise and Skills Team
 - District Teams
 - The Oldham College
 - Jobcentre Plus
 - Work Programme providers
 - Positive Steps
 - National Careers Service
 - Work Clubs
 - Union learning representatives
 - Workforce development service
 - Schools
 - Children's centres
 - Voluntary and Community sector
 - Local businesses

The additional programmes delivered via the funds drawn down from successful external bids will enhance the Service's ability to deliver outcomes and meet targets. The high quality of the Service will be maintained and outcomes and targets will remain in line with SFA and Council requirements.

The development of a non SFA element of delivery should help to diversify the offer from the Service and to expand partnership delivery for the benefit of the citizens of Oldham.

Organisation (other services)

Successful bids for external funds will expand the opportunity to work with other organisations and partners and in particular the Enterprise and Skills team. This will ensure that the Get Oldham Working agenda is delivered and the Council's ambition to get more people into work is met.

The Service does not trade with other Council services and therefore this proposal will not impact upon any other services.

There is no investment requirement for other services.

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

There will be no reduction in FTE in 2016-2017 and 2017-2018.

Additional staff, especially tutors, may be required to deliver the programmes stemming from successful bids.

Communities

Learners are already largely taking responsibility for their own learning. The only exceptions are Job Centre Plus clients who may be participating simply because they are mandated to attend.

There will be no change in the community in terms of responsibility.

Minimal impact on performance targets is envisaged resulting in little behavioural change or enforcement.

The current footprint of delivery is not expected to change.

Service Users

There will be no change in access to learning programmes for learners / Service Users. If bids are successful, a wider range of programmes will be available across Oldham, especially in disadvantaged communities. This will give learners more opportunities to engage in and access learning which develops the skills needed to progress and gain employment.

The high quality of Service delivery will be maintained.

There will be no negative impact on the current fees and charges made to learners. Those learners on existing programmes who qualify will continue to have free or concessionary learning. It is highly likely that additional funding streams will focus on the most disadvantaged for whom learning will be free.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

There is a potential positive impact on the third sector organisations as partnership bids are likely to involve local organisations, potentially increasing their capacity to engage local citizens.

Section 6

Supplementary Information

Get Oldham Working – bids will either be developed in direct partnership with the Enterprise and Skills team and/or will focus on gaining additional funding to enhance skills development and support progression into employment. A key focus will also be on engaging the most disadvantaged and working with marginalised groups to enable them to be more socially included.

The additional funding will complement SFA funded provision which already focuses on the Council's priorities, especially Get Oldham Working and the Co-operative agenda.

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	None required.
Staff Consultation	The management team will be consulted about the best means to deliver the target within overall staffing consultation timelines
Public Consultation	None required
Service User Consultation	None required.
Any other consultation	No formal consultation is required.

Section 8

Equality Impact Screening

Is there **potential** for the proposed saving to have a disproportionate adverse impact on any of the following groups:

	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No

People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Lynda Fairhurst, Head of Service Lifelong Learning Ext: 8055
----------------------	---

Support Officer Contact:	Beckie Wylie, Exec Support Manager (ESM)
Support Officer Ext:	4089


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	15 July 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr S. Akhtar
Signed:	
Date:	15 July 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	D003
Portfolio	Economy and Skills
Directorate:	Education and Early Years
Division:	Attainment – Inclusion & Vulnerable Groups
Responsible Officer and role:	Caroline Sutton - Director Education and Early Years
Cabinet Member and Cluster :	Cllr S Akhtar - Economy and Skills

Title:	Education – Transfer of Income
---------------	---------------------------------------

Section 2

2015/16 Budget for the section: <i>(By Cost Centre):</i>	Expenditure	£959k
	Income	(£1,086k) (£925k relates to DSG Income)
	Net Expenditure	(£127k)
Total posts numbers in section: <i>(By Cost Centre):</i>	FTE	14.61

	2016/17 £k	2017/18 £k
Proposed Financial saving:	36	0
Proposed reduction in FTE's	0	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>In partnership with schools, the Council has in place positive measures to improve children's attainment through emphasising the importance of good attendance. It is intended that, over time, these will reduce the incidence of penalty notices for pupils' non-attendance. However, penalty notices remain a feature of government policy and look set to continue.</p> <p>Discretion is always exercised by officers when there are genuine extenuating circumstances relating to non-attendance at school.</p>
--	---

Proposed Savings £k: <i>Through efficiency, income generation, transformation, decommissioning, etc</i>	£36k
---	------

Further Financial Implications & Considerations <i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	None
---	------

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	0
Type of impact on partners	Neutral or marginal

Section 4

Key Milestones	
Milestone	Timescale
Review profile of penalty fines for 2015/16	By October 2015
	This is an extension of saving A008 put forward for 2015/16 and therefore an EIA and any necessary consultation was completed in 2014 Any further consultation if required will be completed by 26 October 2015

Key Risks and Mitigations	
Risk	Mitigating Factor
Change in government policy	No change in policy has been signalled in the Education and Adoption Bill
Income cannot be used to substitute for base	Review regulations to ensure that

budget	income can be offset in areas where base budget can be saved.
Political and public sensitivity	The Council will work within the legal framework to ensure all fines are legitimate and appropriate discretion applied
Change in parental behaviour	Income will be monitored on an ongoing basis so that any shortfall is identified quickly through regular budget monitoring and alternative savings proposed

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None

Service Delivery and future expected outcomes:

It is anticipated that, over time, the parental responsibility and other measures will improve attendance and have a positive impact on pupil outcomes.

Organisation (other services)

None

Workforce

Note: *Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models*

Minor increase to admin workload to apply and collect fines.

Communities

None

Service Users

None

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

None

Section 6

Supplementary Information
None

Section 7

Consultation Information – <i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	N/A
Staff Consultation	N/A
Public Consultation	Completed in 2014, but any further consultation required will be complete by 26 October 2015
Service User Consultation	N/A
Any other consultation	N/A

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	Yes
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	Yes
EIA to be completed by:	Angela Newman
By:	October 2015

Section 9

Responsible Officer:	Angela Newman
Support Officer Contact:	Carol Hyde
Support Officer Ext:	1621


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	7 August 2015
-----------------------	---------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr S. Akhtar
Signed:	
Date:	30 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

D003 – Non-attendance penalty fines

Lead Officer:	Angela Newman
People involved in completing EIA:	Angela Newman
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	Yes <input checked="" type="checkbox"/> Date of original EIA: N/A

General Information

1a	Which service does this project, policy, or proposal relate to?	This proposal relates to income generation from penalty fines for pupils' non-attendance at school in line with government legislation. This is part of the Vulnerable Groups and Inclusion Service within Education & Early Years.
1b	What is the project, policy or proposal?	<p>This proposal relates to a proposal within the budget template D003, entitled <i>Education – Transfer of income</i>.</p> <p>The current target against this project amounts to £36,000 for 2016/17.</p> <p>Persistent absence is a serious problem for pupils. Much of the work children miss when they are off school is never made up, leaving these pupils at a considerable disadvantage for the remainder of their school career. There is also clear evidence of a link between poor attendance at school and low levels of achievement.</p> <p>It is legislation that parents must make sure their child gets a full-time education and they can be prosecuted if they don't make sure their child has an education. Local councils and schools can use various legal powers if a child is missing school without a good reason.</p> <p>From the beginning of the academic year 2015 to 2016, the government has reduced the persistent absence threshold from 15 per cent to 10 per cent (when a child has missed 38 sessions, 19 days, at any point during the academic year which can be as little as 5 or 7 sessions, 2.5 or 3.5 days each term).</p> <p>Parents have to get permission from the head teacher if they want to take their child out of school during term time. They can only do this if: they make an application to the head teacher in advance (as a parent the child normally lives with) and there are exceptional circumstances. It's up to the head teacher how many days a child can be away from</p>

		<p>school if leave is granted. If leave is not granted and the child is absent for a holiday in term time then a penalty notice can be applied.</p> <p>For non- attendance or truancy parents normally get warnings and offers of help from the council first. Instead of being prosecuted, they can be given a penalty notice. The penalty is £60, rising to £120 if paid after 21 days but within 28 days. Parents can only allow their child to miss school if either: they're too ill to go in to school or they have got advance permission from the school.</p> <p>The savings specified will be achieved through income generation projections based on the volume of fines generated in the past three years.</p>
1c	What are the main aims of the project, policy or proposal?	To achieve savings to the Council's budget by offsetting expenditure against projected income generation.
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	<p>The process of fining parents when their children do not attend school is set to continue and, as it is statutory, it is not an option to discontinue it.</p> <p>This proposal will affect parents who do not ensure that their children attend school sufficiently through the school year in line with the statutory guidelines as outlined above in 1b. In many instances this is related to families taking holidays during term-time.</p> <p>Good attendance at school is a priority for both the Council and the government as there is validated evidence that children and young people's achievement is dependent on this.</p> <p>The Council's long-term aim is to reduce the volume of penalty fines by raising awareness of the importance of attendance at school, but within the current statutory framework current levels of fines are set to continue for the next 2-3 years.</p>

1e. Does the project, policy or proposal have the potential to disproportionately impact on any of the following groups? If so, is the impact positive or negative?

	None	Positive	Negative	Not sure
Disabled people	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

People in a Marriage or Civil Partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
<i>E.g. vulnerable residents, individuals at risk of loneliness or carers.</i>		<input type="checkbox"/>	<input type="checkbox"/>	

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
1h	How have you come to this decision?	<p>The process of fining parents when their children do not attend school is set to continue and, as it is statutory, it is not an option to discontinue it. From the beginning of the academic year 2015 to 2016, the government has reduced the persistent absence threshold from 15 per cent to 10 per cent (when they have missed 38 sessions at any point during the academic year which can be as little as 5 or 7 sessions each term).</p> <p>Over time it is hoped that this will result in improved levels of attendance at school, and therefore improved levels of attainment for Oldham children.</p>

Stage 5: Signature**Lead Officer: Angela Newman****Date: 27.10.15****Approver signature: Elaine McLean****Date: 27.10.2015****EIA review date: October 2016**

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	D004
Portfolio	Economy and Skills
Directorate:	Education and Early Years
Division:	Inclusion and Vulnerable Groups
Responsible Officer and role:	Caroline Sutton - Director Education and Early Years
Cabinet Member and Cluster :	Cllr S Akhtar - Economy and Skills

Title:	Use of Pupil Premium Plus Grant
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Cost Centre):</i>	Expenditure	£1,263k
	Income	(£1,191k) (Includes £1,182k of DSG Income)
	Net Expenditure	£72k
Total posts numbers in section: <i>(By Cost Centre):</i>	FTE	14.61

	2016/17 £k	2017/18 £k
Proposed Financial saving:	38	0
Proposed reduction in FTE's	0	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>The Pupil Premium Plus (PP+) Grant is provided by central government to support the improvement of educational outcomes for Looked After Children. Unlike the standard Pupil Premium Grant (for disadvantaged pupils) the PP+ is routed through local authorities to enable quality assurance activity and accountability in schools to be managed by the LA's Virtual Head teacher. The proposal aims to fund existing quality assurance and accountability activity for Looked After Children in schools through the PP+ rather than the Council's base budget.</p>
--	--

Proposed Savings £k: <i>Through efficiency, income generation, transformation, decommissioning, etc</i>	£38k
---	------

Further Financial Implications & Considerations <i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	None This saving depends on the ability to legitimately substitute income for Dedicated Schools Grant (DSG) and deploy DSG to other budget areas.
---	--

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	None
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	None
Type of impact on partners	Neutral or marginal

Section 4

Key Milestones	
Milestone	Timescale
Implementation of new arrangements	From September 2015
	This is an extension of saving A008 put forward for 2015/16 and therefore an EIA and any necessary consultation was completed in 2014 Any further consultation if required will be completed by 26 October 2015

Key Risks and Mitigations	
Risk	Mitigating Factor
There has been a risk that the PP+ might not continue	The provisions of the Education and Adoption Bill indicate that the funding will continue
Income cannot be used to substitute for base budget	Review regulations to ensure that income can be offset in areas where base budget can be saved

Section 5

What impact might the proposal have on the following?

Property Implications <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
None

Service Delivery and future expected outcomes:
The proposal is likely to have a positive effect on the educational outcomes of Looked After Children.

Organisation (other services)
The proposal is likely to have a positive impact on the partnership working with children's social care services on the needs of Looked After Children.

Workforce
Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models
None

Communities
None

Service Users
None

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

None

Section 6

Supplementary Information

The Pupil Premium Plus Grant is currently set at £1,900 per Looked After Child of school age per year.

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	N/A
Staff Consultation	N/A
Public Consultation	Completed in 2014, but any further consultation required will be complete by 26 October 2015
Service User Consultation	N/A
Any other consultation	N/A

Section 8

Equality Impact Screening

Is there **potential** for the proposed saving to have a disproportionate adverse impact on any of the following groups:

	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No

People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at: http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Angela Newman
----------------------	---------------

Support Officer Contact:	Carol Hyde
Support Officer Ext:	1621


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	7 August 2015
-----------------------	---------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr S. Akhtar
Signed:	
Date:	30 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	D005
Portfolio	Economy and Skills
Directorate:	Education and Early Years
Division:	School Places Planning – Educational Psychology Service
Responsible Officer and role:	Caroline Sutton - Director Education and Early Years
Cabinet Member and Cluster :	Cllr S Akhtar - Economy and Skills

Title:	Income Generation – Educational Psychology
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Cost Centre (delete as appropriate):</i>	Expenditure	£668k
	Income	(£414k) (includes £150k of DSG Income)
	Net Expenditure	£254k
Total posts numbers in section: (By Cost centre)	FTE	9.30

	2016/17 £k	2017/18 £k
Proposed Financial saving:	55	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	The Education and Child Psychology Service successfully trades its services to schools within Oldham and other local authorities. Projections indicate that it will generate income above its targets in 2016/17, allowing this to represent a saving for the Council.
---	--

Proposed Savings £k: <i>Through efficiency, income generation, transformation, decommissioning, etc</i>	Savings of £55k are proposed through income generation.
---	---

Further Financial Implications & Considerations <i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	Further analysis is needed to confirm a longer term business plan for the service in future years. There is a need for further clarity on how the DSG supports the services core statutory duties and how this is distinct from trading activities.
---	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	None at this stage, although the business planning activity referred to above may identify the need for increased staffing if this is needed to secure further trading of services.
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	N/A
Type of impact on partners	Neutral or marginal

Section 4

Key Milestones	
Milestone	Timescale
Agreement of 3 year business plan	Completed: October 2015
	EIA unlikely to be required Any consultation with schools about trading proposals to be complete by 26 October 2015

Key Risks and Mitigations	
Risk	Mitigating Factor
Service does not achieve income targets	Service Level Agreements with schools in place by December 2015 to secure income levels

Trading activity impacts on the delivery of statutory services	Ongoing monitoring of service delivery
Income cannot be used to substitute for base budget	Review regulations to ensure that income can be offset in areas where base budget can be saved

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None

Service Delivery and future expected outcomes:

There is a risk that trading activity distracts the service and/or schools from the delivery of core, statutory services; however this will be closely monitored.
There is the potential to further deliver services to improve the support available to schools.

Organisation (other services)

None

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

Additional staffing may be required to deliver additional trading services. There would be no changes to terms and conditions but individuals may carry out new areas of work.

Communities

None

Service Users

None

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

None

Section 6

Supplementary Information

The Education and Child Psychology Service has recently come under the accountability of the Director of Education and Early Years. Work is now under way on the business planning referred to above.

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	N/A – no changes to terms and conditions to apply
Staff Consultation	To be complete by October 2015 if required
Public Consultation	N/A
Service User Consultation	Any consultation with schools to be completed October 2015 if required
Any other consultation	N/A

Section 8

Equality Impact Screening

Is there **potential** for the proposed saving to have a disproportionate adverse impact on any of the following groups:

	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have	No

undergone a process or part of a process of gender reassignment	
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at: http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Gill Hoar
Support Officer Contact:	Sharon Davies
Support Officer Ext:	1138


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	7 August 2015
-----------------------	---------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr S. Akhtar
Signed:	
Date:	30 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	A001
Portfolio	Chief Executive
Directorate:	Chief Executive Management
Division:	Chief Executive Management
Responsible Officer and role:	Carolyn Wilkins, Chief Executive
Cabinet Member and Cluster :	Cllr J McMahon - Leader of the Council

Title:	Organisational Redesign
---------------	--------------------------------

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£1,173k
	Income	(£1,173k)
	Net Expenditure	£0k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	19

	2016/17 £k	2017/18 £k
Proposed Financial saving:	150	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>Members will recall that the 2015/16 budget was prepared to include a savings proposal of £250k to reflect the reconfiguration of the management of the Council around a structure with a Chief Executive and four Directorates as follows:</p> <ul style="list-style-type: none"> • Corporate and Commercial Services • Co-operatives and Neighbourhoods • Economy and Skills • Health and Wellbeing
---	--

	<p>As a result the management layer below Executive Director level was revised, with posts deleted and the introduction of a more streamlined management framework to reflect the requirements of a Co-operative Council.</p> <p>It has taken some time to implement the new structure including recruitment processes and as a consequence the saving arising from the structure revision (once operating over a full year) will release £400k savings rather than the £250k savings originally identified. This therefore enables a further £150k savings to be proposed to support the 2016/17 budget process.</p>
--	---

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>£150k as a result of efficiencies arising from the full implementation of the approved senior management structure</p>
---	---

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>None- This budget is recharged and therefore shown as NIL the expenditure and corresponding recharge will reduce by £150k.</p>
---	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	0
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
No milestones required	Available from 1/4/16

Key Risks and Mitigations	
Risk	Mitigating Factor
No risks inherent in the proposal	

Section 5

What impact might the proposal have on the following?

<u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
None

<u>Service Delivery and future expected outcomes:</u>
None

<u>Organisation (other services)</u>
None

<u>Workforce</u>
<i>Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models</i>
None – the staffing implications have already been addressed by the approval and implementation of the senior management structure in 2015/16

<u>Communities</u>
None

<u>Service Users</u>
None

<u>Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)</u>
None

Section 6

Supplementary Information
None

Section 7

Consultation Information – <i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none">• <i>What has been consulted on so far? With whom and when?</i>• <i>Further consultation required?</i>• <i>Date consultation to be started and concluded</i>	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	None
Staff Consultation	None
Public Consultation	None
Service User Consultation	None
Any other consultation	None

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Carolyn Wilkins
Support Officer Contact:	Anne Ryans, Director of Finance
Support Officer Ext:	0161 770 4902

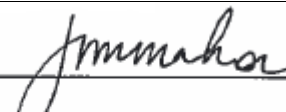
Cabinet Member Comments and/or approval	
Approved	

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	4 August 2015
-----------------------	---------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr J McMahon
Signed:	Signed  Cllr J McMahon (Cabinet Member for Regeneration & City Region)
Date:	4 August 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	A002
Portfolio	Policy and Governance
Directorate:	Policy and Governance
Division:	Executive Support
Responsible Officer and role:	Heather Moore, Head of Executive Support
Cabinet Member and Cluster :	Cllr A Shah, Performance and Corporate Governance

Title:	Savings proposal – Professional Fees
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£448k
	Income	(£448k)
	Net Expenditure	£0
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	21

	2016/17 £k	2017/18 £k
Proposed Financial saving:	24	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	The proposal is to offer up the professional fees budget, within Executive Support as there is no spend against this budget line.
---	---

<u>Proposed Savings £k:</u> <i>Through efficiency, income generation, transformation, decommissioning, etc</i>	£24k
--	------

<u>Further Financial Implications & Considerations</u> <i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	None
--	------

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	0
Type of impact on partners	Negative

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
None	

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
No risk identified with this proposal	

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None

Service Delivery and future expected outcomes:

None

Organisation (other services)

None

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

None

Communities

None

Service Users

None

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

None

Section 6

Supplementary Information
None

Section 7

Consultation Information –	
<i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	N/A
Staff Consultation	N/A
Public Consultation	N/A
Service User Consultation	N/A
Any other consultation	N/A

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Heather Moore, Head of Executive Support
Support Officer Contact:	As above
Support Officer Ext:	1975


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	22 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr A Shah Portfolio Holder Performance and Corporate Governance
Signed:	
Date:	19 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	C002
Portfolio	Corporate and Commercial Services
Directorate:	Corporate and Commercial Services
Division:	Director of Finance
Responsible Officer and role:	Anne Ryans, Director of Finance
Cabinet Member and Cluster :	Cllr A Jabbar; Finance and HR

Title:	Financial Services redesign
---------------	------------------------------------

Section 2

2015/16 Budget for the section: <i>(By Division):</i>	Expenditure	£4,498
	Income	(£4,490)
	Net Expenditure	£8k
Total posts numbers in section: <i>(By Division):</i>	FTE	115.76

	2016/17 £k	2017/18 £k
Proposed Financial saving:	375	137
Proposed reduction in FTE's	13.5	5.0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>Reorganise the three Accountancy Service sections into two - Corporate and Customer Facing. This will concentrate excellence in technical accounting in one section, whilst offering Executive Directors a single contact lead in Customer Facing for all their financial support requirements.</p> <p>Major regeneration projects will be supported by a Senior Finance Manager with two reporting finance managers and their teams. Any additional specialised requirements in this area will be commissioned externally.</p>
--	--

	<p>Delete one of three Assistant Borough Treasurer posts. Delete 13.5 other posts and create a new Finance Manager (Capital and Treasury). Substantive posts of all current permanent staff retained. Slotting in and internal advertising for all posts, except Assistant Director of Finance advertised externally. Full implementation by December 2015</p> <p>Savings arising from the delayed implementation of self-serve slipped to 2017/18. 5 posts will be saved due to savings from self-serve budget monitoring and the integrated payroll system.</p>
--	---

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>£375k through service transformation.</p>
---	--

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>None</p>
---	-------------

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	13.5 Council, being posts currently vacant
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	None
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Trades Union Consultation	28 th July 2015
Economic Impact assessment completed	August 2015
S188 consultation commences	1 st September 2015

Detailed staff and Trade Union consultation	September and October 2015
Slotting-in and internal and external recruitment	5 th November 2015
New structure in full operation	1 st December 2015

Key Risks and Mitigations	
Risk	Mitigating Factor
Inability to recruit suitable staff	Progressive status and reputation of Council Finance function attractive to applicants

Section 5

What impact might the proposal have on the following?

