# **Equality Impact Assessment for the Mental Health Enabling Independence Team Restructure**

#### Did you use the EIA Screening Tool?

No as I understand an EIA is a requirement for the restructure.

# 1. Explaining the matter being assessed

#### Is this a:

Change to a service or function

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

The Enabling Independence Team (EIT) is part of the planned change in Phase 2 of the Adult Social Care (ASC) Mental Health (MH) Transformation Programme which has focussed on the development of the longer-term structure and service model. The initial phase has been subject to a previous Equality Impact Assessment (EIA).

In 2019 the Adults Leadership Team appointed the Social Care Institute of Excellence (SCIE) as an improvement partner to undertake a review of all reablement offers across Surrey, this included the EIT for Mental Health, the feedback overall was positive. The aim of recovery and maximising independence is at the core of this work along with the need to develop a strengths-based approach practice model. The EIT inhouse review picked up that there were operational issues with the current system of a hub and spoke model, challenges included confusion over roles/management within the spoke element and as the hub element covered a large geographical area this impacted on connections for a localised model of working.

The EIT service is a county wide offer within ASC mental health services for people who are ordinarily resident in Surrey. The service is free of charge and offers a short to moderate term intervention for people experiencing mental health difficulties and/or substance misuse issues, it is designed to address social care needs in their pathway of recovery using a strengths-based approach. The service utilises interventions based on prevention, recovery, and enablement with individuals.

The ambition of the service is to have a single front door into EIT and the mental health specialist reablement service based on an area model and using a strengths-based approach. The focus will continue to be for those with mental health and/or substance misuse needs.

Re-organising the EIT will enable us to provide a new clear structure for accountability and support across the service within 4 area locations (north west, south west, mid and east). There is the introduction of 410(e)-3(d)]TETQq0.000008871 0 595.32 841.92 reW\* nBT/F2 12 Tf1 uc

The rationale behind this decision is:

The team is county wide and this provides an area focus.

To ensure that the service has a clear professional identity in line with the rest of adult social care.

To improve the outcomes for people and carers accessing ASC mental health services

Clear and transparent governance arrangements

Clear pathway for people who use the service

Career development and opportunities for the workforce

The planned consultation is focussing on the EIT only (grades PS6, PS7, PS9 and PS11). The proposal is to re-organise the EIT to make it fit for purpose in line with the reorganisation within mental health and the wider Reablement programme. The proposals set out have been discussed in the structure and workforce group of the Adult Social Care Mental Health Transformation programme and the Mental Health Programme Board.

#### Changes to the service model / workforce structure:

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

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

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

Everyone benefits from education, skills and employment opportunities that help them succeed in life.

Everyone lives healthy, active and fulfilling lives, and makes good choices about their wellbeing.

Everyone gets the health and social care support and information they need at the right time and place.

Communities are welcoming and supportive, especially of those most in need, and people feel able to contribute to community life.



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

#### **Disability**

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

This service change is to focus on people in Surrey with a lived experience of mental health and/or substance misuse needs. The aim is to have a positive impact for people with a mental health and/or substance misuse with a personalised and localised approach with experienced staff adopting strengths based working.

This is part of the Mental Health overall restructure. There are also plans for close working with reablement who are developing a specialist mental health service which will improve services for this group.

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

This service change is intended to have a positive impact for those residents with mental health needs by the service being localised area based.

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

Adult Social Care is very much involved with the wider Surrey Mental Health Improvement programme, with continued joint work with SABP and Clinical Commissioning Group colleagues to improve hospital pathways and flow.

Any negative impacts that cannot be mitigated?

NA

# 3. Staff

# Age

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

Workforce MH data (as of September 2021): Age: 34% are aged 50-59; 14% are aged 60+

Whilst there may be a change to the contractual office base for some staff this may also p

#### **Disability**

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

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

Change in workplace may impact staff with a disability who will need to consider accessibility etc for any hub bases.

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

The management team will continue to engage with affected staff regarding the proposed changes and to understand any impact on individuals with a disability. 1:1's will explore wellbeing to identify any transitional support needs for staff with a disability.

HR have been consulted during the preparation of the accompanying consultation document and in the determination of HR processes to be applied. This includes Trades Unions being consulted as part of the process and a formal 30-day consultation and conversations with individuals.

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

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

Any negative impacts that cannot be mitigated?

NA

## **Pregnancy and Maternity**

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

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

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

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

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

NA

Any negative impacts that cannot be mitigated?

NA

#### **Sexual Orientation**

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

Data for the ASC Mental Health workforce cohort – 42% either did not disclose or preferred not to say; 3% identified as LGBTQ.

An employee may or may not choose to disclose their sexuality and may feel anxious about the process of disclosing their sexual orientation with a new manager.

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

Individual consultation and wellbeing discussions with staff will help to identify any mitigation needed to avoid any adverse impact. HR advisors will be available and Council policies will be applied to support affected staff.

There will ongoing consultation.

Learning from previous realignment processes.

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

Any negative impacts that cannot be mitigated?

NA

#### **Carers**

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

SAP does not hold data on Carers as caring records (and personal situations) can change over time.

Staff Gender: 79% are female; 21% are male

Staff with caring responsibilities (of which the majority may be female) may feel adversely impacted by a move to a workplace further away from home than their current contractual base.

Some staff may be advantaged by the ability to work nearer to their home address.

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

SCC has shifted towards agile working where "employees have the autonomy and empowerment to choose where and when they work, in line with the business need; employees and managers alike focus on results and performance based on outcomes". SCC's Agile Working policy p



# 5. Action plan and monitoring arrangements

Insert your action plan here, based on the mitigations recommended.

Involve you Assessment Team in monitoring progress against the actions above.

Item	Initiation Date	Action/Item	Person Actioning	Target Completion Date	Update/Notes	Open/ Closed
1	Feb 22	Audit that staff understand agile working arrangements and tools	TM	April 22		
2	Feb 22	Consultation with individual conversations with staff with a protected characteristic to ensure any issues are understood and addressed	SM	5 April 2022		
3	Feb 22	Access to HR and employee support	Consultation	5 April 2022		
4	Feb 22	Staff on maternity leave are engaged throughout the process	Consultation	5 April 2022		

# 6b. Approval

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

Approved by	Date approved
Head of Service/Liz Uliasz	10 Feb 2022
Executive Director	
Cabinet Member	
Directorate Equality Group	8 Feb 2022

#### Publish:

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

Please send approved EIAs to: INSERT SHARED EMAIL ACCOUNT ADDRESS

#### **EIA** author:

# 6c. EIA Team

Name	Job Title	Organisation	Team Role
Caroline Hewlett	Senior Manager (MH)	SCC Adult Social Care	EIA lead

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