

Equality Impact Assessment and Analysis

CAH Integration: Integrated Commissioning and Contracts Unit

Introduction

CAH Integration

1. Following consultation regarding the formation of a single Children, Adults and Health department in July-September 2012, a decision was taken by Policy and Resources Committee on 5 November 2012. The new department was formed on 1 January 2013.
2. This provides opportunities to realise benefits resulting from integration of the teams, including the transfer in of the public health team. Integration projects will involve reviewing current operating practises with the aim of moving to standard and integrated working methods and systems where possible and appropriate. The savings target associated with the combined impact of all the Children, Adults and Health integration projects is £1125K.

Scope of the Review

3. The Project will seek to find the most effective and efficient operating model, organisational structure and staffing arrangements to deliver an Integrated Commissioning and Contracts Unit for CAH. The review looks at the Commissioning and Contracts service in the following areas: Adults, Children, Public Health, Health & Wellbeing including DAAT.
4. In addition, some other staff within CAH are also in scope. These include some other staff in the Commissioning, Partnerships and Performance division but do not carry out a pure Commissioning & Contracts role.

Objectives of this Review

5. To determine and implement an organisational structure which will:
 - To bring together and integrate the commissioning and contracts services from the three former departments including the Health Improvement Commissioning (including Drug and Alcohol Action Team - DAAT) formerly within the Environment and Community Services Department and thus contribute to the overall integration programme savings required. Potential savings will be identified as early as possible during the BPR stage.
 - To ensure a cost effective, commercial, and high quality service that meets the needs of the changing council, and those of our members, partners and communities.
 - To ensure the resulting new service uses best practise and, where appropriate, contains all aspects of, and follows the commissioning cycle model advocated by the Institute of Public Care (IPC)
 - Enhance existing working partnerships and help the formation of new relationships between Health & Wellbeing Division staff, other SGC staff and partners.
 - Contribute to the implementation of the Council's Target Operating Model (TOM) to standardise, simplify and share services.
 - Maintain and enhance staff morale by ensuring all staff have an opportunity to contribute to the review, individually and through group work.

Potential impacts upon equality groups and how the review will ensure there is no disproportionate negative or positive impact upon any equality group

- The review has potential to make recommendations that will result in a new structure for the Commissioning and Contracts function. This would affect all staff in scope of the review – equalities information in relation to staff in scope of the review are as follows:

Number of employees in scope = 59

Group	% in scope	SGC workforce population
No. of female employees	69.5%	71.8
No. of male employees	30.5%	28.2
No. of employees aged 65 and above	0%	3.5%
No. of employees with a declared disability	11.9%	4.3%
No. of employees (White British)	83.1%	85.4%
No. of employees (White Other)	5.1%	1.2%
No. of employees (BME)	1.7%	4.1%
No. of employees (Ethnicity not disclosed)	8.5%	9.3%

- The table shows that, in comparison to the Council workforce (or the CAH Department workforce where noted), Males are disproportionately over-represented within the population in scope, Disabled People are disproportionately over-represented within the population in scope and people from a “White Other” background are disproportionately over-represented within the population in scope.
6. To ensure this is managed appropriately, the following measures will be undertaken:
 - The Council’s workforce change procedure (which has been equality impact assessed) will be followed throughout the review.
 - Regular communications for individual members of staff within scope of the review will be provided by the service lead and/or project team members as appropriate and in accordance with the needs of individuals.
 - HR will monitor equality related information in respect of all staff in scope of the review.
 7. To ensure that the review does not reduce activities that could impact on vital decision making relating to equality groups all proposals will be subject to a 45 day period of consultation with staff and where appropriate additional consultation with partners.
 8. Any equality issues arising from the consultation (and subsequent to this) will be addressed as necessary so that all individual needs can be met. Prior to the start of the consultation no equality issues had been raised by staff.
 9. This EqIAA will be maintained and updated as the project progresses.
 10. A key issue identified as a result of this EqIAA relates to equalities in procurement/commissioning/contracts. The Public Sector Equality Duty contains clear and specific provision in relation to procurement/commissioning/contracts. As a result of this EqIAA it will be essential that all staff members within any new structure receive training in relation to these issues in order to ensure full and comprehensive knowledge within the team of responsibilities and their implementation moving forwards.