Property Implications <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
Marginal release of office space in Civic Centre possible

Service Delivery and future expected outcomes:
The changes should offer a better service by improved coordination and a more effective structure.
No impact on service quality

Organisation (other services)
Improved service to Executive Directors through offering single point of contact

Workforce
<i>Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models</i>
None

Communities
None

<u>Service Users</u>
None

<u>Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)</u>
None

Section 6

<u>Supplementary Information</u>
None

Section 7

<u>Consultation Information –</u>	
<i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	July to October 2015
Staff Consultation	Early engagement July 2015 Formal consultation begins 1 st September 2015 and ends Mid-October 2015
Public Consultation	No Impact – none required
Service User Consultation	No impact – none required
Any other consultation	None required

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No

People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Anne Ryans, Director of Finance
----------------------	---------------------------------

Support Officer Contact:	Janine Taylor
Support Officer Ext:	0161 770 4902

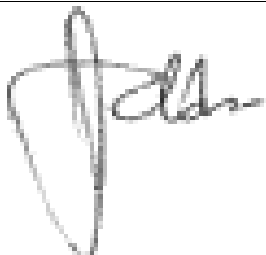
Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	15 July 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr A Jabbar
Signed:	
Date:	15 July 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	C003
Portfolio	Corporate & Commercial Services
Directorate:	Corporate & Commercial Services
Division:	Programme Management Office (PMO)
Responsible Officer and role:	Helen Gerling – Director Commercial and Transformation Services (Interim)
Cabinet Member and Cluster :	Cllr A Jabbar, Finance and HR

Title:	Commercial Services: Schools ICT - Income Generation
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£735k
	Income	(£786k)
	Net Expenditure	(£51k)
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	8

	2016/17 £k	2017/18 £k
Proposed Financial saving:	75	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>Mission statement Oldham Schools ICT Service aims to be the preferred Education ICT service for schools in Greater Manchester and potentially further afield.</p> <p>Current Position 2014/15 saw the service make its first true complete net profit and land its first customers outside of Oldham Borough (3 schools in</p>
---	---

Bolton).

There are already additional income targets set for 2015/16, which the service is on track to achieve. This proposal (submitted for budget consideration in 2014) sets an ambitious target for further growth.

The current service offerings are:

- Low cost fast broadband
- On site IT engineers service (annual / on demand)
- Security Services (Firewall, Web Filtering, AntiVirus, and Email Filtering)
- Hosted servers
- Telephony, including VoIP
- IT Consultancy / Advice
- IT Procurement & Licensing

Due to some key personnel leaving the service and limited management capacity in the team, the 2014/15 goals of increasing the services on offer were not achieved, but these are back on the agenda for this year and the service is also in discussions with Rochdale and Tameside in regards to combining services to schools into one sustainable and profitable business model.

A lot of Local Authorities have already dropped their offer of IT services to schools and these customers are being picked up by a variety of new small businesses. Feedback from schools and other Local Authorities indicates that this is not proving Value For Money for the schools, the businesses are short-lived, and there is no joined up options enabling schools to collaborate easily. Oldham Council's School's IT Service is unique in having a low cost hosted email and collaboration platform that all but 1 school in the Borough signs up and pays for. 3 Bolton schools also now procure this email service.

Big players like Capita have recently been exited from some of our large secondary schools (Newman RC, Waterhead, TOAN, and North Chadderton) due to poor performance and value for money. If the schools ICT service is to pick up such opportunities and deliver best value to these schools, it will need to grow in size in order to retain the skills and expertise these schools demand.

Outcomes:

The schools IT service will offer a value for money, quality service for schools in Oldham and Greater Manchester, with the possibility of contributing towards improved outcomes for children in education. Current options for schools are:

	<ul style="list-style-type: none"> Local Authority IT Service (attractive in that any profit made is re-invested into delivering public services or other local initiatives if within an alternative delivery model) Small local businesses (there are many in Greater Manchester that have started and closed within 3 years as they struggle to get competitive aggregated prices when starting from a small customer base) Large companies (Capita, RM, etc). It is difficult for schools to get their voice heard in large companies and this can result in a lack of responsiveness to meet the school's demands and best support its pupils.
--	---

Proposed Savings £k: <i>Through efficiency, income generation, transformation, decommissioning, etc</i>		2015/16	2016/17	Total
	Income Projection	30,000	75,000	105,000
	Savings	-	-	-
	Total	30,000	75,000	105,000*
	*Cumulative Income Target for 2016/17 including increase of £45,000 in 2014/15 will be £150,000 (45,000+30,000+75,000)			

Further Financial Implications & Considerations <i>ie Capital implications or invest to save, pump priming etc, variations to budget</i>	<p>N/A - There will be some cost with generating the income, but that will be low and handled within the revenue budget within Financial Year. The net income generation is projected as above.</p> <p>There are 86 primary schools, 4 special schools, and 12 secondary schools within Oldham. We currently have 44% schools signed up for Voice over Internet Protocol, 50% for broadband and filtering, 26% IT technicians, and 99% for Email services. The service also sells Antivirus, Backup, Espresso, Microsoft licensing, and hosted websites.</p> <p>Clearer financial projections will be possible when the service has launched all new services and begun marketing outside Oldham Borough.</p> <p>Consideration of an Alternative Delivery Model in the near future is likely to be required due to the risk of claiming an over-recovery of costs.</p>
--	--

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	As the service grows, local jobs should increase.
Total financial loss to partners (£k)	No direct partners of the Council operating in

(including Unity partnership, 3 rd sector, other partners, private sector)	this market. Private sector losses will be negligible in the short term.
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Improved footprint and services to all schools within Oldham	2016/17
Increase customers in the Greater Manchester region	2016/17
Shared opportunities established with Tameside and/or Rochdale	2016/17

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Income generation model is not realised in all or in parts	The risk is limited to the costs committed to. All 3 rd party costs are procured in line with customer orders. Staffing costs are comparatively low, are managed very closely and are directly related to annual contracts with customers. Likely to be a decline vs. quick large loss and therefore performance will be monitored.

Section 5

What impact might the proposal have on the following?

<u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
The location of the schools ICT service may need to be considered if it grows and/or if a shared business model with other LAs are agreed. Current footprint of the service is 6 desks in Civic and one store room. ICT assets exist. Vehicles are all owned by technicians.

Service Delivery and future expected outcomes:

The Schools ICT Service is currently a fully self-funded service. It is dependent on good customer service and the ability to retain customers. The ability to retain this would be greatly enhanced by joining with another local LA Schools ICT service or a strategic partner and these options are being explored.

The impact of this proposal should be to increase the ICT services available to schools and increase confidence in the Local Authority as a good and Value for Money provider of their ICT needs.

Organisation (other services)

We will need to keep a close connection with Schools services throughout the Council and in Unity Partnership. It is important that we are seen to be joined up in our approach. Some of the service relies upon Unity ICT, but there are mitigation plans in place against any risks in relation to that service.

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

There is additional pressure on the workforce to develop the business with limited resources, but the team is keen to deliver value for money for schools and to be a part of a service that has a good reputation. The teams has built strong relationships with schools over the years and recognise the need to contribute to the Council's increasing financial pressures. As more work comes in, the workforce will grow which will help in creating jobs and re-assuring existing employees.

Communities

The schools will be receiving value for money and good, impartial, advice in relation to ICT – helping avoid unnecessary or wasted spend elsewhere and thereby securing money for investment in education. The schools in the local area will feel supported by the Local Authority, when other Local Authorities locally and nationally are abolishing their schools ICT services. As a result, networks of residents related to the schools will also feel that the Local Authority is continuing to support education in Oldham.

Service Users

Initial views have been softly gathered from schools, who are keen for a good value for money ICT service and most want to trust the Local Authority in that regard.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

N/A

Section 6

Supplementary Information

None

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	N/A
Staff Consultation	N/A, although the schools ICT service workforce are all regularly consulted and have been involved in the creation of the plans.
Public Consultation	N/A
Service User Consultation	Every existing customer has been visited within the past 6 months and feedback fed into the designs for the service.
Any other consultation	The service is in regular contact with Unity Partnership in relation to schools ICT services.

Section 8

Equality Impact Screening

Is there **potential** for the proposed saving to have a disproportionate adverse impact on any of the following groups:

	State Yes / No against each line
Disabled people	No

Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Helen Gerling, Director Commercial and Transformation Services (Interim)
----------------------	--

Support Officer Contact:	Shoukat Ali
Support Officer Ext:	0161 770 4686

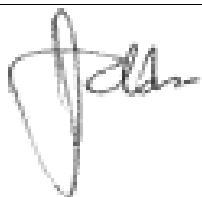
Cabinet Member Comments and/or approval	
Approved	

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	24 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr A Jabbar
Signed:	
Date:	24 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	C004
Portfolio	Corporate & Commercial Services
Directorate:	Corporate & Commercial Services
Division:	Programme Management Office (PMO)
Responsible Officer and role:	Christopher Lewis Head of Transformation (PMO)
Cabinet Member and Cluster :	Cllr A Jabbar, Finance and HR

Title:	Programme Management Office – Income Generation (Repositioning Oldham Programme Management Office Consultancy Model)
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£352k
	Income	(£348k)
	Net Expenditure	£4k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	3

	2016/17 £k	2017/18 £k
Proposed Financial saving:	55	0
Proposed reduction in FTE's	0	0

Section 3

Background: <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>Demand for effective change management expertise is strongly evident across the public sector as organisations seek to deliver outcomes more effectively and efficiently against the backdrop of increasing demand, declining budgets and resources. The drivers for change can vary depending on the space occupied by the organization; some organizations whilst mindful of financial efficiencies are still primarily focused on excellence.</p> <p>This proposal was put forward in the 2014 budget process in order to</p>
--	---

create a trusted public sector project/ change management consultancy model with support from the Unity Partnership around the commercial provision of effective change management (Project, Programme and Transformational) initially to the 'Oldham Market' as a phase one and wider geographic coverage as a phase two. The key to effectively marketing our services will be the design and implementation of an innovative, transformational and effective Oldham Council transformational story.

The table below outlines how the approach will add value and meet the needs/issues of customers.

Value delivered to the customer	Customers issues/needs resolved
Swifter and cheaper project deliverables based on experience	Solve internal capacity issues
Risk Reduction/ Reassurance- Trusted public sector partner	Rapid delivery of transformational outcomes and cost savings
Leading edge thinking on subject matters (Subject Matter Experts)	Deliver proven transformational change/ solutions
Rapid mobilisation	Provide consultants based on specific skills/ knowledge requirements
Value for money	-
Knowledge Transfer	-

The target customer base for phase one will include the NHS (including CCG), The Royal Oldham Hospital Trust and Pennine Acute Care, First Choice Homes, GM Police, GM Fire and Rescue, Schools, Academies & Colleges, Community and Voluntary Groups.

Outcomes:

The approach will provide organisations across Oldham with the skills, subject matter expertise and capacity to effectively design and deliver change. Short term benefits will include effective planning and management of change across Oldham as a place ensuring that projects and programmes are sufficiently transformational, coordinated and deliver efficiencies. The medium and long term benefits of the model are to effectively realize sustained changes in operating models and behaviors that improves the lives of residents and communities within Oldham.

A key driver of the approach will be to ensure the skills are transferred to organisations enabling increased internal capacity to accelerate change whilst reducing the cost of change moving forward

Proposed Savings £k: <i>Through efficiency, income generation, transformation, decommissioning, etc</i>	N/A
---	-----

Further Financial Implications & Considerations <i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	<p>Below is the current budget detail for the RO PMO:</p> <table border="1"> <thead> <tr> <th>Budget Description</th> <th>Expenditure (£)</th> <th>(Income) (£)</th> <th>Gross (£)</th> </tr> </thead> <tbody> <tr> <td>Repositioning Oldham PMO</td> <td>163,930</td> <td>(19,540)</td> <td>183,470</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th></th> <th>2015/16</th> <th>2016/17</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Income Projection</td> <td>20,000</td> <td>55,000</td> <td>75,000</td> </tr> <tr> <td>Savings</td> <td>-</td> <td>-</td> <td>-</td> </tr> <tr> <td>Total</td> <td>20,000</td> <td>55,000</td> <td>75,000</td> </tr> </tbody> </table>	Budget Description	Expenditure (£)	(Income) (£)	Gross (£)	Repositioning Oldham PMO	163,930	(19,540)	183,470		2015/16	2016/17	Total	Income Projection	20,000	55,000	75,000	Savings	-	-	-	Total	20,000	55,000	75,000
Budget Description	Expenditure (£)	(Income) (£)	Gross (£)																						
Repositioning Oldham PMO	163,930	(19,540)	183,470																						
	2015/16	2016/17	Total																						
Income Projection	20,000	55,000	75,000																						
Savings	-	-	-																						
Total	20,000	55,000	75,000																						

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	N/A
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	N/A
Type of impact on partners	Positive

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Business Case produced	October/November 2015
Approval of Model and business Case	December 15/January 2016
Commence marketing of services.	January 2016
Phase one Official launch of the model to the public sector market.	April 2016
Review of first six months performance and review option around phase Two.	October 2016

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Delivery of the proposal draws RO PMO resources away from Oldham Council's £100m corporate transformation programme.	Priorities and resources regularly reviewed with risks and issues escalated to the Interim Director of Commercial and Transformational Services.
Income generation model is not realised in all or in parts for 2015/16	£20k risk in 2015/16: performance issues to be highlighted early in order to find alternate method of delivery (savings)
Income generation model is not realised in all or in parts for 2016/17	Alternative funding would need to be identified if this risk was projected to materialise.

Section 5

What impact might the proposal have on the following?

<u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
The proposal has no property implications.

<u>Service Delivery and future expected outcomes:</u>
The PMO has a team of three officers which is considerably smaller than similar PMOs within the North West that are performing a similar function. Diverting attention of the core function of the team, which is to support the delivery of Oldham Council's £100

million corporate transformation programme, is likely to increase a number of risks including:

- Projects delivered in a less effective manor resulting in unrealised financial and non-financial benefits.
- Poor management and co-ordination of change with unsustainable target operating models and short term culture change.

Organisation (other services)

- Similar to other external market income generating proposals, consideration will need to be given to the support services required that will enable the model to be delivered, this includes finance, legal, marketing and a business development function.
- The consultancy will seek to identify additional opportunities for other trading services within the Council, for example procurement.

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

- Please refer to the impact section above.
- The model may result in members of the PMO team being utilised for direct one to one external consultancy
- Up skilling may be required of the team on external client relationships and contracts.

Communities

- The outcomes of this proposal will not directly affect the residents of Oldham.
- Indirectly, the support offered by the PMO to projects and programmes with the Council and its partners is likely to have a direct impact on residents from the resulting target operating models

Service Users

N/A

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

N/A

Section 6

<u>Supplementary Information</u>
None

Section 7

<u>Consultation Information –</u>	
<i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	N/A
Staff Consultation	N/A
Public Consultation	N/A
Service User Consultation	N/A
Any other consultation	N/A

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	No
By:	No

Section 9

Responsible Officer:	Christopher Lewis, Head of PMO
----------------------	--------------------------------

Support Officer Contact:	Stuart Barratt
Support Officer Ext:	X3230

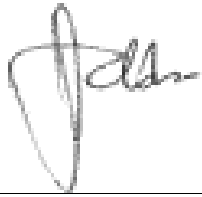
Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	24 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr A Jabbar
Signed:	
Date:	24 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	C006
Portfolio	Corporate and Commercial
Directorate:	Finance
Division:	Capital and Treasury
Responsible Officer and role:	Andy Cooper – Senior Finance Manager / Anne Ryans – Director of Finance
Cabinet Member and Cluster :	Cllr A Jabbar, Finance and HR

Title:	Investment Income through Treasury Management
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£0k
	Income	(£600k)
	Net Expenditure	(£600k)
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	0

	2016/17 £k	2017/18 £k
Proposed Financial saving:	400	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	The Council currently has in excess of £100m in 'cash' which it has in recent years invested in either very short term or instant access investment vehicles. The proposal is to increase income from investments by varying the types and length of investment whilst remaining within the approved Treasury Management Strategy and strictly adhering to the Security, Liquidity Yield investment principles hierarchy.
---	---

<u>Proposed Savings £k:</u> <i>Through efficiency, income generation, transformation, decommissioning, etc</i>	To increase the annual yield from investments by £400k to £1m in 16/17.
--	---

<u>Further Financial Implications & Considerations</u> <i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	It is assumed that the increased income is recurring, the income target will need to be reviewed annually to take account of available cash and the interest rates available in the market
--	--

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	None
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	None
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Monitoring of income against target	Monthly

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Loss of Principal invested	Only use institutions and funds that conform to the TM strategy and are approved on Capita Treasury Services creditworthiness list.
Reduction in cash/ interest rates limit investment income	Monthly monitoring

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None

Service Delivery and future expected outcomes:

None

Organisation (other services)

None

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

None

Communities

None

Service Users

None

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

None

Section 6

Supplementary Information

The authority retains Capita as Treasury Management advisors, who advise on suitable counterparties and investment vehicles.

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	N/A
Staff Consultation	N/A
Public Consultation	N/A
Service User Consultation	N/A
Any other consultation	N/A

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Anne Ryans, Director of Finance
Support Officer Contact:	Andy Cooper
Support Officer Ext:	0161 770 4925


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	15 July 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr Abdul Jabbar
Signed:	
Date:	15 July 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	C009
Portfolio	Corporate and Commercial Services
Directorate:	Commercial and Transformational Services
Division:	Recharges to Unity
Responsible Officer and role:	Helen Gerling, Director Commercial & Transformational Services (Interim)
Cabinet Member and Cluster :	Cllr A Jabbar, Finance and HR

Title:	Project Diamond – Unity Partnership
---------------	--

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£11,574k
	Income	(£0)
	Net Expenditure	£11,574k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	0

	2016/17 £k	2017/18 £k
Proposed Financial saving:	150	0
Proposed reduction in FTE's	0	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>Over the past 2 years, Unity has been working in partnership with Oldham Council to deliver significant savings whilst maintaining or improving service levels under the jointly developed Diamond programme.</p> <p>In March 2015, the Unity Partnership board accepted Mouchel / Unity's offer of increasing the annual savings target for 2015/16 and the remainder of the contract (to 2022) from £4.05m to £4.2m: an increase in savings of £150k.</p> <p>Unity are on track to deliver £3.8m savings in 2015/16 and are</p>
--	--

	<p>applying significant effort in working up proposals to deliver the remaining gap. These savings targets are contractual, are tied to the 3 year extension to the contract, and are governed by the Change Programme Board (CPB) a sub board of the Joint Unity Operations Board.</p>
--	---

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>An additional £150k savings to be delivered by Unity Partnership through efficiencies that do not reduce service provision or quality.</p>
---	---

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>This additional £150k savings target is at risk until specific proposals have been brought forward, agreed, and delivered by Unity Partnership. This risk is managed as a part of the overall contractual terms.</p> <p>See Unity Partnership Board paper from March 2015 for further details.</p>
---	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	Unity Partnership, unknown at this stage.
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	£150k reduced revenue to Unity Partnership, at their request.
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Risk that Unity will not deliver the additional £150k savings in 2015/16	Contract Change Notice terms and conditions.

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

N/A

Service Delivery and future expected outcomes:

No change – principles of savings is no reduction to current service delivery quantity or quality.

Organisation (other services)

N/A

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

Unknown at this point – Unity Partnership only.

Communities

N/A

Service Users

N/A

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

N/A

Section 6

Supplementary Information

None

Section 7

Consultation Information –	
<i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • What has been consulted on so far? With whom and when? • Further consultation required? • Date consultation to be started and concluded 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	This will be managed by Unity Partnership if and as needed.
Staff Consultation	This will be managed by Unity Partnership if and as needed.
Public Consultation	N/A
Service User Consultation	This will be managed by Unity Partnership if and as needed.
Any other consultation	This will be managed by Unity Partnership if and as needed.

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Helen Gerling, Director Commercial & Transformation Services (Interim)
----------------------	--

Support Officer Contact:	Emma Garner
Support Officer Ext:	0161 770 3386


Cabinet Member Comments and/or approval	
Approved	

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	15 July 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr Abdul Jabbar
Signed:	
Date:	15 July 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	C010
Portfolio	Corporate and Commercial Services
Directorate:	Commercial and Transformational services
Division:	Recharges to Unity
Responsible Officer and role:	Helen Gerling, Director Commercial and Transformation Services (Interim)
Cabinet Member and Cluster :	Cllr A Jabbar, Finance and HR

Title:	Reduction in Gross Annual Service Charge for Unity Partnership Contract (3% Contractual Saving)
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£11,574k
	Income	(£0)
	Net Expenditure	£11,574k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	0

	2016/17 £k	2017/18 £k
Proposed Financial saving:	100	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>This proposal relates to a Gross Annual Service Charge (GASC) reduction in respect of the Unity Partnership Contract.</p> <p>Specifically, a reduction in price of the contract from 1 April 2015.</p> <p>There will be no changes to service delivery. The council will as a result receive increased value for money in relation to the fees and charges provided by the Unity Partnership.</p>
---	--

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>This sum is predicated around the Unity contract guarantees as per the Heads of Agreement and the Deed of Variation for Project Diamond. (The project to refresh and reduce the cost of the Unity Partnership to the Council). The saving is approximately 3% of the Annual Service Charge (ASC).</p> <p>The Annual Service Charge (as opposed to the Gross Annual Service Charge) is £7.347m. The PPM (2.5.2) states that “the 3% saving excludes costs associated with the ICT, Property, and Highways Service Streams”. As such the 3% can only be applied to the ASC value of £3.442m, which equals £103,260. This figure has been rounded down to £100,000 for this proposal but if fully delivered ought to achieve the £103,260.</p> <p>There are no capital implications relating to this option.</p>
---	--

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	N/A
---	-----

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	No impact on FTE's
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	£100k Unity Partnership
Type of impact on partners	Negative

Section 4

Key Milestones	
Milestone	Timescale
Agree exact value of saving with Unity Partnership (£103,260)	Complete
Confirm receipt of saving (£103,260)	1 st December 2015.

Key Risks and Mitigations	
Risk	Mitigating Factor
There is a risk that Unity Partnership will calculate the 3% reduction to be less if the core annual service charge for 15/16 reduces in year.	This Star Chamber Proposal has assumed £100,000 saving target, which allows for a reduction in the core contract by £108,666. This risk is assessed as very low.

Section 5

What impact might the proposal have on the following?

Property Implications <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
There are no property implications relating to this option.

Service Delivery and future expected outcomes:
There is a risk that Unity over-commit to savings and that this affects service delivery. However service delivery performance is monitored closely and often and there are provisions under the contract for rectification or penalty.

Organisation (other services)
None.

Workforce
<i>Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models</i>
None.

Communities
The savings Unity have committed to have been specifically agreed such that there will be no detrimental effect to quality or any users' experience.

Service Users
None.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

None.

Section 6

Supplementary Information

None.

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	N/A
Staff Consultation	N/A
Public Consultation	N/A
Service User Consultation	N/A
Any other consultation	This was consulted on and approved by Cabinet in May 2013 as part of Unity Heads of Agreement. This saving is as a result of successful negotiation and agreement with Unity Partnership since then.

