

# Service and Community Impact Assessment (SCIA)

## Front Sheet:

### Directorate and Service Area:

Social & Community Services, Adult Social Care

### What is being assessed:

The option to reduce funding for Healthwatch Oxfordshire by £100,000 (approximately 30%)

### Responsible owner / senior officer:

Kate Terroni, Deputy Director Joint Commissioning

### Date of assessment:

September 2015

### Summary of judgement:

The council is considering an option to reduce funding for Healthwatch Oxfordshire by £100,000 (approximately 30%) from 2016/17.

Although a reduction in funding may affect the level of support Healthwatch Oxfordshire can offer, it is unlikely to have a disproportionate impact on any one group of people.

There is a risk that avenues for public engagement and involvement are reduced for those who are keen to influence health and social care policy and services. People with protected characteristics, from rural communities and in areas of deprivation may have fewer opportunities to make their voices heard. The reduction may also have an effect on staff working for Healthwatch Oxfordshire.

Healthwatch Oxfordshire may not be able to provide an effective service that meets its statutory obligations, although these are very broad and can be met in a variety of ways. Initial conversations with Healthwatch Oxfordshire suggest that whilst this would mean a reduction in activity, the statutory responsibilities could still be met to an acceptable level.

Whilst the service provided by Healthwatch Oxfordshire is highly valued, there may still be opportunities for Healthwatch to join up with other organisations and voluntary and community sector providers who undertake similar activities, such as scrutiny and gathering local views. This would reduce duplication and focus the work of Healthwatch Oxfordshire on areas where they can have the greatest impact, increasing their legitimacy and recognition locally as a consumer champion. It would also reduce costs for the organisation. Healthwatch Oxfordshire has recently become a charitable organisation, which potentially opens up alternative sources of funding that could help mitigate the impact of the Council's contribution.

If funding is reduced, the council would support Healthwatch Oxfordshire to find more cost effective ways of engaging and involving the public. The council would continue to work with Healthwatch to design an effective service with jointly agreed priorities.

## **Detail of Assessment:**

### **Purpose of assessment:**

This assessment considers the impacts of the option to reduce the amount of funding provided to Healthwatch Oxfordshire by £100,000 (30%) in 2016/17.

This assessment is being carried out to ensure that the council considers the impact of this proposed change on different clients, especially those who share a protected characteristic under the Equality Act 2010.

## **You should also include the following statement to clearly set out the reasons and context for undertaking the assessment:**

Section 149 of the Equality Act 2010 ("the 2010 Act") imposes a duty on the Council to give due regard to three needs in exercising its functions. This proposal is such a function. The three needs are:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic, and those who do not.

Complying with section 149 may involve treating some people more favourably than others, but only to the extent that that does not amount to conduct which is otherwise unlawful under the new Act.

The need to advance equality of opportunity involves having due regard to the need to:

- remove or minimise disadvantages which are connected to a relevant protected characteristic and which are suffered by persons who share that characteristic,
- take steps to meet the needs of persons who share a relevant protected characteristic and which are different from the needs other people, and
- encourage those who share a relevant characteristic to take part in public life or in any other activity in which participation by such people is disproportionately low.
- take steps to meet the needs of disabled people which are different from the needs of people who are not disabled and include steps to take account of a person's disabilities.

The need to foster good relations between different groups involves having due regard to the need to tackle prejudice and promote understanding.

These protected characteristics are:

- age
- disability
- gender reassignment
- pregnancy and maternity
- race – this includes ethnic or national origins, colour or nationality
- religion or belief – this includes lack of belief
- sex
- sexual orientation
- marriage and civil partnership

## **Social Value**

Under the Public Services (Social Value Act) 2012 the Council also has an obligation to consider how the procurement of services contracts with a life value of more than £173,934<sup>11</sup> might improve the economic, social, and environmental well-being of the area affected by the proposed contract, and how it might act to secure this improvement. However, it is best practice to consider social value for all types of contracts, service delivery decisions and new/updated policies. In this context, 'policy' is a general term that could include a strategy, project or contract.

## **Context / Background:**

In April 2012 local authorities were given responsibility for the implementation of the Health and Social Care Act 2012 reforms. These reforms introduced a new statutory duty for upper tier authorities to make arrangements for the involvement of people in the commissioning, provision and scrutiny of health and social care services.

Local authorities were required to commission a new independent consumer champion as local Healthwatch that would work locally and with the new national organisation, Healthwatch England. The aim of local Healthwatch is to give citizens

<sup>11</sup> [EC Procurement Threshold for Services](#)

and communities a stronger voice to influence and challenge how health and social care services are provided within its locality. It also champions the collective voice of local communities through the provision of information and advice.

Healthwatch Oxfordshire, the current provider, has been commissioned and grant funded to provide the service since 2013. In 2014 a grant was awarded to Healthwatch Oxfordshire Community Interest Company for a period of 24 months starting April 2014 with the possibility of extending this by up to a year. This was taken up, and the current funding agreement ends in March 2016.

