



Cabinet - Supplementary

Monday 13 February 2017 at 7.00 pm

Board Rooms 3, 4 & 5 - Brent Civic Centre

Membership:

**Lead Member
Councillors:**

Portfolio

Butt (Chair)	Leader of the Council
McLennan (Vice-Chair)	Deputy Leader
Farah	Lead Member for Housing and Welfare Reform
Hirani	Lead Member for Community Wellbeing
Miller	Lead Member for Stronger Communities
M Patel	Lead Member for Children and Young People
Southwood	Lead Member for Environment
Tatler	Lead Member for Regeneration, Growth, Employment and Skills

For further information contact: Thomas Cattermole, Head of Executive and Member Services: 020 8937 5446; thomas.cattermole@brent.gov.uk

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The press and public are welcome to attend this meeting

Agenda

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This supplementary contains the following additional items:

- Appendix A (i) – Revenue Budget Objective Analysis
- Appendix A (ii) – Revenue Budget Subjective Analysis
- Appendix K – Consultation Results
- Equality Impact Assessment

Ward Affected:
All Wards

Lead Member: Deputy Leader (Councillor
Margaret McLennan)
Contact Officer: Conrad Hall, Chief Finance
Officer
Tel: 020 8937 6528 conrad.hall@brent.gov.uk

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BUDGET SUMMARY - OBJECTIVE ANALYSIS

	2016/17 Current Budget £m	Growth £m	Savings £m	Technical Adjustments £m	2017/18 Approved Budget £m
Departmental Budgets					
Community Wellbeing	121.5	3.4	(5.0)	(0.5)	119.4
Children & Young People	40.8	0.7	(0.8)		40.7
Regeneration & Environment	30.2	1.0	(3.1)		28.1
Resources	29.3	0.4	(1.6)		28.1
Performance, Policy & Partnerships	10.3	0.1	(0.3)		10.0
Total Departmental Budgets	232.0	5.5	(10.8)	(0.5)	226.3
Central Budgets	39.6	9.2	(9.0)	1.5	41.3
Total Budget Requirement	271.6	14.7	(19.8)	1.1	267.6
Funding					
Revenue Support Grant	(56.0)			13.3	(42.7)
Retained Business Rates	(34.9)			(1.7)	(36.6)
Business Rates Top up	(48.7)			(0.7)	(49.5)
Specific Grants	(33.7)			1.6	(32.0)
Council Tax	(98.3)			(8.6)	(106.9)
Total Funding	(271.6)			4.0	(267.6)
Service Level Breakdown					
Community Wellbeing					
Adult Social Care	80.3	3.4	(3.2)		80.4
Public Health	22.5			(0.5)	22.0
Community Services	18.7		(1.8)		16.9
Total Budget	121.5	3.4	(5.0)	(0.5)	119.4
Children & Young People					
Children and Young People Directorate	1.6	0.0			1.6
Integration and Improved Outcomes	23.3	0.2	(0.8)		22.7
Safeguarding, Performance and strategy	14.9	0.4			15.3
Other School Related Budgets	1.0				1.0
Total Budget	40.8	0.7	(0.8)		40.7
Regeneration & Environment					
Regeneration & Environment Director's Office	0.5				0.5
Environmental Services	27.7	0.9	(2.3)		26.3
Regeneration	1.9	0.1	(0.8)		1.2
Total Budget	30.2	1.0	(3.1)		28.1
Resources					
Chief Legal Officer	1.2				1.2
Human Resources	2.4				2.4
Digital Services	5.0		(0.4)		4.7
Property	5.5		(0.5)		5.0
Resources Director	0.8				0.8
Finance	3.6				3.6
Customer Services	10.7	0.4	(0.7)		10.4
Total Budget	29.3	0.4	(1.6)		28.1
Performance, Policy & Partnerships					
Chief Operating Officer	0.5	0.1			0.5
Communications	1.0				1.0
Executive & Member Services	2.9				2.9
Commissioning & Procurement	1.0				1.0
Performance Improvement	2.1				2.1
Strategy & Partnership	2.9		(0.3)		2.5
Total Budget	10.3	0.1	(0.3)		10.0
Total Departmental Budgets	232.0	5.5	(10.8)	(0.5)	226.3

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BUDGET SUMMARY - SUBJECTIVE ANALYSIS

	2016/17 Current Budget £m	Growth £m	Savings £m	2017/18 Approved Budget £m
Community Wellbeing				
Expenditure:				
Employee Expenses	25.9	0.3	(0.4)	25.7
Premises Related Expenditure	30.2			30.2
Transport Related Expenditure	16.9	0.7		17.6
Supplies and Services	52.1			52.1
Thrid Party Payments	71.2	2.4	(3.4)	69.6
Transfer Payments	30.7			30.7
Support Services	1.2			1.2
Total Expenditure	228.1			227.1
Income:				
Recharges Income	(23.9)		(0.6)	(24.4)
Government Grants	(1.0)			(1.0)
Other Grants, Reimbursements & Contributions	(19.4)		(0.4)	(19.8)
Customer and Client Receipts	(90.9)		(0.2)	(91.1)
Total Income	(135.1)			(136.3)
Net Expenditure	93.0			90.9
Below the line adjustments (HRA)	28.5			28.5
Total Net Expenditure	121.5	3.4	(5.0)	119.4
Children & Young People				
Expenditure:				
Employee Expenses	36.0	0.2	(0.8)	35.4
Premises Related Expenditure	0.4			0.4
Transport Related Expenditure	1.3			1.3
Supplies and Services	9.8			9.8
Thrid Party Payments	164.9	0.4		165.3
Transfer Payments	50.3			50.3
Support Services	4.7			4.7
Total Expenditure	267.3			267.2
Income:				
Recharges Income	(4.9)			(4.9)
Government Grants	(216.5)			(216.5)
Other Grants, Reimbursements & Contributions	(1.4)			(1.4)
Customer and Client Receipts	(3.8)			(3.8)
Total Income	(226.5)			(226.5)
Net Expenditure	40.8	0.6	(0.8)	40.7
Regeneration & Environment				
Expenditure:				
Employee Expenses	20.0	0.2		20.2
Premises Related Expenditure	3.2		(0.4)	2.8
Transport Related Expenditure	3.6	0.1	(0.2)	3.5
Supplies and Services	16.1		(1.7)	14.4
Thrid Party Payments	18.6	0.7	(0.3)	19.0
Transfer Payments	0.0			0.0
Support Services	0.3		(0.4)	(0.1)
Total Expenditure	61.8			59.8
Income:				
Recharges Income	(4.1)			(4.1)
Government Grants	(4.3)			(4.3)
Other Grants, Reimbursements & Contributions	(1.9)			(1.9)
Customer and Client Receipts	(28.5)		(0.1)	(28.6)
Total Income	(38.8)			(38.9)
Net Expenditure	23.0			20.9
Below the line adjustments	7.2			7.2
Total Net Expenditure	30.2	1.0	(3.1)	28.1
Resources				
Expenditure:				
Employee Expenses	20.2	0.4	(0.5)	20.1
Premises Related Expenditure	9.2			9.2
Transport Related Expenditure	0.1			0.1
Supplies and Services	11.4			11.4
Thrid Party Payments	4.1		(0.3)	3.8
Transfer Payments	0.0			0.0
Support Services	0.0			0.0
Total Expenditure	45.1			44.6
Income:				
Recharges Income	(9.2)			(9.2)
Government Grants				
Other Grants, Reimbursements & Contributions				
Customer and Client Receipts	(6.5)		(0.8)	(7.3)
Total Income	(15.7)			(16.5)
Net Expenditure	29.3	0.4	(1.6)	28.1
Performance, Policy & Partnerships				
Expenditure:				
Employee Expenses	6.3	0.1		6.3
Premises Related Expenditure	0.0			0.0
Transport Related Expenditure	0.0			0.0
Supplies and Services	3.6		(0.3)	3.3
Thrid Party Payments	0.1			0.1
Transfer Payments				
Support Services	0.9			0.9
Total Expenditure	10.9			10.6
Income:				
Recharges Income	0.0			0.0
Government Grants	(0.2)			(0.2)
Other Grants, Reimbursements & Contributions				
Customer and Client Receipts	(0.5)			(0.5)
Total Income	(0.6)			(0.6)
Net Expenditure	10.3	0.1	(0.3)	10.0
Total Departmental Budgets	232.2	5.5	(10.8)	226.3

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Appendix K

Update on Budget consultation February 2017

Brent Connects

- 1.1. Five consultation events were held between 12 January 2016 and 3 February 2016 at locations throughout the borough. The meetings had the following levels of attendance:

Date	Location	Attendance
11 January	Brent Connects Wembley	47
18 January	Brent Connects Harlesden	32
24 January	Brent Connects Kilburn	22
7 February	Brent Connects Willesden	36
8 February	Brent Connects Kingsbury & Kenton	23

- 1.2 The Leader of the Council delivered a presentation outlining the financial position and the difficult budget choices faced by the Council. The Leader and deputy Leader then took questions from the audience and provided answers, supported by senior officers where appropriate for matters of technical detail.
- 1.3 Feedback and opinions offered from these events varied considerably. As an example of the range of opinions expressed:
- one resident stated it felt like they were paying for care twice, once through charges, and also through council tax rises;
 - whereas another thought the council was between a rock and a hard place, and had no choice but to raise council tax.

Have your say pop up sessions

- 1.3 In addition to the Brent Connects consultations, three pop up sessions were held in supermarkets across the borough for residents to comment on the budget proposals and ask questions. Again, these sessions were led by the Leader and supported by senior officers.

Online consultation

- 1.4 The online consultation closed on 3 February 2017 and 84 people responded. Their responses have varied considerably from person to person. Taking the council tax increase as an example, several people have expressed support for

it, others have opposed any rise, a handful have proposed that council tax rises should be limited to just inflation and some have made no comment either way. It is important to note that some of the proposals made could not be legally implemented by the council as they would breach the council's obligations or the council lacks the legal powers necessary to implement some of the suggestions, such as new taxes. Overall, no clear themes emerge from the responses to the consultation.

- 1.5 All of these consultation responses are important. Members need to have regard to them, but are not obliged to follow the suggestions made, and members could not legally implement some of the suggestions made. It is relevant to note that the consultees are, statistically speaking, "self selecting" and therefore not necessarily reflective of opinion in the borough as a whole, nor are they necessarily statistically significant. On the other hand, the people who have responded have chosen to take the time to review the council's proposals and to contribute their thoughts, and often their views will be representative of the views of a much larger number of people.

Supplementary Paper:
Equality Analyses of Budget Proposals

This appendix:

- outlines the equality implications of individual budget proposals on equality and socio-economic groups;
- sets out the mitigating factors and monitoring arrangements put in place;
- informs the equalities implications section in the Budget and Council Tax report - 2017/18 to 2019/20.

The equality analyses in this report are subject to change in response to alterations to any of the individual budget proposals.

