Shropshire Council

Equality and Social Inclusion Impact Assessment (ESIIA) Contextual Notes 2014/2015

The What and the Why:

The Equality and Social Inclusion Impact Assessment (ESIIA) approach replaces the Equality Impact Needs Assessments (EINAs) previously in use by Shropshire Council. It helps to identify whether or not any new or significant changes to services, including policies, procedures, functions or projects, may have an adverse impact on a particular group of people, and whether the human rights of individuals may be affected.

This broader assessment covers consideration of social inclusion. This is so that we are thinking as carefully and completely as possible about all Shropshire groups and communities, including people in rural areas and people we may describe as vulnerable, for example due to low income or to safeguarding concerns, as well as people in what are described as the nine 'protected characteristics' of groups of people in our population, eg Age. We demonstrate equal treatment to people who are in these groups and to people who are not, through having what is termed 'due regard' to their needs and views when developing and implementing policy and strategy and when commissioning, procuring, arranging or delivering services.

It is a legal requirement for local authorities to assess the equality and human rights impact of changes proposed or made to services. Carrying out ESIIAs helps us as a public authority to ensure that, as far as possible, we are taking actions to meet the general equality duty placed on us by the Equality Act 2010, and to thus demonstrate that the three equality aims are integral to our decision making processes. These are: eliminating discrimination, harassment and victimisation; advancing equality of opportunity; and fostering good relations.

The How:

The guidance and the evidence template are combined into one document for ease of access and usage, including questions that set out to act as useful prompts to service areas at each stage. The assessment comprises two parts: a screening part, and a full report part.

Screening (Part One) enables energies to be focussed on the service changes for which there are potentially important equalities and human rights implications. If screening indicates that the impact is likely to be positive overall, or is likely to have a medium or low negative or positive impact on certain groups of people, a full report is not required. Energies should instead focus on review and monitoring and ongoing evidence collection, enabling incremental improvements and adjustments that will lead to overall positive impacts for all groups in Shropshire.

A ***full report (Part Two)*** needs to be carried out where screening indicates that there are considered to be or likely to be significant negative impacts for certain groups of people, and/or where there are human rights implications. Where there is some uncertainty as to what decision to reach based on the evidence available, a full report is recommended, as it enables more evidence to be collected that will help the service area to reach an informed opinion.

Shropshire Council Part 1 ESIIA: initial screening and assessment

Please note: prompt questions and guidance within boxes are in italics. You are welcome to type over them when completing this form. Please extend the boxes if you need more space for your commentary.

Name of service change

Highways Maintenance Asset Management and Communications Strategies

Aims of the service change and description

This paper presents the proposed Asset Management Strategy (AMS) and Communications Strategy of the Shropshire Highways Alliance, which consists of Shropshire, Mouchel, Ringway and IP&E.

The proposed strategies details how the Highways and Transport service will approach the task of managing our most valuable and important public infrastructure from autumn 2015 for the longer term. The Shropshire alliance strategy working group has developed the proposed Asset Management Strategy (AMS) and Communication Strategy (CS).

The remit of the Shropshire alliance is to develop, a highway network that enables Shropshire to flourish, by investing to provide value now and in the future, and giving our customers / stakeholders confidence in the decisions made.

- The proposed AMS and CS sets out how the Council and its partners will best manage the highway and associated assets, taking into account customer needs, Members desires, local priorities, asset condition and available resources.

- The proposed AMS incorporates a proposed Highways Communication Strategy, to ensure the service raises awareness of the Council's asset management objectives and how the alliance communicates.

- The proposed communication strategy details how the service will engage customers and stakeholders to ensure they are aware of, and satisfied with, the continual work that is undertaken to improve the highways network. Communications will be timely, positive, interactive and accessible. Engaging stakeholders to understand their needs and expectations routinely provides the information needed to shape and mould the service provided and the reputation of the Council as a commissioner of services.

The proposed asset management and communications strategies will be widely consulted upon by a range of stakeholders, interest groups, general public over the autumn period.