Section 8

Equality Impact Screening

Is there **potential** for the proposed saving to have a disproportionate adverse impact on any of the following groups:

	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No

People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Helen Gerling, Director Commercial & Transformation Services (Interim)
----------------------	--

Support Officer Contact:	Emma Garner
Support Officer Ext:	0161 770 3386


Cabinet Member Comments and/or approval	
Approved	

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	15 July 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Councillor Abdul Jabbar
Signed:	
Date:	15 July 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	C013
Portfolio	Corporate and Commercial Services
Directorate:	Corporate And Commercial Services
Division:	Finance
Responsible Officer and role:	Mark Stenson, Head of Corporate Governance
Cabinet Member and Cluster :	Cllr A Jabbar, Finance and HR

Title:	Insurance Review
---------------	-------------------------

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£5,000k
	Income	(£0k)
	Net Expenditure	£5,000k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	3.2

	2016/17 £k	2017/18 £k
Proposed Financial saving:	200	0
Proposed reduction in FTE's	0	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	Following on from successful fraud strategies savings of £200k can be achieved in excess of those already submitted in previous years.
---	--

<u>Proposed Savings £k:</u> <i>Through efficiency, income generation, transformation, decommissioning, etc</i>	Following on from successful fraud strategies savings look like they can be achieved on the current budget of around £200k
--	--

<u>Further Financial Implications & Considerations</u> <i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	Although savings can be made on current claims due to the new strategies there is no control over historical case such as abuse, noise induced hearing loss and these appear to be on the increase negating some of the savings achieved by the fraud strategies
--	--

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	0
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Projections for savings are not in line with budget	Established fraud strategies in place

Section 5

What impact might the proposal have on the following?

<u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
None

<u>Service Delivery and future expected outcomes:</u>
None at present

<u>Organisation (other services)</u>
None

<u>Workforce</u> <i>Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models</i>
None

<u>Communities</u>
None

<u>Service Users</u>
None

<u>Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)</u>
None

Section 6

<u>Supplementary Information</u>
None

Section 7

<u>Consultation Information –</u> <i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	None required
Staff Consultation	Internally with insurance team

Public Consultation	None required
Service User Consultation	None required
Any other consultation	None required

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Mark Stenson
----------------------	--------------

Support Officer Contact:	Emma Garner
Support Officer Ext:	0161 770 3386


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	15 July 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr Abdul Jabbar
Signed:	
Date:	15 July 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Budget Reduction Proposals Tranche 1 - For Noting

Ref	Brief Detail	Responsible Officer	Cabinet Member	2016/17 (£'000)	FTE 2016/17	2017/18 (£'000)	EIA Required?	Page No.
E002	Improved Value for Money within Oldham's Residential and Supported Accommodation Offer for Looked After Children and Care Leavers	Kim Scragg	Cllr J Harrison	234	0.0	0	Yes	2
E003	Looked After Children - Demand Management and Reduction (Therapeutic Fostering and the Adolescent Support Unit)	Kim Scragg	Cllr J Harrison	1,254	12.0	0	Yes	14
E004	Mental Health	Maggie Kufeldt	Cllr J Harrison	843	1.5	0	Yes	27
E007	Workforce Re-design	Maggie Kufeldt	Cllr J Harrison	150	5.0	0	Yes	46
E008	Adult Services - Generating Additional Income	Maggie Kufeldt	Cllr J Harrison	401	0.0	0	Yes	69
	Total - Health and Wellbeing			2,882	18.5	0		
B005	Street Lighting - Shared Client Team	Carol Brown	Cllr D Hibbert	22	1.0	13	No	97
	Total - Cooperatives and Neighbourhoods			22	1.0	13		
C001	Business Support Redesign	Anne Ryans	Cllr A Jabbar	350	15.0	0	Yes	103
C005	Strategic Sourcing & Strategic Relationship Management - Commercial Trading Model	Nicola Spence	Cllr A Jabbar	125	2.0	0	No	115
	Total - Corporate and Commercial			475	17.0	0		
	Total Budget Reduction Proposals (Tranche 1)			3,379	36.5	13		

This page is intentionally left blank

Appendix 6

Detailed Pro-formas Tranche 1

Budget Reductions for Noting

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	E002
Portfolio	Health and Wellbeing
Directorate:	Health and Wellbeing Directorate
Division:	Safeguarding
Responsible Officer and role:	Kim Scragg, Director of Safeguarding
Cabinet Member and Cluster :	Cllr J Harrison, Social Care and Safeguarding

Title:	Improved Value for Money within Oldham's Residential and Supported Accommodation Offer for Looked After Children and Care Leavers
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£23,185k
	Income	(£1,381k)
	Net Expenditure	£21,804k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	218 Safeguarding Division

	2016/17 £k	2017/18 £k
Proposed Financial saving:	234	0
Proposed reduction in FTE's	0	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>As part of the wider children's services review, we need to maximize the capacity of in-house and commissioned residential provision across the Borough. We also need to increase their potential to deal with some of the more challenging/complex young people who are currently placed within external placements. A review of the current occupancy levels across the whole residential offer is currently being undertaken.</p> <p>We have 4 residential homes across Oldham – 2 are operated via an in-house model and 2 are commissioned externally from Cambian Care (formerly Advanced Childcare). Evidence over the</p>
--	--

	<p>last 12 months suggests significant underuse of capacity with several beds being vacant over the period.</p> <p>Until recently the Council had a third in house residential home Tylon House which was recently decommissioned as a home to reopen as an Adolescent Support Unit offering outreach and respite support. We were able to effect this change due to the long standing capacity within our residential provision.</p> <p>By expanding our fostering offer and opening the Adolescent Support Unit we expect demand for residential care to decrease and this may allow us to close /decommission another home leaving us with three within the Borough. The savings associated with this are detailed in the other related template. We feel however that additional savings may be achieved within the remaining provision as detailed below.</p>
--	--

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>There are four areas where we feel we can potentially realise savings.</p> <p>1. The current annual contract price with Cambian Childcare is for £1,224,000 and is due to end in November 2017. There is an option to extend for up to five years following this date. One option would be to negotiate a better annual price for the remainder of the contract term.</p> <p>Occupancy figures suggest that during 2014/15 there were £93,531 costs associated with vacant beds within these two commissioned homes (it should be noted that some beds are deliberately held vacant for the welfare of the current occupants) and there are sometimes vacancies for short periods of time rather than prolonged inefficient ways of working.</p> <p>2. Costs for our block contracted placements are lower than those for our in-house provision for equivalent levels of quality.</p> <p>Evidence suggests that if we commissioned an additional 5 beds with Cambian Childcare or another provider at the lower, commissioned cost, there would be savings of approx. £140,000 per year against the in-house model.</p> <p>One implication of this is that the Council would no longer have any in house residential provision remaining.</p> <p>3. We are also currently exploring the option of ‘selling’ additional capacity to neighbouring authorities as part of the collaborative work being undertaken with Rochdale and Bury.</p>
---	--

	<p>4. The Council also provides residential and supported accommodation for care leavers and vulnerable 16/17 year olds as part of a wider care and support offer. We intend to improve the availability, range and value for money of this provision and are currently working with Rochdale and Bury to explore ways of collaboration in this regard.</p> <p>We believe that these options will allow us to deliver approximately £234,000 savings over and above those originally offered.</p>
--	---

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>If the Council was to externally commission any more of its children's homes there would need to be a decision about the current assets.</p>
---	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	There are a number of jobs currently within in house provision would potentially transfer to an alternative provider.
<u>Total financial loss to partners (£k)</u> <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	Difficult to quantify at this stage due to range of options being explored. The main implication is that we could potentially pay Cambian Childcare approximately £100k less per annum.
Type of impact on partners	There may be a reduction of current contract prices to be weighed alongside potential additional external purchasing

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Review and options appraisal	September 2015
Negotiation of contract price with commissioned provider	October 2015
Determination of delivery arrangements from April 2016	December 2015
Mandatory – Completion of EIA & Consultation within PVFM timeline	October 2015

Key Risks and Mitigations	
Risk	Mitigating Factor
Change of home for service users	Carefully planned transition plan.
Possible lack of interest for external providers initially (5 beds) potential to re-commission all external provision (25 beds)	We would make sure that the procurement package is sufficiently robust to ensure providers are attracted.
TUPE of existing staff to a new provider and the costs involved	We will use existing systems and process's to ensure sufficient consultation and time is allowed.

Section 5

What impact might the proposal have on the following?

Property Implications <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
<p>The review of the current accommodation for LAC post 16 may have an impact on another residential home. Work is ongoing to review occupancy rates of all property within the portfolio to cost this option out. The option to increase the number of commissioned homes from an external provider will also need to be explored to see if this is a more efficient way of providing accommodation.</p> <p>If it is agreed to commission additional places, this will have an impact on the remaining 2 in-house properties and what happens to them.</p> <p>The success of the Adolescent Support Unit (ASU) could also have an impact on this budget proposal and needs to be considered as part of the wider review.</p>

Service Delivery and future expected outcomes:
<p>As a commissioned service, there is an existing monitoring process around the quality of provision and service, which could be financially linked (penalties) going forward. There is also a process of quarterly monitoring with the provider to ensure young people are achieving their required outcomes.</p> <p>Ofsted currently rates the externally commissioned provider of the 2 homes in Oldham as Good.</p>

Organisation (other services)
<p>If the ASU is not successful then there could still be an increased number of young people entering the care system which might create additional demand on the residential offer. This needs to be factored in to the wider residential review.</p>

Service Users

If the accommodation for LAC in residential homes is looked at and changes are made, there is likely to be significant impact and disruption to those young people resident within the home. This will need careful and timely consideration to ensure a smooth and planned move to alternative provision.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

A provider partner organisation currently delivers residential care within two properties in Oldham. As part of the wider accommodation review, this is to be looked at and changes are likely. This could create an increase in demand for commissioned services and increased commercial opportunity.

Section 6

Supplementary Information

There will be an options appraisal for the residential accommodation review.

There will be a review of current occupancy levels across the whole residential offer.

The ASU is also being reviewed as part of its twelve month pilot and will ultimately inform the residential review as well.

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	28 th July 2015
Staff Consultation	Staff engagement commenced 30 th July 2015 S188 issue 1 st September 2015
Public Consultation	Commenced 3 rd August 2015
Service User Consultation	Between 3 rd August 2015 and 30 th September 2015 to take place September/October 2015
Any other consultation	3 rd August and 30 th September 2015

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	Yes
People in particular age groups	Yes
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	Yes
EIA to be completed by:	Ed Francis
By:	15 October 2015.

Section 9

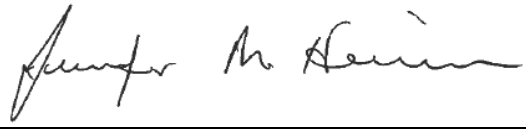
Responsible Officer:	Maggie Kufeldt, Executive Director, Health and Wellbeing
Support Officer Contact:	Claire Hill
Support Officer Ext:	0161 770 3125
Cabinet Member Comments and/or approval	
Approved	

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	29 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr J Harrison
Signed:	
Date:	29 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

E002 Improved Value for Money within Oldham's Residential and Supported Accommodation Offer for Looked After Children and Care Leavers

Stage 1: Initial screening

Lead Officer:	Ed Francis
People involved in completing EIA:	Ed Francis Clare Bamforth
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	No Date of original EIA: November 2014 as part of budget template CO45 - Children's Services Redesign

General Information

1a	Which service does this project, policy, or proposal relate to?	<p>This proposal relates to the range of residential and supported accommodation for Looked After Children and care leavers.</p> <p>The proposal is contained in Budget Template E002 with an additional identified saving of £234k in 2016/17 to that contained in template CO45 from the 2015/16 budget setting process.</p>
1b	What is the project, policy or proposal?	As part of a wider children's services review, we need to maximise the capacity of in-house and commissioned residential provision across the Borough.
1c	What are the main aims of the project, policy or proposal?	<p>There are 4 areas linked to this proposal:</p> <ol style="list-style-type: none"> 1. Review the current annual contract price with Cambian Childcare and try to negotiate a more advantageous price for the remainder of the contract (November 2017) 2. Assess and review the quality and cost of our internal provision with the possibility of commissioning this provision from another provider at a lower cost. 3. Review the current residential and supported

		<p>accommodation offer to care leavers and vulnerable 16/17 year olds as part of the wider care and support offer.</p> <p>4. Collaborative working with Rochdale and Bury could provide opportunity to 'sell' current and future capacity within the residential offer or enter into joint commissioning arrangements for shared benefit.</p>
1d	<p>Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?</p>	<p>The affected individuals/groups would be Looked After Children and Care Leavers.</p> <p>We have 4 residential homes across Oldham – 2 are operated via an in-house model and 2 are commissioned externally from Cambian Care. Evidence over the last 12 months suggests significant underuse of capacity with several beds being vacant over the period.</p> <p>Until recently the Council had a third in house residential home Tylon House which we were able to adapt for use as an Adolescent Support Unit offering outreach and respite support.</p> <p>We were able to effect this change due to the long standing capacity within our residential provision.</p> <p>The Council also directly provides 2 semi independence units for care leavers which are staffed 24 hours.</p> <p>By expanding our fostering offer and opening the Adolescent Support Unit we expect demand for residential care to decrease and this may allow us to close /decommission another home leaving us with three within the Borough. The savings associated with this are the subject of another related template E003. We feel however that additional savings may be achieved within the remaining provision by the actions detailed above.</p> <p>This proposal could potentially affect current service users (Looked After Children and Care Leavers). If the accommodation offer is changed, it is possible that there is some disruption to those young people resident within the homes at the time. This will need careful and timely consideration to ensure a smooth and planned move to alternative provision.</p> <p>There is however the possibility within this proposal that the Council retains its direct control of the properties from which the service is provided and purchases in care and support from an alternative provider. This would be less disruptive but would be subject to an EIA in its own right.</p>

In the event of any change of provider organisation it is likely that TUPE considerations would apply.

There is also potential benefit to care leavers in that the recent Ofsted inspection highlighted the care leavers were reporting a wish for more choice and options than those currently available. A recent change of legislation around 'staying put' should lead to more care leavers opting to stay with their foster carers beyond their 18th birthdays and the discharge of their care orders. Identification of future options would take these factors into account.

There are also potential financial implications for the current provider of block contracted accommodation (2 Children's Homes).

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a Marriage or Civil Partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
Current young people within the residential homes across Oldham		<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Care Leavers		X		
1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal		Significant	
	<input checked="" type="checkbox"/>		<input type="checkbox"/>	

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
1h	How have you come to this decision?	<p>By reviewing these services we hope to improve the cost effectiveness of service provision without compromising on quality and outcomes.</p> <p>This proposal does not seek to reduce the sufficiency of Oldham's overall offer to young people although it might have implications for individual settings.</p>

We are statutorily required to undertake a 'sufficiency' assessment and maintain 'sufficiency' of provision so any decisions we make will be in this context. What is unknown is the potential demand on services going forward and it is therefore important that we retain some flexibility in the accommodation offer in order to ensure sufficient provision.

Most provision is Ofsted registered and therefore there is an external assurance system around current provision and potential alternatives. Currently both homes provide under block contract have an Ofsted rating of 'Good'.

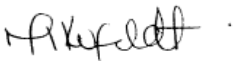
Stage 5: Signature

Lead Officer: Ed Francis

Date: 27/10/15

Approver signature:

Date: 27/10/15



EIA review date:

End September 2016.

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	E003
Portfolio	Health and Wellbeing
Directorate:	Health and Wellbeing Directorate
Division:	Safeguarding
Responsible Officer and role:	Kim Scragg, Director of Safeguarding
Cabinet Member and Cluster :	Cllr J Harrison, Social Care and Safeguarding

Title:	Looked After Children - Demand Management and Reduction (Therapeutic Fostering and the Adolescent Support Unit)
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£23,185k
	Income	(£1,381k)
	Net Expenditure	£21,804k
Total posts numbers in section: <i>(By Division):</i>	FTE	218

	2016/17	2017/18
Proposed Financial saving:	1,254	0
Proposed reduction in FTE's	12	0

Section 3

<p>Background:</p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>These options relate to the Council's statutory duties to protect and safeguard children and young people including looking after those for whom the Council assumes parental responsibility (LAC), however the Council is fully committed to protecting the most vulnerable; it is more about doing things differently and more efficiently.</p> <p>This proposal covers the development of the Therapeutic Fostering service and the Adolescent Support Unit. Organisationally, these services sit within Safeguarding. There are two main proposals designed to offer up a total of £1,254k in 16/17.</p> <p>Within the context of rising demand including increasing Looked After Children numbers we aim to deliver efficiencies across the</p>
---	---

	<p>range of spend areas by:</p> <ul style="list-style-type: none"> • Diverting and delaying children and young people into/out of the social care system, • Reducing the cost of children and young people being supported by the social care system and reducing the cost of the system itself. We aim to do this by improving the foster care offer.
--	--

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>1. Adolescent Support Unit</p> <p>As part of the wider review of Oldham’s Children’s Services, the residential offer to Looked After Children is being reviewed with a view to re-designing the current offer.</p> <p>The vision for Oldham’s Children’s Services is to develop wider placement choice for Looked After Children within the Borough of Oldham and to develop further our ‘edge of care’ offer to prevent children coming into care, namely through creating an Adolescent Support Unit (ASU).</p> <p>The development of the ASU is a 12 month pilot as part of the wider service review to establish demand and need for a preventative model.</p> <p>As part of the review it has been agreed that one of the existing residential children’s homes (Tylon House) which was reporting under capacity occupancy figures, will operate as an ASU, offering respite and family support.</p> <p>The principle function of the ASU is to provide a quality service consisting of out-reach, in-reach, family sessions and short break residential care at weekend. The unit has 3 short term respite beds and 1 crisis bed. The respite is offered on Friday, Saturday and Sunday night.</p> <p>The unit offers planned respite placements to young people aged 11-17 years old who are considered at risk of long-term placement in care.</p> <p>The ASU aims to offer and provide whole family support to families with complex needs, where the child is at risk of being taken into care or where a child in need plan is in place.</p> <p>Savings through the development of the ASU model will be found through reduction in costs incurred in operating the unit as well as reducing the cost of care placements.</p> <p>It is anticipated that 20 young people who, without the intervention of the ASU would be in care, will be worked with. An estimated success rate of 75% means 15 young people will be diverted from care admission. This will create capacity in the</p>
---	--

	<p>system and reduce costs against the residential and foster care placements.</p> <p>2 An improved Foster Care Offer</p> <p>In the budget template C045 – Children’s Services Redesign, January 2015, we outlined plans to reduce placement costs by recruiting a number of ‘specialist’ foster carers in a direct attempt to reduce the number of residential beds we need whether these are within our own children’s homes or external provision.</p> <p>This proposal has been further developed, and there are currently 4 new foster carers going through the recruitment and assessment process and 10 young people currently within the care system who have been identified as having the potential to benefit from the scheme. Work is underway with the children’s social workers to discuss suitability and need of the identified children.</p> <p>Two specialist Social Workers have been recruited to support the delivery of this model.</p> <p>This forms part of Oldham’s developing ‘step down’ model of foster care which aims to reduce overall costs and also to ensure children are in the most appropriate care placement for their needs.</p> <p>In a similar vein to our intentions around foster care, we need to look at the wider support offer including education, and therapeutic intervention.</p> <p>The development of the Therapeutic Fostering model of delivery is on track to deliver 8 placements by the end of March 2016. Further recruitment is planned later this year to recruit the remaining 6 foster carers required to meet the forecast savings. Whilst there are given variables within this model, it is on track to meet all savings allocated against it.</p>
--	---

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>There is a possibility of moving premises to a cheaper accommodation option for the ASU. There may be costs associated with this in terms of coming out of the property lease early – indications are that these costs would be met centrally rather than from the ASU budget.</p> <p>The outcome of the wider review of children’s residential provision in the Borough may also have an impact on the demand and the overall success of the ASU.</p>
---	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	Dependent on whether the ASU is successful there could be risk of job losses for between 9 and 15 residential/outreach staff.
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	Difficult to quantify at this stage whether the financial savings will be achieved from in house or externally procured provision. There could potentially be an impact on external residential care providers and Independent Foster Care Agencies in that we reduce our spend.
Type of impact on partners	Negative

Section 4

Key Milestones	
Milestone	Timescale
Review of the ASU at 6 months	September 2015
Review of therapeutic fostering service	September 2015 and March 2016

Key Risks and Mitigations	
Risk	Mitigating Factor
If sufficient therapeutic foster carers are not recruited, trained and operational in time, and are not delivering services to the right young people, the savings will not be generated and the out of borough placements will not be brought back in-house.	Current interest in the scheme is higher than required, however, it is recognised that some carers will drop out during the process and not progress to become therapeutic foster carers.
If the therapeutic fostering is not effective, there is a potential risk to the 9 newly recruited carers who would not be delivering as intended and who are on an advanced payment package.	There may be an option to convert the specialist foster carers to mainstream provision.
If the ASU does not work, there is potential for an increase of young people into care placements.	The project board will monitor progress against this to ensure that the young people referred to the ASU are most appropriate for this support and ensure the review and evaluation of the ASU is under taken.
If the ASU is not delivering as per its statement of purpose, it is difficult to evaluate success of the unit as it becomes an additional EDT/residential resource.	This is highlighted in the ASU project risk log and has been reported to the ASU project board.
Both models within this template are based on an average cost based model and are dependent on services being delivering to the agreed numbers specified.	Both initiatives relate to the Placement Budget which is demand led and subject to other factors. Variations from anticipated cost benefits 9 over or

	underachievement) will be managed within the overarching budgetary management process.
--	--

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

ASU – options are currently being explored in terms of the current property for the ASU, Tylon House. The lease for this is very costly, and options to re-locate are being reviewed to see if this can offer any further savings against the rental charge. However, for any potential properties, there would need to be some refurbishment costs considered – circa £50,000.

Also, considering that the ASU is a 12 month pilot, the success of this has to be weighed up against the cost of re-locating premises.

There may be costs of ending the lease early which will need to be factored in when known.

Service Delivery and future expected outcomes:

Both models considered within this budget template (Therapeutic Fostering and the ASU) are on track to deliver their intended outcomes as per their agreed delivery models.

Key performance measures have been agreed in order to evaluate the success of each of the models in order to inform the review process.

Quality of the ASU service is monitored both internally and through the regulation inspection via Ofsted.

For both models, it will be imperative to obtain the opinion and wishes and feelings of the young people involved and feedback from other stakeholders.

Organisation (other services)

If the models are not considered effective, there will be an increase on demand of alternative long term places, which are often more costly.

9 staff within the ASU could be affected if the model is not continued after the initial 12 month pilot.

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

If the 12 month ASU pilot is not successful there will be a risk of staff being displaced. Staff are aware of the pilot stage and the need to evidence the success of the unit.

Again, this would need timely consideration with all relevant parties – staff, trade unions, HR, etc – to fully inform the process.

The specialist foster carers recruited would not be delivering as intended and may not receive the same financial remuneration as a result. There may be an option to convert them to mainstream carers.

Communities

The proposals above will not have any impact on the general community. There is likely to be some impact on the parents of the children/young people being cared for if there are changes to their provision.

The recruitment of Oldham residents as foster carers fits with the Co-operative Council.

Service Users

Both proposals will be reviewed and evaluated to ensure quality and effectiveness of the service.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

Partner organisations such as schools and health providers are essential to the success of our aim to care for more challenging young people in family settings as part of the 'wraparound' offer.

Section 6

Supplementary Information

There will be review of the ASU and options for continuing this will be considered.

Consideration for the young people resident at the time of the review must be given and consultation with their parents.