Budget Options Information

Reference:	Council Tax
Service(s):	All
Lead Member(s):	Cllr McLennan

Savings Proposals:	n/a
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1. What are the objectives and expected outcomes of your proposal? Why is it needed? Make sure you highlight any proposed changes.

The Council is faced with severe cuts in its budgets in the next two years and in order to help overcome this it is proposed to:

1. Agree an overall 3.99% increase in the Council's element of Council Tax for 2017/18 with 2% as a precept for Adult Social Care and a 1.99% general increase.
2. Agree that if the 2% adult social care precept in the Council's element of Council Tax is rejected, the Adult Social Care budget will grow by £1.3m in 2017/18 rather than the £3.4m proposed.

A major element of the Council's spend is on social care, and Brent faces considerable demographic challenges over the coming years. The Office for National Statistics projects that from 2017 to 2020 the number of residents over 65 years old in Brent will grow by over 8%, and the number of those under 15 years old by 3.5%. This is much faster than the population as a whole, which is nonetheless forecast to grow by 3.2% at a time when the Council's funding is being significantly reduced. Officers estimate that by 2020 over half of the Council's budget will be spent on social care.

Without the proposed additional Council Tax increase of 2% described above the Adult Social Care budget will grow by £1.3m (instead of by £3.4m), which could pose challenges to the service to meet growing demand of current and future service users. If the above proposal is approved, however, this will mean that for those households who do not receive any Council Tax support the Council Tax for a Band D property will increase by £43.92 annually, or by £3.66 per month, or by £0.84 per week (note these increases also include the 1.99% general increase in Council Tax). The increase in Council Tax will impact on all households, apart from those who receive 100% Council Tax support.

For the most financially vulnerable families the Council Tax support scheme will act as a significant mitigation to the impact of increased Council Tax. Those claimants of pensionable age may be entitled to Council Tax support equating to 100% of their Council Tax liability,

whereas working age claimants may be entitled to up to 80% of their Council Tax liability. For those working age claimants (who are not receiving full exemption due to disability or carer status) in receipt of maximum Council Tax support they will only be required to pay 20% of the full bill, and so the cost of the increase will be £0.17 per week at Band D. However, some households on low incomes who fall outside the Council Tax support threshold could potentially be affected by the Council Tax increase.

This Equality Analysis is looking at the impacts of the proposal (both positive and negative) on affected groups with protected characteristics.

2. Who is affected by the proposal? Consider residents, staff and external stakeholders.

All households in Brent, apart from those eligible for 100% Council Tax discount

If this proposal is approved, it will affect all households in Brent (119,025) that will see their Council Tax bills increase, unless they are eligible for 100% Council Tax support. Currently, approximately 25% (28,100 households out of the 119,025) of households in Brent receive full or partial Council Tax support, which means that they will receive full or partial protection from the increase. In addition those households where there is only one adult resident (34,000 households) receive a 25% reduction in their bill so will therefore see a weekly increase of £0.63 rather than £0.84 at band D.

Adult Social Care service users and their families/carers

The Council Tax increase will mean that the budget of Adult Social Care services will grow by a further £2.1m (from £1.3m to £3.4m) which will enable the service to meet increasing demand of current and future service users who are among the most vulnerable members of Brent's community.

3.1 Could the proposal impact on people in different ways because of their equality characteristics?

Yes.

If the 2% additional Council Tax increase for Adult Social Care is approved, the budget of Adult Social Care services will grow by an additional £2.1m (increasing growth from £1.3m to £3.4m) which will have a positive impact on the most vulnerable members of Brent's community such as older adults, (particularly women who have longer life expectancy, but are also more likely to have caring responsibilities), and people with disabilities / long term health conditions.

The 1.99% increase in Council Tax for general use should have a positive impact on some equality groups as it prevents an additional reduction of £2.0m in the Council's budget. Without a specific alternative proposal the exact benefit to specific groups of residents, staff and external stakeholders is uncertain. However, groups that are most likely to be affected by a reduction in the proposed budget are children and young people, older people and women.

The proposed Council Tax increase will affect households in Brent in different ways based on their financial circumstances. However low income households are likely to be protected as they will see increases in their Council Tax support which will either offset in full or partially this increase.

3.2 Could the proposal have a disproportionate impact on some equality groups?

If you answered 'Yes' please indicate which equality characteristic(s) are impacted

Yes – both positive and negative

Positive impact on Adult Social Care service users: older adults and their carers, particularly women who have longer life expectancy but are also more likely to have caring responsibilities, residents with disabilities/long term health conditions, residents on low incomes who might be experiencing multiple disadvantage.

A major element of the Council's spend is on social care, and Brent faces considerable demographic challenges over the coming years. The Office for National Statistics projects that from 2015 to 2019 the number of residents over 75 years old in Brent will grow by nearly 8%. This is much faster than the population as a whole, which is nonetheless forecast to grow by 3.5% at a time when the Council's funding is being significantly reduced. Officers estimate that by 2020 over half of the Council's budget will be spent on social care.

If the 2% additional Council Tax increase for Adult Social Care is not agreed then the budget for the Adult Social Care department will not grow by the £2.1m proposed, which could pose significant challenges to the service to meet growing demand of current and future service users. Adult Social Care service users are some of the most vulnerable members of Brent's community such older adults and their carers, particularly women who have longer life expectancy but are also more likely to have caring responsibilities, residents with disabilities/long term health conditions, residents on low incomes who might be experiencing multiple disadvantage

The 1.99% increase in Council Tax for general use should have a positive impact on some equality groups as it prevents an additional reduction of £2.0m in the Council's budget. Without a specific alternative proposal the exact benefit to specific groups of residents, staff and external stakeholders is uncertain. However, groups that are most likely to be affected by a reduction in the proposed budget are children and young people, older people and women.

Negative impact on households living on low incomes that fall outside of the threshold for Council Tax and/or Welfare Assistance support (socio-economic disadvantage)

The proposal will increase the financial pressure on those households, particularly working age men and women in single or multiple households, earning just above the threshold to qualify for Council Tax and/or Welfare Assistance support. Brent Council does not hold detailed data on the incomes of Council Tax payers. It is therefore difficult to predict the full impact on equality groups.

Currently, approximately 25% (28,100 households out of the 119,025) of households in Brent receive full or partial Council Tax support, which means that they will receive full or partial protection from the increase. Those households who receive partial Council Tax support will see pro rata increases in their Council Tax. Working age claimants who receive 80% Council Tax support, for example, will see an increase in their bills equivalent to 20% of the increase, i.e. £8.78 per annum for a Band D property or £0.17 per week. The remaining households who are not in receipt of Council Tax support will see a weekly increase in their Council Tax bills ranging from £0.56 for Band A property to £1.69 for Band H property.

The households who are not eligible for Council Tax support will see the Brent Council element of their bill increase by 3.99%. This equates to £43.92 annually for a Band D property, or £3.66 per month, or by £0.84 per week. If they are in receipt of a 25% single person discount, however, this will reduce the increase by 25%.

The table below shows the increase for each Council Tax band:

Band	A	B	C	D	E	F	G	H
Annual Increase	£29.28	£34.16	£39.04	£43.92	£53.68	£64.44	£73.20	£87.84
Weekly Increase	£0.56	£0.66	£0.75	£0.84	£1.03	£1.22	£1.41	£1.69
No / % of properties	4,931 4.1%	13,022 10.9%	35,458 29.8%	33,830 28.4%	21,888 18.4%	6,290 5.3%	3,351 2.8%	255 0.1%
No. receiving a 25% discount	2,491	6,615	13,413	7,487	3,456	780	368	10
Accounts subject to recovery (% sample)	11.6%	16.2%	35.0%	21.3%	10.3%	2.9%	2.4%	0.3%

The table above shows that almost three quarters (73.2%) of households will see a weekly increase of £0.84 or less. It should be noted, however, that the analysis of a random sample of accounts subject to recovery action shows that proportionately more accounts in Bands A, B and C are subject to recovery action. This would suggest that households living in lower banded properties find it more difficult to pay and so, although the proposed increase for these property bands is £0.75 or less per week (or £39.04 or less annually), these households could potentially be more affected by the increase in Council Tax if they are not in receipt of Council Tax support.

Those households living in Bands D – H will in most cases be in a better position to manage the proposed Council Tax increase, although there might be a minority of households on low incomes who fall outside the Council Tax support threshold and could therefore be affected by the increase.

A key limit on the negative impact on particular groups is that so many households will contribute a small amount extra each week, as shown by the figures above.

3.3 Would the proposal change or remove services used by vulnerable groups of people?

The additional 2% increase in Council Tax will help maintain Adult Social Care services used by the most vulnerable members of Brent's community, and will help ensure that the increasing demand on those services is met.

If the proposal is rejected, the Adult Social Care budget will not grow by £2.1m, which could pose challenges to the service to meet growing demand of current and future service users. Failure to meet the increasing demand and diverse needs of current and future service users would have a potential negative impact on those most at need.

The 1.99% increase in Council Tax for general use should have a positive impact on some equality groups as it prevents an additional reduction of £2.0m in the Council's budget. Without a specific alternative proposal the exact benefit to specific groups of residents, staff

and external stakeholders is uncertain, but a reduction in budget at short notice will limit the scope of the Council to reduce the impact on services used by vulnerable groups of people.

While the Council Tax proposal will increase the financial pressure on some households, the Council Tax support scheme will partially or fully mitigate this impact for those households who are living on low incomes and are eligible for Council Tax support. Further, single households will have the impact mitigated by the 25% discount offered to single households.

Further analysis on the impact of the proposal on Council Tax support claimants:

- In 2016-17, the average weekly amount a working age Council Tax support claimant is paying towards their Council Tax is under £5.15 per week (£268.54 per year). Of the three working age Council Tax Support groups, only the Vulnerable group would not see any change to the amount they pay in the event that their Council Tax liability were to increase (due to them being eligible for a 100% reduction). However, the other two groups, Working Age Employed and Working Age Other, would see a £0.19 and £0.16 weekly increase alter the amount they contribute to £9.56 and £5.33 respectively. This is illustrated in table the below:

Scheme Type	2016/17 Average Contribution	New Contribution based on 3.99% Increase (Band D Average)
Vulnerable	£1.24	£1.24
Working Age Employed	£9.37	£9.56
Working Age Other	£5.17	£5.33

- Like the Working Age Vulnerable Group, the Council Tax Support Pensioner group would remain unaffected by an increase to their liability as they too are eligible for a 100% reduction to their bill. This is a significant mitigation of the impact upon this group.
- The Vulnerable group, which includes carers and people who claim disability benefits, or who have partners who claim disability benefits, are entitled to further reductions in Council Tax through Council Tax support, and had an average liability of £1.24 per week in 2016-17. This would be unchanged by the proposal.
- The gender of the working age claimant caseload indicates that women are slightly over-represented in the claimants' pool compared to the Borough profile. However' it should be noted that either partner in a couple may make the Benefit claim which could potentially affect this data:

Gender	Vulnerable		Working Age Employed		Working Age Other		Grand Total	
FEMALE	3380	52%	2905	49%	2996	54%	9281	52%
MALE	2782	43%	2765	47%	2253	41%	7800	44%
UNKNOWN	297	5%	275	5%	256	5%	828	5%
Grand Total	6459	100%	5945	100%	5505	100%	17909	100%

- In terms of Ethnicity, 13% of working age claimants were Asian (compared to 33% of Brent population), 23% of working age claimants were Black (19% of Brent population), 4% of working age claimants were mixed background (5% of Brent population), 21% of working age claimants were white (36% of Brent population), and 4% of working age claimants belonged to another group (7% of Brent population). However, 35% of claimants did not disclose their ethnicity which makes further analysis complicated.