Intended audiences and target groups for the service change

The Alliance Leadership Board, Portfolio and Deputy Portfolio Holder and Managers have agreed the strategy. Wider consultation is now required to ensure a wider set of views and values is obtained, the service will now consult with appropriate organisations, agencies, and stakeholders etc. to refine the strategy and agree a final version of publication to adopt. Typically, consultees will include:

- SALC & all Town and Parish Councils
- Chamber of Commerce
- LEP- infrastructure is a key strand in the strategic economic plan

- Shropshire Voluntary and Community Services
- NFU, CLA, Forestry Commission, Natural England and Environment Agency – to ensure environmental issues are considered.
- General public via consultation portal
- Neighbour Authorities
- Blue light services (fire, police, Ambulance)
- Primary and Community Care - Clinical Commissioning Groups, NHS trusts.
- Key employers
- Members
- General public
- Transport - haulage, taxi ,

The process of consulting stake holders will further refine the strategies prior to adoption, increase its perceived value and integrity, and will also act as key communicative element in disseminating the change in emphasis of the services approach and the work of the Shropshire Alliance.

Evidence used for screening of the service change
Results for identifying any amendments to the strategies will be derived from the • Council's consultation portal. • Letters and correspondence received from industry bodies. • Presentations to Salc and all other town and parish councils • Views of Shropshire Council Members • Ongoing and ad hoc comments fed into staff A reviewed or revised equality impact assessment *will then be completed after the consultation period is closed* and any approaprapraite amendments are made to the strategies, any revising will identify and track progress and any amendments in emphasis, tone or outcome to the strategies.

Specific consultation and engagement with intended audiences and target groups for the service change
The strategies by their nature are wide and generic, thefore there is no single identified specific group to be specifically targeted or identified.

Potential impact on Protected Characteristic groups and on social inclusion

Guidance notes on how to carry out the initial assessment

Using the results of evidence gathering and specific consultation and engagement, please consider how the service change as proposed may affect people within the nine Protected Characteristic groups and people at risk of social exclusion.

1. Have the intended audiences and target groups been consulted about:

- their current needs and aspirations and what is important to them;
- the potential impact of this service change on them, whether positive or negative, intended or unintended;
- The potential barriers they may face.

2. If the intended audience and target groups have not been consulted directly, have representatives been consulted, or people with specialist knowledge, or research explored?

3. Have other stakeholder groups and secondary groups, for example carers of service users, been explored in terms of potential unintended impacts?

4. Are there systems set up to:

- monitor the impact, positive or negative, intended or intended, for all the different groups;
- Enable open feedback and suggestions from a variety of audiences through a variety of methods.

5. Are there any Human Rights implications? For example, is there a breach of one or more of the human rights of an individual or group?

6. Will the service change as proposed have a positive or negative impact on fostering good relations?

7. Will the service change as proposed have a positive or negative impact on social inclusion?

Guidance on what a negative impact might look like

High Negative	Significant potential impact, risk of exposure, history of complaints, no mitigating measures in place or no evidence available: urgent need for consultation with customers, general public, workforce
Medium Negative	Some potential impact, some mitigating measures in place but no evidence available how effective they are: would be beneficial to consult with customers, general public, workforce
Low Negative	Almost bordering on non-relevance to the ESIIA process (heavily legislation led, very little discretion can be exercised, limited public facing aspect, national policy affecting degree of local impact possible)

Initial assessment for each group

Please rate the impact that you perceive the service change is likely to have on a group, through inserting a tick in the relevant column. Please add any extra notes that you think might be helpful for readers.

Protected Characteristic groups and other groups in Shropshire	**High negative impact** *Part Two ESIIA required*	**High positive impact** *Part One ESIIA required*	**Medium positive or negative impact** *Part One ESIIA required*	**Low positive or negative impact** *Part One ESIIA required*
Age (please include children, young people, people of working age, older			✓	

people. Some people may belong to more than one group eg child for whom there are safeguarding concerns eg older person with disability)				
Disability (please include: mental health conditions and syndromes including autism; physical disabilities or impairments; learning disabilities; Multiple Sclerosis; cancer; HIV)			✓	
Gender re-assignment (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)				No evidence to suggest positive or negative impact
Marriage and Civil Partnership (please include associated aspects: caring responsibility, potential for bullying and harassment)				No evidence to suggest positive or negative impact
Pregnancy & Maternity (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)			✓	
Race (please include: ethnicity, nationality, culture, language, gypsy, traveller)				No evidence to suggest positive or negative impact
Religion and belief (please include: Buddhism, Christianity, Hinduism, Islam, Judaism, Non conformists; Rastafarianism; Sikhism, Shinto, Taoism, Zoroastrianism, and any others)				No evidence to suggest positive or negative impact
Sex (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)				No evidence to suggest positive or negative impact
Sexual Orientation (please include associated aspects: safety; caring responsibility; potential for bullying and harassment)				No evidence to suggest positive or negative impact
Other: Social Inclusion (please include families and friends with caring responsibilities; people with health inequalities; households in poverty; refugees and asylum seekers; rural communities; people for whom there are safeguarding concerns; people you consider to be vulnerable)			✓	