Section 7

Consultation Information –	
<i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • What has been consulted on so far? With whom and when? • Further consultation required? • Date consultation to be started and concluded 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	28 th July 2015
Staff Consultation	Staff engagement commenced 30 th July 2015 Issue of Section 188 notice 1 st September 2015
Public Consultation	Commenced 3 rd August 2015
Service User Consultation	Between 3 rd August 2015 and 30 th September 2015 to take place September/October 2015
Any other consultation	3 rd August and 30 th September 2015

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	Yes
People in particular age groups	Yes
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	Yes
EIA to be completed by:	Ed Francis
By:	15 October 2015

Section 9

Responsible Officer:	Maggie Kufeldt, Executive Director, Health and Wellbeing
Support Officer Contact:	Claire Hill
Support Officer Ext:	3125


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	29 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr J. Harrison
Signed:	
Date:	29 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

E003* Looked After Children - Demand Management and Reduction (Therapeutic Fostering and the Adolescent Support Unit)

Stage 1: Initial screening

Lead Officer:	Ed Francis
People involved in completing EIA:	Ed Francis Clare Bamforth
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	No November 2014 as part of budget template CO45 - Children's Services Redesign

General Information

1a	Which service does this project, policy, or proposal relate to?	This proposal relates to the ability to reduce the number of residential places provided by or purchased by the Council due to demand reduction and management via the development of the Adolescent Support Unit (ASU) and the Therapeutic Fostering Scheme. Organisationally, these services sit within Safeguarding. The savings requirement against this proposal is £139,000 in 2015/16 and £1.26 million in 2016/17.
1b	What is the project, policy or proposal?	This proposal relates to the Councils statutory duties to protect and safeguard children and young people including looking after those for whom the Council assumes parental responsibility (LAC and Care Leavers).
1c	What are the main aims of the project, policy or proposal?	Within the context of rising demand including increasing Looked After Children numbers we aim to deliver efficiencies across the range of spend areas by: Diverting and delaying children and young people into the social care system and helping those in the system move out – Adolescent Support Unit.

The principle function of the ASU is to provide a quality service consisting of out-reach, in-reach, family sessions and short break residential care at weekend. The unit has 3 short term respite beds and 1 crisis bed. The respite is offered on Friday, Saturday and Sunday night.

The unit offers planned respite placements to young people aged 11-17 years old who are considered at risk of long-term placement in care.

The ASU aims to offer and provide whole family support to families with complex needs, where the child is at risk of being taken into care or where a child in need plan is in place.

Savings through the delivery of the ASU model will be found through the ability to close an additional children's home due to increasing capacity in the system. Should the unit not prove successful the 'fall back' position to offer up the required savings would come from decommissioning the ASU itself. An options appraisal will be undertaken to determine the appropriate course of action and this will include an EIA.

Reducing the cost of children and young people being supported by the social care system and providing better placement options by delivery of an improved foster care offer.

In order to offer up savings from 2015/16 onwards plans were introduced to reduce placement costs by recruiting a number of 'specialist' foster carers in a direct attempt to reduce the number of residential beds we need whether these are within our own children's homes or external provision.

This proposal has been further developed, and there are currently 4 new foster carers going through the recruitment and assessment process and 10 young people currently within the care system who have been identified as potential to benefit from the scheme. Work is underway with the children's social workers to discuss suitability and need of the identified children.

2 specialist Social Workers have been recruited to support the delivery of this model.

This forms part of Oldham's developing 'step down' model of foster care which aims to reduce overall costs and also to ensure children are in the most appropriate

		care placement for their needs.
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	<p>Both elements of this proposal aim to improve the offer to Oldham's children and young people by reducing the number of children entering the care system and for those that do, by increasing the range of support and provision offered to them.</p> <p>It is therefore hoped that if both models are effective, there will be an improved offer and ultimately a positive impact for the young people.</p> <p>There may be job reductions in care settings as a result of the success of these proposals.</p>

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a Marriage or Civil Partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
Children and young people at risk of care or actually in care		<input checked="" type="checkbox"/>	<input type="checkbox"/>	

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
1h	How have you come to this decision?	<p>In delivering these areas of service change, the impact on children and young people within Oldham will be positive and will provide them with an improved and increased option for accommodation as a LAC.</p> <p>Any new service users will benefit from the developments in the areas and will therefore not be adversely affected in the future.</p> <p>Key performance measures have been agreed in order to evaluate the success of each of the models in order to inform the wider review of Children’s Services.</p> <p>Both elements are monitored closely through the Transforming Children’s Services programme board.</p> <p>By reviewing these services we hope to improve the offer to looked after children and to provide better choice and more opportunity for them to achieve independence.</p> <p>The ASU is still in the early stages of development but is already working with key children and young people in the hope that it will prevent them entering the care system. If this continues to work, we hope that the overall number of children and young people within the care system will eventually reduce longer term.</p> <p>What is unknown is the potential demand on services going forward and it is therefore important that we retain some flexibility in the offer in order to ensure sufficient provision. However, early indications are that both areas will be effective in reducing the number of children and young people within the care system.</p>

Stage 5: Signature

Lead Officer:

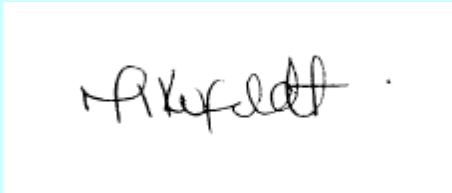
Date:

Ed Francis

27/10/15

Approver signature:

Date: 27/10/15

A handwritten signature in black ink on a white rectangular background. The signature appears to be 'Ed Francis' written in a cursive style.

EIA review date:

September 2016

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	E004
Portfolio	Health and Wellbeing
Directorate:	Health and Wellbeing
Division:	Adult Services
Responsible Officer and role:	Maggie Kufeldt, Executive Director, Health and Wellbeing
Cabinet Member and Cluster :	Cllr J Harrison, Health and Wellbeing Cluster

Title:	Mental Health
---------------	----------------------

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£11,071k
	Income	(£3,625k)
	Net Expenditure	£7,446k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	40 staff paid for by LA, 135 staff all together within the integrated teams (Pennine Care)

	2016/17	2017/18
Proposed Financial saving:	843	0
Proposed reduction in FTE's	1.5	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>This will be achieved by reviewing and re-designing Mental Health service provision, which will include;</p> <ul style="list-style-type: none"> • Reviewing care packages and reducing the cost of support provided to individuals where safe to do so • Improving outcomes for individuals by helping people to maintain their independence and promote recovery • Reviewing and remodeling or re-commissioning mental health services provided under contract, and working with the CCG to review and remodel mental health services across the health and social care economies • Reducing management and staffing costs where that can be achieved without an adverse impact upon service
---	--

	delivery and outcomes for people with mental health problems
--	--

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>Review of Individual Mental Health Cases: £370k Revising the delivery model at Edward House: £100k Improving recovery rates and flow through services: £323k Reduction in contract price/staffing: £50k</p> <p>Total (2016/17) saving: £843k</p>
---	--

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>Some resources for review activity may be needed, as additional staff may need to be recruited to undertake client reviews.</p>
---	--

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	Cannot quantify at this stage – dependent upon commissioning model agreed
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	<p>Revising the delivery model at Edward House: £100k</p> <p>Reduction in contract price/staffing: £50k</p>
Type of impact on partners	Negative

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Community Mental Health team begin case reviews	June 2015 (ongoing as part of 2 year approach)
Review of staffing and management capacity completed	September 2015
Review of commissioned mental health services completed	September 2015
Redesign of service at Edward House completed	31 March 2016

Consultation on new delivery models completed (commissioned services)	Aiming for September 2015
Commissioned service redesign completed	31 March 2016
Mandatory – Completion of EIA & Consultation within PVFM timeline	Completed 12 January 2015 Reviewed September 2015

Key Risks and Mitigations	
Risk	Mitigating Factor
Review of cases by community mental health team does not deliver the required financial savings	Head of Service to receive monthly progress reports including the volume of reviews completed and savings delivered/projected
Review of staffing and management capacity is delayed, reducing ability to achieve project objectives	Head of Service to put a plan in place with Pennine Care Mental Health Trust during June to ensure that management and staffing capacity is reviewed by September 2015
Commissioners do not have sufficient capacity to review mental health services	The review of mental health services will be a priority for the council's lead commissioner. The Head of Service and Head of Commissioning will support and ensure sufficient capacity is available
NHS Commissioners do not engage with the review process	Senior management will negotiate an approach with the CCG to ensure shared understanding and commitment to achieving agreed objectives
Redesign of service at Edward House is not completed	Turning Point (the provider) has a plan in place to redesign the service and will monitor and report progress and issues to the Head of Service each month
Consultation on the new delivery models leads to challenge and delays	Active involvement of service users, their families, carers and other stakeholders from an early point in the project will reduce the risk of challenge. Proposals can be revised following consultation as may be needed to get the best outcomes
New delivery models are not implemented by March 2016	<p>The detailed project plans will set out the steps required to develop and implement new delivery models.</p> <p>Contingency plans will be in place to ensure that new models are in place. Delays may necessitate phasing implementation.</p> <p>The Head of Service will work with commissioners to identify alternative approaches to delivering financial savings and improving outcomes</p>

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

Edward House will require some re-modelling (modernisation to fit with the new service model) and this will be done by Regenda (the landlord) and managed through a Memorandum of Understanding (between Regenda, Turning Point – The current care provider, and OMBC) to set out risk sharing, roles and responsibilities etc.

The review of Highbarn for Mental Health rehabilitation services also has property implications; however this has been captured within the contracts template for adult social care.

Service Delivery and future expected outcomes:

Our intention is to provide people experiencing mental health problems with a broader range of help and support as early as possible, this and providing an enhanced rehabilitation and recovery offer, will support a reduction in demand for more costly secondary mental health care and support. Making better use of other preventative support options, such as talking therapies, peer/group support, and increased support in a community setting are some examples of the way in which this could be done.

We will work with NHS colleagues and people who use mental health services to redesign the way those services are delivered. Giving people with mental health problems more control over the support they receive will lead to better outcomes and reduce our costs in the longer term.

Organisation (other services)

Mental Health reviews constitute a wider approach to managing client reviews across adult social care, and this might have an impact on other client review work.

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

Cannot quantify at this stage until further scoping has been undertaken – will be dependent on commissioning model agreed. It will be important to consider any changes to the mental health workforce within the context of wider work to review the social care workforce.

Communities

There should generally be a positive impact on communities as people are supported to retain, or regain their independence as quickly as possible, and receive the right care, at the right time.

Service Users

Packages of care will be reviewed and reduced where safe to do so.

Benefits to service users include;

- Preventing, reducing and delaying need for intensive mental health interventions
- Improving recovery rates
- Helping people to retain, or regain their independence as quickly as possible
- Reducing the rate at which people re-present to mental health services

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

The proposals will require close working with Pennine Care Mental Health Trust managers and staff, commissioners and providers of mental health services and other stakeholders (in particular the CCG) to agree the detailed project plan, performance and financial efficiency targets and delivery responsibilities. Engaging with Service users, families and carers will also be important when developing the future model and our commissioning approach going forward.

Section 6

Supplementary Information

None.

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	We will consult with and brief trade unions as a starting point when we have reviewed the mental health workforce. We will then consult on proposals for change with service users, their families, carers and other stakeholders to be completed by mid-October.
Staff Consultation	This will be required if staffing proposals require a reduction in posts, or a re-structure of the service.
Public Consultation	From 3 August 2015
Service User Consultation	Edward House services users are being consulted as part of changing the service model delivered from this establishment.
Any other consultation	N/A

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	Yes
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	Yes
People in particular age groups	Yes – care reviews will also be undertaken within the Over 65 mental health community care budget
Groups with particular faiths/beliefs	No
Comment: People who experience mental health issues may also experience higher levels of deprivation, be on lower incomes or be out of work. Whilst people may receive support in different ways in future we do not anticipate there will be an adverse impact on any group with protected characteristics. For example, some people may receive support for a shorter period of time where we can improve outcomes by intervening at an earlier stage.	

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	Yes
EIA to be completed by:	Colin Elliot
By:	26 October 2015

Section 9

Responsible Officer:	Maggie Kufeldt, Executive Director, Health and Wellbeing
Support Officer Contact:	Claire Hill
Support Officer Ext:	3125

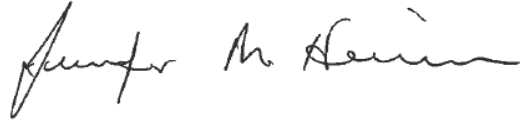
Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	29 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr J. Harrison Social Care and Safeguarding
Signed:	
Date:	29 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

E004: Mental Health

Lead Officer:	Colin Elliott
People involved in completing EIA:	Colin Elliott, Claire Hill
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	No

General Information

1a	Which service does this project, policy, or proposal relate to?	<p>C046 – Adult Social Services – EIA 8 – Mental Health</p> <p>This EIA relates to the provision of mental health services for adults, both over and under the age of 65.</p> <p>The Council’s gross budget for mental health can be broken down as follows;</p> <ul style="list-style-type: none"> • Staffing - £2,427,603 • Community Care Budget – adults under 65 - £2,140,310 • Community Care Budget – adults over 65 - £5,710,230 • Contracts - £793,000 <p>Total gross budget: £11,071,143</p> <p>As part of our proposals to re-design this area of provision, we are planning to achieve the following reductions in expenditure during 2016/17:</p> <p>Review of Individual Mental Health Cases: £370k Revising the delivery model at Edward House: £100k Improving recovery rates and flow through services: £323k Reduction in contract price/staffing: £50k</p> <p>Total (2016/17) saving: £843k</p>
1b	What is the project, policy or proposal?	<p>The Council has operated co-located mental health services since 1992 and a single line management structure with Pennine Care NHS Foundation Trust</p>

since 2005, which includes integrated mental health teams for Adults (under 65) and Older People (over 65's).

We propose to reduce Council expenditure on mental health services by reviewing and re-designing Mental Health service provision, which will include;

- Reviewing care packages and reducing the cost of support provided to individuals where safe to do so
- Improving outcomes for individuals by helping people to maintain their independence and promote recovery
- Reviewing and remodeling or re-commissioning mental health services provided under contract, and working with the CCG to review and remodel mental health services across the health and social care economies
- Reducing management and staffing costs where that can be achieved without an adverse impact upon service delivery and outcomes for people with mental health problems

Our intention is to prevent, delay and reduce demand for traditional mental health treatment and care by intervening earlier and making sure people get the right help and treatment at the right time.

This approach will be beneficial for local people and is also strategically important, demand for mental health support is projected to increase in coming years as local authority budgets reduce. It is vital that we maintain a strong focus on preventing crisis, promoting mental health and wellbeing and, where people do experience mental ill health, help them to recover and live independently as soon as possible.

We will provide people experiencing mental health problems with a broader range of help and support as early as possible, this and providing an enhanced rehabilitation offer, will support a reduction in demand for more costly secondary mental health care and support. Making better use of other preventative support options, such as talking therapies, peer/group support, and increased support in the community are some examples of the way in which this could be done.

We will work with NHS colleagues and people who use mental health services to redesign the way those services are delivered. Giving people with mental health

		problems more control over the support they receive will lead to better outcomes and reduce our costs in the longer term.
1c	What are the main aims of the project, policy or proposal?	<p>The vision for adult care in Oldham is to ensure as many people as possible are enabled to stay healthy and actively involved in their communities for longer and to reduce, delay or avoid the need for targeted services.</p> <p>The main aims of the project support delivery of that vision and include:</p> <ul style="list-style-type: none"> • Ensuring that Oldham Council is able to discharge its duties under the Care Act (2014). • Ensuring that Oldham Council is able to respond effectively to adults in need of mental health assessment and support, and their carers, in light of projected increases in demand and reducing resources. • Improving our capacity to work with Oldham residents who are, or appear to be in need of support to promote their independence, prevent, reduce and delay need for support and to help local residents to achieve the best outcomes. • Improving our capacity and ability to work with carers and to take other approaches that will help us to prevent, reduce, and delay demand for traditional mental health services by intervening earlier and helping people to live as independently as possible in the community for as long as possible.
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	<p>People who experience mental health issues may also experience greater deprivation, be on lower incomes or be out of work.</p> <p>Whilst people with mental health related support needs may receive support in different ways in future we do not anticipate there will be an adverse impact on any group with protected characteristics. For example, some people may receive support for a shorter period of time where we can reduce need and improve outcomes by intervening at an earlier stage.</p> <p>We have clear criteria that we adopt around eligibility and wellbeing and the applied criteria can increase a care package as well as decrease. The focus of reviews is upon strengths and away from the traditional deficit model of need and taking all circumstances into</p>

		<p>account.</p> <p>We will review the equality impact of our plans when they are finalised and will consider potential impacts upon all groups with characteristics protected under equality legislation.</p>
--	--	---

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	X			
Particular ethnic groups	X			
Men or women (include impacts due to pregnancy / maternity)	X			
People of particular sexual orientation/s	X			
People in a marriage or civil partnership	X			
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	X			
People on low incomes				X
People in particular age groups				X
Groups with particular faiths and beliefs	X			
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
<i>E.g. vulnerable residents, individuals at risk of loneliness, carers or serving and ex-serving members of the armed forces</i>		<input type="checkbox"/>	<input type="checkbox"/>	

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input checked="" type="checkbox"/>	

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
1h	How have you come to this	We do not anticipate that revising the delivery of mental

<p>decision?</p>	<p>health support will result in any detrimental impacts upon groups with protected characteristics. However, the potential vulnerability of the client groups, which include individuals with multiple and complex needs for treatment and support, requires that a full equality impact assessment of our plans is completed prior to implementation.</p> <p>We will involve staff, the people that use our services and carers in developing our delivery models, our proposals will be revised in light of comments from those groups. Acting on stakeholder views will help us to ensure we are better able to respond to the needs of individuals, groups with protected characteristics (under equality legislation) and communities in Oldham.</p> <p>We will improve our capacity to respond to local need by targeting our resources more effectively and we will work with people to prevent, reduce and delay need for care and support by making better use of existing staffing and other resources.</p> <p>We have clear criteria that we adopt around eligibility and wellbeing and the applied criteria can increase a care package as well as decrease. The focus of reviews is upon strengths and away from the traditional deficit model of need and taking all circumstances into account.</p>
------------------	---

Stage 2: What do you know?

What do you know already?

Most people under the age of 65 in contact with Community Mental Health Teams are likely to have, or be recovering from a severe or enduring mental health condition. Many of the older people who use mental health services have dementia and may also have other mental and physical health related conditions.

Table 1 below shows the estimated prevalence of a number of mental illness conditions in Oldham compared to the values in England, Table 2 illustrates the volume of different categories of mental health related admissions to hospital in Oldham compared to national averages.

Whilst the data relates to periods between 2011 and 2014 it is unlikely that there has been a

significant change in the relationship between Oldham's performance and average performance across the country. It is therefore probable that the prevalence of numerous mental health conditions and the volume of mental health related hospital admissions remain higher in Oldham than national averages.

This illustrates the scale of the challenge in promoting mental health and wellbeing in Oldham, and also why it is so important to change the way we work to get better outcomes. Our intention is to provide people experiencing mental health problems with a broader range of help and support as early as possible, this and providing an enhanced rehabilitation and recovery offer, will support a reduction in demand for more costly secondary mental health care and support.

Table 1.

Prevalence indicator	Oldham Value	Number of people in Oldham using Census 2011 population	England Value
Percentage of adults (18+) with dementia (2011/12)	0.55	929	0.53
Percentage of adults (18+) with depression (2011/12)	12.49	21,026	11.68
Percentage of adults (18+) with learning disabilities (2011/12)	0.47	791	0.45
Percentage of young people (5-16) with any mental health disorder (2013)	10.11	3,738	9.60
Percentage of young people (5-16) with emotional disorders (2013)	3.88	1,435	3.70

Table 2.

Hospital Admissions			
Indicator	Age	Oldham Latest	England Latest
Attendances at A&E for a psychiatric disorder per 100,000 population	All ages	556.06	243.54
		2012/13	
Number of bed days per 100,000 population.	18+ yrs	4729.42	4685.94
		2013/14 Q1	
Emergency admissions for self harm per 100,000 population	All ages	202.90	190.99
		2012/13	
Hospital admissions for unintentional and deliberate injuries, ages 0-24 per 10,000 population	<25 yrs	160.22	116.03
		2012/13	
Schizophrenia emergency admissions: Rate per 100,000 population	18+ yrs	80.00 (2009/10 - 2011/12)	57 (2009/10-2011/12)
		2011/12	
Emergency Hospital Admissions for Intentional Self-Harm: Directly age-sex standardised rate	All ages	204.85	187.96
		2012/13	
Young people hospital admissions for self-harm: rate per 100,000 aged 10 - 24	10-24 yrs	398.23	352.26
		2010/11-2012/13	
Child hospital admissions due to alcohol specific conditions: rate per 100,000 aged under 18	<18 yrs	68.33	42.72
		2010/11-2012/13	
Young people hospital admissions due to substance misuse: rate per 100,000 aged 15 - 24	15-24 yrs	61.92	75.21
		2010/11-2012/13	
Child hospital admissions for unintentional and deliberate injuries: rate per 10,000 children 0-14	<15 yrs	164.16	103.83
		2012/13	
Young people hospital admissions for unintentional and deliberate injuries: rate per 10,000 young people 15-24	15-24 yrs	153.91	130.65
		2012/13	

	Value higher than England
	Value lower than England

What don't you know?

The World Health Organisation recognises the impact of mental health on all aspects of people's lives in its definition of mental health:

'Mental health is not just the absence of mental disorder. It is defined as a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.'

There is a shift in the way mental health is now being considered. Whilst the prevention and treatment of people with mental health disorders are still important, it is acknowledged that promoting good mental health and wellbeing is wider than this and includes ensuring all people, not just those with a defined condition are experiencing positive mental health and are therefore able to fulfil their potential in relation to academic achievements, productivity, and helping towards experiencing good physical health.

Whilst we have a good understanding of people who require social care and support as a result of mental ill health earlier intervention (for example by All Age Early Help services) will lead to services working with people who in the past we would not have had contact with, unless their condition or situation worsened. We will monitor the impact on services and the outcomes achieved for individuals.

Further data collection

See comments above.