Ethnicity	Number of Claims	
Asian	2291	13%
Black	4150	23%
Mixed	631	4%
Other	803	4%
Unknown	6202	35%
White	3832	21%
Grand Total	17909	100%

- Single people form the largest group of Council Tax Support claimants by family status, followed by lone parents. However, the structure of Council Tax and Council Tax Support mean that these groups are more likely to pay between £0 and £5 per week compared to other groups:

CTax Payment 2016/17	Couple No Dependents		Couple With Dependents		Lone Parent		Single		Grand Total	
£0	359	50%	753	20%	744	14%	2344	29%	4200	23%
£0.01 to £5	134	19%	797	21%	3035	57%	3950	49%	7916	44%
£5.01 to £10	84	12%	1109	29%	651	12%	741	9%	2585	14%
£10.01 to £15	59	8%	440	12%	504	9%	657	8%	1660	9%
£15.01+	79	11%	702	18%	387	7%	380	5%	1548	9%
Grand Total	715	100%	3801	100%	5321	100%	8072	100%	17909	100%

- The existing single person's discount offers significant mitigation of the impact of the proposed Council Tax increase for this group.
- No data is held on Council Tax Support claimants with respect to: gender reassignment; marriage and civil partnership; pregnancy and maternity; religion or belief; and sexual orientation. However, there is no strong evidence to suggest that these groups will be adversely affected by the proposed increase, and the protections described above will apply to these groups.

If the Council Tax proposal is approved, the Council will continue to monitor the impact on equality groups to ensure that any unexpected consequences and/or adverse impact are promptly identified and mitigated. The existing powers under Section 13A of the Local Government Act 1992 allow the Council to reduce Council Tax by up to 100%. The process for applying is detailed on the Council's website.

3.4 Does the proposal relate to an area with known inequalities?

There is a relatively high proportion of older people living with income deprivation in Brent. The borough is 14th worst in the country (326 local authorities) for older people affected by income deprivation.

The additional 2% increase in Council Tax will help maintain Adult Social Care services used by the most vulnerable members of Brent's community such as older adults and their carers, particularly women who have longer life expectancy but are also more likely to have caring responsibilities, disabled people, residents on low incomes who might be experiencing multiple disadvantage.

Many of the Council's services are targeted towards vulnerable groups, therefore the additional 1.99% rise in Council Tax for general use will help to maintain these services, and reduce the impact of cuts to local government funding on service users.

The proposal, on the other hand, will increase the financial pressure on those households, including working age men and women in single or multiple households, earning just above the threshold to qualify for Council Tax and/or Welfare Assistance support. However the impact on pensioners, disabled people and working age households who currently receive 100% or partial Council Tax support will be mitigated due to the corresponding increases in the support provided to them, as outlined above.

3.5 Is the proposal likely to be sensitive or important for some people because of their equality characteristics?

Yes.

3.6 Does the proposal relate to one of Brent's equality objectives?

Yes.

Objective 4: To ensure that local public services are responsive to different needs and treat users with dignity and respect

Recommend this EA for Full Analysis?

No - the costs of the Council Tax increase will be spread widely between households across the borough, and there is already significant mitigation in place to protect the most vulnerable groups, for example: full/partial Council Tax support, single person's discount, and discounts for some disabled people. Demographic pressures in the form of rising numbers of children and older people in the borough combined with reductions in funding from central government mean serious risk of a significant increase in inequality falling disproportionately on some protected groups, especially older people, women, and disabled people if Council Tax is not raised. Finally, existing safeguards include the ability for the Council to reduce Council Tax liabilities, were unintended consequences or an adverse impact has been identified.

Budget Options Information

Reference:	1718BUD1
Service(s):	Public health: Sexual health transformation
Lead Member(s):	Cllr Hirani

Savings Proposals:	Through participation in the London Sexual Health Transformation Programme including the London wide procurement of a 'front door' to sexual health services and a joint procurement with Ealing and Harrow of an integrated local sexual health service savings are anticipated through a diversion of activity to lower cost settings
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In December 2015 Cabinet agreed continued participation in the collaboration with other London boroughs in the London Sexual Health Services Transformation Programme with the intention of procuring genitourinary medicine (GUM services) and Contraception and Sexual Health Service (CaSH) in a new collaborative commissioning model.

Timescales:

Contract award Sub regional integrated service Dec 2016 (subject to confirmation of Ealing's timelines)

Contract award for services: Feb 2017

Contract start 1 April 2017

1. What are the objectives and expected outcomes of your proposal? Why is it needed? Make sure you highlight any proposed changes.

The proposal is to develop a networked system of Sexual Health services on both a Pan-London and sub-regional basis.

An integral component of this networked system will be a Pan London Sexual Health On-Line portal. The 'Front Door' into services will be through a web-based single platform; providing patients with information about sexual health, on-line triage, signposting to the most appropriate service for their needs and the ability to order self-sampling tests. A single database will be developed with the highest levels of confidentiality and security, enabling greater understanding of the patient flows with a focus on prevention and specialist services for those most in need.

The Pan-London Online Portal will incorporate the following elements:

- Triage and Information ("Front of House");
- Self-Testing/Self Sampling;
- Partner Notification; and
- Signposting/ Patient Direction and where possible Appointments (Booking system) (dependent on ability to interface with existing clinic systems).

In Brent, there is an expectation that clinical provision will offer patients (particularly those from vulnerable and high risk groups) the opportunity to triage and self-sample on site, in addition all services will be required to ensure that results are available electronically to patients within 72 hours. Patients who are diagnosed with a Sexually Transmitted Infection (STI) will be offered an appointment within 48 working hours or will be fast tracked if they present to a walk in service. Improved systems for notifying contacts of patients (known as partner notification) with an STI will ensure that resources are targeted at the highest need groups.

Centralisation of partner notification data along with the use of a single patient identifier system/technology to ascertain attendance at clinic of those notified of infection would

support the programmes objectives of reducing the rates of re-infection and repeat attendance.

The primary aim of this system will be to ensure that high volume, low risk and predominantly asymptomatic activity is controlled and managed where appropriate outside of higher cost clinic environments. By shifting testing of asymptomatic patients away from costly clinical environments through this model, it is estimated that considerable savings will be released.

Locally, the vision is to develop and coordinate an integrated system of sexual health provision linked to a network of pan London and regional services. A lead provider model will be developed to coordinate and manage all elements of the system including clinical services and, where appropriate, primary care and third sector services. The whole system will be designed to ensure that evidence based practice drives changes, and resources will be focused on groups with the highest risk. It is important that the new system is flexible and responsive to changes in demography and local need.

Brent Council has overall responsibility for the commissioning of sexual health services in Brent, as part of the interagency agreement Harrow and Barnet Joint Public Health Services (HBJPHS) will lead on the sub regional procurement for Outer North West London (which includes Brent). At the time of writing the precise arrangements for the contract management, monitoring of performance and financial governance are in the process of being formally agreed.

2. Who is affected by the proposal? Consider residents, staff and external stakeholders

The proposals relate to a commissioned service and as such will not affect Brent staff directly.

The proposals will affect Brent residents using sexual health services. The following service providers who are commissioned by Brent Council Public Health to provide sexual health services to the residents of Brent will be directly affected:

- London North West Healthcare NHS Trust
- Central North West London NHS Foundation Trust
- Terrence Higgins Trust
- GP Practices and Community Pharmacies
- Other services across London as part of the London Sexual Health Transformation Project.

3.1 Could the proposal impact on people in different ways because of their equality characteristics?

The proposal potentially impacts on the protected characteristics in relation to the following groups;

- Gender reassignment
- Race
- Sexual orientation
- Age
- Marriage and Civil Partnership
- Disability
- Pregnancy and maternity
- Sex

3.2 Could the proposal have a disproportionate impact on some equality groups?

Yes the following groups may be disproportionately affected because of their greater sexual health needs;

- young people age 16-25;
- men who have sex with men
- Black Africans, Black Caribbean and Black British ethnic groups.

3.3 Would the proposal change or remove services used by vulnerable groups of people?

The proposal would not remove services used by vulnerable groups of people. It would however change the way in which services are delivered. The change in service delivery should have some positive impacts as it would improve service flexibility. As outlined in question 1 above, these changes follow the recommendations of the London Sexual Health Services Transformation Project which has undertaken a needs assessment, analysis of the patient flow data, interviews with commissioning and public health leads in each Council involved, a review of the legal and policy environment and some exploration of the possible alternatives to the traditional service models. From this work, it is clear that there is a strong case for change.

This change could also have some negative impacts on service users who are not computer literate or do not have ready access to the internet, as well as some patients who may find it difficult to access or to use self sampling kit without support. However, any negative impact would be mitigated by offering them accessible appointments to see a clinical specialist.

3.4 Does the proposal relate to an area with known inequalities?

The proposal aims to ensure that high volume, low risk and predominantly asymptomatic activity is controlled and managed, where appropriate, outside of the higher cost clinic environments. By shifting the testing of asymptomatic patients away from clinical environments considerable savings could be made.

The evidence review and discussions with providers suggests that anything from 15% to 30% of activity could be redirected to lower cost service options in a staged manner. The results of the waiting room survey undertaken as part of the London Sexual Health Transformation Programme (LSHTP) indicated that up to 50% of attendees do not have symptoms. Brent Council like many local authorities is facing unprecedented challenges in having to provide an increasing demand for services set against a backdrop of reducing resources.

In 2015/16 Brent Council Public Health was required to find in year savings of at least 6.2% on the public health grant and it is likely that there will be further on-going reductions for allocations in future years when the findings of the Comprehensive Spending Review are formally announced.

A key issue to consider is that Genitourinary Medicine (GUM) services are open access with activity based contracts. This means that while many Brent residents access services through the local provider, London North West Healthcare NHS Trust many others may access services anywhere in London particularly Central London (and nationally) without referral. The Council is liable for the full cost of this activity, and without change the current approach will become unsustainable.

3.5 Is the proposal likely to be sensitive or important for some people because of their equality characteristics?

Yes – Evidence shows that there are specific groups and protected characteristics that have a higher risk of poor sexual health this includes young people age 16-25; men who have sex with men and Black Africans, Black Caribbean and Black British ethnic groups.