The requirements of Healthwatch Oxfordshire, as set out in law, are:

- i. Gather views and understand the experience of people who use services, their carers and the wider community
- ii. Make people's views known
- iii. Promote and support the involvement of local people in the commissioning and provision of local care services and how they are scrutinised
- iv. Recommend investigation or special review of services to Healthwatch England or directly to the Care Quality Commission
- v. Provide advice and information about accessing services and support for making informed choices
- vi. Make the views and experiences of local people known to Healthwatch England and provide a steer to help it carry out its role as national consumer champion.

The current financial climate means that the council has reduced funding whilst demand for services is increasing. Funding for Healthwatch Oxfordshire is not ring fenced and it is considered unlikely that a reduction of approximately 30% to the amount of grant funding provided to Healthwatch Oxfordshire would affect the organisation's ability to meet its statutory requirements.

### **Proposals:**

The option being considered is a reduction in grant funding provided to Healthwatch Oxfordshire by approximately 30% from 2016/17. This is a mid-range reduction in funding for local Healthwatch compared with other local authorities and would achieve £100,000 in savings.

If taken forward, this option would require closer working relationships between Healthwatch Oxfordshire and other voluntary and community sector organisations working with local people and services across the county. It would utilise and build on knowledge, expertise and networks that already exist, which would help to rationalise and consolidate public involvement operations, avoid duplication and reduce the need for Healthwatch Oxfordshire to have its own capacity to engage individuals and communities.

Operating as an independent provider Healthwatch Oxfordshire has autonomy and the freedom to prioritise its activities in order to optimise and maximise the impact it

has. The council will continue to support Healthwatch Oxfordshire to achieve this through its grant management and monitoring process.

A process, led by Healthwatch Oxfordshire, is already underway to maximise engagement activity across all sector, ensuring that that crucial consultation across all organisations is achieved when necessary and helping Healthwatch Oxfordshire to focus on its statutory duties.

### **Evidence / Intelligence:**

The council is unaware of any evidence that would suggest a reduction in funding for Healthwatch Oxfordshire would disproportionately impact any one group with a protected characteristic or affect the organisation's ability to fulfil its statutory duties.

Many other local authorities are reducing funding for their local Healthwatch groups which has encouraged a focus on jointly agreed priorities and more targeted, effective engagement activities that have the greatest impact.

In 2014/15 Healthwatch Oxfordshire gathered feedback that led directly to more than 40 changes in the way health and social care services are commissioned and provided in Oxfordshire (Healthwatch Oxfordshire's 2014/15 Annual Report). They also gave grants to 15 local voluntary sector organisations to help them to share the views of seldom heard groups in Oxfordshire. This includes groups who share protected characteristics such as race, gender, disability and age, as well as people who live in rural areas.

In 2015/16 Healthwatch Oxfordshire has already gathered public opinion on a number of significant areas of work, including experiences of hospital discharge, dignity in care and community dementia supports.

Research undertaken by Healthwatch England shows that the original funding made available for local Healthwatch from central government was £43.5million – this is 67p per person. However the funding allocated to local authorities for commissioning Healthwatch is not ring-fenced, and the overall local government grants to local authorities have and will continue to reduce significantly. The 2015/16 grant allocation of £345,585 gives Healthwatch Oxfordshire 52p per person in the county to fulfil their statutory responsibilities. With a reduction in funding of £100,000 this would reduce to 37p per person. Initial conversations with Healthwatch Oxfordshire suggest that whilst this would mean a reduction in activity, the statutory responsibilities could still be met to an acceptable level.

### **Alternatives considered / rejected:**

The alternative to this proposal is that the council continues to fund Healthwatch Oxfordshire at the current level. As central government funding to the council is reduced, the council needs to make significant savings to meet budgetary pressures.

The option to reduce grant funding for Healthwatch Oxfordshire is part of broader savings proposals to reduce spending without affecting statutory services.

Many other budget reductions have already been made and services stopped or reduced. A reduction in the grant allocated to Healthwatch Oxfordshire would reduce the need for savings further from adult social care services.

## Impact Assessment:

Identify any potential impacts of the policy or proposed service change on the population as a whole, or on particular groups. It might be helpful to think about the largest impacts or the key parts of the policy or proposed service change first, identifying any risks and actions, before thinking in more detail about particular groups, staff, other Council services, providers etc.

It is worth remembering that ‘impact’ can mean many things, and can be positive as well as negative. It could for example relate to access to services, the health and wellbeing of individuals or communities, the sustainability of supplier business models, or the training needs of staff.