Summary (to be completed following analysis of the evidence above)

Does the project, policy or proposal have the potential to have a <u>disproportionate</u> impact on any of the following groups? If so, is the impact positive or negative?	None	Positive	Negative	Not sure
Disabled people	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a marriage or civil partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

People in particular age groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think that this proposal may affect negatively or positively?				
<i>E.g. vulnerable residents, individuals at risk of loneliness, carers or serving and ex-serving members of the armed forces</i>		<input type="checkbox"/>	<input type="checkbox"/>	

3e. What might the potential impact on individuals or groups be? <i>(think about disability, race, gender, sexual orientation, transgender, age, faith or belief and those on low incomes and other excluded individuals or groups)</i>	
Generic (impact across all groups)	Our proposals to review individual cases and improve the rate at which people move through mental health services will improve our capacity and ability to identify people in the community who may benefit from information, advice or support and to intervene earlier to prevent, reduce, and delay demand for traditional social care services by helping people to live as independently as possible in the community for as long as possible. We do not anticipate that our proposals will have a negative impact upon any section of the community. Making better use of our existing capacity and targeting our resources more effectively is likely to have a positive effect and improve our response to local residents who experience mental ill health.
Men or women (include impacts due to pregnancy / maternity)	We do not anticipate that our proposals will have any differential impact upon men or women. The Care Act requires that we are more proactive in identifying and responding to people who may not be in need of traditional social care and support. Earlier intervention and actively helping people to recover from mental ill health will help to achieve better outcomes.
People of particular sexual orientation/s	We do not anticipate that redesigning our services will have a differential impact upon people of particular sexual orientations.
Disabled people	Targeting our resources more effectively to intervene at an earlier stage to prevent, reduce or delay individuals' need for mental health related support is likely to have a positive impact upon disabled people. Our aim is to make sure we help people to live as independently as possible in the community for as long as possible.
Particular ethnic groups	We do not anticipate that redesigning our services will have a differential impact upon people of particular ethnic groups. However changing the way we work, to be more responsive to local people and more actively reviewing cases is likely to have a generally positive impact across all sections of the community.
People in a marriage or civil partnership	We do not anticipate that redesigning our services will have a differential impact upon people who are in a marriage or civil partnership. However changing the way we work, to be more responsive to local people and more actively reviewing cases is

	likely to have a generally positive impact across all sections of the community.
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	We do not anticipate that redesigning our services will have a differential impact upon people who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment.
People on low incomes	We do not anticipate that redesigning our services will have a differential impact upon people on low incomes. Changing the way we work, to be more responsive and intervene earlier with people is likely to have a generally positive impact across all sections of the community.
People in particular age groups	Taking a more proactive approach, intervening earlier and helping people to live as independently as possible in the community for longer will be of benefit to older people by promoting quality of life in old age and delaying the necessity for individuals to be placed in residential care.
Groups with particular faiths and beliefs	We do not anticipate that redesigning our services will have a differential impact upon groups with particular faiths or beliefs.
Other excluded individuals and groups (e.g. <i>vulnerable residents, individuals at risk of loneliness, carers or serving and ex-serving members of the armed forces</i>)	Targeting our staffing and other resources more efficiently to make sure people get the right help at the right time and improving the journey through services will also improve our response to carers and other vulnerable and excluded groups.

Consultation information

This section should record the consultation activity undertaken in relation to this project, policy or proposal.

3a. Who have you consulted with?	<p>We will consult with service users, staff and wider stakeholders in advance of implementing our plans.</p> <p>As previously stated we do not anticipate that our proposals will have a detrimental impact on any groups with characteristics protected under equality legislation, or other excluded individuals or groups. We will finalise the equality impact assessment and our proposals, amending them as may be required following consultation.</p>
3b. How did you consult? (inc meeting dates, activity undertaken & groups consulted)	See above.

Stage 4: Reducing / mitigating the impact

As a result of what you have learned, what can you do to minimise the impact of the proposed changes on equality groups and other excluded / vulnerable groups, as outlined above?

4a. Where you have identified an impact, what can be done to reduce or mitigate the impact?

Impact:	<p>We do not anticipate that the redesign of the services will have a detrimental impact on any groups with characteristics protected under equality legislation, or other excluded individuals or groups.</p> <p>We have clear criteria that we adopt around eligibility and wellbeing and the applied criteria can increase a care package as well as decrease. The focus of reviews is upon strengths and away from the traditional deficit model of need and taking all circumstances into account.</p>
---------	---

4b. Have you done, or will you do anything differently as a result of the EIA?

As previously stated we do not anticipate that our proposals will have a detrimental impact on any groups with characteristics protected under equality legislation, or other excluded individuals or groups. We will review the equality impact assessment and our proposals, amending them as may be required following consultation with stakeholders. If there should be any significant emerging issues or changes to our proposals as the detail is developed or following consultation we will report them and our proposed response to elected members via established overview, scrutiny and cabinet mechanisms.

4c. How will the impact of the project, policy or proposal and any changes made to reduce the impact be monitored?

As stated above we will review and where necessary revise our proposals and, once implemented, will keep the arrangements, the outcomes they achieve and potential equality impacts under review.

Conclusion

This section should record the overall impact, who will be impacted upon and the steps being taken to reduce / mitigate the impact

Our approach to reducing mental health expenditure, by improving outcomes for individuals and the options available to them will enhance our ability to:

- Ensure that Oldham Council is able to discharge its duties under the Mental Health Act and the Care Act.
- Ensure that Oldham Council is able to respond effectively to adults in need of mental health related assessment and support, and their carers, in light of projected increases in demand, reducing resources and new statutory duties.
- Improve our capacity to work with Oldham residents who are, or appear to be in need of support to promote their independence, prevent, reduce and delay need for support and to help local residents to achieve the best outcomes.

- Improve our ability to respond to social care need within groups with characteristics protected under equality legislation.
- Improve our capacity and ability to prevent, reduce, and delay demand for traditional social care services by intervening earlier and helping people to live as independently as possible in the community for as long as possible.

We have clear criteria that we adopt around eligibility and wellbeing and the applied criteria can increase a care package as well as decrease. The focus of reviews is upon strengths and away from the traditional deficit model of need and taking all circumstances into account.


At this stage there is no reason to believe that implementation of our proposals to reduce mental health related expenditure will have a negative impact upon any section of the population or upon groups with characteristics protected under equality legislation and we anticipate that there will be a positive impact arising from greater capacity to promote independence and wellbeing by intervening earlier with people who might otherwise require more intensive social care.

We will consult with stakeholders on our proposals and review the equality impact assessment and our proposals in light of that consultation.

Stage 5: Signature

Lead Officer: Colin Elliott, Assistant Director, Adult Services
Date: 27 October 2015

Approver signature: Maggie Kufeldt, Executive Director, Health and Wellbeing



Date: 27/10/15

EIA review date: December 2016

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	E007
Portfolio	Health and Wellbeing
Directorate:	Health and Wellbeing
Division:	Adult Services
Responsible Officer and role:	Maggie Kufeldt, Executive Director, Health and Wellbeing
Cabinet Member and Cluster :	Cllr J Harrison, Health and Wellbeing Cluster

Title:	Workforce re-design
---------------	----------------------------

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£4101k
	Income	(£0k)
	Net Expenditure	£4101k
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	115

	2016/17	2017/18
Proposed Financial saving:	150	0
Proposed reduction in FTE's	5	0

Section 3

Background: <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	This budget pro-forma provides information on the saving target for 2016/17 associated with workforce re-designs within Adult Social Care. Savings amount to £150k.
--	---

<p><u>Proposed Savings £k:</u></p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>Workforce re-design involves the redesign of the care management, personalisation and all age disability elements of service delivery. Mental Health and Client Support functions are not included; however, we need to consider this as part of a whole system approach, including links to safeguarding and Mental Health staffing reviews, which is also underway.</p> <p>The workforce redesign will have a strong focus on:</p> <ul style="list-style-type: none"> • Adapting and changing the skills mix in order to have a workforce that is flexible, responsive with a clear focus on demand management, prevention and improving outcomes • Partnership and integration; making the best use of resources available to prevent, reduce and delay need for social and healthcare and other intensive interventions • Commissioning; leading and shaping the market to develop and deliver high quality service <p>Savings are to be realised via a combination of service/process improvements and reconfiguration of staffing structures. We are also committed to further integration of service provision with Health where this will add value, improve outcomes for local residents and advance the strategic aims of Oldham Council and our Greater Manchester partners.</p>
---	---

<p><u>Further Financial Implications & Considerations</u></p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	None
---	------

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	Cannot quantify at this stage until scoping and consultation completed
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	None
Type of impact on partners	Negative

Section 4

<u>Key Milestones</u>	
Milestone area	Timescale
High level proposal in place	September 2015
Detailed Proposal signed off	October 2015
Completion of EIA	October 2015
Commence implementation	January 2016

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Longer waiting times for assessment and review if fewer care management staff are employed.	A detailed assessment of risk and capacity and demand must be undertaken
The additional responsibilities imposed by the Care Act will need to be absorbed, and may have an impact on the achievement of our strategic aims and objectives. The estimated cost to Oldham Council is estimated to be nearly £3m per annum.	Further government funding may (or may not) be provided to local authorities for this purpose. The Council must ensure it continues to develop an understanding of the impact of increased demand, and additional responsibilities arising from the introduction of the Care Act in April 2015.
Insufficient resources to make the necessary investment in prevention and early intervention, resulting in an acceleration of demand for social care	Ensure a robust programme management approach to managing projects, ensuring resources needed to carry out projects are clearly stipulated.
Additional risk to health, wellbeing and safety if vulnerable adults receive less support than they would in the past	The Council must ensure service users are provided with a safe level of care.

Section 5

What impact might the proposal have on the following?

<u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
None.

Service Delivery and future expected outcomes:

The overall vision for adult care in Oldham is to ensure as many people as possible are enabled to stay healthy and actively involved in their communities for longer and avoid, reduce or delay the need for targeted health and social care services. In order to achieve this and manage the expected future demands, we must move away from traditional “social” and “health” care, and focus on early intervention to address needs before they escalate, and develop more integrated, person centred services that are better able to respond to individuals taking account of their assets and abilities.

Whilst we must reduce Community Care expenditure we must also make sure we are able to discharge our statutory duties in respect of vulnerable adults, a proportion of whom will need intensive and /or long term care and support.

Maintaining safe services whilst delivering a complex programme to transform services, reduce costs and improve longer term outcomes will be challenging, not least because as our resources reduce local need and demand for social care are projected to increase and the introduction of the Care Act in 2015 presented additional duties for Local Government.

The approach to manage the expected demand within reduced resources will be one that:

- Intends to lessen demand
- Is focused on outcomes
- Promotes delivery models that deliver better outcomes, at lower cost where possible
- Supports people to avoid using residential care services, but where they do reduces the length of stay and delays the point of admission
- Invests in preventative services

Organisation (other services)

The success of the transformation programme depends heavily on the engagement of all parts of the organisation and our key partners to establish a joined up approach. To support this we have established a Transforming Adult Services group, which meets regularly to engage key elements of the business in our transformation programme.

We are also working with NHS Oldham Clinical Commissioning Group and our Urgent Care Alliance NHS partners to identify opportunities for improving the whole health and social care system. This will in turn inform our redesign of Adult Social Care.

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

A reduction in the workforce and a refocusing of the role of care management may have a negative impact on the capacity of the workforce to shift culture and behaviour at the required pace, and staff members' ability to undertake their roles in a creative and innovative way.

The proposals create an opportunity to work in a more integrated way with partners, and to develop our workforce to focus more on demand management, prevention and achieving a measurable improvement in outcomes. Adopting an asset based approach that encourages positive risk taking and effective risk management will be a key element of the overall approach. This is important because most people who use social care and support services want to retain their independence and control over their life for as long as possible. We aim to make sure people get just the right amount of support at the right time to achieve these aims.

In all cases, the impact of FTE reductions, including the impact on the remaining workforce must be assessed as the proposals are further developed.

Communities

The proposals will generally have a positive impact on communities in that as many people as possible will be enabled to stay healthy and active in the community for longer by delaying or avoiding the need for targeted services. However, there may be additional pressure on families and carers, as well as service users to continue to cope for longer with less support than would have been available in the past.

Service Users

Redesigning our services and integrating health and social care where that makes sense will improve people's experience of social care and health services in Oldham. Taking a more person centered approach to preventing, reducing and delaying need to traditional social care and other intensive services will result in better outcomes for individuals and more people living independently for longer in the community.

However, there may also be additional risks to health, wellbeing and safety if vulnerable adults receive less support than they would have in the past, and additional pressure on families and carers if they are unable to access support We will work more proactively to identify and help carers at an earlier stage to mitigate those risks.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

Ongoing reductions in public sector funding may displace demand to the voluntary and community sectors. This will be taken into account as future commissioning strategies are developed. It is also the case that reductions in social care might also increase demand for

health services. We are working with our local and Greater Manchester NHS partner agencies to make sure that our transformation plans are coherent and that we are able to identify and mitigate risks across the health and social care economy.

Section 6

Supplementary Information

None.

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	A Trade Union meeting took place in late July with staffing consultation following this. A full overall public consultation will be completed by mid-October.
Staff Consultation	This will be required if staffing proposals require a reduction in posts, or a re-structure of the service.
Public Consultation	From 3 August 2015
Service User Consultation	As below
Any other consultation	Where relevant, consultation with all affected staff, service users, carers, providers and partners, has been undertaken for specific projects.

Section 8

Equality Impact Screening

Is there **potential** for the proposed saving to have a disproportionate adverse impact on any of the following groups:

	State Yes / No against each line
Disabled people	Yes
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No

People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	Yes
People in particular age groups	Yes
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	Yes
EIA to be completed by:	Jayne Ratcliffe
By:	26 October 2015

Section 9

Responsible Officer:	Maggie Kufeldt
Support Officer Contact:	Claire Hill
Support Officer Ext:	3125


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	29 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr J Harrison Social and Safeguarding
Signed:	
Date:	29 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Equality Impact Assessment Tool - DRAFT

E007: Workforce Redesign

Lead Officer:	Peter Tomlin
People involved in completing EIA:	Peter Tomlin
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	Yes No X The original EIA was completed January 2015.

General Information

1a	Which service does this project, policy, or proposal relate to?	<p>This EIA relates to budget proposal ref: E007. This is a continuation of the 2015/16 proposal Redesigning Care Management and Assessment Services. Budget Reference Number: CO46</p> <p>This Equality Impact Assessment relates to the redesign of Adult Community Care Management, Assessment and related services provided by Oldham Council.</p>
1b	What is the project, policy or proposal?	<p>The proposal is to redesign and where necessary restructure Adult Community Care Management, Assessment and related services provided by Oldham Council to ensure the services are efficient, cost effective and fit for purpose in the future.</p> <p>We will take a phased approach to this work. We are proposing to work with managers and staff from Adults Social Care and Pennine Care Trust, and with commissioners from the Council and the CCG in developing a service specification that describes the integrated models of care and delivery, and the governance for managing these changes.</p> <ul style="list-style-type: none"> • Subject to agreement at DMT and with the CCG, the services that we are looking for an integrated approach to include; <ul style="list-style-type: none"> ○ The single point of access ○ The clusters / neighbourhood teams ○ Integrated Discharge Team ○ Intermediate Care and Re-ablement ○ Out of Hours / EDT ○ Specialist services – Learning Disabilities and Mental Health

The proposed governance for these changes will be reported to the Health and Well Being Board from the Integrated Commissioning Group, who will have oversight of a Programme Board with subgroups to cover the following areas;

- Systems design
- IT and information governance
- Workforce and organisational development
- Estates and Asset Management

- Finance and Contractual Mechanisms
- Engagement and involvement with people who use services and carers

Plus task and finish work on the following;

- Governance
- Mapping the existing services and spend

For each of the above the staff will be involved relevant to the expertise required, from across the stakeholder organisations including the Council, Pennine Care Trust, Pennine Acute Trust, the voluntary, community and faith sector.

Whilst the functions delivered by the services will not change as a result of the redesign process we will make better use of existing capacity by working with health colleagues to target our staffing and other resources more effectively within localities.

This is necessary to ensure that we are able to deliver additional duties under the Care Act 2014 and to improve our response to Oldham residents as Council budgets reduce.

In practice this will entail:

- Examining the potential to move resources out of specialist services into locality teams where there is evidence that this approach will add value and improve outcomes.

- Further the integration of health and social care teams and functions where it is cost effective to do so and where integration will improve customer experience and health and well-being

		<p>outcomes.</p> <p>The target for reducing operating costs by redesigning Adult Services is £300,000. (£150,000 to be achieved in 2015/16, £150,000 to be achieved in 2016/17).</p> <p>At this stage we anticipate that the required level of savings will be delivered by a reduction in management and staffing costs, less reliance on residential care and hospital services and better use of the voluntary, community and faith sector local to where people live. The detail of posts affected will become clearer as we develop our plans.</p>
1c	What are the main aims of the project, policy or proposal?	<p>The main aims of the project include:</p> <ul style="list-style-type: none"> • To ensure that Oldham Council is able to discharge its duties under the Care Act (2014). • To ensure that Oldham Council is able to respond effectively to adults in need of social care assessment and support and their carers in light of projected increases in demand, reducing resources and new statutory duties. • To improve our capacity to work with Oldham residents who are, or appear to be in need of support to promote their independence, prevent, reduce and delay need for support and to help local residents to achieve the best outcomes. • To improve our ability to respond to social care need within localities, as well as the needs of particular groups, including those with characteristics protected under equality legislation. This may entail moving elements of what we do out of specialist services so that we can work more effectively to respond to the needs of local communities. • To improve our capacity and ability to work with carers and to take other approaches that will help us to prevent, reduce, and delay demand for traditional social care and health services by intervening earlier and helping people to live as independently as possible in the community for as long as possible.

		We are currently, alongside health partners, analysing data on local need and demand for social care and support to develop the detailed evidence base required to inform decisions about how we should target resources in future. Our aim is to improve the quality and value of Assessment and Care Management so we can help Oldham residents to achieve the best outcomes possible.
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	<p>We do not anticipate that this proposal will have a detrimental impact on any section of the community. It is our intention that targeting our resources more effectively will improve our responses to groups with characteristics protected under equality legislation and to the community as a whole.</p> <p>We anticipate that redesigning our services will have a positive impact upon people with disabilities of all ages, carers and upon older people in need of care or support.</p>

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people		X		
Particular ethnic groups	X			
Men or women (include impacts due to pregnancy / maternity)	X			
People of particular sexual orientation/s	X			
People in a marriage or civil partnership	X			
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	X			
People on low incomes		x		
People in particular age groups		X		
Groups with particular faiths and beliefs		x		
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
Vulnerable residents and carers.		X		

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	X	<input type="checkbox"/>
	<p>The services currently being delivered will be re-designed to improve their operational delivery and flexibility to respond to local need for assessment and support.</p> <p>There should not be a negative impact on any section of the community. We will be better equipped to respond to local people, particularly to disabled people, older people and carers.</p> <p>We anticipate that our target for financial savings (£300k) will, primarily, be delivered by reductions in management and staffing costs. We do not anticipate a significant reduction in front line staff although some roles and functions may change.</p> <p>Targeting our resources more effectively will enable us to deliver new duties, improve our response to local people and the outcomes we achieve.</p>	

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes
1h	How have you come to this decision?	<p>We do not anticipate any detrimental impacts as a result of the redesign of adult services. However, given the potential scale of change to management and staffing structures, and the vulnerable nature of the people in need of social care and support it will be prudent to conduct a full equality impact assessment and to review our findings when the detail of our plans is in place.</p> <p>We will involve staff, the people that use our services and carers in developing our delivery models through the governance model described above. Our proposals will be revised in light of comments from those groups. Acting on stakeholder views will help us to ensure we are better able to respond to the needs of individuals, groups with protected characteristics (under equality legislation) and communities in Oldham.</p> <p>We will improve our capacity to respond to local need by targeting our resources more effectively. There will be not be a substantial change to the way we work with individuals, families and carers in the community but we will be more able to work with people to prevent, reduce and delay need for care and support by making better use of existing staffing and other resources.</p> <p>Where it will add value and improve outcomes we will look to further integrate our services with local Health services. Such judgements will be evidence based and negotiated with NHS agencies to ensure that together we are able to deliver a better service and outcomes for Oldham residents.</p> <p>We will review potential equality impacts in January 2016.</p>

Stage 2: What do you know?

What do you know already?

Adult social care tends to be provided to people who have characteristics protected by equality legislation. Therefore any substantial change to services provided, or the way in which they are delivered might have positive or detrimental impacts upon individuals or groups with protected characteristics.

This is illustrated by the following information which provides an overview of social care and support provided to Oldham residents.

Demographic Information

A summary of people supported by Oldham Council in residential settings and in their own homes during 2013-2014 (following an assessment of need) is provided below:

Table 1: Numbers supported by Social Services during 2013-14

	Total Clients	Community Based Services
Physical Disability - 18 to 64	493	480
Mental Health - 18 to 64	200	169
Learning Disability - 18 to 64	431	419
Other - 18 to 64	10	10
Older People - 65 and Over	2726	1908
Total	3860	2986

Table 2: Numbers helped to live at home during 2013-14

	Total Clients	Home Care
Physical Disability - 18 to 64	480	156
Mental Health - 18 to 64	169	31
Learning Disability - 18 to 64	419	34
Other - 18 to 64	10	0
Older People - 65 and Over	1908	1367
Total	2986	1588

Oldham, in common with many local authorities across the country faces projected increases in demand for health and social care in coming years as a result of a number of factors. These include:

- An ageing population
- People living longer with complex and multiple health conditions
- Children with learning and physical disabilities surviving into adult hood as a result of better medical treatment and care.

In coming years demographic growth is projected across all sections of the local population that are likely to require some form of social care and support in future. Some examples are provided below.

Table 3: Projecting Adult Need and Service Information Data*	2014	2015	2020	2025	2030
Total population aged 18 and over predicted to have a moderate or severe learning disability **	851	856	867	881	895
People aged 18-64 predicted to have a moderate or serious physical disability	13,395	13,482	13,813	13,992	13,852
People aged 75 and over predicted to have registerable eye conditions	998	1,024	1158	1389	1530
People aged 18-64 predicted to have <u>psychotic</u> disorder	851	856	867	881	895
People aged 18-64 predicted to have two or more <u>psychiatric</u> disorders	9709	9736	9798	9838	9791
Total population aged 65 and over predicted to have dementia	2357	2416	2717	3143	3672
People aged 65 and over with a limiting long-term illness, by age, projected to 2030	4882	4978	5146	5146	5724
Total population aged 65 and over predicted to be admitted to hospital as a result of falls	718	728	820	949	1046
People aged 65 and over providing unpaid care to a partner, family member or other person, by age, projected to 2030	4927	5014	5314	5724	6283

* The above information (relating to Oldham) is taken from a national dataset produced in 2013.

** Information relating to people with moderate and severe learning disabilities is included to illustrate the sections of the learning disabled population most likely to require social care and support. The total learning disabled population in Oldham is projected to increase from a current baseline of 4,003 to 4143 by 2020. (Oldham Joint Strategic Needs Assessment for Adults with Learning Disabilities 2014)

What don't you know?

Whilst we understand overall demand and need for the services we commission and provide across different client groups (including assessment and case management) we do not yet have the detailed evidence base that will be needed to target our resources more effectively across localities, and we do not understand the impact of a more integrated approach with health services, as many of the people who receive services from us also receive them from health. Adopting a named care co-ordinator approach through a single assessment and care plan, regardless of whether health or social care professionals take the lead should result in an improved customer journey, but the impact on resources is not known at this time.

We are analysing available data to gain a better understanding of the nature, complexity and geographical distribution of future demand across client groups. This includes analysing the

composition of demand for social care and support that arises from managing risk as people (often frail, older people) are discharged from hospital, and how that demand is distributed across the borough when people return home or to other settings (such as extra care housing, residential and nursing homes).

We are establishing the stronger, more sophisticated evidence base that will help us to make informed decisions about the number and type of staff that will be needed to operate within localities and to meet the complex needs of particular groups, such as people with multiple needs, sensory impairments or individuals who are nearing the end of their life.

Further data collection

Discussions with staff at all levels indicates that we can make better use of existing capacity, and if we achieve that by redesigning services the outcome will be a positive impact on people with characteristics protected by equality legislation.