3.6 Does the proposal relate to one of Brent’s equality objectives?

Yes – “ensure that our commitment to equality and diversity is integrated into procurement and commissioning processes”.

4. Recommend this EA for full analysis

Yes

5. What effects could your service have on different equality groups and on cohesion and good relations?

The following evidence highlights the need to ensure that future service provision actively promotes take up of services by all groups in which the following issues will need to be addressed;

- Brent has a significant prevalence of sexually transmitted diseases (STIs) in the population - with 1,634 acute STI diagnoses recorded in 2014, representing a 16% increase on 2013.
- The rates for gonorrhoea, genital warts, genital herpes and syphilis rank Brent among those authorities in England with the highest rates. In Brent, the gonorrhoea diagnosis rate (151.6 per 100,000) is high compared to England as a whole (52.9 per 100,000).
- Brent is ranked 20th highest (out of 326 local authorities in England) for gonorrhoea diagnoses rates, which is a marker for high levels of high risk sexual activity.

What evidence / data have you reviewed to assess the potential impact of your proposals? Include the actual data, statistics reviewed in the section below. This can include census data, borough profile, profile of service users, workforce profiles, results from consultations and the involvement tracker, customer satisfaction surveys, focus groups, research interviews, staff surveys; complaints etc. Where possible include data on the nine Protected Characteristics.

(Where you have gaps (data is not available/being collated), you may need to include this as an action to address in your Improvement Action Plan at Stage

5.1 Age (including carers of young/older people) - Positive

Evidence from the Joint Strategic Needs Assessment in Brent reflects the national picture, where STIs disproportionately affect women aged 16 to 19 and men aged 25 to 34.

The proportion of women prescribed emergency hormonal contraception is greater in those under 25, suggesting a continued need to target young women. In Brent 55% of all emergency contraception was prescribed to women younger than 25

In 2012-13, the Brent community contraception service saw 9,436 attendances, of these, 95% were amongst women; 39% were in the 25 to 34 age group, 25% in the 35 to 44 age group and 19% were aged between 18 and 24 years.

5.2 Disability - Positive

There is a lack of data on the sexual health and reproductive health needs of the people with Disability in Brent. However, it is anticipated that the proposed service will have a positive impact on the needs of this group by ensuring that services are fully accessible. This will be measured as a key element of the evaluation process against submitted bids in the procurement process.

5.3 Gender Identity and Expression - Positive

There is a lack of data on the sexual health and reproductive health needs of the people with gender reassignment in Brent. However, it is anticipated that the proposed service will have a positive impact on the in addressing gender identity and expression. This will be measured as a key element of the evaluation process against submitted bids in the procurement process.

5.4 Marriage and Civil Partnership - Positive

There is a lack of specific data on the sexual health and reproductive health needs of individuals in marriage or civil partnership, in Brent. The new service provider will be required to ensure improved access to high risk and vulnerable groups and this will be measured as a key element of the evaluation process against submitted bids in the procurement process.

5.5 Pregnancy and Maternity - Positive

There is a lack of specific data on the sexual health needs of women during pregnancy and maternity time in Brent. In general, the numbers of teenage pregnancies in Brent have been declining in the recent years and Brent has currently one of the lowest rates in London.

5.6 Race - Positive

Individuals from Black African, Black Caribbean and Black British ethnic groups remain key targets and a priority is to ensure service provision is able to address the sexual health needs of these groups in particular developing a focus on targeting interventions for Black Africans.

Based on the proportion of acute sexually transmitted infections (STIs) by ethnicity, the highest proportion of acute STIs in 2012 were seen among individuals from Black Africans and this group is disproportionately affected by acute STIs.

5.7 Religion or Belief - Positive

At present, there is a lack of data on the sexual health and reproductive health needs of people from different religions and beliefs. It is anticipated that the proposed new service will have positive impact on the needs of this group and this will be measured as a key element of the evaluation process against submitted bids in the procurement process.

5.8 Sex - Positive

The rates of acute STIs in 2012 were higher among young males compared to young females. Similarly, the rates of reinfection with an STI were also higher among men.

In 2012, 23% of women and 28% of men presenting with an acute STI at a GUM clinic during the four year period from 2009 to 2012 became re-infected with an acute STI within twelve months.

Nationally, during the same period of time, an estimated 51% of women and 49% of men presenting with an acute STI at a GUM clinic became re-infected with an acute STI within twelve months. The new service provider will be required to ensure improved access to high risk and vulnerable groups and this will be measured as a key element of the evaluation process against submitted bids in the procurement process.

5.9 Sexual Orientation - Positive

Men who have sex with men (MSM) are one of the key priority groups in Brent as there is a disproportionate prevalence of STI diagnoses amongst this group.

In the period 1st April 2014 to 31st of March 2015, there were 2,434 STI's diagnosed as a result of Brent patients attending any clinic nationally. Of these, 501 diagnoses were amongst MSM, this equates to 21% of STI diagnoses that year.

In Brent 21% of the HIV diagnoses in 2014-15 were seen in the MSM population. The proposed sexual service model would have a positive impact on the needs of MSM and this will be measured as a key element of the evaluation process against submitted bids in the procurement process.

5.10 Others Socio Economic Deprivation - Positive

Socio-economic deprivation (SED) is a known determinant of poor health outcomes and data from the GUM clinics show a strong correlation between rates of acute STIs and the index of multiple deprivation across England. The relationship between STIs and SED is probably influenced by a range of factors such as the provision of and access to health services, education, health awareness, health care seeking behavior and sexual behavior.

There is considerable geographic variation in the distribution of sexually transmitted infections (STIs) in Brent. Geographically, the NW10 postcode has the highest volume of STIs in Brent and these are also concentrated in areas of higher deprivation. In 2011, 70% of the borough's diagnosed STIs were in the first and second most deprived wards in Brent.

6. Please provide a brief summary of any research or engagement initiatives that have been carried out to formulate your proposal.

- **What did you find out from consultation or data analysis?**
- **Were the participants in any engagement initiatives representative of the people who will be affected by your proposal?**
- **How did your findings and the wider evidence base inform the proposal?**

To assess the current state of acute sexual health services (GUM - Genitourinary Medicine) in London, the London Sexual Health Transformation Project (LSHTP) Team undertook a needs assessment between April and May 2015.

An analysis of patient flow data took into account the protected characteristics of Brent residents in relation to sexual orientation, sex, age and ethnicity.

Interviews were also undertaken with commissioning and public health leads in each participating council. Initial consultation with prospective providers was undertaken to assess the market's ability and capacity to respond to the forthcoming procurement. A waiting room

survey was also undertaken as part of LSHTP; in headline terms the survey represented a good cross-section of participants.

7. Could any of the impacts you have identified be unlawful under the Equality Act 2010? Prohibited acts include direct and indirect discrimination, harassment, victimization and failure to make a reasonable adjustment.

None of the impacts identified would be considered unlawful under the Equality Act 2010.

8. What actions will you take to enhance the potential positive impacts that you have identified?

The key area to addressing the positive impacts identified will be through the design and development of the service specification to ensure that it addresses and promotes good sexual health for all Brent residents particular the key priority groups identified and this will be measured as a key element of the evaluation process against submitted bids in the procurement process.

9. What actions will you take to remove or reduce the potential negative impacts that you have identified?

The only potential negative impact identified is around people not being able to use/access internet based services and therefore not being able to self sample, this will be addressed by having the option of a clinic visit.

10. Please explain how any remaining negative impacts can be justified?

There are no remaining negative impacts.

Budget Options Information

Reference:	1718BUD2
Service(s):	Adult Social Care
Lead Member(s):	Cllr Hirani

Savings Proposals:	Income generation – The introduction of a provisional charge for Community Care and Accommodation based care will generate revenue earlier in the process and avoid people not contributing to service due to non-compliance with the financial assessment process. This provisional charge removes the inherent delay in assessing a client after the actual care package has commenced.
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This proposal was subject to Cabinet consideration and approval in July 2016, following a 30 day consultation with service users and their families. Light touch assessments were implemented at the end of August 2016. Savings of £0.25m were generated from collecting income earlier in the process.

A summary of the equality analysis is available below.

What effects could your policy have on different equality groups and on cohesion and good relations?

AGE

Neutral

Older people are the largest client group serviced by Adult Social Care. Some older clients may not fully understand how their Client Contribution has been calculated. There was concerns at the one of the consultation meeting that older people may think that they need to be computer literate in order to communicate with the council. It was fully explained that this was not the case. Each customer will receive a full breakdown on how their financial assessment had been calculated using the DWP data base. A visit by a Client Affair Officer will also be undertaken should a customer required further clarification or if it is deemed that for specific customers this is the best way to convey information.

The policy could have a positive impact as in using information from a data base requires less forms paper evidence from customers which can be unsettling and cause confusion.

DISABILITY

Neutral

All customers receiving care from Adult Social Services will have a level of disability. The policy does not impact on disability in any form of way. Clear communication is key to ensuring all customers understand that there is a cost to the service they receive and what is their financial contribution are.

The policy will have no impact on vulnerable people who may be on low income who meet Fair Access to Service criteria as there is no change to overall cost of the service and many customers on low income will not be charged. The Council has a legal obligation to provide services to meet assessed need regardless of a customer's ability to pay.

The policy would ensure that the most vulnerable people continue to have access to and benefit from the services that they need.

Disabled people should not receive fewer services as a result of this proposed change in policy.

GENDER

Neutral

This policy has neutral effect on gender. It is however, recognised that women do live longer than men and are more likely to require social care. There is also more female customers using Adult Social Care Services than males. It could be said that the policy would have a positive impact on females as the proposed financial assessment process is more streamlined and requires less input from customers.

MARRIAGE AND CIVIL PARTNERSHIP

Neutral

This policy has neutral effect on the group.

PREGNANCY

Neutral

This policy has neutral effect on the group.

RACE

Neutral

There would be no racial group for whom the policy would have a disproportionately adverse impact Brent remains a majority Black Asian Minority (BAME) borough with 63.7% of the population being non- white. In England and in Wales the figure is 14% and 40% in London. The largest single ethnic group in Brent - is the Asian/Asian British, Indian or British Indian Group 18.6% of the borough population followed by the White: English/Welsh/Scottish/Northern Irish/ British group with 18%. In England and Wales the Asian/British: Indian or British Indian group makes up 2.5 % of the population, rising to 8.8% in Outer London Kingsbury

RELIGION

Neutral

There would be no religious group for whom the policy would have a disproportionately adverse impact.

The Policy aims to continue to support service users accordingly to their faith and religion and any other spiritual needs they may have.

SEX

Neutral

SEXUAL ORIENTAION

Unknown

We are unable to collect the evidence in this characteristic, therefore we are unable to specify of the policy will have negative or positive impact on the group.