Decision, review and monitoring

Decision	Yes	No
Part One ESIIA Only?	✓	
Proceed to Part Two Full Report?		✓

If Part One, please now use the boxes below and sign off at the foot of the page. If Part Two, please move on to the full report stage.

Actions to mitigate negative impact or enhance positive impact of the service change
The strategies in question will be subject to formal Scrutiny by the Council and the Councils Section 151officer and Audit, to ensure that the Asset Management criteria is adopted and improved.

Actions to review and monitor the impact of the service change
Shropshire Council will review the feedback of its consultation and amend the strategies if required with the approval of the Portfolio Holder – as per recommendations of the October Cabinet Report, further we will via the HMEP review our strategies against similar organisations. More importantly we will monitor the response from the various communication channels and service requests based upon the DFT criteria for effective service delivery.

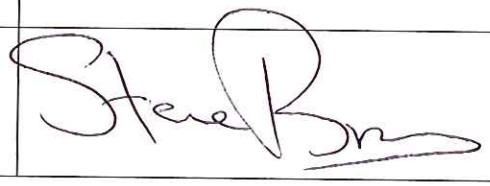
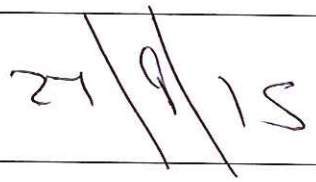
Scrutiny at Part One screening stage

People involved	Signatures	Date
Lead officer carrying out the screening		
*Any internal support**		
*Any external support***	Lois Dale Mrs Lois Dale, Rurality and Equalities Specialist; ext 5684	21st September 2015
Head of service		

This refers to other officers within the service area

****This refers either to support external to the service but within the Council, e.g. from the Rurality and Equalities Specialist, or support external to the Council, e.g. perhaps from a peer authority***

Sign off at Part One screening stage

Name	Signatures	Date
Lead officer's name		
Head of service's name		

Shropshire Council Part 2 ESIIA: full report

Guidance notes on how to carry out the full report

The decision that you are seeking to make, as a result of carrying out this full report, will take one of four routes:

1. To make changes to satisfy any concerns raised through the specific consultation and engagement process and through your further analysis of the evidence to hand;
2. To make changes that will remove or reduce the potential of the service change to adversely affect any of the Protected Characteristic groups and those who may be at risk of social exclusion;
3. To adopt the service change as it stands, with evidence to justify your decision even though it could adversely affect some groups;
4. To find alternative means to achieve the aims of the service change.

The Part Two Full Report therefore starts with a forensic scrutiny of the evidence and consultation results considered during Part One Screening, and identification of gaps in data for people in any of the nine Protected Characteristic groups and people who may be at risk of social exclusion, e.g. rural communities. There may also be gaps identified to you independently of this process, from sources including the intended audiences and target groups themselves.

The forensic scrutiny stage enables you to assess:

- **Which gaps need to be filled right now, to help you to make a decision about the likely impact of the proposed service change?**

This could involve methods such as: one off service area focus groups; use of customer records; examination of data held elsewhere in the organisation, such as corporate customer complaints; and reference to data held by similar authorities or at national level from which reliable comparisons might be drawn, including via the Rural Services Network. Quantitative evidence could include data from NHS Foundation Trusts, community and voluntary sector bodies, and partnerships including the Local Enterprise Partnership and the Health and Well Being Board. Qualitative evidence could include commentary from stakeholders.

- **Which gaps could be filled within a timeframe that will enable you to monitor potential barriers and any positive or negative impacts on groups and individuals further along into the process?**

This could potentially be as part of wider corporate and partnership efforts to strengthen the evidence base on equalities. Examples would be: joint information sharing protocols about victims of hate crime incidents; the collection of data that will fill gaps across a number of service areas, e.g. needs of young people with learning disabilities as they progress through into independent living; and publicity awareness campaigns that encourage open feedback and suggestions from a variety of audiences.