We are now working with partner agencies to develop more detailed plans that will be put to consultation with people who are, or may in future be in need of social care and support and their carers (see above).

Summary (to be completed following analysis of the evidence above)				
Does the project, policy or proposal have the potential to have a <u>disproportionate</u> impact on any of the following groups? If so, is the impact positive or negative?	None	Positive	Negative	Not sure
Disabled people		X		
Particular ethnic groups	X			
Men or women (include impacts due to pregnancy / maternity)	X			
People of particular sexual orientation/s	X			
People in a marriage or civil partnership	X			
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	X			
People on low incomes		x		
People in particular age groups		X		
Groups with particular faiths and beliefs		x		
Are there any other groups that you think that this proposal may affect negatively or positively?				
Vulnerable residents and carers.		X		

Stage 3: What do we think the potential impact might be?

Consultation information

<p>3a. Who have you consulted with?</p>	<p>The Adult Services Transformation Programme has been included in three public consultation events and discussed with representatives of the voluntary sector and providers of residential and homecare in Oldham.</p> <p>Four briefings for staff and trade unions on the Adult and Children’s Social Care budget proposals were held in August 2014 with reference to future plans to redesign our services. Two further staff briefings have been held in 2015 as part of the budget setting consultation process; our plans to redesign services were discussed at both events.</p> <p>Numerous workshops were held with managers and staff across Adult Services in 2014 to involve them in considering what works well, what can be improved and how we can redesign services to get better outcomes and deliver new statutory duties.</p>
<p>3b. How did you consult? (inc meeting dates, activity undertaken & groups consulted)</p>	<p>Workshops were held with managers and staff on the following dates in 2014: August: 28th September: 5th/12th/15th/22nd/30th October: 6th/15th/23rd</p> <p>The redesign of adult services has also routinely been discussed at meetings with service and team managers.</p> <p>We are now engaging our NHS and other partners in developing more detailed proposals which we will consult upon with people who use our services, their families, carers and others with an interest (such as local voluntary sector agencies and providers of social care services) – see above.</p> <p>Following initial agreement from the CCG and DMT during November 2015 we will be running workshops jointly with the Pennine Care Trust to engage firstly with managers and then staff in this model of care and to gain their views and insights into the issues that matter to them. This will also form part of the consultation as these proposals are part of the tranche 1 savings.</p>

3c. What do you know?

At this stage we do not anticipate any adverse or negative impact on people in need of social care assessment, case management and support. We believe that by redesigning the way we work will improve the service that we offer to local people, including disabled people, older people and carers. However further work is required to develop the evidence base needed to finalise our plans.

(1) Potential impact of the proposal will be on the groups that have been identified.

As previously stated, we do not anticipate any adverse or negative impact on people in need of social care assessment, case management and support. We believe that by redesigning the way we work to deliver new duties under the Care Act we will improve the service that we offer to local people, including carers. However further work is required to develop the evidence base needed to finalise our plans.

Potential impacts will be reassessed following consultation with a broader range of stakeholders, including our statutory and other partner agencies, people in need of social care and support, their families and carers.

(2) What we are planning to do to mitigate potential negative impacts.

Careful management of the transition to new working arrangements (when detail is finalised) will minimise disruption to people who use our services, families, carers and partner agencies. We will assess and put in place plans to mitigate identified risks as our proposals are finalised and we will review potential equality impacts prior to implementation.

3d. What don't you know?

If you feel that the data and past consultation feedback you have is not sufficient to properly consider the impact before a decision is made then you may wish to supplement your evidence base with more data or further consultation. In some cases statutory consultation may be required. This should be proportionate to the scale of the decision and will depend on the gaps in your current understanding.

3e. What might the potential impact on individuals or groups be?

(think about disability, race, gender, sexual orientation, transgender, age, faith or belief and those on low incomes and other excluded individuals or groups)

Generic (impact across all groups)

Redesigning our services will improve our capacity and ability to identify people in the community who may benefit from information, advice or support and to intervene earlier to prevent, reduce, and delay demand for traditional social care services by helping people to live as independently as possible in the community for as long as possible. We do not anticipate that redesigning services will have a negative impact upon any section of the community. Making better use of our existing

	capacity and targeting our resources more effectively is likely to have a positive effect and improve our response to local residents.
Men or women (include impacts due to pregnancy / maternity)	We do not anticipate that redesigning our services will have any differential impact upon men or women. The Care Act requires that we are more proactive in identifying and responding to people who may not be in need of traditional social care and support. By redesigning the way we work to provide better information to the local population on their rights, entitlements and options available to them, all sections of community will be better informed about the full range of universal, community and social support available to them and those they care for.
People of particular sexual orientation/s	We do not anticipate that redesigning our services will have a differential impact upon people of particular sexual orientations. However changing the way we work, to be more responsive to local people and to provide better information is likely to have a generally positive impact across all sections of the community.
People in a marriage or civil partnership	We do not anticipate that redesigning our services will have a differential impact upon people in a marriage or civil partnership. However changing the way we work, to be more responsive to local people and to provide better information is likely to have a generally positive impact across all sections of the community.
Disabled people	Targeting our resources more effectively to intervene at an earlier stage to prevent, reduce or delay individuals' need for traditional social care and support is likely to have a positive impact upon disabled people. Our aim is to make sure we have the capacity we need to help people to live as independently as possible in the community for as long as possible.
Particular ethnic groups	We do not anticipate that redesigning our services will have a differential impact upon people of particular ethnic groups. However changing the way we work, to be more responsive to local people and to provide better information is likely to have a generally positive impact across all sections of the community.
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	We do not anticipate that redesigning our services will have a differential impact upon people who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment. However changing the way we work, to be more responsive to local people and to provide better information is likely to have a generally positive impact across all sections of the community.
People on low incomes	We do not anticipate that redesigning our services will have a differential impact upon people on low incomes. However changing the way we work, to be more responsive to local people and to provide better information is likely to have a generally positive impact across all sections of the community.
People in particular age groups	The majority of people who receive social care assessments, case management and other services are over 64 years of age.

	Taking a more proactive approach, intervening earlier and helping people to live as independently as possible in the community for longer will be of benefit to older people by promoting quality of life in old age and delaying the necessity for individuals to be placed in residential care.
Groups with particular faiths and beliefs	We do not anticipate that redesigning our services will have a differential impact upon groups with particular faiths or beliefs. However changing the way we work, to be more responsive to local people and to provide better information is likely to have a generally positive impact across all sections of the community.
Other excluded individuals and groups (e.g. <i>vulnerable residents, individuals at risk of loneliness, carers or serving and ex-serving members of the armed forces</i>)	We must redesign our services so we have the capacity we will need to work more proactively with carers and to help people who might otherwise require social care and support to be as independent as possible and achieve their potential. Targeting our staffing and other resources more efficiently to achieve these aims will improve our response to carers and other vulnerable and excluded groups.

Stage 4: Reducing / mitigating the impact

4a. Where you have identified an impact, what can be done to reduce or mitigate the impact?

Impact:	We do not anticipate that the redesign of the services will have a detrimental impact on any groups with characteristics protected under equality legislation, or other excluded individuals or groups.
---------	---

4b. Have you done, or will you do anything differently as a result of the EIA?

As previously stated we do not anticipate that the redesign of the services will have a detrimental impact on any groups with characteristics protected under equality legislation, or other excluded individuals or groups. We will consult with staff and other stakeholders on more detailed proposals when these are in place and we will review the equality impact assessment and our proposals, amending them as may be required by September 2016. If there should be any significant emerging issues or changes to our proposals as the detail is developed or following consultation we will report them and our proposed response to elected members via established overview, scrutiny and cabinet mechanisms.

4c. How will the impact of the project, policy or proposal and any changes made to reduce the impact be monitored?

As stated above we will review and where necessary revise more detailed proposals by September 2015 and will keep revised arrangements, the outcomes they achieve and potential equality impacts under close review once new structures are in place.

Conclusion

This section should record the overall impact, who will be impacted upon and the steps being taken to reduce / mitigate the impact

Redesigning our care management and assessment services will enhance our ability to:

- Ensure that Oldham Council is able to discharge its duties under the Care Act (2014).
- Ensure that Oldham Council is able to respond effectively to adults in need of social care assessment and support and their carers in light of projected increases in demand, reducing resources and new statutory duties.
- Improve our capacity to work with Oldham residents who are, or appear to be in need of support to promote their independence, prevent, reduce and delay need for support and to help local residents to achieve the best outcomes.
- Improve our ability to respond to social care need within localities, as well as the needs of particular groups, including those with characteristics protected under equality legislation. This may entail moving elements of what we do out of specialist services so that we can work more effectively to respond to the needs of local communities.
- Improve our capacity and ability to work with carers and to take other approaches that will help us to prevent, reduce, and delay demand for traditional social care services by intervening earlier and helping people to live as independently as possible in the community for as long as possible.

At this stage there is no reason to believe that redesigning the services will have a negative impact upon any section of the population or upon groups with characteristics protected under equality legislation and we anticipate that there will be a positive impact arising from greater capacity to promote independence and wellbeing by intervening earlier with people who might otherwise require more intensive social care.

We will consult with stakeholders on more detailed proposals when these are in place and we will review the equality impact assessment and our proposals, amending them as may be required and report any changes to relevant council committees and cabinet.

Stage 5: Signature

Lead Officer: Peter Tomlin, Interim Head of Safeguarding Adults and Learning Disabilities,
Adult Services

Date: 27.10.2015

Approver signature: Maggie Kufeldt

A handwritten signature in black ink on a white rectangular background. The signature appears to be 'M Kufeldt' with a small dot at the end.

Date: 27/10/15

EIA review date: January 2016

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	E008
Portfolio	Health and Wellbeing
Directorate:	Health and Wellbeing
Division:	Adult Services
Responsible Officer and role:	Maggie Kufeldt, Executive Director, Health and Wellbeing
Cabinet Member and Cluster :	Cllr J Harrison, Health and Wellbeing Cluster

Title:	Adult Services – Generating additional income
---------------	--

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	N/A
	Income	(£23,454k)
	Net Expenditure	N/A
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	0

	2016/17 £k	2017/18 £k
Proposed Financial saving:	401	0
Proposed reduction in FTE's	0	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>This document sets out proposals for generating additional income for Adult Social Care in 2016/17.</p> <p>a) Income generation and charging - £260,000</p> <ul style="list-style-type: none"> • Attendance Allowance (night element) • Charging for self-funders <p>b) Increasing NHS Continuing Health Care funding - by developing more effective, joined up systems and processes between health and social care funding arrangements - £141,000</p>
--	--

Together, these proposals total £401k

Proposed Savings £k:

Through efficiency, income generation, transformation, decommissioning, etc

a) Income generation and charging: £260,000

There are two areas where charging is being considered over and above current policy -

i. Attendance Allowance (night element)

The Care Act 2014 clearly sets out the types of benefits which must fully be taken into account. This includes Attendance Allowance (AA) and Disability Living Allowance (DLA). As part of a financial assessment we currently disregard the night care element of this allowance. The night care element is classed as the difference between the low and high rates of Attendance Allowance or the middle and high rate of Disability Living Allowance. Previously, under Fairer Charging Guidance this was disregarded if night care services were not provided but under the Care Act 2014 the allowance is to be made as part of Disability Related Expenditure.

ii. Charging for Self-funders

The Care Act guidance set out that people with eligible care and support needs who have assets above the upper capital limit (currently £23,250) can ask local authorities to meet their needs and the authority may charge a fee for making this arrangement. The arrangement fee can only cover the cost of negotiating and/or managing the contract with a provider and any administration costs incurred in the process. The fee can be set at a flat rate however it must not be set at a cost which exceeds the true cost met by the authority.

b) Increasing NHS Continuing Health Care Funding by developing more effective, joined up systems and processes between health and social care funding arrangements - £141,000

NHS continuing healthcare (or CHC) is the name given to a package of care that is arranged and funded solely by the NHS for individuals who are not in hospital and have been assessed as having a 'primary health need'. This proposal will involve working in partnership with the CCG to develop a more effective, joined up system and processes, to ensure packages of care and support are reviewed and the right level of funding is allocated to clients who have both health, and social care needs.

<p>Further Financial Implications & Considerations</p> <p><i>ie Capital implications or invest to save, pump priming etc , variations to budget</i></p>	<p>Attendance Allowance - Some elements of night care services may require allowances to be made under disability related expenses (DRE). Costs in this area are currently unknown and could potentially lead to lower income than projected. Clients in receipt of higher or middle rate care AA or DLA may also be entitled to Severe Disability Premium. Support should be provided to enable clients to access this additional premium, which in turn may further increase income and also support them in maximising additional income to themselves.</p> <p>Charging for Self-Funders - Unknown demand, if self-funders approach the authority, they may not wish to have the authority arrange their support with providers on their behalf. The number of self-funders is still a relatively new area for the service to demand model and work is currently underway to develop projections for this group of clients.</p>
--	--

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	N/A
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	N/A
Type of impact on partners	Neutral or marginal

Section 4

Key Milestones	
Project area	Timescale
a) Income generation and charging	Implemented April 2016
b) Increasing NHS Continuing Health Care Funding	Implemented April 2016

Key Risks and Mitigations		
Project area	Risk	Mitigating Factor
a) Income generation and charging	It is anticipated that income of up to £260k could be generated by adopting the policies as outlined in this document. This will need to be weighed against the potential fallout and challenge that charging inevitably brings.	Ensuring effective, timely engagement and consultation will be important to ensuring these proposals are tenable.
b) Increasing NHS Continuing Health Care Funding	Joint agreement with partners in not achieved	Ensuring effective, timely engagement and consultation with relevant partners will be essential.

Section 5

What impact might the proposal have on the following?

Property Implications *ie closures, maintenance costs, transfer of Assets, property savings, etc*

None

Service Delivery and future expected outcomes:

The overall vision for adult care in Oldham is to ensure as many people as possible are enabled to stay healthy and actively involved in their communities for longer and delay or avoid the need for targeted services. In order to achieve this and manage the expected future demands, there is a need to move away from traditional “social” and “health” care, and focus on prevention, integration and a more person centered model of holistic care. The proposals contained within this paper will help to deliver this vision.

The approach to manage the expected demand within reduced resources will be one that:

- Intends to lessen demand;
- Is focused on outcomes;
- Promotes delivery models that can deliver savings;
- Supports people to avoid using residential care services, but where they do reduces the length of stay and delays the point of admission; and
- Invests in preventative services.

Organisation (other services)

The success of the transformation programme depends on the engagement of all parts of the organisation and our key partners to establish a joined up approach. To support this we have established a fortnightly Transforming Adult Services group, which aims to engage with key elements of the business in our transformation programme.

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

We will need to ensure the workforce is fully skilled up and knowledgeable on changes to the adult social care charging framework, and changes to other working practices and processes arising from these proposals. The workforce across adult social care will also need to be effectively briefed and up skilled to deal with the fees and processes associated with brokering care and support services for self-funders.

Communities

Communities will benefit from a joined up health and social care system, with simpler processes and will find it easier to understand their care and support funding.

<u>Service Users</u>
<p>Service users will experience a more joined up system, and would benefit from an aligned approach to the funding of their care and support.</p> <p>The charging elements of this proposal will impact on the amount of disposable income Adult Social Care service users will retain, as a result of their contribution towards their care and support needs increasing. However, all individuals will be left with a Minimum Income Guarantee (MIG) level, as laid out in the statutory framework, so no-one will pay more towards their care than they can afford to do so.</p>

<u>Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)</u>
<p>Partners will also benefit from a more joined up health and social care system, with effective aligned processes and systems. However, partners might also feel additional financial pressures from revised working arrangements.</p> <p>There may be additional pressure on voluntary and community organisations as demand rises and attempt to fill gaps in provision.</p>

Section 6

<u>Supplementary Information</u>
None.

Section 7

<u>Consultation Information –</u>	
<i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	Not applicable
Staff Consultation	Not applicable. No impact on the number of FTE's.

Public Consultation	<p>From 3 August</p> <p>The proposals outlined within this report for charging for adult social care services formed part of an engagement exercise led by the Department of Health in Autumn 2011. As part of this engagement adult's with care and support needs and provider organisations were directly involved in developing The Care Act 2014 and the subsequent regulations and guidance. Local authorities are required to follow the new national framework on charging for care and support services in adult social care. As a result consultation is not required.</p> <p>Generating additional income via CHC does not require public consultation as this approach is outlined in the National Framework for NHS CHC and NHS FNC (DH revised 2012).</p>
Service User Consultation	As above
Any other consultation	Not applicable

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	Yes
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	Yes
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No

People in particular age groups	Yes
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	Yes
EIA to be completed by:	Attendance Allowance – Karen Maders Self-funders Fee – Andrew Pearson Continuing Health Care – N/A
By:	26 October 2015

Section 9

Responsible Officer(s):	Maggie Kufeldt, Executive Director, Health and Wellbeing
-------------------------	--

Support Officer Contact:	Claire Hill
Support Officer Ext:	3125


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	29 June 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr Harrison Social Care and Safeguarding
Signed:	
Date:	26 June 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Equality Impact Assessment Tool - DRAFT

E008 – Adult Services – generating additional income (Night Care Allowance)

Stage 1: Initial screening

Lead Officer:	Kirsty Littlewood, Head of Client Support Services
People involved in completing EIA:	Karen Maders Team Leader Income and Assessments
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	Yes

General Information

1a	Which service does this project, policy, or proposal relate to?	<p>This EIA relates to the night care allowance element of budget proposal E008 – Generating additional income.</p> <p>Adult Social Care Non Residential Charging Policy The Care Act 2014 introduced changes to the rules relating to the financial assessment process for calculating service user's contributions towards their non-residential care services which include personal budgets, day-care, extra care housing and supported living.</p> <p>The charging policy was revised in April 2015 to make it compliant with the Care Act but further revisions are needed in relation to the treatment of Attendance Allowance, Disability Living Allowance Care and Personal Independence Payments (Daily Living Component).</p>
1b	What is the project, policy or proposal?	<p>What are Attendance Allowance, Disability Living Allowance and Personal Independence Payments (Daily Living Component) made for?</p> <p>These are non-means-tested benefits paid by the Department for Work and Pensions to people whose care needs meet the eligibility criteria. Attendance Allowance is payable at 2 rates as are Personal Independence Payments (Daily Living Component) and there are 3 rates of Disability Living Allowance Care.</p> <p>Disability Living Allowance is being replaced by Personal Independence Payments, no new claims to this benefit can</p>

be made and existing recipients are being transferred over as their cases are reviewed.

Fairer Charging Guidance

Prior to the implementation of the Care Act 2014 the non-residential charging policy was set based on the Fairer Charging Guidance issued by the Department of Health.

- Fairer Charging Guidance paragraph 42 stated that *“it seems to be unlawful for councils to take into account an element of Attendance Allowance or Disability Living Allowance paid for night care as income where the council purchases no element of night care.”*
- It is currently accepted that the difference between the high and low rate of Attendance Allowance (AA) and high and middle rate of Disability Living Allowance Care (DLA) is the element paid for night care.
- Due to this, the difference between these rates, £27.20 a week is currently given as a night care allowance to those people who do not receive night care services from the Council.
- For those who do receive night services from the Council, for example they live in supported accommodation or have helpline installed in their property no allowance is given.

Care Act 2014

- Under the Care Act, the treatment of AA, DLA Care and PIP Daily Living Component has changed. The Care Act states that the full amount should be taken into account and allowance should be made under Disability Related Expenditure for the actual costs incurred of any care not provided by the Council.
- It is proposed to reflect this change in the non-residential charging policy.
- This change to the charging policy will ensure that all service users are treated fairly and simplifies the process for when service users transfer from DLA Care to PIP.

What is Disability Related Expenditure?

- Disability Related Expenditure is to be allowed in the financial assessment for payments made to meet needs that are not being met by the Council for example day or night care, maintenance of wheelchairs and specialist equipment.
- Disability Related Expenditure also covers additional costs the a service user has due to the nature of their illness or disability which are not for care and support for example above average heating costs, transport costs and gardening.

1c	What are the main aims of the project, policy or proposal?	<p>The main aim of the proposal is to be fully compliant with the treatment of income as set out in the Care Act 2014 therefore ensuring the fair and equitable treatment of all service users.</p> <p>The present charging policy needs to be altered as currently the element of AA or DLA Care paid for night care is either fully taken into account or fully disregarded.</p> <p>The proposal seeks to ensure that</p> <ul style="list-style-type: none"> • All service users regardless of whether they are in receipt of AA, DLA or PIP are treated in the same way. • Appropriate allowance is made in the financial assessment for the cost of care not arranged by the Council. • The income collected by the Council is maximised.
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	<p>This proposed change in policy may have a detrimental effect on those who currently do not have night care services provided by the Council as they currently receive an additional allowance in their financial assessment.</p> <p>By no longer making this allowance the maximum weekly contribution that a service user has to make towards their care may increase. However, service users will still be left with the Minimum Income Guarantee amount set by the Department of Health and will receive an allowance for Disability Related Costs incurred.</p>

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input type="checkbox"/>	X	<input type="checkbox"/>
Particular ethnic groups	X		<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input type="checkbox"/>	<input type="checkbox"/>	X	<input type="checkbox"/>
People of particular sexual orientation/s	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a marriage or civil partnership	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	X	<input type="checkbox"/>
People in particular age groups	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be				

affected negatively or positively by this project, policy or proposal?				
--	--	--	--	--

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input type="checkbox"/>	X

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes
1h	How have you come to this decision?	<p>The change proposed is likely to have a negative impact on some service user's finances.</p> <p>Where service users are going to see an adverse change in their financial position, we will need to ensure that we have processes in place to help them cope.</p> <p>Due to this likely impact it is recommended we do a full impact assessment.</p>

Stage 2: What do you know?	
What do you know already?	
<p>We currently have open financial assessments and support plans for approximately 2,200 service users of these 970 are in receipt of high rate AA or DLA care and of these 328 currently have an allowance of £27.20 a week made in their financial assessment as they do not have night care service arranged by the Council.</p> <p>Financial Impact for Service Users</p> <p>A scoping exercise has been completed to identify the likely financial impact on service users who are currently receiving an allowance and the findings are as follows</p> <ul style="list-style-type: none"> • 19% will have no increase in the amount that they are paying for their care • 4% will have an increase in the cost of care of less than £10 • 15% will have an increase in the cost of care of between £10 and £27.20 • 62% will have an increase in the cost of care of £27.20 	

We do not currently know how many service users will claim Disability Related Expenditure for night care they are paying for privately and how this will impact on the figures above.

Financial Impact for the Council

The removal of the allowance will increase the income collected by the Council. The scoping exercise that has been completed suggests the following

- Weekly income invoiced will increase by £4,720
- Annual income invoiced will increase by £245,000

Financial reassessment

The service users who are currently in receipt of the Night Care Allowance will need a financial re-assessment in order to explain the change in assessment rules and understand how this will effect what they need to pay.

Service users will be required to provide all details of their income, capital and expenditure so that an assessment of what they can afford to pay towards their care services can be calculated.