Please provide a brief summary of any research or engagement initiatives that have been carried out to formulate your proposal.

A 30 days consultation process took place. Within that period 2 stakeholder meetings were held. Consultation methods included a paper survey and stakeholder meetings. The first stakeholder meeting provided the opportunity for stakeholders to help design and comment on the on-line survey. The on-line survey went live on 25th April 2016 and closed on 27th May 2016. The overall numbers who responded to the consultation is 41.

For both stakeholder meetings notes were taken by those presenting the information in relation to the proposal.

Questions were raised concerning the proposal and all questions were appropriately responded to at the meetings.

There was a request for more written information in relation to financial assessments.

Whilst the proposed change to light touch assessments and charging the average cost of £29.07 only affects new users of the service, existing users of the service may be affected if they have a change in circumstances, hence the target audience for consultation will be both new and existing users.

Stakeholders' primary concerns and issues were as follows. They:

- wanted to know what was included in a financial assessment calculation
- 2 residents wanted to know if customers had to give permission to the council to access their DWP information
- 1 resident wanted to ensure enough time was allocated to the consultation period and requested that the consultation be extended by 5 days to take into consideration an end of the week closure rather than the beginning of the week
- wanted to know how customers identified for reablement services will know that they would not be a charge for up to six weeks
- wanted to know what constituted a Disability Related Expenditure
- were issues around customers not having a computer to exchange information with the Council.

In response to the above issues and concerns it was explained what was included within a financial assessment, what was disregarded and the types of Disability Related Expenditure (DRE) that would be considered within the calculation.

Assurance was provided that the process would be open and transparent and that engagement with stakeholders was essential to ensure full understanding of how the financial contribution charges are calculated, applied and the timescales of informing customers of when the charges for their services will commence.

It was further explained that customers had already given their consent to the DWP to share data with other Government agencies and with Local Authorities and that reablement customers are told by social workers that the reablement service is free for six weeks at the point when their reablement service commences. However, if it is necessary for ongoing care to continue after the six weeks this would be subjected to a financial assessment contribution. The response to this question also included information around means testing for Adult Social Care service and only those customers identified that they can afford to pay will be charged a financial contribution.

In addition to the above issues raised stakeholders generally thought that combining the existing charging policies made sense and welcomed the use of DWP information to undertake financial assessments. One comment which had been made at the first stakeholder meeting was in relation to a stakeholder brother who lived in another borough

and had their financial contribution calculated using DWP information. It was a positive experience for the brother as he did not have to find information or complete forms.

Weekly check was undertaken to analyse the on-line survey responses to the consultation however there were no returns. It was generally considered that the face to face interaction with stakeholder provided a more qualitative response to the proposal where clarity of information could be better exchange and concerns addressed

The participants were residents of borough who used services. There was also representation from people who had experience of other local authorities charging policies as well as potential new customers.

Could any of the impacts you have identified be unlawful under the Equality Act 2010? Prohibited acts include direct and indirect discrimination, harassment, victimization and failure to make a reasonable adjustment.

No. Adults Social Care ensures that all residents are treated with dignity, respect and equality. We also aim to ensure we take any actions for discriminatory behaviours. We ensure all residents are treated fairly and the backbone of this work is the right to independence and control the lives of vulnerable people.

What actions will you take to enhance the potential positive impacts that you have identified?

- Residents will be given alternative choice to how a financial assessment is undertaken should they not want the Council to use their DWP information.
- Residents will be given verbal and written information to help them understand the financial assessment process.
- For residents who have no capacity an Independent Mental Capacity Assessment will be arranged
- Residents will have the same rights and responsibilities as other citizens.
- We will make sure that we will work closely with other organisations e.g. advocacy
- We will work closely with families and friends
- We will work closely with other Council's departments

What actions will you take to remove or reduce the potential negative impacts that you have identified?

There are no negative impact. Our aim is to ensure people are treated equally despite their age, disability, gender, race, religion or beliefs or sexual orientation. We ensure that all customers have the same access to information and ensure they adapted in a format they can understand to ensure discrimination is eliminated.

Please explain how any remaining negative impacts can be justified?

There are no remaining negative impacts identified.

Budget Options Information

Reference:	1718BUD3
Service(s):	Adult Social Care
Lead Member(s):	Cllr Hirani

Savings Proposals:	Direct Services - John Billam and New Millennium to become more inclusive services which bring in the community and additional income to make effective and efficient use of key assets.
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1. What are the objectives and expected outcomes of your proposal? Why is it needed? Make sure you highlight any proposed changes.

The traditional role of day service provision was to provide carers daily respite from the stress generated by the caring role and to avoid home placement breakdowns. With the ever increasing complexity of the conditions that people with learning disabilities have, as well as their increased longevity, this has not only placed a greater stress upon the families/carers, but also increased the level of support that they often need.

At the same time there is an expectation that services will have an aspirational aspect, provide avenues for people with disabilities to be better integrated into their communities and to be active members of society.

John Billam has already started to embrace its changing role and received an award by the Autism Society for its work. It will start its training of other staff groups in autism awareness with a view of decreasing the authority's need to source external training options. The training suite being developed will be open to staff and carers without having to hire external facilities. Plans to develop work training opportunities for service users, a social enterprise; as well as developing a menu based service programme to better meet the individual needs of service users are being explored.

All of this will create a service which meets the needs of service users, their families and carers, whilst placing community integration as a key target.

As part of this an alternative model to the restrictive transport system will be explored. The transport system as it stands denies service users the opportunity to be travel confident and restricts the starting point of all activities being that of the John Billam Centre. It also means that the times that service users leave and return to their homes are based upon the needs of the transport route planners and not the individual. Naturally the service will need transportation for some activities and service users, however this can be better met by fleet hired vehicles. It is estimated that at John Billam alone this potential change could achieve a saving of £188,097 per annum, which could also be replicated at New Millennium.

2. Who is affected by the proposal? Consider residents, staff and external stakeholders.

This proposal to explore an alternative model of transport system will potentially have a significant impact on service users and carers. Those who do not have an assessed need for transportation will be expected to manage their own means of getting to day services. Those who have used this service for many years will also be impacted upon due to the change in the service and the uncertainty of what the change will mean to them individually.

The remodelling of the whole service will also raise concerns that the change will lead to a decrease in service level.

3.1 Could the proposal impact on people in different ways because of their equality characteristics?

The main group that can be impacted upon will be those with disabilities as this is the primary group of service users. However this will be minimised as all service users will be individually assessed as to how they will attend day services. Those whose needs require them to be collected due to their disability will continue to have access to this service.

Carers of those service users who are no longer eligible to access day services could also be affected by the proposal/s.

3.2 Could the proposal have a disproportionate impact on some equality groups? If you answered 'Yes' please indicate which equality characteristic(s) are impacted

As all of the service users have disabilities as their primary assessed need this group will be disproportionately impacted upon.

Carers of the above service users are also likely to be indirectly affected if the service user they are caring for is no longer eligible to access the service.

3.3 Would the proposal change or remove services used by vulnerable groups of people?

The transportation service is designed for and used by a vulnerable group.

3.4 Does the proposal relate to an area with known inequalities?

People with Learning Disabilities are often facing profound inequalities and become victims of discriminatory and abusive behaviour within the wider community. Therefore any changes of services needs to be robustly assessed and be subject to ongoing monitoring.

3.5 Is the proposal likely to be sensitive or important for some people because of their equality characteristics?

It is likely to be a sensitive issue to the carers of the service users directly impacted upon by the changes. They are often concerned about the risks presented to the person that they care for due to past experiences.

3.6 Does the proposal relate to one of Brent's equality objectives?

It is intended that the changes will ensure that the Direct Services are responsive to different needs and treat users with dignity and respect. This will be achieved by ensuring that the means of transportation reflects the service users assessed needs.

Recommend this EA for Full Analysis?

Yes, a full Equality Analysis will be carried out when the detailed proposals are drafted. The proposals will also be subject to consultation with service users and their carers.

Budget Options Information

Reference:	1718BUD4
Service(s):	Adult Social Care
Lead Member(s):	Cllr Hirani

Savings Proposals:	Extending NAIL provision for people in Nursing Care
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A full Equality Analysis on this proposal was carried out in November 2014 and has since been updated. A summary of the equality analysis is available below and the full version of it is available at: <https://www.brent.gov.uk/media/16406380/new-accommodation-for-independent-living-ea.pdf>

1. What are the objectives and expected outcomes of your proposal? Why is it needed? Make sure you highlight any proposed changes.

The proposal is to move lowest need (c.20%) of clients currently in nursing care to Supported Living which would deliver a £0.3m saving. This is based on an analysis of nursing home placements, which suggest there are a number of placements at the simpler end. Clients would need to agree to the move and some may find moving traumatic. Families and carers may also be averse to disrupting stable placements. Some users may prefer a less institutional environment and regain independence and skills lost through being in nursing care.

There are approximately 700 clients in residential care, and 400 in nursing care in Brent. Annual spend on residential and nursing care in Brent is currently £39.2m, or approximately 50% of the Adult Social Care (ASC) budget, and there are significant pressures on this budget, as projections included within our Market Position Statement available below suggest that the need for residential or nursing care accommodation in the borough may increase by as much as 31% by 2020. Providing care in people's homes is significantly cheaper than providing the same level of care in a residential or nursing care setting, and generally preferred by service users. However in many cases clients are forced to move into residential care facilities because their physical needs cannot be met in their own home, or because their families are unable to care for them at home and they cannot source suitable independent accommodation.

The New Accommodation for Independent Living (NAIL) project aims to deliver alternatives to residential and nursing care which will help to ease the pressure on ASC budgets, whilst ensuring that individuals' needs are met, and giving people more independence, choice and control. Accommodation Plus (Supported Living and Extra Care) gives people their own front door and allows us to build the support they need around this accommodation to support their independence.

The purpose of the project is to design and develop alternative 'accommodation plus' options, which incorporate:

- 'extra care' living (generally for older clients) and
- 'supported living' for younger people who require support from Adult Social Services due to a physical disability, learning difficulty or mental health condition.

The proposed 'accommodation plus' options will promote independence and provide choice in how and where clients live. Providing services in this way enables clients to live independently in the community, promoting well-being and alleviating social isolation. It also

enables primary health, care and support services to come to the individual, rather than the individual being required to change their accommodation in order to receive services that can and should be available in the community. This will involve extensive work with Planning & Development and Providers with the aim of meeting people's needs better at home and using new models of care and support in the community.

Service users will live in their own home, with their own tenancy, and with access to on-site personal care such as help with washing, dressing and medication. The level of support they receive will be tailored to their specific needs. For people with disabilities or illnesses that require nursing care on a frequent basis or closer monitoring than available in accommodation plus, a nursing home may continue to be a more appropriate option.

This Project is being delivered in two phases:

- **Phase one (completed)** - determined financial viability for the project, and aimed to understand current market intelligence. It included a review of the current client need to inform what would be delivered in phase 2.
- **Phase two** - will deliver a rolling programme of accommodation; 200 units by March 2017, and a further 329 units by March 2018 and beyond.