We assess the impact of decisions on any relevant community, but with particular emphasis on:

- Groups that share the nine protected characteristics
  - age
  - disability
  - gender reassignment
  - pregnancy and maternity
  - race – this includes ethnic or national origins, colour or nationality
  - religion or belief – this includes lack of belief
  - sex
  - sexual orientation
  - marriage and civil partnership
- Rural communities
- Areas of deprivation

We also assess the impact on:

- Staff
- Other council services
- Other providers of council services
- Any other element which is relevant to the policy or proposed service change
- How it might improve the economic, social, and environmental of the area affected by the contract **if** the Public Services (Social Value) Act 2012 applies

For every community or group that you identify a potential impact you should discuss this in detail, using evidence (from data, consultation etc.) where possible to support your judgements. You should then highlight specific risks and any mitigating actions

you will take to either lessen the impact, or to address any gaps in understanding you have identified.

If you have not identified an impact on particular groups, staff, other Council services, providers etc. you should indicate this to demonstrate you have considered it.

<p><b>Impact on Individuals and Communities:</b></p>
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**Impact on groups with protected characteristics, rural communities and areas of deprivation**

The requirements of Healthwatch Oxfordshire, as set out in law, are:

- i. Gather views and understand the experience of people who use services, their carers and the wider community
- ii. Make people’s views known
- iii. Promote and support the involvement of local people in the commissioning and provision of local care services and how they are scrutinised
- iv. Recommend investigation or special review of services to Healthwatch England or directly to the Care Quality Commission
- v. Provide advice and information about accessing services and support for making informed choices
- vi. Make the views and experiences of local people known to Healthwatch England and provide a steer to help it carry out

<b>Risks</b>	<b>Mitigations</b>
<p>Avenues for public engagement and involvement are reduced for those who are keen to influence health and social care policy and commissioning decisions and challenge delivery issues related to health and social care services</p>	<p>The council will support Healthwatch to link up with other organisations in Oxfordshire, including the voluntary and community sector, who are undertaking similar activities, (e.g. gathering local views and scrutinising local services/decisions) and utilise established networks to reach as many residents of Oxfordshire as possible.</p> <p>The council will support Healthwatch to seek alternative funding streams if the organisation wishes to maintain current levels of service. Healthwatch has recently become a charitable organisation which opens alternative sources of possible funding that were not previously accessible to the organisation and may help maintain levels of activity.</p> <p>The council is keen to develop co-designed services, therefore when</p>

	services are redesigned/commissioned, it will directly engage with people who would use or be affected by these services.
Groups of people with protected characteristics, rural communities and more deprived areas have fewer opportunities to make their voice heard,	<p>The council will work with Healthwatch to ensure that engagement activities are targeted at groups with protected characteristics, rural communities and areas of deprivation when priorities are set as part of the grant funding agreement.</p> <p>Work with individuals and communities will be prioritised by primarily focusing on meeting statutory duties, the level of impact an activity will have and the avoidance of duplication/repetition.</p>

**No differential impacts have been identified on groups that share protected characteristics beyond those given above.**

**Impact on Staff:**

**None identified**

**Impact on other Council services:**

**None identified**

**Impact on providers:**

<b>Risks</b>	<b>Mitigations</b>
Healthwatch Oxfordshire Community Interest Company is not able to meet its statutory duties and provide an effective service within the revised grant allocation	There is already overlap in the activities of Healthwatch and other local organisations working to gather views of the public and ensure their voices are heard. The council is confident that Healthwatch Oxfordshire would be able to reduce its level of activity and continue to fulfil its statutory obligations, albeit with reduced capacity. Healthwatch will be supported to draw on existing networks to reach groups and individuals it would not otherwise be able to, focus its engagement activities where they will

	have the greatest impact and explore alternative, more cost effective methods of public involvement.
A reduction in funding may result in Healthwatch Oxfordshire Community Interest Company needing to reduce its staffing establishment.	<p>The council will work with Healthwatch Oxfordshire to reduce the impact on the remaining budget if redundancies are required.</p> <p>The council will encourage Healthwatch Oxfordshire to consider the ways in which volunteers can be utilised and help them to develop appropriate training to support any such roles.</p>

### **Social Value**

*If the Public Services (Social Value) Act 2012 applies to this proposal, please summarise here how you have considered how the contract might improve the economic, social, and environmental well-being of the relevant area.*

**How might the proposal improve the economic well-being of the relevant area?**  
N/A

**How might the proposal improve the environmental well-being of the relevant area?**  
N/A

### **Action plan:**

<b>Action</b>	<b>By When</b>	<b>Person responsible</b>
Decision on whether the funding will be removed as part of the broader budget proposals	February 2016	Council Members
If option taken forward, develop an implementation plan and communications plan	February 2016	Engagement Manager

### **Monitoring and review:**

**Person responsible for assessment: Engagement manager**

Version	Date	Notes
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		(e.g. Initial draft, amended following consultation)
v.1	September 2015	Initial draft
v.2	September 2015	Officer comments
v.3	November 2015	Updated with HWO feedback