The charging framework provides a consistent approach for fairly and consistently assessing all service users' contributions towards the cost of the services that they receive, based on their individual circumstances and is based on the principles set out in the Care Act 2014:

- ensuring that people are not charged more than it is reasonably practicable for them to pay;
- is comprehensive, to reduce variation in the way people are assessed and charged;
- clear and transparent, so people know what they will be charged;
- promotes wellbeing, social inclusion, and supports the vision of personalisation, independence, choice and control;
- supports carers to look after their own health and wellbeing and to care effectively and safely;
- is person-focused, reflecting the variety of care and caring journeys and the variety of options available to meet need;
- applies the charging rules equally so those with similar needs or services are treated the same and minimises anomalies between different care settings;
- encourages and enables those who wish to stay in or take up employment, education or training or plan for the future costs of meeting their needs to do so; and
- is sustainable for local authorities in the long-term.

The attached Charging Framework for Non-Residential Services provides a detailed breakdown of how a financial assessment will be completed for each service user.

What don't you know?

Care Act Part 2 – Social care funding reforms

We do not currently know the full details of the changes that are going to be introduced in 2020 with the second phase of the Care Act and how this will impact on the non-residential charging policy and income collected.

Further data collection

Summary (to be completed following analysis of the evidence above)	None	Positive	Negative	Not sure
Does the project, policy or proposal have the potential to have a <u>disproportionate</u> impact on any of the following groups? If so, is the impact positive or negative?				
Disabled people	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a marriage or civil partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think that this proposal may affect negatively or positively?				

Stage 3: What do we think the potential impact might be?

Consultation information <i>This section should record the consultation activity undertaken in relation to this project, policy or proposal.</i>	
3a. Who have you consulted with?	There has been no consultation on these changes as they are being made to bring the charging policy in line with the Care Act 2014.
3b. How did you consult? (inc meeting dates, activity)	

undertaken & groups consulted)	
--------------------------------	--

3c. What do you know?

Financial Impact for Service Users
 A scoping exercise has been completed to identify the likely financial impact on service users who are currently receiving an allowance and the findings are as follows

- 19% will have no increase in the amount that they are paying for their care
- 4% will have an increase in the cost of care of less than £10
- 15% will have an increase in the cost of care of between £10 and £27.20
- 62% will have an increase in the cost of care of £27.20

3d. What don't you know?

We do not currently know how many service users will claim Disability Related Expenditure and how this will impact on the figures above. If Disability Related Expenditure is allowed then this would reduce the financial contribution and lessen the financial impact on service users.

3e. What might the potential impact on individuals or groups be? *(think about disability, race, gender, sexual orientation, transgender, age, faith or belief and those on low incomes and other excluded individuals or groups)*

Generic (impact across all groups)	There are 328 service users who currently have an additional allowance as they do not receive night care services. These will need to be financially re-assessed. There will be an impact on people with a low income as the allowances that are currently applied when completing a financial assessment will be reduced meaning that people may have to pay more towards the cost of their care.
Men or women (include impacts due to pregnancy / maternity)	Whilst our approach does not positively or negatively impact either of these groups disproportionately it should be noted that in general, across health and social care, there are significantly higher levels of women receiving care and support than men. This is linked to demographics reflecting that generally women live longer than men and in turn need a high level of social care support. In turn this may mean that a greater number of women are affected.
People of particular sexual orientation/s	No impact.
People in a Marriage or Civil Partnership	No impact.
Disabled people	Service users in receipt of an allowance for night care are in receipt of non-means tested disability benefits due to the nature of their illness or disability. As such the changes will directly impact this protected characteristic group most significantly. However, there will not be a disproportionate effect on a particular group of disabled people as the proposals will be applied consistently and ensure that all recipients of AA, DLA or PIP are treated in the same way.

Particular ethnic groups	No impact.
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No impact.
People on low incomes	There will be an impact on people with a low income as the allowances that are currently applied when completing a financial assessment will be reduced meaning that people may have to pay more towards the cost of their care. However, our framework for charging does not create inequalities and it does recognise, in line with the Care Act principles for charging for care and support services, that people only pay towards their care and support needs what is affordable. These changes will ensure that our approach to charging is applied fairly and consistently to all service user groups in compliance with Care Act legislation.
People in particular age groups	No impact.
Groups with particular faiths and beliefs	No impact.
Other excluded individuals and groups (e.g. <i>vulnerable residents, individuals at risk of loneliness, carers or serving and ex-serving members of the armed forces</i>)	No impact.

Stage 4: Reducing / mitigating the impact

As a result of what you have learned, what can you do to minimise the impact of the proposed changes on equality groups and other excluded / vulnerable groups, as outlined above?

4a. Where you have identified an impact, what can be done to reduce or mitigate the impact?

Impact 1: Increase in financial contribution for service users in receipt of night care allowance	<p>A period of transitional relief will be applied from 1 April 2016 until 31 March 2017. This will apply to all service users with an increase of more than £20 per week. This could be as high as 77% of service users who currently receive an allowance. These service users will be charged 50% of the increased amount until 31 March 2017 and 100% of the increase after this date.</p> <p>This provides protection to those who are going to be significantly impacted by the change in contribution whilst minimising the impact on the collection of income.</p> <p>As part of the financial re-assessments that will be required due to this change benefit checks will be completed to ensure that service users are receiving the correct benefit entitlement. Service users will</p>
---	--

	be advised to claim for any additional amounts we feel they may be entitled to, for example Severe Disability Premium and pension Savings Credit, in order to ensure that their income is maximised.
--	--

4b. Have you done, or will you do, anything differently as a result of the EIA?

Financial assessments

Financial assessments will be completed and notification of the change in contribution will be sent to service users prior to any increase in charge being implemented giving service users the opportunity to ask questions and have the charges fully explained to them. The period of transitional protection will minimise the financial impact on service users in the first instance giving them time to make adjustments to their expenditure as required.

4c. How will the impact of the project, policy or proposal and any changes made to reduce the impact be monitored?

Financial assessments

The outcomes of financial assessments will be recorded, including the previous charges and the new contribution due to the change in the non-residential charging policy. This will then be monitored and reviewed, including the mitigating actions taken, to ensure that the measures taken are effective.

Conclusion

This section should record the overall impact, who will be impacted upon and the steps being taken to reduce / mitigate the impact

Whilst there could potentially be both positive and negative impacts on a range of protected characteristic groups – disability and people on a low income– appropriate mitigating actions have been identified to reduce the potential impact.

Stage 5: Signature

Lead Officer: Kirsty-Louise Littlewood

Date: 27/10/15

Approver signature: Maggie Kufeldt

Date: 27/10/15

A handwritten signature in black ink, appearing to read 'M Kufeldt', is written on a white rectangular background.

EIA review date: 12 months (July 2016)

APPENDIX 1: Action Plan and Risk Table

Action Plan

Once you have decided on the course of action to be taken in order to reduce or mitigate the impact, please complete the action plan below (An example is provided in order to help you)

Number	Action	Required outcomes	By who?	By when?	Review date
1 Financial Re-assessments	Financial re-assessments will be undertaken for all service users who will be affected by this change. As part of this the changes will be fully explained and details of any disability related expenditure will be collected, ensuring that appropriate allowances are made in the financial assessment.	<ul style="list-style-type: none"> ➤ Service users will fully understand the charging policy and changes that are being made. ➤ Information will be collected on disability related expenditure ensuring that financial assessments are accurate 	Angela Pemberton	31/03/2016	
2 Welfare Benefit Checks	As part of the financial reassessment a benefit check will be completed ensuring that service users are in receipt of their full benefit entitlement and their income is maximised.	<ul style="list-style-type: none"> ➤ Referrals are made to Welfare Rights and DWP where appropriate to assist with benefit claims. ➤ Income levels are reviewed for those service users where additional benefits are claimed to ensure that records are updated if income levels change. 	Angela Pemberton/Sophie Harland	31/03/2016	
3 Transitional Protection	Transitional Protection will be applied to those service users whose contributions increase by more than £20.00 a week.	<ul style="list-style-type: none"> ➤ The financial impact on those affected by the change is limited initially. 	Income & Assessment Team		
4 Monitor the impact of the change	Monitor the impact on service user's contributions and levels of income along with the income collected by the Council.	<ul style="list-style-type: none"> ➤ Reports can be produced to monitor the effects of the change. 	Sophie Harland/Karen Maders	31/03/2016	

Risk table

Record any risks to the implementation of the project, policy or proposal and record any actions that you have put in place to reduce the likelihood of this happening.

Ref.	Risk	Impact	Actions in Place to mitigate the risk	Current Risk Score	Further Actions to be developed
R1.1	Increase in complaints and appeals received due to the increase in service user's contributions		Transitional protection to be applied and financial re-assessments to be completed	CIII	Effective communication plan to be completed.



E008 Adult Services – Generating additional income (Self-funders)

Stage 1: Initial screening

Lead Officer:	Kirsty-Louise Littlewood, Head of Client Support Services
People involved in completing EIA:	Andrew Pearson, Team Leader, Care Arrangers
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	Yes

General Information

1a	Which service does this project, policy, or proposal relate to?	<p>This EIA relates to the self-funding element of budget proposal reference E008 – Generating Additional Income.</p> <p>Charging for Self-funders The Care Act guidance set out that people with eligible care and support needs who have assets above the upper capital limit (currently £23,250) can ask local authorities to meet their needs and the authority may charge a fee for making this arrangement.</p> <p>The arrangement fee can only cover the cost of negotiating and/or managing the contract with a provider and any administration costs incurred in the process.</p> <p>The fee can be set at a flat rate however it must not be set at a cost which exceeds the true cost met by the authority.</p> <p>The authority must make clear to the person that they are liable to pay an arrangement fee in addition to the cost of meeting their needs.</p> <p>It is important to note that whilst local authorities have discretion in arranging care home placements for people with assets above the upper threshold, this is not the case where the needs will be met by care and support of some other type. In these cases the authority must meet the persons eligible needs.</p>
----	---	--

1b	What is the project, policy or proposal?	<p>The proposal is to implement fees for people who self-fund their care where they ask the Council to set up and broker their care and support package.</p> <p>People are defined as self-funding their care where they have assets in excess of the capital threshold which is currently set at £23,250.</p> <p>Self-funders are making huge financial decisions which require expert purchasing advice and support. The right guidance at this point prevents people spending their assets too quickly and falling back on to local authority funding, something that often happens. It is crucial to fill these gaps in support through the offer of expert provision of a service</p> <p>Projected figures suggest that the number of self-funders within the Borough is between 699 – 1200. These figures are based on research carried out by Oxford Brookes. It is anticipated that the higher figure, is more likely to be nearer the actual number of self-funders within Oldham, as it is modelled on benefits-based data.</p> <p>Initial modelling of a self-funders fee suggests that an initial flat rate of £25 could be charged for the set-up of a care package. Future amendments to packages would be charged at a flat rate of £15 or £25 for a complete change of provider.</p>
1c	What are the main aims of the project, policy or proposal?	<p>The main aim of the proposal is to enable self-funders to access quality, cost effective services through the brokering of care packages on their behalf by the Council.</p> <p>Implementing administrative fees for the provision of these services enables the scheme to be cost-neutral to the authority whilst offering self-funders access to provision of services at the rate commissioned by the Council. These commissioned rates are significantly lower than the rates charged to self-funders by providers.</p> <p>The fee only applies to self-funders where they request the Council broker their care and support package on their behalf.</p>

		It is important to note that this proposal only relates to arranging care home placements as local authorities have discretion within this area. This is not the case where the needs will be met by care and support of some other type. In these cases the authority must meet the person's eligible needs and a fee cannot be charged.
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	This proposal will benefit self-funders with care and support needs as they will be able to ask the Council to arrange their support at the same council commissioned rates as other clients who are eligible for local authority funding.

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a marriage or civil partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
Vulnerable adults who self-fund their own care and support needs		<input checked="" type="checkbox"/>		

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
		<input checked="" type="checkbox"/>

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or	Yes
----	---	-----

	proposal?	
1h	How have you come to this decision?	<p>The implementation of additional options for self-funders in brokering their care means that they will be supported to access appropriate care and support providers, have their contractual arrangements managed on their behalf and be able to access care and support services at council commissioned rates which are significantly lower than rates within the external social care market.</p> <p>Based on this assessment it is believed that any impact would be positive. However, it is felt that further consultation is required on self-funders fees to ensure that views of self-funders are taken into consideration as part of the decision making process.</p>

Stage 2: What do you know?



An EIA should be based upon robust evidence. This stage will guide you through potential sources of information and how to interpret it. Understanding the current context is a key stage in all policy making and planning.

What do you know already?

We know that there is a large self-funder market in Oldham who currently cannot access residential care through the Council as we do not currently offer this service. This change would give people the option of accessing residential care through the Council, at a potentially reduced rate, for a small administration fee. This would be to the financial benefit of the service user and the Council as capital assets would last longer.

From research carried out by Oxford Brookes and looking at the information that we currently hold we are aware of the following

- There are likely to be between 699-1200 self-funders in the borough
- We currently have financial assessments for 41 service users in residential placements who have been assessed self-funding (this does not include those on a deferred payment)
- We currently have financial assessments on the system for 212 non-residential service users who have been assessed as self-funding
- If we were to charge the setup fee to 699 people £17,745 would be generated in income
- If we were to charge the setup fee to 1200 people £30,000 would be generated in income

What don't you know?

We do not know the following

- Of the likely self-funders identified by Oxford Brookes we do not know how these are split between residential and non-residential service users.
- How many self-funders would choose to access care services through the Council

- The rates charged by providers for private funded users
- The impact this change will have on the provider market, some providers subsidise their income by charging a higher fee to self-funders than that set by the Council. If the number of private self-funders reduced this may impact on the sustainability of some providers.

Further data collection

Summary (to be completed following analysis of the evidence above)

Does the project, policy or proposal have the potential to have a <u>disproportionate</u> impact on any of the following groups? If so, is the impact positive or negative?	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a Marriage or Civil Partnership	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	X	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think that this proposal may affect negatively or positively?				
Vulnerable adults who self-fund their own care and support needs		X	<input type="checkbox"/>	

Stage 3: What do we think the potential impact might be?



In order to be able to identify ways to mitigate any potential impact it is essential that we know what those potential impacts might be.

Consultation information

This section should record the consultation activity undertaken in relation to this project, policy or proposal.

3a. Who have you consulted with?	Consultation questionnaires have been sent out to 1,800 service users including those who we have assessed as being self-funding
3b. How did you consult?	Consultation questionnaires were sent out through the post.

(inc meeting dates, activity undertaken & groups consulted)

Please note - there is considerable overlap between E008 and E010. We did not want to send vulnerable people two different sets of questionnaires, which could cause confusion, when one would cover both. The consultation period has not been extended, but we did merge the questionnaires. There are a number of reasons for this;

- Due to the similarity of the proposals for E008 & E010 and the potential impact of any future changes, it was felt appropriate to consult on all proposals together
- We considered the impact on our vulnerable adult client base, for which these proposals would impact, and the importance of sharing all proposals so they had a holistic view and could comment and feedback, aware of all the related implications
- In addition, and most importantly, as this client group is vulnerable, it would not be appropriate to send multiple questionnaires due to the confusion and negative impact this could cause

A high volume of questionnaires were sent out and approximately 100 returned to date. This approach in addition to the three public consultations already undertaken, will ensure a thorough and informed approach to the evaluation of the impact.

3c. What do you know?

We know that there is a large self-funder market in Oldham who currently cannot access residential care through the Council as we do not currently offer this service. This change would give people the option of accessing residential care through the Council, at a potentially reduced rate, for a small administration fee. This would be to the financial benefit of the service user and the Council as capital assets would last longer.

From research carried out by Oxford Brookes and looking at the information that we currently hold we are aware of the following

- There are likely to be between 699-1200 self-funders in the borough
- We currently have financial assessments for 41 service users in residential placements who have been assessed self-funding (this does not include those on a deferred payment)
- We currently have financial assessments on the system for 212 non-residential service users who have been assessed as self-funding
- If we were to charge the setup fee to 699 people £17,745 would be generated in income
- If we were to charge the setup fee to 1200 people £30,000 would be generated in income

Analysis of the responses received from the consultation shows that

- 21% agree with charging a fee for arranging residential care placements
- 31% do not agree with charging a fee
- 41% did not know
- 7% did not answer the question

3d. What don't you know?

We do not know the following

- Of the likely self-funders identified by Oxford Brookes we do not know how these are split between residential and non-residential service users.
- How many self-funders would choose to access residential care services through the Council
- The rates charged by providers for private funded users
- The impact this change will have on the provider market, some providers subsidise their income by charging a higher fee to self-funders than that set by the Council. If the number of private self-funders reduced this may impact on the sustainability of some providers.

3e. What might the potential impact on individuals or groups be?

(think about disability, race, gender, sexual orientation, transgender, age, faith or belief and those on low incomes and other excluded individuals or groups)

Generic (impact across all groups)	There could be up to 1200 people who may benefit from having the option of having care arranged by the Council and accessing this at a lower rate.
Disabled people	It would have a positive impact as people would have the option of having care arranged for them and possibly accessing this at a lower rate.
Particular ethnic groups	No impact
Men or women (include impacts due to pregnancy / maternity)	No impact
People of particular sexual orientation/s	No impact
People in a Marriage or Civil Partnership	No impact
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No impact
People on low incomes	No impact
People in particular age groups	It would have a positive impact as people would have the option of having care arranged for them and possibly accessing this at a lower rate

Groups with particular faiths and beliefs	No impact
Other excluded individuals and groups Vulnerable adults who self-fund their care	It would have a positive impact as people would have the option of having care arranged for them and possibly accessing this at a lower rate

Stage 4: Reducing / mitigating the impact



As a result of what you have learned, what can you do to minimise the impact of the proposed changes on equality groups and other excluded / vulnerable groups, as outlined above?

4a. Where you have identified an impact, what can be done to reduce or mitigate the impact?

	We have not identified any negative impacts from this change the impacts will be positive.

4b. Have you done, or will you do, anything differently as a result of the EIA?

--

4c. How will the impact of the project, policy or proposal and any changes made to reduce the impact be monitored?

We will record the number of self-funders accessing care through the Council and monitor the income generated.
We will monitor the impact this change has on the provider market.

Conclusion

This change should have a positive impact for self-funders in Oldham as it gives them additional options when arranging the residential care and support they require and may mean that they can access this care at a lower rate for a small administration fee.

Stage 5: Signature

Lead Officer: Kirsty-Louise Littlewood

Date: 07/10/15

Approver signature: Maggie Kufeldt

Date: 07/10/15

A handwritten signature in black ink, appearing to read 'M Kufeldt', is written on a white rectangular background.

EIA review date: 12 months (July 2016)

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	B005
Portfolio	Co-operatives and Neighbourhoods
Directorate:	Co-operatives and Neighbourhoods
Division:	Environmental Services
Responsible Officer and role:	Carol Brown – Director of Environmental Services
Cabinet Member and Cluster :	Cllr D Hibbert - Housing, Planning & Highways

Title:	Street Lighting – shared client team reduction in staff (Rochdale)
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£1,283k
	Income	(£0k)
	Net Expenditure	£1,283k (controllable and semi controllable)
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	3

	2016/17 £k	2017/18 £k
Proposed Financial saving:	22	13
Proposed reduction in FTE's	1	0

Section 3

<u>Background:</u> <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>Oldham Council has invested in a street lighting PFI which is based on a 25 year contract with an initial 5 year core investment period to replace 80% of the street lighting asset.</p> <p>The core investment period comes to an end at the end of this financial year and although it has been necessary to maintain a strong client function it is envisaged going forward that this will not need to be maintained to the same degree but be supplemented with expertise as needed to support the delivery of the contract and any potential claims.</p>
---	--

	<p>The client function and associated costs for the contract management has to this point been shared with Rochdale Council however, given that essentially there are 2 separate contracts in place it is proposed that a smaller team be created to deal with local need.</p>
--	--

<p>Proposed Savings £k:</p> <p><i>Through efficiency, income generation, transformation, decommissioning, etc</i></p>	<p>The current shared street lighting team currently costs the Council £131,928 and includes a shared project manager based in Rochdale. This approach has proved supportive in terms of shared contract management however it has also become evident that local knowledge of Oldham's contract is essential to defend claims, inform on regeneration projects, liaise with Unity Highways and deliver support for a wide range of district events including Christmas lights, bonfire and Remembrance Sunday.</p> <p>A reduced team of Oldham manager, street lighting technician and admin position total cost £109,370. To manage this saving shared work between Rochdale and Oldham will need to continue similar to the current arrangement to effectively manage the input required in terms of contract performance monitoring.</p> <p>2016/17 Savings: £22,558</p> <p>Potential for further savings in 2017/18 through a shared admin function:</p> <p>2017/18 Savings: £12,575</p> <p>Total proposed savings £35,133</p>
--	--

<p>Further Financial Implications & Considerations</p> <p><i>ie Capital implications or invest to save, pump priming etc, variations to budget</i></p>	<p>None</p>
---	-------------

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	0
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	0
Type of impact on partners	Neutral or marginal

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
None agreed at this time pending project approval	

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Unable to meet timescales for response as currently	Need to agree revised service standards in some service areas.
Members will see a change of personnel in their district teams	Full explanation to be provided to explain the rationale for savings and efficiencies

Section 5

What impact might the proposal have on the following?

<u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
None

<u>Service Delivery and future expected outcomes:</u>
<p>Reducing the team from its current level will potentially impact on responsiveness however this can be mitigated by siting the resource back in the borough and continued shared working with Rochdale to reduce duplication in contract reporting.</p> <p>Local delivery will also present opportunities to share best practice with other teams within the Council in PFI monitoring</p>

<u>Organisation (other services)</u>
<p>There will be limited impact on other areas of the Council however we would require:</p> <ul style="list-style-type: none">• A fully considered communications plan will be essential• Full support from partners

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

Employees have not to date been involved in the development of the proposal but their engagement will be essential moving forward to detail proposals and implementation.

Communities

The residents of Oldham will in the main have an improved street lighting asset and given the core implementation period is due to be complete until further works currently proposed in year 13 are due the number of service requests should reduce enabling the reduction in the client resource.

Service Users

As above

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

Partner organisations will be engaged with to reduce the impact.

Section 6

Supplementary Information

None

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	None undertaken at this stage
Staff Consultation	Ongoing – shared approach with Rochdale Council
Public Consultation	N/A
Service User Consultation	N/A
Any other consultation	N/A

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Carol Brown
Support Officer Contact:	Ellen Marchbank-Smith
Support Officer Ext:	0161 770 5690


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	7 July 2015
-----------------------	-------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr Dave Hibbert
Signed:	
Date:	17 June 2015

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	C001
Portfolio	Finance and HR
Directorate:	Corporate and Commercial Services
Division:	Finance
Responsible Officer and role:	Anne Ryans, Director of Finance
Cabinet Member and Cluster :	Cllr A Jabbar, Finance and HR

Title:	Business Support Redesign
---------------	----------------------------------

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£ 4,344k
	Income	£ (4,484k)
	Net Expenditure	£ (140k)
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	157.04

	2016/17 £k	2017/18 £k
Proposed Financial saving:	350	0
Proposed reduction in FTE's	15	0

Section 3

<p><u>Background:</u></p> <p><i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i></p>	<p>The Business Support Service provides support services to 62 services across the Council, a full list of services can be found at Appendix 1.</p> <p>The vision for the Business Support Service is to support the organisation to deliver customer focused services that improve the customer experience whilst reducing operational cost through effective end to end processes. This will be driven through the</p>
--	---

enablers of people, process and technology. The future delivery of the Business Support Service will be reviewed in order to deliver a £350k budget saving.