The NAIL (Phase 2) project has four key workstreams:

- Delivering the accommodation – the development and delivery of at least 200 homes throughout the borough by March 2017, and a further by 329 March 2018.
- Commissioning the right models of care and support for the accommodation, ensuring it meets the needs of the population we support and that the care and support provided in the buildings enhances the focus on independence, choice, control and quality of life
- Identifying and matching individuals to the right accommodation at the right time, and facilitating moves into the Accommodation Plus provision.
- Delivering the operating model for the delivery of future Accommodation Plus developments beyond 2017.

Of the 66 potential sites identified in the NAIL Phase 1 project, some are owned by the council, while some are owned by the private sector or Registered Social Landlords. Brent is only likely to develop around 40 accommodation plus units through the NAIL project on its own land. A key element of the NAIL project will therefore be developing the market to facilitate the construction of the remaining units by registered providers and the private sector. One of the objectives of the NAIL project is to ensure that processes and partnerships are in place, enabling ASC to have more control over the design of sites to better meet the needs of Brent residents.

It is intended that through the NAIL project, Adult Social Care staff will be involved in the site specification of both Council and non-council owned sites from very early on in the process. It is also intended that certain principles will be applied as a "baseline" for sites, such as increased levels of communal space to foster social interaction, and high proportions of wheelchair accessible flats which will enable people to stay in their homes as their needs change.

In addition to using our stronger relationship with providers to influence the design of potential sites, the council will also be able to exert control through the planning process to ensure that the units delivered are of suitable design and tenure to support the needs of our

communities. While it must be acknowledged that we will not have complete control over every element of the specification of new sites within the borough, it must also be acknowledged that the majority of service users will not need highly advanced environmental adaptations in order to live independently. In the vast majority of cases, it is the provision of a simple modern design that can be easily adapted, along with a bespoke package of integrated care that will enable an individual to live a full life in independent accommodation.

The provision of Adult Social Care is specified on a case by case basis, with detailed assessments used to identify the bespoke package of care that is needed by an individual service user. Workstreams 2 and 3 will ensure that potential clients for the new properties will be matched to suitable accommodation, and that the right care is commissioned to suit individual needs. Closer relationships with housing providers will enable the council to identify potential clients well in advance of properties being completed, giving time for occupational therapy assessments to be carried out to identify specific physical adaptations that are needed by a particular client. In addition, this early identification of potential clients will enable more support to be provided over a longer period of time to address any concerns that service users may initially have, and allow them and their families time to develop skills and prepare for independent living.

Given that designs have not yet been drawn up for all the units within scope of workstream 1 of the project, this Equality Analysis (EA) looks at the broader equalities implications of the project, and general requirements for units from an equalities perspective. As each site is designed, a short briefing note that describes the design of the site in relation to equalities considerations will be undertaken and considered by the NAIL project board.

2. Who is affected by the proposal? Consider residents, staff and external stakeholders.

National evidence suggests that this approach has the capacity to bring significant improvements to people's quality of life by moving away from a limited selection of traditional accommodation settings to a diverse range of accommodation settings which better support individual needs.

There is broad recognition that for some people residential/nursing care homes will continue to offer the best solution, and individual assessments will ensure that moves into "accommodation plus" units are only offered where appropriate. Conversely, there are significant numbers of people within restrictive residential care homes that could be better supported in more independent accommodation and who have the potential to achieve greater personal independence.

At present, there are over 1000 clients currently in residential or nursing care homes. Clients who are identified as potentially being suitable for accommodation plus will be identified through individual assessment of their health and social care needs. As a result, the likelihood is that the vast majority of accommodation plus units will be filled from those living in residential care homes. Those currently living in nursing care homes are more likely to have needs which are best managed within a nursing setting, and are least likely to be able to benefit from independent accommodation, although they will be considered on an individual basis. As such, this EA only considers equalities data relating to the 700 individuals living in residential care homes.

The table below shows the four main client categories under which ASC clients living in residential care homes may be receiving support, and the planned number of units that will be developed in the first tranche of developments until March 2017 for each of these categories of service user. The mix of units that will be developed after 2017 has not yet

been agreed, and will be decided on the basis of the demographic of clients remaining in residential care at that time.

Client Group	Total clients in residential care	Planned number of units delivered by NAIL project by March 2017
Learning Disability 18-64	220	62
Mental Health	46	22
Older People's Services	407	93
Physical Disability 18-64	23	22
Grand Total	696	200

The number of units that will be developed for each client group is based on data analysis laid out within our market position statement. This in turn is generated through POPPI (Projecting Older People Population Information System) and PANSI (Projecting Adult Needs and Service Information System), which are used nationally to predict and plan future commissioning needs.

3.1 Could the proposal impact on people in different ways because of their equality characteristics?

The core purpose of Adult Social Care is to prevent deterioration of physical and mental health, to promote independence and social inclusion, and to improve opportunities and life chances by provision of person-centred and needs-based support. The ability to live independently whilst receiving this tailored support has been shown to enable people to achieve better outcomes, and is what service users have told us that they want. The NAIL project will enable the Council to support the development of the types of accommodation that is needed, and to get involved earlier in the process so that we have adequate time to address any concerns our service users may have, and to build the skills they need to prepare for independent living.

The detailed needs assessments that are central to Adult Social Care will be used to match service users to the appropriate accommodation. These assessments are based upon need, and not on whether someone exhibits any of the protected characteristics, and as such are fair and transparent.

The NAIL project is key to ensuring that the council can continue to provide the necessary support to individuals by enabling us to make budget savings, whilst continuing to address individual needs appropriately, and improving flexibility and independence. Whilst there may be a change in the way services are provided, they will continue to be provided according to individual need, and every attempt will be made to ensure all the needs of every individual are met.

3.2 Could the proposal have a disproportionate impact on some equality groups? If you answered 'Yes' please indicate which equality characteristic(s) are impacted

Protected Group	Positive impact	Adverse impact	Neutral

Age	x		
Disability	X		
Gender re-assignment			Unknown
Marriage and civil partnership			Unknown
Pregnancy and maternity			x
Race			x
Religion or belief		Possible adverse impact	
Sex	x		
Sexual orientation			Unknown

Every single service user has an individual needs led assessment which includes social care eligibility and takes into account all the issues around the protected groups. A support plan will be put into place which will meet the needs of people with all the protected characteristics appropriately.

The accommodation plus setting will provide service users with the choice of how and where to live, in an environment which is fit for purpose, yet at the same time promoting independence. Appropriate care packages will still be in place, as they are currently, to meet the needs of the individual.

For those whose needs demand it, traditional residential settings will remain an option.

3.3 Would the proposal change or remove services used by vulnerable groups of people?

No changes to the level of the service are proposed, other than opportunities identified during phase one to improve both the quality of service delivery and the commitment by Brent to support local residents to stay at home for as long as possible or as close to home for as long as possible with excellent quality, personalised care and support.

It must be noted that Adult Social Care play an important role in ensuring that older people; people with learning disabilities, physical disabilities or mental ill health access the right support within the community. Also in doing so, Adult Social Care support social inclusion for these groups within the wider community in Brent.

In addition, it is the intention of the NAIL project to provide suitable, flexible communal space within schemes whenever possible that can be used for a variety of purposes, enabling different groups to participate in activities with one another.

We anticipate a positive impact in relation to most service users across all protected groups, as the opportunity to live independently with the right support and care is a preferable long term outcome than living in institutionalised and restrictive care settings.

The levels and type of service provision will remain as at present, but will be improved by giving service users more choice and independence to decide how and where they live. It is recognised that for many service users across all different groups, relocation may cause emotional distress and orientation issues in their new surroundings. To mitigate this, it will be necessary to offer a 'resettlement package' to ensure that appropriate support and assistance are in place, both during and after the move.

For those with a physical disability, the transition from a residential care setting to a semi independent setting will require practical support to help them settle in their new surroundings.

As the project will move a significant number of service users throughout the borough, there is potential for a negative impact on faith / belief. While we hope that the varied distribution of potential sites mitigates this risk, the benefits of the project, and the financial pressure on Adult Social Care budgets mean that we must pursue the most suitable and viable sites and may not be able to take into account the relative location of places of worship. Should we identify a negative impact as the project progresses, we could consult with the Brent Multi-Faith forum to ascertain whether we can engage faith groups to provide added community support.

3.4 Does the proposal relate to an area with known inequalities?

Overall, the detailed analysis has found that the proposals will be beneficial for all service users. The analysis has only identified a minor negative impact in relation to religion or belief as sites cannot be guaranteed to be close to places of worship. While we hope that the varied distribution of potential sites mitigates this risk, the benefits of the project, and the financial pressure on Adult Social Care budgets mean that we must pursue the most suitable and viable sites and may not be able to take into account the relative location of places of worship.

This aside, the project has the potential to have a significant positive impact on all service users, regardless of what protected characteristics they exhibit, by enabling them to have choice and control over their lives, and ensuring that tailored support is provided to them to improve their equality of opportunity and the overall quality of their lives.

3.5 Is the proposal likely to be sensitive or important for some people because of their equality characteristics?

Yes

Brent has produced its first Market Position Statement (MPS) which aims to signal our intention to share better, more transparent information with the market; for the benefit of both current and potential providers of Accommodation Based Care and Support Services (ABCSS). It will support better relationships between Commissioners and service providers, acting as a foundation for better engagement and partnership working resulting in a full range of services that fully meet the needs of people as close to home as possible and to promote real choice for local people.

The following four principles guide our thinking around how we develop models of ABCSS going forward:

- **Principle 1:** Wherever possible we meet people's needs at home or as close to home as possible and we will build local capacity in the marketplace to achieve this

- **Principle 2:** We recognise that the needs of individuals may change over time, and we work with individuals receiving care and support to review the services they receive in line with these changes; which may mean a change in service provision to better meet their needs
- **Principle 3:** We work proactively with the market to ensure that services are always of an excellent quality and value for money is always achieved.
- **Principle 4:** For local people, who genuinely need residential or nursing care, we actively review and monitor the quality of these services, to ensure they are safe, personalised, and deliver excellent quality and good outcomes for individuals.

The Brent Health and Wellbeing Strategy 2012-2015 stipulates that people will need to take on much greater personal responsibility for their own wellbeing, making the right choices when these are open to them. At the same time, recognising those people who are vulnerable or at risk, so that we can focus on keeping people safe, offering prevention and early help for them.

Packages of social care are based upon an individual's social care needs, irrespective of what protected groups they may or may not be part of. In doing this, services users are provided tailored support to enable them to live more independently and thus improve their equality of opportunity.

3.6 Does the proposal relate to one of Brent's equality objectives?

Yes

Recommend this EA for Full Analysis?

Yes, it relates to the following objectives:

Equality Objective 1: To know and understand all our communities

Equality Objective 2: To involve our communities effectively

Equality Objective 4: To ensure that local public services are responsive to different needs and treat users with dignity and respect

4. Use the comments box below to give brief details of what further information you will need to complete a Full Equality Analysis. What information will give you a full picture of how well the proposal will work for different groups of people? How will you gather this information? Consider engagement initiatives, research and equality monitoring data.

The detailed consultation process and the full Equality Analysis, along with the Market Position Statement document is available at:

<https://www.brent.gov.uk/media/16406380/new-accommodation-for-independent-living-ea.pdf> .

Budget Options Information

Reference:	1718BUD5
Service(s):	Adult Social Care
Lead Member(s):	Cllr Hirani

Savings Proposals:	Mental Health Service – Further development of the recovery pathway, focusing on supported living and supporting the move to general needs housing and independence.
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1. What are the objectives and expected outcomes of your proposal? Why is it needed? Make sure you highlight any proposed changes.

This proposal sets out an ongoing process to reduce the dependency on mental health residential and supported accommodation placements. This proposal would offer support to residents with mental health needs in the least restrictive setting and will enable them to live in their own homes via floating / outreach support.

The objectives of the proposal are to:

- enable a more effective recovery pathway – better access to housing and employment will accelerate step down to general needs housing
- support ongoing negotiations with providers to manage costs and focus on the right support for residents
- improve access to general needs housing

Outcomes:

- more people supported in the right setting which supports their recovery pathway
- providers meet the changing needs of the local population
- achieved savings of £0.5m

The proposal is required to ensure the changing needs of the population continue to be met. Providers are robust, provide high quality and value for money services for the Borough residents.

The proposed changes were informed by the [2015 Brent JSNA on Mental Health](#). In addition to this, an analysis was done on the number and type of mental health placements and it was determined with work with providers that there is capacity to move a cohort of the service users to more independent settings. The current service users were reviewed and needs assessed on what accommodation is required to meet the residents' needs. As a result placements are regularly RAG rated to ensure only those who are suitable to step down, will do so.

2. Who is affected by the proposal? Consider residents, staff and external stakeholders.

Residents in the Borough who require specialist mental health supported accommodation and their families.

3.1 Could the proposal impact on people in different ways because of their equality characteristics?

Yes. Mental health supported accommodation is targeted at vulnerable residents with mental needs and is tailored to meet their individual and often complex needs. Due to the nature of the service the proposed changes are likely to impact on current and future clients with mental health needs and their families.

3.2 Could the proposal have a disproportionate impact on some equality groups? If you answered 'Yes' please indicate which equality characteristic(s) are impacted

Yes. Due to the nature of the service, there are number of equality and vulnerable groups that are likely to be affected by the proposed changes such as age, disability, gender and race.

Other vulnerable groups that may be impacted by the changes to the service are:

- Ex-offenders
- Single homeless people
- Rough sleepers
- Women at risk or fleeing domestic violence
- Young people at risk / leaving care
- Refugees, Gypsies, Roma and Irish Travellers
- Socio-economic groups

3.3 Would the proposal change or remove services used by vulnerable groups of people?

This proposal would offer support to residents with mental health needs in the least restrictive setting and will enable them to live in their own homes via floating / outreach support.

3.4 Does the proposal relate to an area with known inequalities?

Yes. Due to the nature of the service, there are number of equality and vulnerable groups that are likely to be affected by the proposed changes, as outlined in section 3.2.

Service users are actively part of developing their own care plan. Therefore any potential negative impact/issues will be discussed at an early stage, with identified actions and any additional care packages put in place. All service users in placements have detailed needs assessments and are RAG rated. Only those service users who are assessed as capable to step down to independent living will be moved.

3.5 Is the proposal likely to be sensitive or important for some people because of their equality characteristics?

Yes

3.6 Does the proposal relate to one of Brent's equality objectives?

Yes. It relates to the following equality objective: To ensure that local public services are responsive to different needs and treat users with dignity and respect.

Recommend this EA for Full Analysis?

Yes

Stage 2: Analysis

5. What effects could your policy have on different equality groups and on cohesion and good relations?

5.1 Age (*select all that apply*)

- Positive
- Neutral
- Negative

Please give details:

Brent has a young population with 35.1% aged between 20 and 39.

- The under 18 population makes up 22.9% of the population
- The 16-64 (working age population) makes up 68.2% of the population
- The 65 and over population makes up 11% of the population

Severe and enduring mental health conditions include long term illnesses such as schizophrenia, personality disorder, bipolar disorder, or other psychosis. Estimates suggest that people with severe mental health conditions die 10 years younger than the general population due to poorer physical health.

The prevalence of severe and enduring mental health conditions in Brent affects 1.1% of the population, which is above both the London (1%) and England (0.8%) averages.

The current age of the MH cohort in supported accommodation is identified as the following:

Mental Health Service Users		(%)
20-29	4	2.65%
30-39	20	13.25%
40-49	43	28.48%
50-59	54	35.76%
60+	30	19.87%
Total	151	

Therefore, this proposal allows the services to be targeted better in the community.

Service users are actively part of developing their own care plan. Therefore any potential negative impact/issues will be discussed at an early stage, with identified actions and any additional care packages put in place. All service users in placements have detailed needs assessments and are RAG rated. Only those service users who are assessed as capable to step down to independent living will be moved.

5.2 Disability (*select all that apply*)

- Positive
- Neutral
- Negative

Please give details:

The services are targeted at and tailored to the specific needs of residents with mental health needs.

Service users are actively part of developing their own care plan. Therefore any potential negative impact/issues will be discussed at an early stage, with identified actions and any additional care packages put in place. All service users in placements have detailed needs assessments and are RAG rated. Where required Community Mental Health Services make reasonable adjustments to service delivery and provision. Only those service users who are assessed as capable to step down to independent living will be moved.

5.3 Gender Identity (select all that apply)

- Positive
- Neutral
- Negative

Please give details:

In 2013, 1.6% of adults aged 16 and over in the UK identified their sexual identity as lesbian, gay or bisexual. In Brent, this equates to approximately 4,000 adults. Where required, Community Mental Health services would commission specialist services to meet the needs of the resident.

5.4 Marriage and civil partnership (select all that apply)

- Positive
- Neutral
- Negative

Please give details:

Where required, Community Mental Health services would commission specialist services to meet the needs of the resident.

5.5 Pregnancy and maternity (select all that apply)

- Positive
- Neutral
- Negative

Please give details:

Where required, Community Mental Health services would commission specialist services to meet the needs of the resident.

5.5 Race (select all that apply)

- Positive
- Neutral
- Negative

Please give details:

Brent is ethnically diverse: 66.4% of the population is from Black, Asian or Minority Ethnic (BAME) group. This has increased since 2011, when BAME groups made up 63.7% of the population.

The Brent JSNA suggested that the Indian ethnic group currently make up the highest proportion of BAME (19% of the population), followed by Other Asian (12%). The White group make up 33%.

The current ethnicity of the MH cohort in supported accommodation is identified as the following:

Mental Health Service Users		(%)
Asian or Asian British	11	7.28%
Black or Black British	68	45.03%
Mixed / Multiple	2	1.32%
Not Stated / Undeclared	27	17.88%
Other Ethnic Groups	2	1.32%
White	41	27.15%

Grand Total	151
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Any commissioned services in the community would continue to take into consideration people's cultural and/or religious beliefs and where required, specialist services will be commissioned to meet the needs of the resident.

5.7 Religion or belief (select all that apply)

- Positive
- Neutral
- Negative

Please give details:

Any commissioned services in the community would continue to take into consideration people's cultural and/or religious beliefs and where required, specialist services will be commissioned to meet the needs of the resident.

5.8 Sex (select all that apply)

- Positive
- Neutral
- Negative

Please give details:

According to the 2011 census, there were 1,721 more males (156, 468) than females (154,747) in Brent, giving a gender ratio of 50.3 to 49.7.

The current gender of the MH cohort in supported accommodation is identified as the following:

Mental Health Service Users		(%)
Female	32	21.19%
Male	115	76.16%
Unknown	4	2.65%

Grand Total	151
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Where required, Community Mental Health services would commission specialist services to meet the needs of the resident.

5.9 Sexual orientation (select all that apply)

- Positive
- Neutral
- Negative

Please give details:

Where required, Community Mental Health services would commission specialist services to meet the needs of the resident.

5.10 Other (please specify) (select all that apply)

- Positive
- Neutral
- Negative

Please give details:

Where required, Community Mental Health services would commission specialist services to meet the needs of the resident.

6. Could any of the impacts you have identified be unlawful under the Equality Act 2010? Prohibited acts include direct and indirect discrimination, harassment, victimisation and failure to make a reasonable adjustment.

- Yes
- No

7. Please provide a brief summary of any research or engagement initiatives that have been carried out to formulate your proposal.

The proposed changes were informed by the [2015 Brent JSNA on Mental Health](#). In addition to this, an analysis was done on the number of mental health placements and it was determined with work with providers there capacity to move service users to more independent settings. As a result placements are regularly RAG rated to ensure only those who are suitable to step down, will do so.

STAGE 3: ACTION PLANNING

8. What actions will you take to enhance the potential positive impacts that you have identified?

All service users in placements are assessed on their needs and RAG rated. Only those assessed to step down to independent living will be moved.

9. What actions will you take to remove or reduce the potential negative impacts that you have identified?

Service users are actively part of developing their own care plan. Therefore any potential negative impact/issues will be discussed at an early stage, actions and any additional care packages put in place.

10. Please explain how any remaining negative impacts can be justified?

In Mental Health all service users have a current risk assessment and any risks are mitigated as required.

Budget Options Information

Reference:	1718BUD6
Service(s):	Environmental Improvement
Lead Member(s):	Cllr Southwood

Savings Proposals:	£0.25m from the collection of bulky waste items
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1. What are the objectives and expected outcomes of your proposal? Why is it needed? Make sure you highlight any proposed changes.

The objective of the bulky waste proposal is to consider the introduction of a charge for the service; which is currently free. The expected outcomes are to enable effective management of the demand for the service by looking to reduce waiting times for residents, whilst offering and maintaining a responsive service. Also to recover the operating cost every year by the introduction of a charge to those who are able to pay for the service, whilst considering options for retaining an element of a free service. Additional changes would see the introduction of a chargeable service for landlords and the provision of a linked and separate arrangement for re-use.

2. Who is affected by the proposal? Consider residents, staff and external stakeholders.

All residents are potentially affected by the proposal, as anyone can use the service currently and charges would be applied to anyone wanting to use the service.

3.1 Could the proposal impact on people in different ways because of their equality characteristics?

We have identified certain groups who may be impacted by a change to the bulky waste service, by way of a charge. These include disability, age and ethnicity, . We believe that the introduction of a charge could have a greater impact on those who live in areas of deprivation across Brent and those who are in receipt of income related benefits and government support. However, we believe this impact to be mitigated by the proposal to introduce a free collection for those in receipt of income related benefits.