The Council has committed to consider which services could be transferred to the Unity Partnership with a view to the more efficient, effective and economic delivery of the service. In this regard, Unity has been asked to prepare a business proposal to support the Business Support service transfer at the same time as guaranteeing the delivery of a £350k saving. This business proposal for this project (Project Pelican) is currently being prepared and therefore the detail is not available. Therefore it is not possible for the Council to agree that the Unity route is the way in which the £350k saving will be delivered only that £350k will be delivered.

Whether delivered by Unity or alternatively in-house by the Council, the delivery of the saving will require a full review of the activities undertaken by the staff employed within the Business Support Service. However, to be effective the review will need to be an end to end review of processes and as such will be undertaken in conjunction with the services. This will cover:

- A full end to end review of service processes from the initial stages of customer contact through to task completion/job fulfilment. This will include:
 - removal of duplication and waste
 - determining significance of tasks and amending those deemed unnecessary i.e. more risk based approach
 - working with other corporate services to minimise overlaps
 - implementing/reviewing quality procedures to reduce waste
 - maximising opportunities for automation and self-serve through the use of technology
- Review of business support requirements across the Council, moving to a more bespoke service rather than a generic model ensuring the support provided meets the needs of the service.
- Review of management structures to ensure the service drives transformation.

<u>Proposed Savings £k:</u> <i>Through efficiency, income generation, transformation, decommissioning, etc.</i>	The saving anticipated is £350k and the current proposal is that this will be achieved by the transfer of the service to Unity and the consequent driving out of efficiencies
---	---

<u>Further Financial Implications & Considerations</u> <i>ie Capital implications or invest to save, pump priming etc. , variations to budget</i>	<p>Capital investment in technology to maximise opportunities for automation and self-serve through the use of technology</p> <p>At the moment though, there is no detail available on the level of financial investment that will be required to underpin the Business Support Transformation. This will be set out in the Detailed Business Case expected from Unity Partnership in November 2015. At that stage the Council will make a decision on the feasibility of the business and part of that process will include the considerations of the financial implications</p>
---	---

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	If the service transfers to Unity then there will be a reduction of staffing and this will then involve Unity staff, the level of which is yet to be determined but is estimated to be 15.
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	If the service transfers to Unity then the saving will be delivered by a reduction in the updated Unity contract sum which should not have any adverse implications.
Type of impact on partners	Not Known

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Receipt from Unity of a business case for the transfer of the service	November 2015
Review of the Unity business case	Late November/December 2015
Decision on the Unity business case	December 2015
Potential transfer of the Service to Unity	Before March 2016
Implementation of Restructure and service redesign timetable	After transfer to Unity (if agreed) and before the end of March 2016
Realise agreed savings	March 2016
Implementation of New Business Support model	April 2016

Review models to ensure continuous improvement	Ongoing
--	---------

Key Risks and Mitigations	
Risk	Mitigating Factor
The receipt from Unity of a business case that cannot be agreed	Working with Unity to develop a suitable business case
Without service wide changes, there is a risk that the programme will not meet its financial objectives	Clear objectives for the business case set at the outset, early engagement with stakeholders, regular communication
There is a risk that the FTE reduction required to meet the 2016/17 target cannot be agreed with customers	Early engagement with stakeholders, regular communication
There is a risk of double counting of savings between this proposal and other proposals	Support from Finance to identify potential overlaps and then discussion and regular engagement other leads
Managing staff morale through the period of uncertainty and ensuring no degradation of service	Ensure strong comms in place and support on change readiness levels of staff from HR/OD

Section 5

What impact might the proposal have on the following?

Property Implications <i>i.e. closures, maintenance costs, transfer of Assets, property savings, etc.</i>
There is a possibility that the resourcing of the Reception area of some properties may be impacted. Possibly a review of whether such a function falls under the remit of Customer Services as opposed to Business Support.

Service Delivery and future expected outcomes:
The Business Support Service is a key enabler for services across the Council, supporting them to achieve their objectives and targets. Service delivery will continue with limitations to the flexibility and range of services offered.
There will be a re-design of the service offer from the new Business Support Service and it will be critical that the new model and emerging service offering is not seen as a degradation of service standards, but rather an evolving set of new ways of working and alternative method of service delivery frameworks, that need to be embraced under the new ways of working agenda.

There may be a number of instances where pilots of the new "To Be" models will need to be run and this will require organizational flexibility amongst a range of services selected to be part of such pilot schemes

Organisation (other services)

The proposal will support other services to improve their service delivery. However, as other services are undergoing redesign there could be a direct impact on the Business Support Service and on the proposals outlined in this document.

It has already been identified that the delivery of this proposal could be impacted by other 2016/17 budget proposals. Further information can be considered once the content of other proposals is known.

Success of this proposal is highly dependent on a number of infrastructure issues such as new ways of working, promoting self-service across a range of Council services as part of the organisational culture, adoption of new technology around mobile working and the maximization of scanning & indexing solutions corporately

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

There will be an impact on the workforce:

- There will be the reduction in headcount and FTE the exact levels have yet to be confirmed (currently estimated to be 15), however if the service transfers to Unity, staffing reductions will apply to Unity officers
- The development of bespoke service provision and change of tasks to meet future service needs may require staff to develop new skills.
- Reductions within services supported could place additional pressure on reduced BSS resource.
- Staff morale and expectations will need to be managed. Change readiness support will be required as part of the transformation and transition periods.

Communities

As the service is an internal business support function, there are no apparent direct implications for communities. However, given the intrinsic nature of business support with the services that they support there could be potentially indirect implications for front line services that impact the community. Part of the role of the project team will be to mitigate any such negative implications.

Service Users

Service users should see a minimal impact in terms of the outcomes to be delivered by the service as customers will be given the opportunity to prioritise the support delivered.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

The full impact on partners will be determined as the programme of work is developed.

Partners will be required to assist in unlocking savings. They will need to be heavily involved in process and procedure redesign. Initial analysis indicates a direct impact on:

1. NHS, particularly Mental Health Services for Adults.

The redesign may affect the integrated business support team based at Maple House and will affect both organisations. This will mean increasing pressures when undergoing the transition. The Trust is also embarking on a review of their business support functions and we have agreed to make decisions in partnership where possible. There needs to be agreement in integrating as much as possible as there is currently significant duplication of activity.

2. Police

The Police may also be affected by any redesign proposals in relation to support for the Community Safety and Neighbourhood Teams. They will be consulted on any redesign activity.

There may be an indirect impact on partners working with the Integrated Commissioning Hub, when redesigning business support we need to ensure that support for the hub enables the organisation and its partners to improve outcomes and reduce costs where possible.

Section 6

Supplementary Information

The Business Support Service is currently being considered for transfer to the Unity Partnership, where there is a guaranteed £350k saving for 16/17. The content of this document will need to be reviewed if the transfer of the service is agreed as the detail of the proposal is not currently available.

Section 7

Consultation Information –	
<i>This should include as a minimum the following:</i>	
<ul style="list-style-type: none"> • <i>What has been consulted on so far? With whom and when?</i> • <i>Further consultation required?</i> • <i>Date consultation to be started and concluded</i> 	
NB – All public consultations must be completed prior to approval by Cabinet/Council.	
Trade Union Consultation	1st meeting with TUs held on Monday 13/07/2015. This was the start of the TU engagement process whilst we are awaiting the development of a detailed Business Case by Unity Partnership for the transfer of the service. This has helped achieved early engagement with the unions on this proposal.
Staff Consultation	Staff consultation timeline started at the beginning of September 2015 and therefore aligns to the formal staff consultation process with the corporate staff consultation process that come under the jurisdiction of the Council's Section 188 which was issued on 1 Sept 2015.
Public Consultation	Not required
Service User Consultation	Senior Council managers have received communication about this proposal and further updates will be provided as detail is firmed up.
Any other consultation	Not applicable

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	Yes
EIA to be completed by:	Bola Odunsi
By:	October 2015

Section 9

Responsible Officer:	Anne Ryans , Director of Finance
----------------------	----------------------------------

Support Officer Contact:	Bola Odunsi
Support Officer Ext:	4905


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	15 July 2015
-----------------------	--------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr A Jabbar
Signed:	
Date:	15 July 2015

Equality Impact Assessment Tool – DRAFT

C001: Business Support Redesign

Stage 1: Initial screening

Lead Officer:	Bola Odunsi
People involved in completing EIA:	Bola Odunsi & Sarah Bell
Is this the first time that this project, policy or proposal has had an EIA carried out on it? If no, please state date of original and append to this document for information.	No Date of original EIA: 24/10/14

General Information

1a	Which service does this project, policy, or proposal relate to?	Business Support Services Redesign (C001). This EIA is a second year update of the proposal D017 which was approved for 2015/16.
1b	What is the project, policy or proposal?	<p>This EIA relates to budget proposal C001 (Business Support Redesign) this will deliver savings of £350k in 2016/17.</p> <p>The total budget for the service is</p> <p>Expenditure: £4,344,480 <u>Income: £4,484,480 (recharges)</u> Net Budget £ (140,000)</p> <p>The breakdown of the expenditure budget of £4,344,480 is as follows;</p> <ul style="list-style-type: none"> • £3,562,290 – controllable • £ 782,190 – non-controllable <p>The vision for the Customer and Business Support Service is to support the organisation to deliver resident focussed services through effective people, processes and technology.</p>
1c	What are the main aims of the project, policy or proposal?	The future delivery of the Business Support Service will be reviewed in order to deliver a

	<p>£350k budget saving. This is in addition to the £200K first year saving.</p> <p>The Council has committed to consider which services could be transferred to the Unity Partnership with a view to the more efficient, effective and economic delivery of the service. In this regard, Unity has been asked to prepare a business proposal to support the Business Support service transfer at the same time as guaranteeing the delivery of a £350k saving. This business proposal for this project (Project Pelican) is currently being prepared and therefore the detail is not available. Therefore it is not possible for the Council to agree that the Unity route is the way in which the £350k saving will be delivered only that £350k will be delivered.</p> <p>Whether delivered by Unity or alternatively in-house by the Council, the delivery of the saving will require a full review of the activities undertaken by the staff employed within the Business Support Service. However, to be effective the review will need to be an end to end review of processes and as such will be undertaken in conjunction with the services. This will cover:</p> <ul style="list-style-type: none"> • A full end to end review of service processes from the initial stages of customer contact through to task completion/job fulfilment. This will include: <ul style="list-style-type: none"> ○ removal of duplication and waste ○ determining significance of tasks and amending those deemed unnecessary i.e. more risk based approach ○ working with other corporate services to minimise overlaps ○ implementing/reviewing quality procedures to reduce waste ○ maximising opportunities for automation and self-serve through the use of technology • Review of business support requirements across the Council, moving to a more bespoke service rather than a generic
--	--

		<p>model ensuring the support provided meets the needs of the service.</p> <ul style="list-style-type: none"> • Review of management structures to ensure the service drives transformation.
1d	Who, potentially, could this project, policy or proposal have a detrimental effect on, or benefit, and how?	<p>The project will have a direct impact on all services supported by the Business Support Service and could have an indirect impact on the customers of those services.</p> <p>In some areas this could be a positive impact in that the service will receive support through a Business Support function which is more tailored to the individual needs of the service i.e. they get the support they need (bespoke) rather than being offered staff who can undertake a standard range of tasks (generic).</p> <p>In some areas there could be a negative impact. For example if staffing within a frontline service is reduced and then there is an unforeseen peak in workload the service may suffer and this could have a direct impact on residents.</p> <p>Any redesign of the service will be undertaken in conjunction with the services we support and actions. At the point of reviewing each service EIA screening will take place and where any potential disproportionate adverse impacts are identified, a full EIA will be carried out.</p>

1e. Does the project, policy or proposal have the potential to <u>disproportionately</u> impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy / maternity)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in a Marriage or Civil Partnership	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People of particular sexual orientation/s	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

part of a process of gender reassignment				
People on low incomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal?				
<i>None</i>		<input type="checkbox"/>	<input type="checkbox"/>	

1f. What do you think that the overall NEGATIVE impact on groups and communities will be?	None / Minimal	Significant
	<input checked="" type="checkbox"/>	<input type="checkbox"/>

1g	Using the screening and information in questions 1e and 1f, should a full assessment be carried out on the project, policy or proposal?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
1h	How have you come to this decision?	Any redesign of the service will be undertaken in conjunction with the services we support. At the point of reviewing each service, EIA screening will take place and where any potential disproportionate adverse impacts are identified, a full EIA will be carried out.

Stage 5: Signature		
Lead Officer:	Bola Odunsi	Date: 27/10/15
Approver signature:	Anne Ryans	Date: 27/10/15
EIA review date: December 2016		

Budget Saving Pro-forma 2016/17 and 2017/18

Section 1

Reference:	C005
Portfolio	Corporate & Commercial Services
Directorate:	Corporate & Commercial Services
Division:	Strategic Sourcing & Strategic Relationship Management
Responsible Officer and role:	Nicola Spence, Senior Manager Strategic Sourcing
Cabinet Member and Cluster :	Cllr A Jabbar, Finance and HR

Title:	Strategic Sourcing (Procurement) & Strategic Relationship Management (SRM)- Commercial Trading Model
---------------	---

Section 2

2015/16 Budget for the section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	Expenditure	£1,193k
	Income	(£1,193k)
	Net Expenditure	£0
Total posts numbers in section: <i>(By Portfolio/Directorate/Division delete as appropriate):</i>	FTE	20

	2016/17 £k	2017/18 £k
Proposed Financial saving:	125	0
Proposed reduction in FTE's	2	0

Section 3

Background: <i>Brief description of the proposal ie: what will be different, how will changes be implemented, timescale for implementation</i>	<p>The proposal is to develop an income generation stream using a business partner approach, offering skills and expertise to other local authorities and to create a procurement offer that enables a shared service or remit based on concession and a fee where back office costs could be shared from a virtual procurement platform.</p> <p>In 2014/15, the team proved there is a market for sourcing</p>
--	---

services across the public sector within the GM region, securing paid work from Tameside and Trafford. The offer involves selling our services as trusted, respected, knowledgeable, well-connected networking professionals who have a proven track record of delivering cost savings and solving difficult problems (e.g. social value and the local agenda). This is done utilising the Council's brand and the team's subject matter expertise.

Our approach is to increase our relationships with other public services within GM and ensure we have an irresistible offer, taking on strategic sourcing projects and providing expertise. The service will also seek to utilise other agencies in referring our resources.

Our Professional Services Partnership model builds on our own direct marketplace to provide the following consultancy offer:

- Drive efficiencies through service reviews
- Create local jobs by helping you get the most from the Social Value Act
- Shape and implement new service delivery models
- Create a procurement function that saves you money
- Deliver a procurement hub, savings and major outsourcing
- Management and delivery of council cost reduction programmes
- Provision of interim professional resource

In addition to the above consultancy model we propose to also deliver a Procurement offer that will serve not only the Borough but could be the centre for procurement activity for North Manchester and also into South Yorkshire.

We have positioned our traded offer to meet the demands of other Local Authorities. We have an advantage over the private sector consultants in that we intimately understand the needs, lead the market, and are not seeking profit for shareholders. In addition, we are one of the few Authorities who have a unique, focused approach to ensuring tangible social values are embedded into all our contracts and measured through strategic contract management.

We market our offer wider than the Association of Greater Manchester Authorities (AGMA) as there is already an AGMA Procurement Hub which is an established small core team which provides professional procurement support to the Collaborative Efficiency Programme and delivers objectives of improvement and efficiency through collaborative procurement projects. There is also the newly established STaR (Stockport, Trafford and

Rochdale) Team which will supports Trafford, Stockport and Rochdale for all procurement requirement and contracts. This team has already referred people to us as they do not have the capacity to take on work for other organisations at this time.

The Strategic Sourcing Team will assist at every stage of the procurement process providing strategic or operational assistance or a combination of both. The team offer a tailored approach to meet the individual needs of clients, whilst ensuring compliance with European Union and procurement best practice and mitigating any potential challenges and risks. The commercially astute team drive value and improvements from and throughout the procurement process. The team are committed to the delivery of cost savings, reduced risks, increased efficiencies and simplified processes, whilst also ensuring that value based outcomes are sought and that the right balance of cost savings, quality and social value are achieved.

Our experienced team can help with:

- Identification or re-evaluation of needs.
- Definition or evaluation of the organisation's business requirements.
- Review of current procurement process.
- Embed social value outcomes within the procurement process
- Refinement or development of the procurement strategy.
- Market analysis and assessment.
- Review and benchmark of incumbent suppliers.
- Identification of potential suppliers.
- Definition of appropriate procurement process based on event types and spend.
- Implementation of Category Management.
- Identification of cost reduction opportunities and savings programmes.
- Identification of time and process efficiencies.
- Development of Framework Agreements

Progress to Date

Discussions have progressed with Tameside Council and an Inter- Authority Agreement has been signed by both parties together with a costed model for Oldham services.

Tameside have commissioned procurement support to provide an 'as is' scenario with a view to directly commission tender support from the Strategic Sourcing team.

The contract generated £15k income in FY14/15 and a further £45k in FY15/16. Further conversations with Tameside are currently in progress to look at a longer term more strategic partner approach.

In 2014/15, consultancy support was delivered into STaR Procurement Team to the aid the development of the team and to raise the profile of Oldham's Procurement Team. The support ended in November 2014 and the assignment generated £15k income.

Conversations are also ongoing with Manchester City Council and GM PCC.

All procurement projects will be managed by the Sourcing Team and Strategic Relationship Management Team within current capacity.

If the model grows at a rate faster than current capacity there will be a requirement to buy-in procurement support or develop this model with Association Greater Manchester Authorities colleagues.

Proposed Savings £k: <i>Through efficiency, income generation, transformation, decommissioning, etc</i>		2015/16	2016/17	Total
	Income Projection	45,000	125,000	170,000
	Savings	0	0	0
	Total	45,000	125,000	170,000

Further Financial Implications & Considerations <i>ie Capital implications or invest to save, pump priming etc , variations to budget</i>	N/A
---	-----

Economic Impact Summary	
Total net FTE job losses (gains): <i>(including Council, Unity partnership, 3rd sector, other partners, private sector)</i>	No FTE implications if trading model is delivered 2 x FTE Procurement Manager if trading model is unsuccessful
Total financial loss to partners (£k) <i>(including Unity partnership, 3rd sector, other partners, private sector)</i>	N/A
Type of impact on partners	Positive

Section 4

<u>Key Milestones</u>	
Milestone	Timescale
Trading model currently in flight with Tameside Council and STaR Shared Procurement Team and generating estimated income of £15,000.	November 2014 complete
Develop communications pack and include reference sites	July/August 2014 complete
Develop Strategic Sourcing forward plan for consultancy work	2015/16 (partially complete)
Strategic Sourcing Team to fully engage based on completion of Oldham projects.	2016/17

<u>Key Risks and Mitigations</u>	
Risk	Mitigating Factor
Income generation model is not realised in all or in parts	Profiling the unique selling point of this model in that services can be obtained on a short/medium term basis without the requirement of a long term commitment.

Section 5

What impact might the proposal have on the following?

<u>Property Implications</u> <i>ie closures, maintenance costs, transfer of Assets, property savings, etc</i>
There are no implications to property.

<u>Service Delivery and future expected outcomes:</u>
Close scrutiny of capacity will be required to ensure that resource is focused on delivering council demands as well as income generating models. The quality of the service should not change and there will be new income generation targets.

Organisation (other services)

- The model may mean that there is a reduction in the capacity of the Oldham Strategic Sourcing Team
- The service currently trades internally with all Directorates but the proposal does not impact on their service delivery and saving
- The proposal does not require investment from another service area

There is an assumption that specific services will continue to be provided to enable this proposal to be successful - corporate procurement service to the Council.

Workforce

Note: Please detail here any direct or indirect impact on the employees beyond reduction in numbers, for example, changes working methods, job roles or delivery models

There is potential to generate income for other services within Commercial Services portfolio.

The proposal is to reduce the current Procurement and SRM structure by 2 x Procurement Manager posts. The service has already re-shaped to cover 1 x Procurement Manager post as a result of the recent secondment arrangements. A further 1 x Procurement manager post to be identified. However, if the traded model for Procurement & SRM is successful we will need to ensure we have sufficient resource to meet the future demand. Close monitoring of capacity plans and resource allocation will be carried out through the transition period.

There will be a reduction in FTE of 2 x Procurement Manager if the income cannot be generated

Communities

The provision and delivery of services directly to the residents of Oldham remain unaffected by these proposals.

Service Users

Service users in receipt of services delivered as a result of a procurement project remain unaffected.

Internal service users (stakeholders) remain unaffected by this model. However it is recognised that some re-shaping of work priority areas would be required across those areas category managed.

Partner Organisations (Public & Private) inc Third Sector (Voluntary, Faith & Third Party Organisations)

N/A

Section 6

Supplementary Information

None

Section 7

Consultation Information –

This should include as a minimum the following:

- *What has been consulted on so far? With whom and when?*
- *Further consultation required?*
- *Date consultation to be started and concluded*

NB – All public consultations must be completed prior to approval by Cabinet/Council.

Trade Union Consultation	July 2015
Staff Consultation	August - October 2015
Public Consultation	September 2015
Service User Consultation	N/A
Any other consultation	N/A

Section 8

Equality Impact Screening

Is there potential for the proposed saving to have a disproportionate adverse impact on any of the following groups:	
	State Yes / No against each line
Disabled people	No
Particular ethnic groups	No
Men or Women (include impacts due to pregnancy/maternity)	No
People who are married or in a civil partnership	No
People of particular sexual orientation/s	No
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	No
People on low incomes	No
People in particular age groups	No
Groups with particular faiths/beliefs	No

If by answering yes to any of the question the screening has identified a potential disproportionate adverse impact, you will need to complete an Equality Impact Assessment. This assessment form and the guidance for its completion can be found at:

http://intranet.oldham.gov.uk/downloads/file/124/equality_impact_assessment_toolkit

EIA required:	No
EIA to be completed by:	N/A
By:	N/A

Section 9

Responsible Officer:	Nicola Spence, Senior Procurement Manager (Interim)
Support Officer Contact:	Helen Gerling, Director Commercial & Transformation Services (Interim)
Support Officer Ext:	0161 770 3468


Cabinet Member Comments and/or approval
Approved

Please return completed form to: financialplanning@oldham.gov.uk

Submitted to Finance:	26 August 2015
-----------------------	----------------

Section 10

Approval by Lead Cabinet Member

Cabinet Member:	Cllr A Jabbar
Signed:	
Date:	26 August 2015

Approval by Supporting Cabinet Members

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

Cabinet Member:	
Signed:	
Date:	

This page is intentionally left blank