3.2 Could the proposal have a disproportionate impact on some equality groups?

No. Whilst there may be an impact on certain groups, we do not believe that the impact would be disproportionate, as the retention of a free element to the service would mitigate any impact.

If you answered 'Yes' please indicate which equality characteristic(s) are impacted

N/A

3.3 Would the proposal change or remove services used by vulnerable groups of people?

The proposal would change the service for some residents, as the service could become chargeable. However, the retention of a free element to the service would ensure no adverse or detrimental effect on vulnerable groups

3.4 Does the proposal relate to an area with known inequalities?

Residents on low income, and those living in HMO's, live in all areas of the borough and therefore all borough residents may be affected by a decision to introduce a charge, in that

respect. Those who live in areas of high density population or deprivation may be less likely to own a car, and therefore unable to utilise the alternative disposal service offered at the Reuse and Recycling Centre at Abbey Road; which allows for certain items to be disposed of for free. However the introduction of a charge would allow the service to offer a collection of a wider range of items than currently offered, and again the retention of a free element of the service for those in receipt of income related benefits would mitigate the issues regarding deprivation and car ownership.

3.5 Is the proposal likely to be sensitive or important for some people because of their equality characteristics?

It is not considered that this bulky waste proposal is particularly sensitive on equality characteristics, due to the consideration of retention of a free element of service provision.. In addition, the decision to charge was previously publically consulted upon in 2014/15 and no issue was raised regarding sensitivity of introducing a charge for the service.

3.6 Does the proposal relate to one of Brent's equality objectives?

It relates to equality objective 4; to ensure that local public services are responsive to different needs and treat users with dignity and respect.

Recommend this EA for Full Analysis?

No

Budget Options Information

Reference:	1718BUD7
Service(s):	Regeneration
Lead Member(s):	Cllr Butt & Cllr Mashari

Savings Proposals:	Special Projects budget will be reviewed and efficiencies of £0.1m found.
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1. What are the objectives and expected outcomes of your proposal? Why is it needed? Make sure you highlight any proposed changes.

It is proposed that the Special Projects budget is reviewed and efficiencies of £0.1m found.

2. Who is affected by the proposal? Consider residents, staff and external stakeholders.

There are no direct users of this service, however the budget is used for bids to initiate schools projects. The council will still need to resource new projects from time to time, but this will be done on a case by case basis rather than as part of an ongoing team.

Any potential/likely impact on Council employees will be considered as part of the Council's internal policies and processes.

3.1 Could the proposal impact on people in different ways because of their equality characteristics?

No. The funding is used for schools related projects such as school extensions and refurbishment work.

3.2 Could the proposal have a disproportionate impact on some equality groups?

If you answered 'Yes' please indicate which equality characteristic(s) are impacted

The efficiencies are identified on the basis of how the project bids will be commissioned and administered so no negative impact is anticipated as a result of the proposal.

3.3 Would the proposal change or remove services used by vulnerable groups of people?

No. The efficiencies are identified on the basis of how the project bids will be commissioned and administered so no negative impact is anticipated as a result of the proposal. A case by case approval may introduce delays in project commissioning. To mitigate against this the projects will be commissioned at the start of the year and granted bulk approval at the start of the year.

3.4 Does the proposal relate to an area with known inequalities?

No

3.5 Is the proposal likely to be sensitive or important for some people because of their equality characteristics?

No

3.6 Does the proposal relate to one of Brent's equality objectives?

Yes, it is related to the following equality objective: To ensure that local public services are responsive to different needs and treat users with dignity and respect

Recommend this EA for Full Analysis?

No

Individual project bids will continue to be subject to equality considerations and assessments where required.

Budget Options Information

Reference:	1718BUD9
Service(s):	Parking and Lighting
Lead Member(s):	Cllr Southwood
Savings Proposals:	£1.0m from additional parking charges

1. What are the objectives and expected outcomes of your proposal? Why is it needed? Make sure you highlight any proposed changes.

The proposal is to achieve a budget saving of £1.0m from additional parking charges.

An estimated £1m would be sought from an exercise to establish any unresolved and escalating parking pressures that can be mitigated by an increase in the cost of resident parking permits and other parking charge increases. This will include a review of Pay and Display charges. This would seek to address parking pressures in the context of an increase in the borough's population. Regeneration and increased development may result in additional cars and increased parking pressures. This creates the need to match parking charges to current and future demand, with the revenue paying for the service and any additional revenue being reinvested in the service. This exercise will consider residential parking permits and some car parking tariffs but will not include a review of visitor parking charges.

The legislative framework does not allow authorities to increase permit prices for the purpose of raising revenue – they are a charge made to vehicle owners for the service of managing and enforcing controlled parking zones (CPZs). For any increase in permit charges to be valid, the council must therefore set out to clearly evidence that the costs of managing and enforcing CPZs are not currently being fully covered. The proposal is that any revenue received would pay for the service. Any additional income above that needed to cover costs would not be available to meet other budget pressures and can only be re-invested in line with the provisions set out in the Traffic Management and Road Traffic Regulation Acts.

Any proposal to increase pay & display charges or to introduce differential charges must similarly show evidence of congestion in parking bays. Officers must therefore undertake an exercise to establish whether a new demand has emerged since the last review 12 months ago, which Cabinet endorsed in March 2016. Again, the legal framework does not permit authorities to increase on-street parking charges simply for the purpose of raising revenue.

Local authorities do not have powers to seek to deter car ownership by increasing resident and business permit prices.

2. Who is affected by the proposal? Consider residents, staff and external stakeholders.

- Those paying for parking, including resident and business permit holders, would be subject to higher charges.
- Differential charging could see different areas of the borough subject to different pay and display tariffs.
- Visitor parking charges will not be considered.

Any increase in parking tariffs may be unpopular initially. However, increased pay and display charges would mitigate parking congestion and create more sustained environmental benefits.

3.1 Could the proposal impact on people in different ways because of their equality characteristics?

Yes, see below. Blue Badge holders will be impacted on significantly less than other car owners.

3.2 Could the proposal have a disproportionate impact on some equality groups? If you answered 'Yes' please indicate which equality characteristic(s) are impacted

Evidence from the 2011 Census and resident permit sales does not currently suggest there is significant growth in vehicle ownership in CPZ areas.

There would be no adverse impact on disabled people; Blue Badge holders do not need to pay for on-street parking and are therefore fully protected. None of the other equality groups are over-represented amongst car owners or users and therefore they would not be disproportionately affected.

3.3 Would the proposal change or remove services used by vulnerable groups of people?

No

3.4 Does the proposal relate to an area with known inequalities?

No

3.5 Is the proposal likely to be sensitive or important for some people because of their equality characteristics?

No

3.6 Does the proposal relate to one of Brent's equality objectives?

No

Recommend this EA for Full Analysis?

No

Budget Options Information

Reference:	1718BUD10
Service(s):	Environmental Improvement
Lead Member(s):	Cllr Southwood
Savings Proposals:	£900k from efficiencies in the Public Realm contract operation.

1. What are the objectives and expected outcomes of your proposal? Why is it needed? Make sure you highlight any proposed changes.

To make operational efficiencies over two years within the Public Realm contract to allow for service improvements to be made in resolving persistent issues.

2. Who is affected by the proposal? Consider residents, staff and external stakeholders.

All residents who live in, travel through and visit the borough.

3.1 Could the proposal impact on people in different ways because of their equality characteristics?

Potentially the proposal could have an impact on people in different ways because people utilise the waste, street and parks services in different ways.

3.2 Could the proposal have a disproportionate impact on some equality groups? If you answered 'Yes' please indicate which equality characteristic(s) are impacted

No, at the moment there is no disproportionate impact identified on any particular equality group.

3.3 Would the proposal change or remove services used by vulnerable groups of people?

The proposal would seek to streamline and make efficiencies in existing services. It is not envisaged to directly impact upon vulnerable groups of people.

3.4 Does the proposal relate to an area with known inequalities?

No. The proposal would affect all areas of the borough equally.

3.5 Is the proposal likely to be sensitive or important for some people because of their equality characteristics?

No. The proposal is unlikely to be sensitive due to particular equality characteristics.

3.6 Does the proposal relate to one of Brent's equality objectives?

The proposal relates to Equality Objective 4; To ensure that local public services are responsive to different needs and treat users with dignity and respect.

Recommend this EA for Full Analysis?

No

Budget Options Information

Reference:	1718BUD11
Service(s):	Parking and Lighting
Lead Member(s):	Cllr Southwood

Savings Proposals:	Maximise the potential of the soon-to-be operational Central Management System to maximise street lighting energy efficiencies.
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1. What are the objectives and expected outcomes of your proposal? Why is it needed? Make sure you highlight any proposed changes.

The proposal is to maximise the potential of the soon-to-be operational Central Management System (CMS) to optimise street lighting energy efficiencies.

The Central Management System for street lighting, which the council is currently procuring, provides the opportunity to review street lighting levels at a micro-level. Although deployment of the System will already be contributing to the agreed £0.75m p.a. saving expected from street lighting, it is considered that an additional £0.1m p.a. could be saved through a rigorous review of lighting levels at a highly localised level across the borough.

2. Who is affected by the proposal? Consider residents, staff and external stakeholders.

Some users may notice marginally lower lighting levels than expected at certain locations. Should the lighting level not be acceptable at a specific location the CMS does allow corrective adjustments to be made rapidly.

3.1 Could the proposal impact on people in different ways because of their equality characteristics?

Yes, see below

3.2 Could the proposal have a disproportionate impact on some equality groups? If you answered 'Yes' please indicate which equality characteristic(s) are impacted

Street lighting contributes to road safety and reducing the fear of crime, and lighting levels need to be set with these objectives in mind. Young adults are more likely to be active outside the home between the hours of midnight and 6 am; and adults working or travelling to work during these hours might also be impacted. Girls and women are perceived to be more likely to have concerns about potential crime during the hours of darkness. The proposal to introduce a Lighting Strategy would however provide the potential to mitigate any disadvantage to specific groups. Should the Council decide to introduce a Lighting Strategy with an element of noticeable light dimming, a full Equality Impact Assessment will be undertaken as part of the design of the Lighting Strategy and action plan in due course.

3.3 Would the proposal change or remove services used by vulnerable groups of people?

Yes

3.4 Does the proposal relate to an area with known inequalities?

Yes

3.5 Is the proposal likely to be sensitive or important for some people because of their equality characteristics?

Yes

3.6 Does the proposal relate to one of Brent's equality objectives?

Yes, it relates to the following equality objective: To ensure that local public services are responsive to different needs and treat users with dignity and respect

Recommend this EA for Full Analysis?

Yes

Should the Council decide to introduce a Lighting Strategy with an element of noticeable light dimming, a full Equality Impact Assessment will be undertaken as part of the design of the Lighting Strategy and action plan in due course.